

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

---

# PHA Plans

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:** City of Paris Housing Authority

**PHA Number:** TX048

**PHA Fiscal Year Beginning: (mm/yyyy)** 07/2002

**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)

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)

**5-YEAR PLAN**  
**PHA FISCAL YEARS 2000 - 2004**  
[24 CFR Part 903.5]

**A. Mission**

State the PHA's mission for serving the needs of low-income, very low income, and extremely low-income families in the PHA's jurisdiction. (select one of the choices below)

- The mission of the PHA is the same as that of the Department of Housing and Urban Development: To promote adequate and affordable housing, economic opportunity and a suitable living environment free from discrimination.
- X The PHA's mission is: (state mission here)

The City of Paris Housing Authority is the same as that of the Department of Housing & Urban Development: To promote adequate and affordable Housing, Economic opportunity and a suitable living environment free of discrimination.

**B. Goals**

The goals and objectives listed below are derived from HUD's strategic Goals and Objectives and those emphasized in recent legislation. PHAs may select any of these goals and objectives as their own, or identify other goals and/or objectives. Whether selecting the HUD-suggested objectives or their own, **PHAS ARE STRONGLY ENCOURAGED TO IDENTIFY QUANTIFIABLE MEASURES OF SUCCESS IN REACHING THEIR OBJECTIVES OVER THE COURSE OF THE 5 YEARS.** (Quantifiable measures would include targets such as: numbers of families served or PHAS scores achieved.) PHAs should identify these measures in the spaces to the right of or below the stated objectives.

**HUD Strategic Goal: Increase the availability of decent, safe, and affordable housing.**

- X PHA Goal: Expand the supply of assisted housing  
Objectives:
- Apply for additional rental vouchers:
  - X Reduce public housing vacancies:  
**The vacancy rate has remained unchanged.**
  - Leverage private or other public funds to create additional housing opportunities:
  - Acquire or build units or developments
  - Other (list below)
- X PHA Goal: Improve the quality of assisted housing  
Objectives:
- X Improve public housing management: (PHAS score)  
**Management is striving to work together to better our PHAS score.**
  - X Improve voucher management: (SEMAP score)  
**Management is striving to be a standard performer.**

Increase customer satisfaction:

**Is a top priority and will continue to strive to get families involved.**

- Concentrate on efforts to improve specific management functions:  
(list; e.g., public housing finance; voucher unit inspections)
- Renovate or modernize public housing units:
- Demolish or dispose of obsolete public housing:
- Provide replacement public housing:
- Provide replacement vouchers:
- Other: (list below)

PHA Goal: Increase assisted housing choices

Objectives:

- Provide voucher mobility counseling:
- Conduct outreach efforts to potential voucher landlords

**We will continue to outreach potential landlords by running ads, having meetings, and meet one on one with social groups in our area.**

- Increase voucher payment standards
- Implement voucher homeownership program:
- Implement public housing or other homeownership programs:
- Implement public housing site-based waiting lists:
- Convert public housing to vouchers:
- Other: (list below)

### **HUD Strategic Goal: Improve community quality of life and economic vitality**

PHA Goal: Provide an improved living environment

Objectives:

- Implement measures to deconcentrate poverty by bringing higher income public housing households into lower income developments:
- Implement measures to promote income mixing in public housing by assuring access for lower income families into higher income developments:
- Implement public housing security improvements:  
**Management has contracted with local police for security services.**
- Designate developments or buildings for particular resident groups  
(elderly, persons with disabilities)
- Other: (list below)

### **HUD Strategic Goal: Promote self-sufficiency and asset development of families and individuals**

PHA Goal: Promote self-sufficiency and asset development of assisted households

Objectives:

- Increase the number and percentage of employed persons in assisted families:
- Provide or attract supportive services to improve assistance recipients' employability:
- Provide or attract supportive services to increase independence for the elderly or families with disabilities.
- Other: (list below)

**We do work with the agencies in our community to help improve employment opportunities for all tenants and independence for our elderly and/or disabled.**

**HUD Strategic Goal: Ensure Equal Opportunity in Housing for all Americans**

- PHA Goal: Ensure equal opportunity and affirmatively further fair housing Objectives:

- Undertake affirmative measures to ensure access to assisted housing regardless of race, color, religion national origin, sex, familial status, and disability:
- Undertake affirmative measures to provide a suitable living environment for families living in assisted housing, regardless of race, color, religion national origin, sex, familial status, and disability:
- Undertake affirmative measures to ensure accessible housing to persons with all varieties of disabilities regardless of unit size required:

- Other: (list below)

**Management will continue to implement equal opportunity and fair housing for all.**

**Other PHA Goals and Objectives: (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**

**X** **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.

**Not required as of October 1999**

**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.

**Table of Contents**

Page #

**Annual Plan**

- i. Executive Summary
- ii. Table of Contents
  - 1. Housing Needs
  - 2. Financial Resources
  - 3. Policies on Eligibility, Selection and Admissions
  - 4. Rent Determination Policies
  - 5. Operations and Management Policies
  - 6. Grievance Procedures
  - 7. Capital Improvement Needs
  - 8. Demolition and Disposition
  - 9. Designation of Housing
  - 10. Conversions of Public Housing
  - 11. Homeownership
  - 12. Community Service Programs
  - 13. Crime and Safety

- 14. Pets (Inactive for January 1 PHAs)
- 15. Civil Rights Certifications (included with PHA Plan Certifications)
- 16. Audit
- 17. Asset Management
- 18. Other Information

**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:

- Admissions Policy for Deconcentration
- FY 2002 Capital Fund Program Annual Statement
- Most recent board-approved operating budget (Required Attachment for PHAs that are troubled or at risk of being designated troubled ONLY)

Optional Attachments:

- PHA Management Organizational Chart
- FY 2002 Capital Fund Program 5 Year Action Plan
- Public Housing Drug Elimination Program (PHDEP) Plan
- Comments of Resident Advisory Board or Boards (must be attached if not included in PHA Plan text)
- 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.

<b>List of Supporting Documents Available for Review</b>		
<b>Applicable &amp; On Display</b>	<b>Supporting Document</b>	<b>Applicable Plan Component</b>
X	PHA Plan Certifications of Compliance with the PHA Plans and Related Regulations	5 Year and Annual Plans
X	State/Local Government Certification of Consistency with the Consolidated Plan	5 Year and Annual Plans
X	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

<b>List of Supporting Documents Available for Review</b>		
<b>Applicable &amp; On Display</b>	<b>Supporting Document</b>	<b>Applicable Plan Component</b>
	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
X	Most recent board-approved operating budget for the public housing program	Annual Plan: Financial Resources;
X	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
X	Section 8 Administrative Plan	Annual Plan: Eligibility, Selection, and Admissions Policies
X	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
X	Public housing rent determination policies, including the methodology for setting public housing flat rents X check here if included in the public housing A & O Policy	Annual Plan: Rent Determination
X	Schedule of flat rents offered at each public housing development X check here if included in the public housing A & O Policy	Annual Plan: Rent Determination
X	Section 8 rent determination (payment standard) policies X check here if included in Section 8 Administrative Plan	Annual Plan: Rent Determination
X	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
X	Public housing grievance procedures X check here if included in the public	Annual Plan: Grievance Procedures



<b>List of Supporting Documents Available for Review</b>		
<b>Applicable &amp; On Display</b>	<b>Supporting Document</b>	<b>Applicable Plan Component</b>
	housing A & O Policy	
X	Section 8 informal review and hearing procedures X check here if included in Section 8 Administrative Plan	Annual Plan: Grievance Procedures
X	The HUD-approved Capital Fund/Comprehensive Grant Program Annual Statement (HUD 52837) for the active grant year	Annual Plan: Capital Needs
X	Most recent CIAP Budget/Progress Report (HUD 52825) for any active CIAP grant	Annual Plan: Capital Needs
X	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
N/A	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
N/A	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
N/A	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
X	Approved or submitted public housing homeownership programs/plans	Annual Plan: Homeownership
X	Policies governing any Section 8 Homeownership program X check here if included in the Section 8 Administrative Plan	Annual Plan: Homeownership
X	Any cooperative agreement between the PHA and the TANF agency	Annual Plan: Community Service & Self-Sufficiency
N/A	FSS Action Plan/s for public housing and/or Section 8	Annual Plan: Community Service & Self-Sufficiency
N/A	Most recent self-sufficiency (ED/SS, TOP or ROSS or other resident services grant) grant program reports	Annual Plan: Community Service &

<b>List of Supporting Documents Available for Review</b>		
<b>Applicable &amp; On Display</b>	<b>Supporting Document</b>	<b>Applicable Plan Component</b>
		Community Service & Self-Sufficiency
	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
N/A	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)

## **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.

<b>Housing Needs of Families in the Jurisdiction by Family Type</b>							
Family Type	Overall	Afford-ability	Supply	Quality	Access-ibility	Size	Loca-tion
Income <= 30% of AMI	<b>963</b>	<b>4</b>	<b>4</b>	<b>3</b>	<b>4</b>	<b>4</b>	<b>4</b>
Income >30% but <=50% of AMI	<b>680</b>	<b>3</b>	<b>3</b>	<b>4</b>	<b>3</b>	<b>2</b>	<b>3</b>
Income >50% but <80% of AMI	<b>410</b>	<b>2</b>	<b>3</b>	<b>2</b>	<b>2</b>	<b>2</b>	<b>1</b>
Elderly	<b>508</b>	<b>3</b>	<b>3</b>	<b>4</b>	<b>4</b>	<b>2</b>	<b>3</b>
Families with Disabilities	<b>N/A</b>	<b>N/A</b>	<b>N/A</b>	<b>N/A</b>	<b>N/A</b>	<b>N/A</b>	<b>N/A</b>
Race/Ethnicity	<b>1151.7</b>	<b>3</b>	<b>2</b>	<b>3</b>	<b>3</b>	<b>2</b>	<b>3</b>
Race/Ethnicity	<b>837.3</b>	<b>3</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>2</b>	<b>4</b>
Race/Ethnicity							

Housing Needs of Families in the Jurisdiction by Family Type							
Family Type	Overall	Afford- ability	Supply	Quality	Access- ibility	Size	Loca- tion
Race/Ethnicity							

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	56	100%	48%

<b>Housing Needs of Families on the Waiting List</b>			
Extremely low income <=30% AMI	39.5%	70%	
Very low income (>30% but <=50% AMI)	16.5%	30%	
Low income (>50% but <80% AMI)	0	0	
Families with children	36	64%	
Elderly families	0	0	
Families with Disabilities	4	.1%	
Race/ethnicity	7	13%	
Race/ethnicity	49	88%	
Race/ethnicity	0	0	
Race/ethnicity			
Characteristics by Bedroom Size (Public Housing Only)			
1BR	22	39%	15%
2 BR	17	30%	74%
3 BR	11	20%	10%
4 BR	6	11%	1%
5 BR			
5+ BR			
Is the waiting list closed (select one)? X 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			

<b>Housing Needs of Families on the Waiting List</b>
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)

<b>Housing Needs of Families on the Waiting List</b>			
If used, identify which development/subjurisdiction:			
	# of families	% of total families	Annual Turnover
Waiting list total	191	100%	
Extremely low income <=30% AMI	0	0	
Very low income (>30% but <=50% AMI)	133	70%	
Low income (>50% but <80% AMI)	58	30%	
Families with children	128	67%	
Elderly families	13	.07%	
Families with Disabilities	11	.06%	
Race/ethnicity	14	.07%	
Race/ethnicity	177	93%	
Race/ethnicity	0	0	
Race/ethnicity			
Characteristics by Bedroom Size (Public Housing Only)	Not Applicable		
1BR	Not Applicable	Not Applicable	Not Applicable
2 BR	Not Applicable	Not Applicable	Not Applicable
3 BR	Not Applicable	Not Applicable	Not Applicable
4 BR	Not Applicable	Not Applicable	Not Applicable
5 BR	Not Applicable	Not Applicable	Not Applicable
5+ BR	Not Applicable	Not Applicable	Not Applicable
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			

### 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) N/A

**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) N/A

**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: (list below) results OF consultation with other organizations that work with other low income families.

**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.

<b>Financial Resources: Planned Sources and Uses</b>		
<b>Sources</b>	<b>Planned \$</b>	<b>Planned Uses</b>
<b>1. Federal Grants (FY 2000 grants)</b>		
a) Public Housing Operating Fund	\$526,475.00	
b) Public Housing Capital Fund	\$434,310.00	
c) HOPE VI Revitalization	N/A	
d) HOPE VI Demolition	N/A	
e) Annual Contributions for Section 8 Tenant-Based Assistance	\$1,298,531.00	
f) Public Housing Drug Elimination Program (including any Technical Assistance funds)	443,388.00	
g) Resident Opportunity and Self-Sufficiency Grants	N/A	
h) Community Development Block Grant	N/A	N/A
i) HOME	N/A	N/A
Other Federal Grants (list below)	N/A	N/A
<b>2. Prior Year Federal Grants (unobligated funds only) (list below)</b>		
1999 Comprehensive Grant		
2000 Comprehensive Grant	\$250,000.00	L.P.B. Abatement
2001 Comprehensive Grant	\$351,957.00	General Improvement
<b>3. Public Housing Dwelling Rental Income</b>	\$311,014.00	Administrative, Maintenance, Salaries, Utilities, Insurance, Routine expenditures.
<b>4. Other income (list below)</b>	N/A	

Financial Resources: Planned Sources and Uses		
Sources	Planned \$	Planned Uses
4. Non-federal sources (list below)	N/A	
<b>Total resources</b>	\$3,235,675.00	

### **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 applying we begin screening and begin offering, this is due to the shortage of applicants on the waiting list.**

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) **Applicants are put on the waiting list by order of date and time of application.**

- 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)

c. Preferences

- 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**)
- 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
- 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) **Prior to adding additional members to the lease and within 10 days after member moves out of the household.**

**(6) Deconcentration and Income Mixing**

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)

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)

### **(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:



**(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: **Add hardship exemption**

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: **Option of choice 30% or flat rents**

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)

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

**X** 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)
- 95<sup>th</sup> 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
- X** 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)\_\_\_\_\_

**X** Other (list below) /**Any time a family experiences a decrease in income that is not as a result of the tenant’s actions.**

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)

**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)

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.

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.)

<b>Program Name</b>	<b>Units or Families Served at Year Beginning</b>	<b>Expected Turnover</b>
Public Housing	173	20%
Section 8 Vouchers	206	16.0%
Section 8 Certificates		
Section 8 Mod Rehab	95	40.1%
Special Purpose Section 8 Certificates/Vouchers (list individually)	25	0%
Public Housing Drug Elimination Program (PHDEP)	258	N/A
Other Federal Programs(list individually)	N/A	N/A

### **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.

Public Housing Maintenance and Management: (list below)

- |                                    |                            |
|------------------------------------|----------------------------|
| A. Maintenance Plan and Procedures | N. Trespass Policy         |
| E. After Hours Procedures          | O. Minimum Rent Policy     |
| F. Emergency Procedures            | P. Collection Policy       |
| D. Gas shut off valve and map      | Q. Lease                   |
| E. Schedule of Charges             | R. Security Policy         |
| F. Work Orders                     | S. Community Center Policy |
| G. Billing Forms                   | T. Income Limits           |
| H. Move out charge form            | U. Lawn Policy             |
| I. Annual Maintenance Charge       | V. Grievance Policy        |
| Inspection Form                    | W. One Strike Policy       |
| Inspection Notification            | X. URP usage rates         |



- Abandonment Notice
- New Tenant Information
- AA. Eviction Policy
- CC. Flat Rents
- EE. Family Choice Rental Payments
- GG. Minority Business Policy
- Key Fund Policy
- KK. Procurement Policy
- Disposition Policy
- Section 3 Policy
- QQ. General Dispository
- SS. Amended Procurement Policy
- (2) Section 8 Management: (list below)
- Y. Pet Policy
- Z. Transfer Policy
- BB. A and O Policy
- DD. Elimination Federal Preferences
- FF. Capitalization Policy
- HH. Investment Policy
- JJ. Personnel Travel Policy
- LL. Petty Cash Policy
- NN. Collection Loss Policy
- PP. Credit Card Policy
- RR. Income Disregard Policy

### **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.

#### **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:

2. Which PHA office should residents or applicants to public housing contact to initiate the PHA grievance process? (select all that apply)
- HA main administrative office
  - PHA development management offices
  - Other (list below)

#### **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:

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 offices
- Other (list below)

## **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:

- Capital Fund Program Annual Statement is provided as an attachment to the PHA Plan at Attachment (state name)

-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 (state name

-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 (Non-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:

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:

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:

### **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.)

<b>Demolition/Disposition Activity Description</b>
1a. Development name: 1b. Development (project) number:
2. Activity type: Demolition <input type="checkbox"/> Disposition <input type="checkbox"/>
3. Application status (select one) Approved <input type="checkbox"/> Submitted, pending approval <input type="checkbox"/> Planned application <input type="checkbox"/>
4. Date application approved, submitted, or planned for submission: <u>(DD/MM/YY)</u>
5. Number of units affected:
6. Coverage of action (select one) <input type="checkbox"/> Part of the development <input type="checkbox"/> Total development
7. Timeline for activity: a. Actual or projected start date of activity: b. Projected end date of activity:

**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.

<b>Designation of Public Housing Activity Description</b>
1a. Development name: 1b. Development (project) number:
2. Designation type: Occupancy by only the elderly <input 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 type="checkbox"/> Submitted, pending approval <input type="checkbox"/> Planned application <input type="checkbox"/>
4. Date this designation approved, submitted, or planned for submission: <u>(DD/MM/YY)</u>
5. If approved, will this designation constitute a (select one) <input type="checkbox"/> New Designation Plan <input type="checkbox"/> Revision of a previously-approved Designation Plan?
Number of units affected: 7. Coverage of action (select one)

<input type="checkbox"/> Part of the development
<input type="checkbox"/> Total development

**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.

<b>Conversion of Public Housing Activity Description</b>	
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.)

<b>Public Housing Homeownership Activity Description (Complete one for each development affected)</b>	
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)	
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:

### **PHA Community Service and Self-sufficiency Programs**

[24 CFR Part 903.7 9 (1)]

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)?

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)

#### **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. )

<b>Services and Programs</b>				
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)
<i>Northeast Texas Council on alcohol and drug abuse</i>	<i>Na</i>	<i>Per referral</i>	<i>Social Services Office</i>	<i>Public Housing</i>
Texas Agriculture Extension	Na	Per referral	Social Services Office	Public Housing
Consumer Credit Counseling	NA	Per referral		
Lamar County Head Start	NA	Per referral	Social Services Office	Public Housing

Northeast Texas Technical Assistance Office	NA	Per referral	Social Services Office	Public Housing
Even Start	NA	Per referral	Social Services Office	Public Housing
Red River County Girl Scouts	NA	Per referral	Social Services Office	Public Housing
Department of Human Services	NA	Per referral	Social Services Office	Public Housing

**(2) Family Self Sufficiency program/s**

a. Participation Description

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

- 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)

- Hi 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)

3. Which developments are most affected? (list below)

**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)

2. Which developments are most affected? (list below)

**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)

2. Which developments are most affected? (list below) All

**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 2000 in this PHA Plan?  
 Yes  No: This PHDEP Plan is an Attachment. (Attachment Filename: \_\_\_\_)

#### **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?

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 (File name)

provided below:

Syble Bills, Mary Ruth Hughes, Lillian Brooks, and Lee Taylor approved plan as it is.

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:

Other: (list below)

**Comments had already been addressed in Plan requiring no changes.**

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

1x 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
- x other: (describe)

**Mayor appoints resident commissioners, based on recommendation of the PHA.**

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)
  - xThe 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.
  - xThe PHA has consulted with the Consolidated Plan agency during the development of this PHA Plan.
  - X 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.

## **Attachments**

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

# PHA Plan Table Library

## Component 7 Capital Fund Program Annual Statement Parts I, II, and II

### Annual Statement Capital Fund Program (CFP) Part I: Summary

Capital Fund Grant Number      FFY of Grant Approval: (MM/YYYY)

Original Annual Statement

Line No.	Summary by Development Account	Total Estimated Cost
1	Total Non-CGP Funds	
2	1406 Operations	
3	1408 Management Improvements	
4	1410 Administration	
5	1411 Audit	
6	1415 Liquidated Damages	
7	1430 Fees and Costs	
8	1440 Site Acquisition	
9	1450 Site Improvement	
10	1460 Dwelling Structures	
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	1498 Mod Used for Development	
19	1502 Contingency	
20	<b>Amount of Annual Grant (Sum of lines 2-19)</b>	
21	Amount of line 20 Related to LBP Activities	
22	Amount of line 20 Related to Section 504 Compliance	
23	Amount of line 20 Related to Security	
24	Amount of line 20 Related to Energy Conservation Measures	

**Annual Statement**  
**Capital Fund Program (CFP) Part II: Supporting Table**

Development Number/Name HA-Wide Activities	General Description of Major Work Categories	Development Account Number	Total Estimated Cost

**Annual Statement**  
**Capital Fund Program (CFP) Part III: Implementation Schedule**

Development Number/Name HA-Wide Activities	All Funds Obligated (Quarter Ending Date)	All Funds Expended (Quarter Ending Date)

**Optional Table for 5-Year Action Plan for Capital Fund (Component 7)**

Complete one table for each development in which work is planned in the next 5 PHA fiscal years. Complete a table for any PHA-wide physical or management improvements planned in the next 5 PHA fiscal year. Copy this table as many times as necessary. Note: PHAs need not include information from Year One of the 5-Year cycle, because this information is included in the Capital Fund Program Annual Statement.

<b>Optional 5-Year Action Plan Tables</b>				
<b>Development Number</b>	<b>Development Name (or indicate PHA wide)</b>	<b>Number Vacant Units</b>	<b>% Vacancies in Development</b>	
<b>Description of Needed Physical Improvements or Management Improvements</b>			<b>Estimated Cost</b>	<b>Planned Start Date (HA Fiscal Year)</b>
<b>Total estimated cost over next 5 years</b>				

**Optional Public Housing Asset Management Table**

See Technical Guidance for instructions on the use of this table, including information to be provided.

Public Housing Asset Management						
Ident	Activity Description					
tion						
Number and type of units	Capital Fund Program Parts II and III <i>Component 7a</i>	Development Activities <i>Component 7b</i>	Demolition / disposition <i>Component 8</i>	Designated housing <i>Component 9</i>	Conversion <i>Component 10</i>	Home- ownership <i>Component 11a</i>

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

---

**PHA Plans**  
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:** City of Paris Housing Authority

**PHA Number:** TX048

**PHA Fiscal Year Beginning: (mm/yyyy)** 07/2002

**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)

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)

**5-YEAR PLAN**  
**PHA FISCAL YEARS 2000 - 2004**  
[24 CFR Part 903.5]

**A. Mission**

State the PHA's mission for serving the needs of low-income, very low income, and extremely low-income families in the PHA's jurisdiction. (select one of the choices below)

- The mission of the PHA is the same as that of the Department of Housing and Urban Development: To promote adequate and affordable housing, economic opportunity and a suitable living environment free from discrimination.
- X The PHA's mission is: (state mission here)

The City of Paris Housing Authority is the same as that of the Department of Housing & Urban Development: To promote adequate and affordable Housing, Economic opportunity and a suitable living environment free of discrimination.

**B. Goals**

The goals and objectives listed below are derived from HUD's strategic Goals and Objectives and those emphasized in recent legislation. PHAs may select any of these goals and objectives as their own, or identify other goals and/or objectives. Whether selecting the HUD-suggested objectives or their own, **PHAS ARE STRONGLY ENCOURAGED TO IDENTIFY QUANTIFIABLE MEASURES OF SUCCESS IN REACHING THEIR OBJECTIVES OVER THE COURSE OF THE 5 YEARS.** (Quantifiable measures would include targets such as: numbers of families served or PHAS scores achieved.) PHAs should identify these measures in the spaces to the right of or below the stated objectives.

**HUD Strategic Goal: Increase the availability of decent, safe, and affordable housing.**

- X PHA Goal: Expand the supply of assisted housing  
Objectives:
- Apply for additional rental vouchers:
  - X Reduce public housing vacancies:  
**The vacancy rate has remained unchanged.**
  - Leverage private or other public funds to create additional housing opportunities:
  - Acquire or build units or developments
  - Other (list below)
- X PHA Goal: Improve the quality of assisted housing  
Objectives:
- X Improve public housing management: (PHAS score)  
**Management is striving to work together to better our PHAS score.**
  - X Improve voucher management: (SEMAP score)  
**Management is striving to be a standard performer.**

Increase customer satisfaction:

**Is a top priority and will continue to strive to get families involved.**

- Concentrate on efforts to improve specific management functions:  
(list; e.g., public housing finance; voucher unit inspections)
- Renovate or modernize public housing units:
- Demolish or dispose of obsolete public housing:
- Provide replacement public housing:
- Provide replacement vouchers:
- Other: (list below)

PHA Goal: Increase assisted housing choices

Objectives:

- Provide voucher mobility counseling:
- Conduct outreach efforts to potential voucher landlords

**We will continue to outreach potential landlords by running ads, having meetings, and meet one on one with social groups in our area.**

- Increase voucher payment standards
- Implement voucher homeownership program:
- Implement public housing or other homeownership programs:
- Implement public housing site-based waiting lists:
- Convert public housing to vouchers:
- Other: (list below)

### **HUD Strategic Goal: Improve community quality of life and economic vitality**

PHA Goal: Provide an improved living environment

Objectives:

- Implement measures to deconcentrate poverty by bringing higher income public housing households into lower income developments:
- Implement measures to promote income mixing in public housing by assuring access for lower income families into higher income developments:
- Implement public housing security improvements:  
**Management has contracted with local police for security services.**
- Designate developments or buildings for particular resident groups  
(elderly, persons with disabilities)
- Other: (list below)

### **HUD Strategic Goal: Promote self-sufficiency and asset development of families and individuals**

PHA Goal: Promote self-sufficiency and asset development of assisted households

Objectives:

- Increase the number and percentage of employed persons in assisted families:
- Provide or attract supportive services to improve assistance recipients' employability:
- Provide or attract supportive services to increase independence for the elderly or families with disabilities.
- Other: (list below)

**We do work with the agencies in our community to help improve employment opportunities for all tenants and independence for our elderly and/or disabled.**

**HUD Strategic Goal: Ensure Equal Opportunity in Housing for all Americans**

- PHA Goal: Ensure equal opportunity and affirmatively further fair housing
- Objectives:

- Undertake affirmative measures to ensure access to assisted housing regardless of race, color, religion national origin, sex, familial status, and disability:
- Undertake affirmative measures to provide a suitable living environment for families living in assisted housing, regardless of race, color, religion national origin, sex, familial status, and disability:
- Undertake affirmative measures to ensure accessible housing to persons with all varieties of disabilities regardless of unit size required:

- Other: (list below)

**Management will continue to implement equal opportunity and fair housing for all.**

**Other PHA Goals and Objectives: (list below)**

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

**ii. 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**

**X** **Troubled Agency Plan**

**iii. 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.

**Not required as of October 1999**

**iv. 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.

**Table of Contents**

Page #

**Annual Plan**

- iii. Executive Summary
- iv. Table of Contents
  - 19. Housing Needs
  - 20. Financial Resources
  - 21. Policies on Eligibility, Selection and Admissions
  - 22. Rent Determination Policies
  - 23. Operations and Management Policies
  - 24. Grievance Procedures
  - 25. Capital Improvement Needs
  - 26. Demolition and Disposition
  - 27. Designation of Housing
  - 28. Conversions of Public Housing
  - 29. Homeownership
  - 30. Community Service Programs
  - 31. Crime and Safety

- 32. Pets (Inactive for January 1 PHAs)
- 33. Civil Rights Certifications (included with PHA Plan Certifications)
- 34. Audit
- 35. Asset Management
- 36. Other Information

**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:

- Admissions Policy for Deconcentration
- FY 2002 Capital Fund Program Annual Statement
- Most recent board-approved operating budget (Required Attachment for PHAs that are troubled or at risk of being designated troubled ONLY)

Optional Attachments:

- PHA Management Organizational Chart
- FY 2002 Capital Fund Program 5 Year Action Plan
- Public Housing Drug Elimination Program (PHDEP) Plan
- Comments of Resident Advisory Board or Boards (must be attached if not included in PHA Plan text)
- 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.

<b>List of Supporting Documents Available for Review</b>		
<b>Applicable &amp; On Display</b>	<b>Supporting Document</b>	<b>Applicable Plan Component</b>
X	PHA Plan Certifications of Compliance with the PHA Plans and Related Regulations	5 Year and Annual Plans
X	State/Local Government Certification of Consistency with the Consolidated Plan	5 Year and Annual Plans
X	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

<b>List of Supporting Documents Available for Review</b>		
<b>Applicable &amp; On Display</b>	<b>Supporting Document</b>	<b>Applicable Plan Component</b>
	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
X	Most recent board-approved operating budget for the public housing program	Annual Plan: Financial Resources;
X	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
X	Section 8 Administrative Plan	Annual Plan: Eligibility, Selection, and Admissions Policies
X	Public Housing Deconcentration and Income Mixing Documentation: 3. 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 4. Documentation of the required deconcentration and income mixing analysis	Annual Plan: Eligibility, Selection, and Admissions Policies
X	Public housing rent determination policies, including the methodology for setting public housing flat rents X check here if included in the public housing A & O Policy	Annual Plan: Rent Determination
X	Schedule of flat rents offered at each public housing development X check here if included in the public housing A & O Policy	Annual Plan: Rent Determination
X	Section 8 rent determination (payment standard) policies X check here if included in Section 8 Administrative Plan	Annual Plan: Rent Determination
X	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
X	Public housing grievance procedures X check here if included in the public	Annual Plan: Grievance Procedures

<b>List of Supporting Documents Available for Review</b>		
<b>Applicable &amp; On Display</b>	<b>Supporting Document</b>	<b>Applicable Plan Component</b>
	housing A & O Policy	
X	Section 8 informal review and hearing procedures X check here if included in Section 8 Administrative Plan	Annual Plan: Grievance Procedures
X	The HUD-approved Capital Fund/Comprehensive Grant Program Annual Statement (HUD 52837) for the active grant year	Annual Plan: Capital Needs
X	Most recent CIAP Budget/Progress Report (HUD 52825) for any active CIAP grant	Annual Plan: Capital Needs
X	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
N/A	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
N/A	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
N/A	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
X	Approved or submitted public housing homeownership programs/plans	Annual Plan: Homeownership
X	Policies governing any Section 8 Homeownership program X check here if included in the Section 8 Administrative Plan	Annual Plan: Homeownership
X	Any cooperative agreement between the PHA and the TANF agency	Annual Plan: Community Service & Self-Sufficiency
N/A	FSS Action Plan/s for public housing and/or Section 8	Annual Plan: Community Service & Self-Sufficiency
N/A	Most recent self-sufficiency (ED/SS, TOP or ROSS or other resident services grant) grant program reports	Annual Plan: Community Service &



<b>List of Supporting Documents Available for Review</b>		
<b>Applicable &amp; On Display</b>	<b>Supporting Document</b>	<b>Applicable Plan Component</b>
		Community Service & Self-Sufficiency
	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
N/A	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)

## **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.

<b>Housing Needs of Families in the Jurisdiction by Family Type</b>							
Family Type	Overall	Afford-ability	Supply	Quality	Access-ibility	Size	Loca-tion
Income <= 30% of AMI	<b>963</b>	<b>4</b>	<b>4</b>	<b>3</b>	<b>4</b>	<b>4</b>	<b>4</b>
Income >30% but <=50% of AMI	<b>680</b>	<b>3</b>	<b>3</b>	<b>4</b>	<b>3</b>	<b>2</b>	<b>3</b>
Income >50% but <80% of AMI	<b>410</b>	<b>2</b>	<b>3</b>	<b>2</b>	<b>2</b>	<b>2</b>	<b>1</b>
Elderly	<b>508</b>	<b>3</b>	<b>3</b>	<b>4</b>	<b>4</b>	<b>2</b>	<b>3</b>
Families with Disabilities	<b>N/A</b>	<b>N/A</b>	<b>N/A</b>	<b>N/A</b>	<b>N/A</b>	<b>N/A</b>	<b>N/A</b>
Race/Ethnicity	<b>1151.7</b>	<b>3</b>	<b>2</b>	<b>3</b>	<b>3</b>	<b>2</b>	<b>3</b>
Race/Ethnicity	<b>837.3</b>	<b>3</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>2</b>	<b>4</b>
Race/Ethnicity							

Housing Needs of Families in the Jurisdiction by Family Type							
Family Type	Overall	Afford- ability	Supply	Quality	Access- ibility	Size	Loca- tion
Race/Ethnicity							

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)

### C. 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	56	100%	48%

<b>Housing Needs of Families on the Waiting List</b>			
Extremely low income <=30% AMI	39.5%	70%	
Very low income (>30% but <=50% AMI)	16.5%	30%	
Low income (>50% but <80% AMI)	0	0	
Families with children	36	64%	
Elderly families	0	0	
Families with Disabilities	4	.1%	
Race/ethnicity	7	13%	
Race/ethnicity	49	88%	
Race/ethnicity	0	0	
Race/ethnicity			
Characteristics by Bedroom Size (Public Housing Only)			
1BR	22	39%	15%
2 BR	17	30%	74%
3 BR	11	20%	10%
4 BR	6	11%	1%
5 BR			
5+ BR			
Is the waiting list closed (select one)? X 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			

<b>Housing Needs of Families on the Waiting List</b>
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)

<b>Housing Needs of Families on the Waiting List</b>			
If used, identify which development/subjurisdiction:			
	# of families	% of total families	Annual Turnover
Waiting list total	191	100%	
Extremely low income <=30% AMI	0	0	
Very low income (>30% but <=50% AMI)	133	70%	
Low income (>50% but <80% AMI)	58	30%	
Families with children	128	67%	
Elderly families	13	.07%	
Families with Disabilities	11	.06%	
Race/ethnicity	14	.07%	
Race/ethnicity	177	93%	
Race/ethnicity	0	0	
Race/ethnicity			
Characteristics by Bedroom Size (Public Housing Only)	Not Applicable		
1BR	Not Applicable	Not Applicable	Not Applicable
2 BR	Not Applicable	Not Applicable	Not Applicable
3 BR	Not Applicable	Not Applicable	Not Applicable
4 BR	Not Applicable	Not Applicable	Not Applicable
5 BR	Not Applicable	Not Applicable	Not Applicable
5+ BR	Not Applicable	Not Applicable	Not Applicable
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			

**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) N/A

**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) N/A

**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: (list below) results OF consultation with other organizations that work with other low income families.

**3. 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.

<b>Financial Resources: Planned Sources and Uses</b>		
<b>Sources</b>	<b>Planned \$</b>	<b>Planned Uses</b>
<b>1. Federal Grants (FY 2000 grants)</b>		
j) Public Housing Operating Fund	\$526,475.00	
k) Public Housing Capital Fund	\$434,310.00	
l) HOPE VI Revitalization	N/A	
m) HOPE VI Demolition	N/A	
n) Annual Contributions for Section 8 Tenant-Based Assistance	\$1,298,531.00	
o) Public Housing Drug Elimination Program (including any Technical Assistance funds)	443,388.00	
p) Resident Opportunity and Self-Sufficiency Grants	N/A	
q) Community Development Block Grant	N/A	N/A
r) HOME	N/A	N/A
Other Federal Grants (list below)	N/A	N/A
<b>2. Prior Year Federal Grants (unobligated funds only) (list below)</b>		
1999 Comprehensive Grant		
2000 Comprehensive Grant	\$250,000.00	L.P.B. Abatement
2001 Comprehensive Grant	\$351,957.00	General Improvement
<b>3. Public Housing Dwelling Rental Income</b>	\$311,014.00	Administrative, Maintenance, Salaries, Utilities, Insurance, Routine expenditures.
<b>4. Other income (list below)</b>	N/A	



Financial Resources: Planned Sources and Uses		
Sources	Planned \$	Planned Uses
4. Non-federal sources (list below)	N/A	
<b>Total resources</b>	\$3,235,675.00	

### **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 applying we begin screening and begin offering, this is due to the shortage of applicants on the waiting list.**

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) **Applicants are put on the waiting list by order of date and time of application.**

- 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)

d. 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**)

3. 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
- 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) **Prior to adding additional members to the lease and within 10 days after member moves out of the household.**

**(6) Deconcentration and Income Mixing**

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)

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)

## **(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:

**(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)

c. 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: **Add hardship exemption**

d. 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: **Option of choice 30% or flat rents**

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)

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

**X** 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)
- 95<sup>th</sup> 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
- X** 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)\_\_\_\_\_
- X** Other (list below) /**Any time a family experiences a decrease in income that is not as a result of the tenant’s actions.**

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**

2. 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)

**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)

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.

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.)

<b>Program Name</b>	<b>Units or Families Served at Year Beginning</b>	<b>Expected Turnover</b>
Public Housing	173	20%
Section 8 Vouchers	206	16.0%
Section 8 Certificates		
Section 8 Mod Rehab	95	40.1%
Special Purpose Section 8 Certificates/Vouchers (list individually)	25	0%
Public Housing Drug Elimination Program (PHDEP)	258	N/A
Other Federal Programs(list individually)	N/A	N/A

### **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.

OO. Public Housing Maintenance and Management: (list below)

- |                                    |                            |
|------------------------------------|----------------------------|
| A. Maintenance Plan and Procedures | N. Trespass Policy         |
| E. After Hours Procedures          | O. Minimum Rent Policy     |
| F. Emergency Procedures            | P. Collection Policy       |
| D. Gas shut off valve and map      | Q. Lease                   |
| E. Schedule of Charges             | R. Security Policy         |
| F. Work Orders                     | S. Community Center Policy |
| G. Billing Forms                   | T. Income Limits           |
| H. Move out charge form            | U. Lawn Policy             |
| I. Annual Maintenance Charge       | V. Grievance Policy        |
| OO. Inspection Form                | W. One Strike Policy       |
| PP. Inspection Notification        | X. URP usage rates         |

- QQ. Abandonment Notice
- RR. New Tenant Information
- AA. Eviction Policy
- CC. Flat Rents
- EE. Family Choice Rental Payments
- GG. Minority Business Policy
- OO. Key Fund Policy
- KK. Procurement Policy
- OO. Disposition Policy
- PP. Section 3 Policy
- QQ. General Dispository
- SS. Amended Procurement Policy
- (2) Section 8 Management: (list below)
- Y. Pet Policy
- Z. Transfer Policy
- BB. A and O Policy
- DD. Elimination Federal Preferences
- FF. Capitalization Policy
- HH. Investment Policy
- JJ. Personnel Travel Policy
- LL. Petty Cash Policy
- NN. Collection Loss Policy
- PP. Credit Card Policy
- RR. Income Disregard Policy

## **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:

2. Which PHA office should residents or applicants to public housing contact to initiate the PHA grievance process? (select all that apply)
- HA main administrative office
  - PHA development management offices
  - Other (list below)

### **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:

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 offices
- Other (list below)

## **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:

- Capital Fund Program Annual Statement is provided as an attachment to the PHA Plan at Attachment (state name)

-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 (state name

-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 (Non-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:

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:

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:

## **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.)

<b>Demolition/Disposition Activity Description</b>
1a. Development name: 1b. Development (project) number:
2. Activity type: Demolition <input type="checkbox"/> Disposition <input type="checkbox"/>
3. Application status (select one) Approved <input type="checkbox"/> Submitted, pending approval <input type="checkbox"/> Planned application <input type="checkbox"/>
4. Date application approved, submitted, or planned for submission: <u>(DD/MM/YY)</u>
5. Number of units affected:
6. Coverage of action (select one) <input type="checkbox"/> Part of the development <input type="checkbox"/> Total development
7. Timeline for activity: a. Actual or projected start date of activity: b. Projected end date of activity:

**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.

<b>Designation of Public Housing Activity Description</b>	
1a. Development name:	
1b. Development (project) number:	
2. Designation type:	
Occupancy by only the elderly <input 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 type="checkbox"/>	
Submitted, pending approval <input type="checkbox"/>	
Planned application <input type="checkbox"/>	
4. Date this designation approved, submitted, or planned for submission: <u>(DD/MM/YY)</u>	
5. If approved, will this designation constitute a (select one)	
<input type="checkbox"/> New Designation Plan	
<input type="checkbox"/> Revision of a previously-approved Designation Plan?	
6. Number of units affected:	
7. Coverage of action (select one)	

- |  |
|--|
| <input type="checkbox"/> Part of the development<br><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.

<b>Conversion of Public Housing Activity Description</b>	
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.)

<b>Public Housing Homeownership Activity Description (Complete one for each development affected)</b>	
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)?

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)

### **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. )

<b>Services and Programs</b>				
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)
<i>Northeast Texas Council on alcohol and drug abuse</i>	<i>Na</i>	<i>Per referral</i>	<i>Social Services Office</i>	<i>Public Housing</i>
Texas Agriculture Extension	Na	Per referral	Social Services Office	Public Housing
Consumer Credit Counseling	NA	Per referral		
Lamar County Head Start	NA	Per referral	Social Services Office	Public Housing

Northeast Texas Technical Assistance Office	NA	Per referral	Social Services Office	Public Housing
Even Start	NA	Per referral	Social Services Office	Public Housing
Red River County Girl Scouts	NA	Per referral	Social Services Office	Public Housing
Department of Human Services	NA	Per referral	Social Services Office	Public Housing

**(2) Family Self Sufficiency program/s**

a. Participation Description

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

- 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)

- Hi 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)

3. Which developments are most affected? (list below)

**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)

2. Which developments are most affected? (list below)

**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)

2. Which developments are most affected? (list below) All

**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 2000 in this PHA Plan?  
 Yes  No: This PHDEP Plan is an Attachment. (Attachment Filename: \_\_\_\_)

#### **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 (File name)

provided below:

Syble Bills, Mary Ruth Hughes, Lillian Brooks, and Lee Taylor approved plan as it is.

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:

Other: (list below)

**Comments had already been addressed in Plan requiring no changes.**

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

1x 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
- x other: (describe)

**Mayor appoints resident commissioners, based on recommendation of the PHA.**

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)
  - xThe 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.
  - xThe PHA has consulted with the Consolidated Plan agency during the development of this PHA Plan.
  - X 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.



## **Attachments**

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

# PHA Plan Table Library

## Component 7 Capital Fund Program Annual Statement Parts I, II, and II

### Annual Statement Capital Fund Program (CFP) Part I: Summary

Capital Fund Grant Number      FFY of Grant Approval: (MM/YYYY)

Original Annual Statement

Line No.	Summary by Development Account	Total Estimated Cost
1	Total Non-CGP Funds	
2	1406 Operations	
3	1408 Management Improvements	
4	1410 Administration	
5	1411 Audit	
6	1415 Liquidated Damages	
7	1430 Fees and Costs	
8	1440 Site Acquisition	
9	1450 Site Improvement	
10	1460 Dwelling Structures	
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	1498 Mod Used for Development	
19	1502 Contingency	
20	<b>Amount of Annual Grant (Sum of lines 2-19)</b>	
21	Amount of line 20 Related to LBP Activities	
22	Amount of line 20 Related to Section 504 Compliance	
23	Amount of line 20 Related to Security	
24	Amount of line 20 Related to Energy Conservation Measures	

**Annual Statement**  
**Capital Fund Program (CFP) Part II: Supporting Table**

Development Number/Name HA-Wide Activities	General Description of Major Work Categories	Development Account Number	Total Estimated Cost

**Annual Statement**

**Capital Fund Program (CFP) Part III: Implementation Schedule**

Development Number/Name HA-Wide Activities	All Funds Obligated (Quarter Ending Date)	All Funds Expended (Quarter Ending Date)

## Optional Table for 5-Year Action Plan for Capital Fund (Component 7)

Complete one table for each development in which work is planned in the next 5 PHA fiscal years. Complete a table for any PHA-wide physical or management improvements planned in the next 5 PHA fiscal year. Copy this table as many times as necessary. Note: PHAs need not include information from Year One of the 5-Year cycle, because this information is included in the Capital Fund Program Annual Statement.

<b>Optional 5-Year Action Plan Tables</b>				
<b>Development Number</b>	<b>Development Name (or indicate PHA wide)</b>	<b>Number Vacant Units</b>	<b>% Vacancies in Development</b>	
<b>Description of Needed Physical Improvements or Management Improvements</b>			<b>Estimated Cost</b>	<b>Planned Start Date (HA Fiscal Year)</b>
<b>Total estimated cost over next 5 years</b>				



**ATTACHMENT H**  
**Annual Statement/Performance and Evaluation Report**  
**Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary**

PHA Name: PARIS HOUSING AUTHORITY OF THE CITY OF PARIS	Grant Type and Number TX21P048705-99 Capital Fund Program: CFP Capital Fund Program Replacement Housing Factor Grant No:	Federal FY of Grant: 1999
---	---	------------------------------

Original Annual Statement (revision no: )  Reserve for Disasters/ Emergencies  Revised Annual Statement  
 Performance and Evaluation Report for Period Ending: 1999  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	27620.00			27620.00
4	1410 Administration	35632.00			36726.49
5	1411 Audit				
6	1415 liquidated Damages				
7	1430 Fees and Costs	34500.0	73700.00		71945.00
8	1440 Site Acquisition				
9	1450 Site Improvement	46780.00			41541.61
10	1460 Dwelling Structures	203370.00	143370.00		143370.00
11	1465.1 Dwelling Equipment— Nonexpendable				
12	1470 Nondwelling Structures				
13	1475 Nondwelling Equipment	20290.00			20290.00
14	1485 Demolition				

**ATTACHMENT H**  
**Annual Statement/Performance and Evaluation Report**  
**Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary**

PHA Name: PARIS HOUSING AUTHORITY OF THE CITY OF PARIS	Grant Type and Number TX21P048705-99 Capital Fund Program: CFP Capital Fund Program Replacement Housing Factor Grant No:	Federal FY of Grant: 1999
---	---	------------------------------

**Original Annual Statement** (revision no: )  **Reserve for Disasters/ Emergencies**  **Revised Annual Statement**  
 **Performance and Evaluation Report for Period Ending: 1999**  **Final Performance and Evaluation Report**

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
15	1490 Replacement Reserve	0	20800.00		20800.00
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs	10000.00			3625.00
18	1498 Mod Used for Development				
19	1502 Contingency				
20	Amount of Annual Grant: (sum of lines 2-19)	378192.00			365918.10
21	Amount of line 20 Related to LBP Activities	82605.51			
22	Amount of line 20 Related to Section 504 Compliance				
23	Amount of line 20 Related to Security	91020.00			
24	Amount of line 20 Related to Energy Conservation Measures				



## ATTACHMENT H

### Annual Statement/Performance and Evaluation Report

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

#### Part II: Supporting Pages

PHA Name: Paris Housing Authority of the City of Paris		Grant Type and Number Capital Fund Program #: TX21P048705-99 Capital Fund Program Replacement Housing Factor #:				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 Propos Wor
				Original	Revised	Funds Obligated	Funds Expended	
TX048-001	GEORGE WRIGHT HOMES							
	SITE IMPROVEMENTS							
	SEWER LINE REPLACEMENT	1450	300 FT	7000.00			1836.08	
	TOP SOIL/ LANDSCAPING	1450	10LDS	1000.00			1000.00	
	A/C REPLACEMENT LAUNDROMAT	1450	1	0	750.00		750.00	
	TOTAL SITE IMPROVEMENT 001			8000.00	8750.00		8823.47	
	DWELLING STRUCTURE							
	SECURITY SCREENS	1460	1000	125000.00	62570.00		62570.00	
	REHAB. 9 UNITS	1460	9	0	51000.00		51000.00	
	EXTERIOR DOOR REPLACEMENT	1460	200		0			
	TOTAL DWELLING STRUCTURE			185000.00	113570.00		113570.00	
TX048-002	BOOKER T. WASHINGTON							
	DWELLING STRUCTURE							

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

PHA Name: Paris Housing Authority of the City of Paris		Grant Type and Number Capital Fund Program #: TX21P048705-99 Capital Fund Program Replacement Housing Factor #:				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 Propos Wor
				Original	Revised	Funds Obligated	Funds Expended	
	SECURITY SCREENS	1460	520	60000.00	28450.00		28450.00	
	TOTAL DWELLING STRUCTURE			60000.00	28450.00		28450.00	
TX048-004	JACKSON COURT							
	SITE IMPROVEMENTS							
	LAWN CARE/MAINTENANCE	1450	SITE	8800.00			8726.53	
	TOTAL SITE IMPROVEMENTS			8800.00				
	DWELLING STRUCTURE							
	EXTERIOR PAINTING	1450		17500.00			17500.00	
	TOTAL DWELLING STRUCTURE			17500.00			17500.00	
TX048-004	CLOVIS GRAVES HOMES (13 <sup>TH</sup> )							
	SITE IMPROVEMENTS							
	LAWN CARE/MAINTENANCE	1450	SITE	7200.00			7200.00	
	COMM. BLDG A/C REPLACEMENT	1450	2	0	2130.00		2130.00	

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

PHA Name: Paris Housing Authority of the City of Paris		Grant Type and Number Capital Fund Program #: TX21P048705-99 Capital Fund Program Replacement Housing Factor #:			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 Proposed Work
				Original	Revised	Funds Obligated	Funds Expended	
	TOTAL SITE IMPROVEMENT			7200.00	9330.00		9330.00	
	DWELLING STRUCTURE							
	EXTERIOR PAINTING	1450		1,200.00			1,200.00	
	TOTAL DWELLING STRUCTURE			1,200.00			1,200.00	
TX048-004	PRICE CIRCLE							
	SITE IMPROVEMENTS							
	LAWN CARE/MAINTENANCE	1450		1200.00			1200.00	
	TOTAL SITE IMPROVEMENT			1200.00			1200.00	
TX048-004	DWELLING STRUCTURES							
	EXTERIOR PAINTING	1460		2250.00			1350.00	
	TOTAL DWELLING STRUCTURES			2250.00			1350.00	
	AGENCY WIDE TEX048							
	RELOCATION COSTS	1495.1		0	10000.00		3625.00	
	NONDWELLING EQUIPMENT							

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

PHA Name: Paris Housing Authority of the City of Paris		Grant Type and Number Capital Fund Program #: TX21P048705-99 Capital Fund Program Replacement Housing Factor #:			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 Propos Wor
				Original	Revised	Funds Obligated	Funds Expended	
	MAINTENANCE TOOLS, SUPPLIES, EQUIPMENT	1475		10000.00			10000.00	
	TAILGATE LIFT	1475		1800.00			1800.00	
	COMMUNITY CTR. SUPPLIES/RESIDENT SER	1475		1000.00			1000.00	
	COMPUTER RESIDENT SERVICES	1475		5000.00			5000.00	
	BOOKSHELVES/ CHAIRS CENTERS	1475		2490.00			2490.00	
	TOTAL NONDWELLING EQUIPMENT			20290.00			20290.00	
	FEES AND COSTS							
	PRO COMP SERVICES	1430		3500.00			3830.00	
	LEAD TESTING/ASSESSMENT	1430		31000.00			31000.00	
	ARCH. & ENGINEERING	1430			11000.00		11000.00	
	ABATMENT PLAN TESTING	1430			15700.00		14275.00	

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

PHA Name: Paris Housing Authority of the City of Paris		Grant Type and Number Capital Fund Program #: TX21P048705-99 Capital Fund Program Replacement Housing Factor #:			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 Proposed Work
				Original	Revised	Funds Obligated	Funds Expended	
	AFTER REMOVAL OF LBP	1430			9000.00		9000.00	
	CONSULTING FEES	1430			3500.00		1745.00	
	STATE FEES	1430						
	TOTAL FEES AND COSTS			34500.00	73700.00		72605.51	
	ADMINISTRATION							
	SOCIAL SERVICES COORDINATOR	1410		19750.00			19750.00	
	COMP RESIDENT CLERK	1410		10712.00			10712.00	
	MAINTENANCE SUPER/COMP COORDINATOR	1410		4160.00			4160.00	
	SUNDRY EXPENSES ADMIN. GRANT	1410		1000.00			2,094.49	
	TOTAL ADMINISTRATION	1410		35,632.00			36,726.49	
	AGENCY WIDE CONTINUED							
	SITE IMPROVEMENT							
	PHAS TRAINING STAFF	1408		3000.00			300.00	

**ATTACHMENT H**

**Annual Statement/Performance and Evaluation Report**

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

**Part II: Supporting Pages**

PHA Name: Paris Housing Authority of the City of Paris		Grant Type and Number Capital Fund Program #: TX21P048705-99 Capital Fund Program Replacement Housing Factor #:			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 Proposed Work
				Original	Revised	Funds Obligated	Funds Expended	
	GAA/FINANCE UPDATING TRAINING	1408		2500.00		2500.00	2500.00	
	AUTOMATED SYSTEM TRAINING UPDATE	1408		1500.00		1500.00	1500.00	
	RESIDENT COUNCIL DEVELOPMENT	1408		3500.00		3500.00	3500.00	
	DEV. MONEY/BUDGET MGMT CLASSES	1408		1000.00		1000.00	1000.00	
	HOMEOWNERSHIP COURSE	1408		120.00		120.00	120.00	
	SELF SUFFIENCY/JOB TRAINING COURSE	1408		1000.00		1000.00	1000.00	
	DEVELOP HOUSEKEEPING	1408		1000.00		1000.00	1000.00	
	UPDATE IMP. VACANCY RELOCATION PLAN	1408		2000.00		2000.00	2000.00	
	IMPLEMENT AUTO ORIEN. PROGRAM	1408		2000.00		2000.00	2000.00	

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

PHA Name: Paris Housing Authority of the City of Paris		Grant Type and Number Capital Fund Program #: TX21P048705-99 Capital Fund Program Replacement Housing Factor #:			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 Propos Worl
				Original	Revised	Funds Obligated	Funds Expended	
	DESK OFFICE FILE CABINETS	1408		10000.00	10000.00		10000.00	
	TOTAL MGMT IMPROVEMENT			27620.00			27620.00	







**ATTACHMENT H**

**Annual Statement/Performance and Evaluation Report**

**Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary**

PHA Name: HOUSING AUTHORITY OF THE CITY OF PARIS	Grant Type and Number TX21P048705-00 Capital Fund Program: CFP Capital Fund Program Replacement Housing Factor Grant No:	Federal FY of Grant: 2000
--	---	---------------------------

Original Annual Statement (revision no: )  Reserve for Disasters/ Emergencies  Revised Annual Statement

Performance and Evaluation Report for Period Ending: 1999  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	43,430.00		43,430.00	43,430.00
3	1408 Management Improvements	13,420.00		13,420.00	170.68
4	1410 Administration	56,840.00		56,840.00	54,840.00
5	1411 Audit				
6	1415 liquidated Damages				
7	1430 Fees and Costs				
8	1440 Site Acquisition				
9	1450 Site Improvement	96,868.00	17,200.00	17200.00	16,824.45
10	1460 Dwelling Structures	90,290.00	261,412.00	259,130.10	2,281.90
11	1465.1 Dwelling Equipment—Nonexpendable	34,646.00	0		
12	1470 Nondwelling Structures	53328.00	0		
13	1475 Nondwelling Equipment	45500.00	29000.00	29000.00	29000.00
14	1485 Demolition				

**ATTACHMENT H**

**Annual Statement/Performance and Evaluation Report**

**Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary**

PHA Name: HOUSING AUTHORITY OF THE CITY OF PARIS	Grant Type and Number TX21P048705-00 Capital Fund Program: CFP Capital Fund Program Replacement Housing Factor Grant No:	Federal FY of Grant: 2000
--	---	---------------------------

Original Annual Statement (revision no: )
  Reserve for Disasters/ Emergencies
 Revised Annual Statement  
 Performance and Evaluation Report for Period Ending: 1999
  Final Performance and Evaluation Report

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs	0	13000.00	13,000.00	13,000.00
18	1498 Mod Used for Development				
19	1502 Contingency				
20	Amount of Annual Grant: (sum of lines 2-19)	434302.00		434302.00	148547.03
21	Amount of line 20 Related to LBP Activities		254092.00		
22	Amount of line 20 Related to Section 504 Compliance				
23	Amount of line 20 Related to Security				
24	Amount of line 20 Related to Energy Conservation Measures				

**ATTACHMENT H**  
**Annual Statement/Performance and Evaluation Report**  
**Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary**

PHA Name: HOUSING AUTHORITY OF THE CITY OF PARIS	Grant Type and Number TX21P048705-00 Capital Fund Program: CFP Capital Fund Program Replacement Housing Factor Grant No:	Federal FY of Grant: 2000
--	---	---------------------------

Original Annual Statement (revision no: )  Reserve for Disasters/ Emergencies  Revised Annual Statement  
 Performance and Evaluation Report for Period Ending: 1999  Final Performance and Evaluation Report

Line No.	Summary by Development Account	Total Estimated Cost	Total Actual Cost
----------	--------------------------------	----------------------	-------------------

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

PHA Name: HOUSING AUTHORITY OF THE CITY OF PARIS	Grant Type and Number Capital Fund Program #: TX21P048705-00 Capital Fund Program Replacement Housing Factor #:	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 Proposed Work
				Original	Revised	Funds Obligated	Funds Expended	
TX048-001	ROACH/VERMIN/TERMITE TREATMENT	1460	140	4600.00		4600.00	2281.90	
	LEAD-BASED PAINT ASSESSMENT/ABATEMENT	1460	140	133668.00		133,668.00	0	



**ATTACHMENT H**

**Annual Statement/Performance and Evaluation Report**

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

**Part II: Supporting Pages**

PHA Name: HOUSING AUTHORITY OF THE CITY OF PARIS		Grant Type and Number Capital Fund Program #: TX21P048705-00 Capital Fund Program Replacement Housing Factor #:				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 Propos Worl
				Original	Revised	Funds Obligated	Funds Expended	
AGENCY WIDE	MOVING EQUIPMENT	1475	2	14,000.00		14,000.00	14,000.00	
	MAINTENANCE TOOLS/SUPPLIES	1475		15,000.00		15,000.00	15,000.00	
ADMINISTRATIVE	SOCIAL SERVICES COORDINATOR	1410	1	24,000.00		24,000.00	24,000.00	
	COMP./RESIDENT SERVICE CLERK	1410	1	15,680.00		15,680.00	15,580.00	
	PRORATE MAINT/COORD	1410	1	6,160.00		6,160.00	6,160.00	
	BENEFITS	1410		10,000.00		10,000.00	10,000.00	
	SUNDRY EXPENSE	1410		1,000.00		1,000.00	1,000.00	
MANAGEMENT	CAPITOL FUND UPDATE COURSE	1408	1	1,200.00		1,200.00	1,200.00	
	MONEY BUDGETING CLASSES FOR RESIDENT	1408		3,000.00		3,000.00		
	SELF SUFFICENCY CLASSES	1408		2,000.00		2,000.00		







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

PHA Name: HOUSING AUTHORITY OF THE CITY OF PARIS		Grant Type and Number Capital Fund Program #: TX21P048705-00 Capital Fund Program Replacement Housing Factor #:			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 Propos Wor
				Original	Revised	Funds Obligated	Funds Expended	



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

PHA Name: HOUSING AUTHORITY OF THE CITY OF PARIS		Grant Type and Number Capital Fund Program #: TX21P048705-00 Capital Fund Program Replacement Housing Factor #:				Federal FY of Grant: 2000	
Development Number Name/HA-Wide Activities	All Fund Obligated (Quart Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates
	Original	Revised	Actual	Original	Revised	Actual	



**ATTACHMENT H**  
**Annual Statement/Performance and Evaluation Report**  
**Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary**

PHA Name: HOUSING AUTHORITY OF THE CITY OF PARIS	Grant Type and Number TX21P04850201 Capital Fund Program: CFP Capital Fund Program Replacement Housing Factor Grant No:	Federal FY of Grant: 2001
---	--	------------------------------

**Original Annual Statement** (revision no: )  
 **Reserve for Disasters/ Emergencies Revised Annual Statement**  
 **XPerformance and Evaluation Report for Period Ending: 9/30/2002**  
 **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				44,310.00
2	1406 Operations	\$44,310.00			
3	1408 Management Improvements	\$14,920.00			
4	1410 Administration	\$56,840.00	\$57,840.00		46,840.00
5	1411 Audit	N/A			
6	1415 liquidated Damages	N/A			
7	1430 Fees and Costs	\$0.00	\$12,000.00		
8	1440 Site Acquisition	N/A			
9	1450 Site Improvement	\$92,372.00			
10	1460 Dwelling Structures	\$75,290.00			
11	1465.1 Dwelling Equipment— Nonexpendable	\$33,626.00			
12	1470 Nondwelling Structures	\$93,249.00	\$81,249.00		
13	1475 Nondwelling Equipment	\$31,500.00			
14	1485 Demolition	NA			

**ATTACHMENT H**  
**Annual Statement/Performance and Evaluation Report**  
**Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary**

PHA Name: HOUSING AUTHORITY OF THE CITY OF PARIS	Grant Type and Number TX21P04850201 Capital Fund Program: CFP Capital Fund Program Replacement Housing Factor Grant No:	Federal FY of Grant: 2001
---	--	------------------------------

**Original Annual Statement** (revision no: )  
 **Reserve for Disasters/ Emergencies Revised Annual Statement**  
 **Performance and Evaluation Report for Period Ending: 9/30/2002**  
 **Final Performance and Evaluation Report**

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
15	1490 Replacement Reserve	NA			
16	1492 Moving to Work Demonstration	NA			
17	1495.1 Relocation Costs	NA			
18	1498 Mod Used for Development	NA			
19	1502 Contingency	NA			
20	Amount of Annual Grant: (sum of lines 2-19)	\$443,107.00			
21	Amount of line 20 Related to LBP Activities	NA			
22	Amount of line 20 Related to Section 504 Compliance	\$0.00			
23	Amount of line 20 Related to Security	\$68,286.00			
24	Amount of line 20 Related to Energy Conservation Measures	\$27,029.00			









# ATTACHMENT H

## Annual Statement/Performance and Evaluation Report

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

#### Part II: Supporting Pages

PHA Name: HOUSING AUTHORITY OF THE CITY OF PARIS		Grant Type and Number Capital Fund Program #: TX21P04850201 Capital Fund Program Replacement Housing Factor #:			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 Propos Wor
				Original	Revised	Funds Obligated	Funds Expended	
TX048-004	LAWN CARE MAINTENANCE	1450		8,800.0				
JACKSON COURT	INSTALL FLOOR FIXTURES	1460		1,750.00				
	INSTALL FLOW RESTRICTORS (WATER)	1460		875.00				
	LAUNDRY FACILITIES	1470		54,121.00				
TX048-04	LAWN CARE MAINTENANCE	1460		7,200.00				
CLOVIS GRAVES	INSTALL FLOOR FIXTURES	1460		1,330.00				
	INSTALL FLOW RESTRICTORS (WATER)	1460		665.00				
TX048-004	LAWN CARE MAINTENANCE	1450		1,200.00				
PRICE CIRCLE	INSTALL FLOOR FIXTURES	1460		420.00				

**ATTACHMENT H**

**Annual Statement/Performance and Evaluation Report**

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

**Part II: Supporting Pages**

PHA Name: HOUSING AUTHORITY OF THE CITY OF PARIS		Grant Type and Number Capital Fund Program #: TX21P04850201 Capital Fund Program Replacement Housing Factor #:			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 Propos Wor
				Original	Revised	Funds Obligated	Funds Expended	
	INSTALL FLOW RESTRICTORS (WATER)	1460		210.00				
AGENCY WIDE	MAINTENANCE/STORAGE FACILITY	1470		27,128.00				
	MAINTENANCE TOOL/SUPPLIES	1475		15,000.00				
	COMPUTER SYSTEMS UPDATE	1475		7,000.00				
	COMMUNITY CENTER SUPPLIES	1475		1,000.00				
	PLAYGORUND PARK IMPROVEMENTS	1475		8,500.00				
ADMINISTRATION	SOCIAL SERVICES COORDINATOR	1410		26,000.00			25,000.00	















**ATTACHMENT H**

**Annual Statement/Performance and Evaluation Report**

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

**Part III: Implementation Schedule**

PHA Name: HOUSING AUTHORITY OF THE CITY OF PARIS		Grant Type and Number Capital Fund Program #: TX21P04850201 Capital Fund Program Replacement Housing Factor #:					Federal FY of Grant: 2001
Development Number Name/HA-Wide Activities	All Fund Obligated (Quart Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates
	Original	Revised	Actual	Original	Revised	Actual	
TX----001	3/31/03			3/31/04			
TX----002	3/31/03			3/31/04			
TX----003	3/31/03			3/31/04			
TX----005	3/31/03			3/31/04			
TX----HA	3/31/03			3/31/04			

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

PHA Name: HOUSING AUTHORITY OF THE CITY OF PARIS		Grant Type and Number Capital Fund Program #: TX21P04850201 Capital Fund Program Replacement Housing Factor #:				Federal FY of Grant: 2001	
Development Number Name/HA-Wide Activities	All Fund Obligated (Quart Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates
	Original	Revised	Actual	Original	Revised	Actual	



**Annual Statement/Performance and Evaluation Report**

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

PHA Name: Paris Housing Authority

Grant Type and Number TX21P04850202

Capital Fund Program: CFP

Capital Fund Program Replacement Housing Factor Grant No:

Federal FY of Grant: 2002

Original Annual Statement  
 Performance and Evaluation Report for Period Ending:  Reserve for Disasters/ Emergencies  Revised Annual Statement (revision no: )  
 Summary by Development Account  Final Performance and Evaluation Report

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	
1	Total non-CFP Funds				
2	1406 Operations	33,268.00			
3	1408 Management Improvements	7,120.00			
4	1410 Administration	33,268.00			
5	1411 Audit				
6	1415 liquidated Damages				
7	1430 Fees and Costs	28,592.00			
8	1440 Site Acquisition				
9	1450 Site Improvement	30,650.00			
10	1460 Dwelling Structures	140,603.00			
11	1465.1 Dwelling Equipment—Nonependable				
12	1470 Nondwelling Structures	32,478.00			
13	1475 Nondwelling Equipment	26,704.00			
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1498 Mod Used for Development				
19	1502 Contingency				
20	Amount of Annual Grant: (sum of lines 2-19)	332,683.00			
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 Compliance				
23	Amount of line 20 Related to Security				
24	Amount of line 20 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: Paris Housing Authority      Grant Type and Number:      Capital Fund Program #: TX21P04850202      Federal FY of Grant: 2002  
 Capital Fund Program Replacement Housing Factor #:

Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work
				Original	Revised	Funds Obligated	Funds Expended	
TX048-001	George Wright Homes							
	Sidewalks & curb cuts	1450		9,000.00				
	<b>SUBTOTAL</b>	<b>1450</b>		<b>9,000.00</b>				
	Cabinet replacement	1460	18	31,000.00				
	Interior painting	1460	12	12,500.00				
	Interior floor coverings	1460	37	16,250.00				
	Roach & termite treatment	1460		1,500.00				
	<b>SUBTOTAL</b>	<b>1460</b>		<b>61,250.00</b>				











**Annual Statement/Performance and Evaluation Report  
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)**

**Part II: Supporting Pages**

PHA Name: Paris Housing Authority

Grant Type and Number  
Capital Fund Program #: TX21P04850202  
Capital Fund Program  
Replacement Housing Factor #:

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 Proposed Work
				Original	Revised	Funds Obligated	Funds Expended	
TX048-004	Price Circle							
	Lawn care maintenance	1450		1,200.00				
	Landscaping	1450		500.00				
	<b>SUBTOTAL</b>	<b>1450</b>		<b>1,700.00</b>				
	A/C Condenser replacement	1460	5	3,200.00				
	Interior painting	1460	2	1,400.00				
	<b>SUBTOTAL</b>	<b>1460</b>		<b>4,600.00</b>				

**Annual Statement/Performance and Evaluation Report  
 Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)**

**Part II: Supporting Pages**

Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Grant Type and Number Capital Fund Program #: Dev. Acct No.	Quantity	Replacement Housing Factor #:		Total Actual Cost		Status of Proposed Work
				Original	Revised	Funds Obligated	Funds Expended	
TX048-HA	Operations	1406		33,268.00				
	<b>SUBTOTAL</b>	<b>1406</b>		<b>33,268.00</b>				
	Staff training	1408		4,000.00				
	Resident housekeeping/safety	1408		1,120.00				
	Self sufficiency/money mgmt.	1408		2,000.00				
	<b>SUBTOTAL</b>	<b>1408</b>		<b>7,120.00</b>				
	Social services	1410		26,000.00				
	Prorate maintenance / grant	1410		5,180.00				
	Sundry expenses	1410		2,088.00				
	<b>SUBTOTAL</b>	<b>1410</b>		<b>33,268.00</b>				
	Fees and costs	1430		8,000.00				
	Hire an architect to develop plans and specifications	1430		20,592.00				
	<b>SUBTOTAL</b>	<b>1430</b>		<b>28,592.00</b>				
	Maintenance vehicle	1475	1	1,200.00				
	Maintenance tools and supplies	1475		10,704.00				
	Computer hardware	1475	2	4,000.00				
	Maintenance and Office equipment	1475		10,800.00				
	<b>SUBTOTAL</b>	<b>1475</b>		<b>26,704.00</b>				



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

Development Number Name/HA-Wide Activities	All Fund Obligated (Quart Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates
	Original	Revised	Actual	Original	Revised	Actual	
TX048	9/30/03			9/30/05			

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

PHA Name: Paris Housing Authority		Grant Type and Number Capital Fund Program #: TX21P04850202 Capital Fund Program Replacement Housing Factor #:		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 Proposed Work
				Original	Revised	Funds Obligated	Funds Expended	
TX048-002	Booker T. Washington							
	Furnace replacement	1460	10	22,000.00				
	Cabinet replacement	1460	9	16,353.00				
	Interior painting	1460	8	4,000.00				
	Interior floor coverings	1460	10	4,000.00				
	Roach & termite treatment	1460		1,000.00				
	<b>SUBTOTAL</b>	<b>1460</b>		<b>47,353.00</b>				

# HOUSING AUTHORITY OF THE CITY OF PARIS

**Denny Head- Executive Director**

**Benny Goforth**  
Maintenance Supervisor

**Lee Taylor**  
Director of Social  
Services

Assistant Director/  
Bookkeeper/ Systems  
Manager

**Trish Pridemore**  
Operations Manager

**Comp-Clerk**

Vacant

**Administrative  
Clerk**

Patti Torres

**Receptionist  
Applications  
Coordinator**

Donna Jones

**Inspector**

L.D. Ruthart

**Caseworkers**

**Public  
Housing**

Liz Brooks

**Section 8**

Deborah  
Ritchey

**Maintenance mechanic A**

Bobby Bailey

**Maintenance Mechanic B**

Jim Knight

**Maintenance Aid A**

Paul Liggins

**UTILITY ALLOWANCE SCHEDULE  
DEVELOPMENT SUPPLIED UTILITIES**

The following utilities in the indicated quantities, will be allowed for the residents residing in the following sites: George Wright Homes, TX048-001, and Booker T. Washington Homes, TX048-002. Resident consumption, or usage in excess of these allowances will be billed on a unit of purchase price, cents per kilowatt hour of electricity, and (MCF) thousand cubic feet of gas. These additional costs will be figured into the amount owed to the Housing Authority and billed monthly.

**Electricity:** For lighting, refrigeration, small appliances, electric heaters, furnace blowers, air conditioning and/or washers and dryers.

**Electricity (KWH)**

MONTHS	1 BEDROOM	2 BEDROOM	3 BEDROOM	4 BEDROOM
JAN-FEB-MAR	685	1160	1620	1700
APR-MAY-JUNE	1300	1950	2450	2700
JULY-AUG-SEPT	2000	2550	2850	3300
OCT-NOV-DEC	850	1360	1540	1900
TOTAL	4835	7020	8460	9600

**Gas: For cooking, heating, domestic water heating**

**GAS (MFC)**

MONTHS	1 BEDROOM	2 BEDROOM	3 BEDROOM	4 BEDROOM
JAN-FEB-MAR	320	345	425	475
APR-MAY-JUNE	145	160	190	205
JULY-AUG-SEPT	80	85	100	115
OCT-NOV-DEC	275	295	375	415
TOTAL	820	885	1090	1210

# UTILITY ALLOWANCE FOR NEW SITES: JACKSON COURT, CLOVIS GRAVES, PRICE CIRCLE

## 3 BEDROOM UNITS

	Monthly	Yearly
ELECTRIC CONSUMPTION	\$624	\$7488
GAS CONSUMPTION	\$ 54	\$ 649

## OLD SITES VERSUS NEW SITES

GWH & BTW	ELECTRICITY	GAS
MONTHLY	705	91
NEW SITES	624	54

## CONSUMPTION AT AVERAGE RATES

ELECTRICITY 624 @ .0950 = \$ 59.28

GAS 54 @ .0098 = \$ 52.92

TOTAL \$112.20



Effective Date 4-27-2001			
DESCRIPTION		LABOR LINE	LABOR COST
<b>BATHROOMS</b>			
<b>UNSTOP</b>	COMMODE	1	\$10.50
	LAVATORY	1	\$10.50
	TUB	1	\$10.50
<b>REPLACE</b>	COMMODE	1 1/2	\$15.75
	COMMODE LID & SEAT	1/2	\$5.25
	COMMODE HANDLE	1/4	\$2.63
	LAVATORY	1	\$10.50
	TISSUE HOLDER	1/2	\$5.25
	TISSUE ROLLER	1/4	\$2.63
	TOWEL BAR	1/2	\$5.25
	SOAP DISH	1/2	\$5.25
	TOOTHBRUSH HOLDER	1/2	\$5.25
	GRAB BAR	1/2	\$5.25
<b>PULL</b>	COMMODE	1 3/4	\$18.38
<b>KITCHEN</b>			
<b>UNSTOP</b>	SINK	1	\$10.50
<b>REPLACE</b>	BASKET STRAINER	1/4	\$2.63
	RUBBER STOPPER	1/4	2.63
	(ALL SIZES)		
	STOVE KNOBS	1/4	\$2.63
	OVEN CONTROL VALVES	3/4	\$7.89
	BURNER GRATES	1/4	\$2.63
	ADJUST & CLEAN BURNER	1/2	\$5.25
	OVEN HANDLE	1/2	\$5.25
	REFRIGERATOR HANDLES	1/4	\$2.63
	REF. BOTTOM DOOR BARS	1/2	\$5.25
REF	BOTTOM DOOR BRACKETS	1/2	5.25
	FREEZER DOOR BARS	1/2	5.25
	FREEZER DOOR BRACKETS	1/2	\$5.25
<b>INSTALL</b>	CABINET HINGES (2)	1/2	\$5.25
<b>DOORS</b>			
<b>REPLACE</b>	SCREEN DOOR	1	\$10.50
	SCREEN DOOR LOCK	1/2	\$5.25

## **RENT COLLECTION POLICY**

Rent is due and payable without notice at the office of The Housing Authority of the City of Paris office of George Wright Homes on the first working day of each month. If not received by close of business on the sixth (6<sup>th</sup>) day of the month, the Housing Authority will charge a late charge of twenty dollars ( \$20.00) and mail or deliver a notice of delinquent rent to the tenant's address.

Such notice will remind the tenant of his/her obligation under the lease and will designate a deadline, not to exceed 14 days from the date of the notice, by which time the tenant must contact the Housing Authority office and make arrangements for payment.

If there is good reason for an extension of time to pay the delinquent rent, the Administrative Assistant/Bookkeeper may enter into a Back Rent Agreement with the tenant. Such Agreement will be in writing, signed by both parties and will require the tenant to make future rent payments in full not later than the 6<sup>th</sup> of the month during which they become due. Late fees will not be charged when the tenant is under a Back Rent Agreement as long as the tenant is abiding by the terms of the agreement. The Agreement will specify the due dates and dollar amounts of periodic payments to be made toward settlement of the past-due balance. A sample Back Rent Agreement is attached to this Rent Collection Policy.

Failure to reach an Agreement, or failure of the tenant to abide by the terms of the Agreement, will result in a 14 day notice of lease cancellation to the tenant in writing.

If the tenant contacts and pays in full the Housing Authority within the 14 day notice period, cancellation will be rescinded. If the tenant does not contact the Housing Authority during the 14 day notice period and does not pay the past-due balance in full, then the Housing Authority may file for eviction. Once the eviction has been filed, the Housing Authority has the option to accept payments on past-due or current rent.

All terminations shall be processed in accordance with the requirements of the lease, State Law and Federal Regulations.

## **Charges Other Than Rent**

The rent collection policy is modified with respect to charges other than rent as follows:

Charges other than rent, such as excess utilities and tenant caused damages and repairs, shall not be due and collectible until 30 days after the Housing Authority gives written notice to the tenant of the charges. Failure to make payment on these charges are also grounds for eviction.

**ADDENDUM O**  
**COMMUNITY SERVICE/SELF SUFFICIENCY POLICY**

**A. BACKGROUND**

The Quality Housing and Work Responsibility Act of 1998 requires that all non-exempt (see definitions) public housing adult residents (18 or older) contribute eight (8) hours per month of community service (volunteer work) or participate in eight (8) hours of training, counseling, classes and other activities which help an individual toward self sufficiency and economic independence. This is a requirement of the Public Housing Lease.

**B. Definitions**

**Community Service-** volunteer work which includes, but is not limited to:

1. Work at a local school, hospital, or child care center
2. Work with youth organizations
3. Work at the Authority to help improve physical conditions
4. Work at the authority to help improve physical conditions
5. Helping neighborhood groups with special projects
6. Working through resident organization to help other residents with problems

**Note: Political activity is excluded.**

**Self Sufficiency Activities-** activities which include, but are not limited to:

1. Job training programs
2. Substance abuse or mental health counseling
3. English proficiency or literacy (reading)classes
4. Budgeting and credit counseling
5. Any kind of class that helps a person toward economic independence

**EXEMPT ADULT-** an adult member of the family who

1. Is 62 years of age or older
2. Has a disability that prevents him/her from being gainfully employed
3. Is the caretaker of a disabled person
4. Is working at least 20 hours per week.
5. Is participating in a welfare to work program
6. Is receiving assistance from **TANF** and is in compliance with job training and work activities requirements of the program.

**C. Requirements of the Program**

1. The eight (8) hours per month may be either volunteer work or self sufficiency program activity or a combination of the two.
2. At least eight (8) hours of activity must be performed each month. An individual may not skip a month and then double up the following month, unless special circumstances warrant special consideration. The Authority will make the determination of whether to allow or disallow a deviation from the schedule.
3. Activities must be performed within the community and not outside the jurisdictional area of the Authority.

#### 4. Family Obligations

- a. at Lease execution or re-examination after October 1, 1999, all adult members (18 or older) of a public housing resident family must
  - 1) provide documentation that they are exempt from Community Service requirement if they qualify for an exemption, and
  - 2) sign a certification that they have received and read this policy and understand that if they are not exempt, failure to comply with the community Service requirement will result in non-renewal of their lease.
- b. At each annual re-examination, non-exempt family members must present a completed documentation form (to be provided by the Authority) of activities performed over the previous twelve (12) months. This form will include places for signatures of supervisors, instructors, or counselors certifying to the number of hours contributed.
- c. If a family member is found to be non-compliant at re-examination he/she and the Head of Household will sign an agreement with the Authority to make up the deficient hours over the next twelve (12) month period.
- d. Change in exempt status:
  - 1) If, during the twelve (12) month period, a non-exempt person becomes exempt, it is his/her responsibility to report this to the Authority and provide documentation of such.
  - 2) If, during the twelve (12) month period, an exempt person becomes non-exempt, it is his/her responsibility to report this the Recording/Certification documentation form and a list of agencies in the community that provide volunteer and/or training opportunities.

#### 5. Authority Obligations

- a. To the greatest extent possible and practicable, the Authority will
  - 1) provide names and contacts at agencies that can provide opportunities for residents, including disabled, to fulfill their Community Service obligations. **(According to the Quality Housing and Work Responsibility Act, a disabled person who is otherwise able to be gainfully employed is not necessarily exempt from Community Service requirement)**
  - 2) provide in-house opportunities for volunteer work or self sufficiency programs.
- b. The Authority will provide the family with exemption verification forms and Recording/Certification documentation forms and a copy of this policy at initial application and at lease execution
- c. The Authority will make the final determination as to whether or not a family member is exempt from the Community Service requirement. Residents may use the Authority's Grievance Procedure if they disagree with the Authority's determination.
- d. Non-compliance of family member

- 1) At least thirty(30) days prior to annual re-examination and/or lease expiration, the Authority will begin reviewing the exempt or non-exempt status and compliance of family members.
- 2) If the Authority finds a family member to be non-compliant, the Authority will enter into an agreement with the non-compliant member and the Head of Household to make up the deficient hours over the next twelve (12) month period.
- 3) If, at the next annual re-examination, the family member still is not compliant, the lease will not be renewed and the entire family will have to vacate, unless the non-compliant member agrees to move out of the unit.
- 4) The family may use the Authority's Grievance Procedure to protest the lease termination.

**Community Service Exemption Certification**

**I Certify that I am eligible for an exemption from the Community Service requirement for the following reason:**

- I am 62 or older
- I have a disability which prevents me from working  
*(Certification of Disability Form will serve as documentation)*
- I am working at least 20 hours per week  
*(Employment Verification form will serve as documentation)*
- I am participating in a Welfare to Work Program  
*(Must provide verification letter from agency)*
  
- I am receiving TANF and am participating in a required economic self sufficiency program or work activity  
*(Must provide verification from the funding agency that you are complying with job training or work requirements)*

\_\_\_\_\_  
Resident

\_\_\_\_\_  
Date

**APPENDIX 2**

**COMMUNITY SERVICE COMPLIANCE CERTIFICATION**

**I/ WE have received a copy of, have read and understand the contents of the Authority's Community Service/Self Sufficiency Policy.**

**I/ We understand that this is a requirement of the Quality Housing and Work Responsibility Act of 1998 and that if we do not comply with this requirement, our lease will not be renewed.**

\_\_\_\_\_  
**Resident**

\_\_\_\_\_  
**Date**

\_\_\_\_\_  
**Resident**

\_\_\_\_\_  
**Date**

\_\_\_\_\_  
**Resident**

\_\_\_\_\_  
**Date**



**FAMILY CHOICE OF RENTAL PAYMENT**

I, \_\_\_\_\_, Head of Household, have been informed that my rent based upon my income is \$ \_\_\_\_\_. The Ceiling/Flat Rent for this unit is \$ \_\_\_\_\_.

- I, \_\_\_\_\_ elect the Ceiling/Flat Rent.
- I, \_\_\_\_\_ elect rent based upon my income.

I, understand that my monthly rental amount is \$ \_\_\_\_\_.

\_\_\_\_\_  
Head of Household

\_\_\_\_\_  
Date

Employee: \_\_\_\_\_ Date \_\_\_\_\_

**ESTABLISHED CEILING/FLAT RENTS**

1 Bedroom: \$ 341.00    2 Bedroom: \$ 401.00    3 Bedroom: \$ 561.00  
4 Bedroom: \$ 663.00

**FAMILY CHOICE OF RENTAL PAYMENT**

I, \_\_\_\_\_, Head of Household, have been informed that my rent based upon my income is \$ \_\_\_\_\_. The Ceiling/Flat Rent for this unit is \$ \_\_\_\_\_.

- I, \_\_\_\_\_ elect the Ceiling/Flat Rent.
- I, \_\_\_\_\_ elect rent based upon my income.

I, understand that my monthly rental amount is \$ \_\_\_\_\_.

\_\_\_\_\_  
Head of Household

\_\_\_\_\_  
Date

Employee: \_\_\_\_\_ Date \_\_\_\_\_

**ESTABLISHED CEILING/FLAT RENTS**

1 Bedroom: \$ 341.00    2 Bedroom: \$ 401.00    3 Bedroom: \$ 561.00  
4 Bedroom: \$ 663.00

**HOUSING AUTHORITY OF THE CITY OF PARIS  
ADMINISTRATIVE PLAN FOR SECTION 8**

**EXISTING/RENTAL REHABILITATION PROGRAM**

1. INTRODUCTION

This Administrative Plan provides guidelines for the efficient and effective operation of the Section 8 Existing/Rental Rehabilitation Program for the Housing Authority of the City of Paris within the guidelines established by the United States Department of Housing and Urban Development (HUD). The primary objective of the Program is to assist very low income families to secure decent, safe, and sanitary housing in the private market. This allows the families to choose a neighborhood in which they prefer to live and helps to upgrade and maintain the quality of neighborhoods, as subsidized units must meet Housing Quality Standards (HQS) established by HUD. Other goals of this Plan are to assist as many very low income families as possible, providing them the opportunity of improving their lifestyle and becoming more self sufficient; to encourage freedom of housing choice and spatial deconcentration of assisted housing into areas outside of those in which low income and minority households are concentrated; and to provide improved living conditions for low income families while maintaining their rent payments at an affordable level.

The Housing Authority of the City of Paris (the HA) makes housing assistance payments directly to landlords for participating families. The Housing Assistance Payment (HAP) is defined as the difference between contract rent and total tenant payment (TTP). The contract rent cannot exceed the HUD determined Fair Market Rent (FMR) except as allowed generally by HUD guidelines.

The HA has 131 Certificates and 95 Vouchers; the Certificates and Vouchers are distributed in accordance with budgetary constraints. In addition to financial assistance, our objective implies certain ancillary functions that need to be performed. These include such diverse tasks as educating that portion of the population most in need of assistance about the programs, counseling them where necessary in the ways and means of obtaining adequate housing, and helping them to deal with problems such as discrimination. These functions, in addition to the technical aspects of certifying applicants, qualifying units, and performing other administrative details, require an approach to the Program that is sensitive to both family needs and program requirements.

The Administrative Plan must be approved by the Board of Commissioners. The Board oversees the operation of this Authority and must also approve operating reserve expenditures.

1. STAFF

1. The Staff is headed by the Executive Director who is responsible for the overall operation of the office and supervision of the staff. This includes

overall operations of inspections, making sure that all units on the Program meet the HUD Housing Quality Standards and the City's Housing Code requirements, insuring that all of the rules and regulations and records required by HUD are kept accurately and up to date, making sure that all expenditures are kept within the current budget, and insuring that all employees have a drug-free work place.

2. The Applications Coordinator performs various functions including taking applications, verifying preliminary eligibility, and maintaining the Waiting List. This employee provides other assistance as required.
3. The Section 8 Coordinator does Program Orientation, completes paperwork, obtains required signatures, screens for suitability, maintains necessary local records, and prepares Section 8 HAP and Utility Reimbursement Payment checks. The Section 8 Coordinator also performs annual re-certifications, balances local records, and forwards all necessary data to the Fee Accountant each month so that financial reports required by HUD are prepared in a timely manner. Reports are given to the Executive Director for presentation to the Board of Commissioners each month to keep them abreast of the occupancy status, financial information, and any problems encountered with the Housing Program.
4. The Administrative Assistant/Bookkeeper and the Fee Accountant provide assistance in preparing the Section 8 HAP and Utility Reimbursement Payment (URP) checks and in the maintenance of the budget and program accounting requirements.
5. The Housing Inspector performs HQS inspections and maintains information for determining Rent Reasonableness and Utility Allowances for the Section 8 Program. HQS Inspections may be performed, as the workload requires, by a qualified Inspector. This individual will be familiar with the HQS Manual and will be assigned to conduct annual inspections for re-certification or initial inspections when a unit is being considered by a Program Certificate/Voucher Holder.

## **II. OUTREACH TO FAMILIES AND OWNERS**

The HA publicizes and disseminates information concerning the availability and nature of housing assistance for very low income families and issues public invitations to owners to make dwelling units available for leasing by eligible families in accordance with the Equal Opportunity Housing Plan.

When the number of applicants is not consistent with the HA's outreach goal, advertisements in the newspaper and on the radio are made and brochures are distributed to local businesses. The HA staff also makes personal contact by formal and informal discussions or meetings with private property owners, property managers (as appropriate), real estate agencies, and community groups. Program requirements are explained and printed material is offered to acquaint the owner/manager with the opportunities under the Program. Owners of property throughout the city are targeted by this outreach so as to encourage participation in areas that are not of low income or minority concentration. The HA maintains a regularly updated list of landlords with property available for rental programs. This list is kept in the office for public review.

If the receipt of applications is too rapid, dates to accept applications may be reduced or discontinued completely until the number on the Waiting List merits taking more applications. (Ref. 24 CFR 982.206(c))

## **III. OCCUPANCY**

### **1. OVERVIEW**

This section outlines occupancy requirements and covers the steps in chronological order for processing family applications.

Applications are accepted at the HA office located at 100 George W. Wright Homes, Paris, Texas, during the hours of 8:00 a.m. to 11:00 a.m. and 2:00 p.m. to 4:00 p.m., Monday through Thursday (unless amended by resolution of the Board of Commissioners or discontinued or reduced according to procedures noted in "II. Outreach").

The Administrative office displays the Equal Housing logo and Fair Housing opportunity posters, which explain the procedures for filing complaints with HUD.

The first step in obtaining rental assistance is for the family to complete an application giving family members' names, dates of birth, Social Security numbers, and all other required information as well as income per month. The Waiting List will include (1) applicant name; (2) family unit size; (3) date and time of application; (4) qualifications for any ranking or local preference; and (5) racial or ethnic designation of the head of household (Ref. 24 CFR 982.204(b)). The family will go on the Waiting List

according to date and time that the application is completed, signed, and returned to the HA staff.

Interviews for completion of an application are by appointment only and are scheduled according to the date and time, bedroom size, and Elderly or Family designation. All adult family members (other than full-time students or full-time employees) are requested to attend the interview with the head of household. Exceptions are made for the severely handicapped or similar hardships.

Any inquiries about an application, including applicant's estimated date of housing or changes to the application, must be done in person during office hours or by mail. Telephone inquiries will not be accepted. Changes to the application or information concerning the applicant's status will be given to a friend or family member if applicant authorizes this action in writing which includes date, instructions, and signature of applicant.

The Authority will not, on the basis of race, color, religion, sex, national origin, handicap, familial status, or age, deny to any family the opportunity to apply for admission, nor deny an eligible applicant the opportunity to lease a dwelling unit suitable to its needs in any area of operation of the HA.

Single pregnant women with no other children will be allowed to apply for assistance as a two-member family. Applicants who are not noticeably pregnant will be required to provide medical documentation of their condition by providing either a physician's certificate, a certificate from the Health Department, or certification from a family planning agency. Persons in the process of adopting a child under age 18 will be treated identically to a single pregnant woman, but persons in the process of securing legal custody through other means must provide evidence of a reasonable likelihood of success to be admitted to occupancy prior to obtaining custody except as provided in paragraph B of this Section. If the pregnancy or adoption is terminated prior to an offer of housing being made, the HA will deny eligibility. If the pregnancy or adoption is terminated after admission, the individual constitutes the remaining member of a tenant family and could continue in the Program under the existing Lease.

The Administrative office has designated parking for the handicapped and a ramp for accessibility.

## 2. ELIGIBILITY REQUIREMENTS (Ref. 24 CFR 982.201)

1. In order to qualify for assistance, the applicant must be a "family," must be income-eligible, must be a citizen or a non-citizen who has eligible immigration status as determined in accordance with 24 CFR part 5, must successfully pass a police screening (must not have been charged with any drug-related, weapon-related, or other violent crime), and must not owe any

money to the HA.

1. **Income.** To be income eligible, the family must be either:
    1. A “very low-income” family (annual income does not exceed 50% of median income for the area); or
    2. A “low-income” family (annual income does not exceed 80% of the median income for the area) in any of the following categories:
      - (A) A low-income family that is “continuously assisted” under the 1937 Housing Act.
      - (B) A low-income family physically displaced by rental rehabilitation activity under 24 CFR part 511.
      - (C) A low-income non-purchasing family residing in a HOPE 1 (HOPE for Public and Indian Housing Home ownership) or HOPE 2 (HOPE for Home ownership of Multifamily Units) project.
      - (D) A low-income non-purchasing family residing in a project subject to a home ownership program under 24 CFR 248.173.
      - (E) A low-income family displaced as a result of the prepayment of a mortgage or voluntary termination of a mortgage insurance contract under 24 CFR 248.165.
      - (F) For the certificate program only, a low-income family residing in a HUD-owned multifamily rental housing project when HUD sells, forecloses, or demolishes the project.
  - iii. The HA determines whether the family is income-eligible by comparing the family's annual income (gross income) with the HUD-established very low-income limit or low-income limit for the area. The applicable income limit for issuance of a certificate or voucher when a family is selected for the program is the highest income limit (for the family unit size) for areas in the HA jurisdiction. The applicable income limit for admission to the program is the income limit for the area where the family is initially assisted in the program. The family may only use the certificate or voucher to rent a unit in an area where the family is income eligible at admission to the program.
2. **Family composition.**
    1. A “family” may be a single person or a group of persons.
    2. A “family” includes a family with a child or children.

3. A group of persons consisting of two or more elderly persons or disabled persons living together, or one or more elderly or disabled persons living with one or more live-in aides is a “family.”
4. A pregnant woman is a two-person “family.”
5. A person in the process of adopting a child under the age of 18 is a “family.”
6. A person attempting to gain legal custody of a child under the age of 18 is a “family.”
7. A single person family may be:
  - (A) An elderly person (at least 62 years of age).
  - (B) A displaced person.
  - (C) A disabled person.
  - (D) Any other single person.
- viii. A child who is temporarily away from the home because of placement in foster care is considered a member of the family.

**3. Continuously assisted.**

1. An applicant is continuously assisted under the 1937 Housing Act if the family is already receiving assistance under any 1937 Housing Act program when the family is admitted to the certificate or voucher program.
  2. If an applicant applied for assistance under the Section 8 Program while receiving assistance under any 1937 Housing Act program, there is considered to be a continuity of assistance. An applicant who is not receiving assistance under any 1937 Housing Act program at the time of his or her application for assistance under the Section 8 Program is not considered to have continuity of assistance.
  4. The HA must receive information verifying that an applicant is eligible within the period of sixty (60) days before the HA issues a certificate or voucher to the applicant.
2. All completed and verified applications will be added to an “eligible to be notified” list, and families will be called in for briefing and issuance of certificates/vouchers in accordance with herewith.
  3. A Statistical report will be prepared by the Section 8 Staff each month to insure that the very low-income requirement is met, that the elderly/non-elderly, and unit size distribution is followed, and that the number of certificates issued is sufficient to maintain HAP Contracts on the number of units authorized.



3. REASONS FOR INELIGIBILITY

1. If a family has previously lived in one of the assisted housing programs and moved owing a bill for unpaid rent, damages, or any other charges, they will not be eligible for a Section 8 Certificate/Voucher until the debt to the HA is paid in full. If a family has been on the Section 8 Program and owes for damages, unpaid rent, vacancy loss or rent paid on a vacant unit, they will be ineligible for the Program until the HA and Landlord are reimbursed for such claims.
2. If the family is determined to be ineligible because of family composition or income or for any other reason, the application will be marked "INELIGIBLE" and filed in the Ineligible file. The family will then be taken off the Waiting List and informed in writing of the reason for ineligibility. At this time the ineligible family may request an informal hearing on the determination of ineligibility. If such a request is made, a meeting between the family and a person not involved in the original decision will be arranged for this purpose.

3. POLICY FOR REPAYMENT BY TENANT OR FORMER TENANT

1. Former tenants who owe a bill for unpaid rent, damages, or any other charges will be notified, upon their name coming to the top of the waiting list, that they have ten (10) days to reimburse the HA for such charges. Failure to reimburse the HA within the prescribed time period will result in removal of the former tenant's name from the waiting list.
2. A repayment agreement will be made between the tenant and the HA and arrangements for monthly payments will be made on the basis of the tenant's ability to pay. The time period for repayment can be any length of time not to exceed twenty-four (24) months from the date of the agreement. Any program participant who owes the HA money will not be eligible to move to another unit until his or her debt is paid in full.
3. Any tenant who goes off the Program without giving the proper notice to both landlord and the HA will not be eligible for the Program for a period of one (1) year from the date that he or she reapplies. Also, the tenant must pay the HA for any overpayment of rent to the landlord that has not been paid.

4. WAITING LIST (Ref. 24 CFR 982.204)

Applicants screened for eligibility are placed on a Waiting List according to date and time, bedroom size, and Elderly or Family Designation. If an applicant is determined ineligible, written notification outlining the reason(s) for the determination will be sent to the applicant.

Every six (6) months, the HA will send to the Applicants a request for an update of information. Applicants are required to return the update within thirty (30) days. They are also required to provide the HA with a current address any time their address changes. Such changes must be reported to the office by the head of the household or family representative. Applicants who have mail from the HA returned are considered to have moved and are removed from the List.

Changes in family composition may result in a change of the family from one size Waiting List to another appropriate for their family size and composition.

Low Rent Public Housing residents may apply for and be placed on the Section 8 Waiting List and may be changed from one Program to the other upon meeting all eligibility requirements. Applicants who are on both lists and receive assistance through Low Rent Public Housing are required to notify the HA that they no longer need assistance under the Section 8 Program.

**1. OPENING AND CLOSING OF WAITING LIST (Ref. 24 CFR 982-206)**

The Section 8 office may suspend the acceptance of further applications if the waiting list is such that additional applicants would not be able to receive a Certificate/Voucher within the next twelve (12) months.

If applications are to be suspended, a public notice will be published in the local newspaper. When applications are resumed, a public notice will again be published in the local newspaper. Such notice shall state when and where to apply and list any limitations on who may apply for available slots in the program.

**E. VERIFICATION OF INCOME AND DETERMINATIONS OF GROSS FAMILY CONTRIBUTION**

Before issuing a Certificate/Voucher to the applicant, he or she will be asked to sign a release form which will allow the HA to check with the employer or appropriate person(s) concerning income and/or medical expenses and child-care expenses to the extent necessary to enable another member of the family to be employed or to further his or her education (when applicable). This form will then be mailed directly to the authorized person or persons to be completed and returned to the Administrative Office. The HA will verify family income, family composition, status of full-time students, value of assets, and other factors relating to eligibility.

The Total Tenant Payment will be computed according to HUD's current regulations. (Ref. 42 U.S.C. 1437a)

Applicants who report child care expense from an individual providing home care in excess of \$50.00 per week must provide a copy of their signed Income Tax Return showing the deduction for child care as verification of the expense. Applicants failing to provide this verification will only be allowed a maximum of \$50.00 per week for child care allowance.???

A quality control check will be made of at least 5% of all files.

**F. BRIEFING OF FAMILIES AND ISSUANCE OF CERTIFICATES**

Briefing of Certificate/Voucher holders is handled on a group basis by staff members. Applicants are interviewed individually after the group briefing, given an opportunity to ask questions and are requested to sign their Certificate/Voucher.

Certificate/Voucher holders will be notified at their briefing session that the HA updates the listing of available housing weekly and are invited to pick up the weekly update from the office. Additional assistance is provided as needed upon request.

The family will be briefed as follows (Ref. 24 CFR 982.301):

1. **Subsidy Standards.** The family is responsible for finding a dwelling unit of size for which they are qualified. The rule for no more than two (2) persons per bedroom or living/bedroom will be explained.

<b>Certificate Size</b>	<b>Min. # In Household</b>	<b>Max. # In Household</b>
0 Bedroom	1	1
1 Bedroom	1	2
2 Bedroom	2	4
3 Bedroom	4	6
4 Bedroom	6	8
5-6 Bedroom	8	10-12

2. Exceptions may be made, however, and a larger certificate/voucher may be issued under the following circumstances (Ref. 24 CFR 982.402(b)(8)):
  1. Current policies of most apartment complexes within the HA area of operation require two bedroom units for a two member family other than husband and wife, or parent and infant child. For this reason, the HA issues original certificate/voucher holder a two bedroom

certificate if the family consists solely of a parent and one child four years of age and older. When a child reaches the age of four, a certificate/voucher holder is not automatically entitled to a larger size certificate, but would have to meet criteria under "c" below for a change in bedroom size.

2. Medical reasons requiring a family member to have a separate bedroom.
3. Special circumstances regarding relationship, age, sex, or handicap if need is requested by family, properly documented, and verified.
3. State Law requires that the number of adults per bedroom not exceed three (3). The HA will comply with this State regulation. If a family can locate suitable housing at the FMR of a smaller unit, the HA will make every effort to accommodate that family provided HQS and other requirements are met.
4. If a family is currently living in a high poverty census tract in the HA's jurisdiction, the advantages of moving to an area that does not have a high concentration of poor families will be explained.
5. For the Certificate Program, the family will be given the Fair Market Rent for their size dwelling unit along with an explanation of the utility allowance schedule.
6. For the Voucher Program, the family will be given information on the payments standards and the utility allowance schedule.
7. The family will be advised as to where it may lease a unit.
8. The amount of the Gross Family Contribution (Total Tenant Payment) will be computed and explained to the family.
9. The family will be advised that they may be required to pay utility deposits and, in addition, a Security Deposit to the owner in the amount of one month's TTP or \$50.00, whichever is greater.
10. The family will be advised that the dwelling unit must meet HUD HQS and City of Paris Housing Codes.
11. Advice will be given on how to find a suitable dwelling unit. Family will be advised as to the area covered by the HA.
12. Information will be given the family on actions to take if they suspect they are encountering discrimination.

13. When briefing a family that includes any disabled person, the HA will take appropriate steps to ensure effective communication in accordance with 24 CFR 8.6.
14. A packet will be given to each family that has been issued a Certificate or Voucher, which will include the following (Ref. 24 CFR 982.301):
  1. Section 8 Program Fact Sheet (includes a description of how the program works; summarizes family and owner responsibility; describes where the family may lease a unit; and miscellaneous information);
  2. General Information Sheet and Miscellaneous Certifications;
  3. Term of voucher/certificate; Policy on Extensions or Suspensions; of Certificates/Vouchers;
  4. Information on how HAP is determined;
  5. For the Certificate Program, Fair Market Rent Information;
  6. For the Voucher Program, Payment Standards Information;
  7. Schedule of Utility Allowances;
  8. Notice of Portability;
  9. Lease Addendum;
  10. Required Lease Provisions and Prohibited Lease Provisions;
  11. Request for Lease Approval;
  12. Subsidy Standards; Exceptions;
  13. "A Good Place to Live!";
  14. "Protect Your Family From Lead in Your Home";
  15. Equal Opportunity Statement and Complaint Form;
  16. List of Landlords;
  17. Notice to Disabled Persons;
  18. Family Obligations;
  19. Assistance Termination Information; and
  20. Procedures for Conducting Informal Hearings.
15. The family will be informed that the Certificate/Voucher is valid for only sixty (60) days and that the unit selected must be inspected before the expiration date of the Certificate/Voucher. In order to retain validation, they must report to the Section 8 Office periodically, preferably every ten (10) days, either in person or by telephone, in order for the staff to more adequately assist them in finding a unit. The Section 8 office may extend the Certificate/Voucher on not more than (2) occasions and for not more than a total of one hundred twenty (120) days if the Certificate/Voucher Holder is making an honest effort in locating an acceptable unit or has extenuating circumstances, such as hospitalization or family emergencies which affected the family's ability to locate an acceptable unit, and makes a written request for the extension. The

HA shall notify families in writing whether an extension has been granted.

16. The HA shall grant a family a suspension of the initial term, or any extension thereof, of the Certificate/Voucher if the family has submitted a request for lease approval during the term of the Certificate/Voucher. Such suspension shall commence on the date the Request for Lease Approval is submitted to the HA and shall end on the date that the HA either approves or denies the request. Suspension is defined as stopping the clock on the term of the Certificate/Voucher during the period of lease approval.
17. If the certified family finds a suitable dwelling unit and the owner agrees to participate in the Program, they must complete the Preliminary Checklist and the Request for Lease Approval provided in the Tenant Packet and return it to the Section 8 office before an inspection will be made.

7. DISCRIMINATION (Ref. 24 CFR 982.304)

In the event a family claims that illegal discrimination because of race, color, religion, sex, national origin, age, familial status, or disability prevents the family from finding or leasing a suitable unit with assistance under the program, the HA shall provide the family with a copy of the Housing Discrimination Complaint Form and information on how to complete the same.

8. ISSUANCE OF CERTIFICATE/VOUCHER; LEASE APPROVAL (Ref. 24 CFR 982.302)

When a family is selected to participate in the program, the HA shall issue a certificate or voucher to the family. The family may then begin its search for a unit. If the family finds a unit and the owner is willing to lease the unit under the program, the family must submit to the HA a Request for Lease Approval and a copy of the proposed lease. Both documents must be submitted during the term of the certificate or voucher.

2. PROVIDING INFORMATION TO PROSPECTIVE OWNERS (Ref. 24 CFR 982.307)

By the placement of a family on the HA waiting list or by selecting a family for participation in the program, the HA is making no representations to the owner about the family's expected behavior or the family's suitability for tenancy. At or before HA approval to lease a unit, the HA shall inform the owner that the HA has not screened the family's behavior or suitability for tenancy and that such screening is the owner's own responsibility.

The HA shall encourage owners to screen families on the basis of their tenancy histories. An owner may consider a family's background with respect to such factors as:

1. Payment of rent and utility bills;
2. Caring for a unit and premises;
3. Respecting the rights of others to the peaceful enjoyment of their housing;
4. Drug-related criminal activity or other criminal activity that is a threat to the life, safety, or property of others; and
5. Compliance with other essential conditions of tenancy.

The HA will provide to the owner:

1. The family's current and prior address (as shown in the HA records); and
2. The name and address (if known to the HA) of the landlord at the family's current and prior address.

When a family wants to lease a dwelling unit, the HA shall offer the owner any and all other information in the HA's possession about the family, including information about the tenancy history of family members or about drug-trafficking by family members, the release of which is not prohibited by law. Without exception, the HA shall give the same types of information to all owners.

10. **CALCULATING TENANT RENT AND TOTAL TENANT PAYMENT;  
DETERMINING RENT REASONABLENESS; RENT INCREASES;  
AFFORDABILITY ADJUSTMENTS**

1. Total tenant payments are calculated according to HUD's current regulation (Ref. 42 U.S.C. 1437a) by the staff member conducting the initial, interim, or annual interview.
2. For the Section 8 Existing Program, the HA certifies and documents on a case-by-case basis that the Contract Rent for each unit for which a lease has been approved is:
  1. Reasonable in relation to rents currently being charged for comparable units in the private unassisted market; and
  2. Not in excess of rents currently being charged by the owner for comparable unassisted units.
3. Rent increase requests for the Section 8 Existing Program do not exceed the applicable annual adjustment factors as published by HUD.
4. Rent Reasonableness

The HA will make every effort to determine that the rent requested by the Landlord is reasonable. A rent reasonableness study conducted by the

Inspection Department is performed for each unit to ensure rent requests are comparable to unassisted units in the same area. The HA will not approve a rental amount or a request for a rental increase that exceeds the rent amount being charged unassisted Families in the same unit size and type, living in the same building or apartment complex.

The HA will examine the following for the purpose of determining rent reasonableness:

1. Rents in the immediate area or neighborhood or in similar nearby neighborhoods if comparables are unavailable; and
2. Rental information obtained from classified advertisements in the newspapers, adjacent apartment complexes, and from other sources.

5. Rent Increase Procedures/Affordability Adjustments

1. Rental Certificates

Landlords are required to submit requests for rent increases to the HA at least sixty (60) days in advance of the effective date of the proposed increase. In a request for a rent increase, the Landlord must document the reason for the increase over the amount previously charged for the unit. The HA will review each proposed increase to determine whether the request is justified. The maximum increase allowable in the Certificate Program is subject to the lesser of the following:

1. The pre-adjusted rent to the Landlord multiplied by the applicable Section 8 annual adjustment factor, published by HUD in the Federal Register, that is in effect 60 days before the HAP contract anniversary;
2. The reasonable rent (as most recently determined by the HA) in accordance with Section 24 CFR 982.305, as amended; or
3. The amount requested by the owner.

Some reasons for contract rent increases to be considered by the HA include increases:

1. due to escalating utility rates (only for Landlord paid utilities);
2. caused by increasing operating expenses;
3. from recently completed repairs or rehabilitation made to improve dwelling units; or
4. caused by changes in market rental rates.

The HA will certify all approved rent increases in writing. All certifications



will include justification for the increase. Each certification will be maintained in the Family's file and will be approved by the Executive Director, or designee.

The HA will use HUD regulations as a guide for determining justification for refusal of a contract rent increase. In cases where the HA disapproves a Landlord's request for a contract rent increase, the HA will notify the Landlord and the Family, in writing, and will state the reason(s) for not approving the increase. Should a Landlord insist on the increase requested, the Family will be offered a new Rental Certificate and relocation assistance.

## 2. Rental Vouchers

The Voucher Contract requires the Landlord to notify the Family, in writing, of proposed increases, and the date the increase will go into effect. A copy of this letter must be sent to the HA at least sixty (60) days prior to renewal. All proposed rent increases must be approved by the HA as reasonable and cannot exceed rents charged for comparable unassisted units in the same area.

## 11. PREPARATION OF TENANT FILE

After the unit has passed inspection, the Tenant's file will be prepared and all necessary documents will be signed by the appropriate parties. For all initial inspections, including applicants originally going on the Section 8 Program and tenants moving from one unit to the other, the Inspection Checklist will be signed by the owner and a copy given to him for his records.

## IV. HOUSING QUALITY STANDARDS (HQS) AND INSPECTIONS (Ref. 24 CFR 982.401)

1. A unit must comply with HQS performance requirements and acceptability criteria both at the initial occupancy of the dwelling unit and during the term of the assisted lease.
2. When a mobile home is to be inspected, the State's Mobile Home Code for Tie-downs shall be used along with the HUD program requirements.
3. If, upon the initial inspection, the unit fails to pass the minimum Housing Quality Standards, the owner will be informed of the deficiencies and told that he has up to thirty (30) days to correct these. When he/she contacts the HA's Section 8 office that the deficiencies have been corrected, the Housing Inspector will re-inspect the unit, making sure that the necessary repairs or adjustments have been made.
4. Landlords requiring more than two (2) inspections on any unit due to their failure to correct all deficiencies found on the initial inspection or have the unit accessible for

the Inspector will be charged \$20.00 for each additional inspection required.

5. Landlords and tenants are responsible for determining that units generally meet HQS as described in the handout "A Good Place to Live!" The Executive Director reserves the right to refuse a third or subsequent inspection when the landlord, applicant or participant has scheduled an initial inspection, been given the requirements to bring the unit up to HQS, has scheduled a follow-up inspection where they have not followed through on correcting identified problems, and then requests a third inspection.
6. The initial inspection report will have an entry made on the bottom of the front page to indicate the quality of the unit, which will help in determining the rent reasonableness.
7. The HA will respond promptly to complaints by families or owners.
8. In response to complaints by families about owners, the tenant must first provide the HA with a copy of a letter written to the landlord in an attempt to inform him/her of the current problems. The landlord will be given sufficient time to make any repairs. If he or she should not do this within ten (10) days from the date of the letter sent by the tenant, an inspector will make a special inspection of the unit and, if necessary, the landlord will be given a list of repairs required to keep the rental property within the Housing Quality Standards. Where the health or safety of the tenant is in immediate danger, the landlord will be required to complete the repairs within a twenty-four (24) hour time period. Any additional repairs required to meet HQS must be completed within thirty (30) days or HAP may be abated. Should the landlord elect not to make these repairs, the HAP Contract will be canceled and the tenant allowed to find another unit meeting Housing Quality Standard requirements.
9. The HA will maintain an inspection standard to insure quality of approved housing and that the requested rent meets rent reasonableness test and landlords are given opportunity to lower their rent and make the requested repairs. The following items and their condition are inspected when a landlord requests a rent in excess of an amount the unit would bring in its existing condition under the minimum Housing Quality Standard.
  1. Type and condition of wall covering.
  2. Insulation and weatherstripping. (More than minimum.)
  3. Type of heat source.
  4. Light covers.
  5. Type and condition of floor covering.

6. Neighborhood amenities with relationship to rent requested.
7. Air circulation.
8. Screens on doors and windows.

22. LEASE APPROVAL AND HOUSING ASSISTANCE PAYMENTS CONTRACT EXECUTION

A copy of the Housing Assistance Payments Contract will be provided to owners. A copy of the Lease and Lease Addendum will be provided to the owner upon request; additionally, owners are provided a Landlord Packet to explain HQS.

1. DISAPPROVAL OF OWNER (Ref. 24 CFR 982.306)

1. The HA will not approve a unit if the HA has been informed (by HUD or otherwise) that the owner is debarred, suspended, or subject to a limited denial of participation under 24 CFR part 24.
2. When directed by HUD, the HA must not approve a unit if: (1) The federal government has instituted an administrative or judicial action against the owner for violation of the Fair Housing Act or other federal equal opportunity requirements, and such action is pending; or (2) A court or administrative agency has determined that the owner violated the Fair Housing Act or other federal equal opportunity requirements.
3. In its administrative discretion, the HA may deny approval to lease a unit from an owner for any of the following reasons: (1) The owner has violated obligations under a housing assistance payments contract under Section 8 of the 1937 Act (42 U.S.C. 1437f); (2) The owner has committed fraud, bribery, or any other corrupt or criminal act in connection with any federal housing program; (3) The owner has engaged in drug-trafficking; (4) The owner has a history or practice of non-compliance with the HQS for units leased under the tenant-based programs, or with applicable housing standards for units leased with project-based Section 8 assistance or leased under any other federal housing program; (5) The owner has a history or practice of renting units that fail to meet State or local housing codes; or (6) The owner has not paid State or local real estate taxes, fines, or assessments.
4. Nothing in this rule is intended to give any owner any right to participate in the program.
5. For purposes of this section, "owner" includes a principal or other interested party.

**VI. RESPONSIBILITIES OF THE TENANT AND LANDLORD** (Ref. 24 CFR 982.404(b) and 24 CFR 982.551)

1. TENANT/PARTICIPANT RESPONSIBILITIES

1. The family must supply any and all information that the HA or HUD determines is necessary in the administration of the Program, and such information must be true and complete.
2. The members of the family must not commit fraud, bribery, or any other corrupt or criminal act in connection with the Program.
3. The family must not own or have any interest in the unit.
4. The family must use the assisted unit for its residence, and it must be its only residence.
5. The family will be told that they are to inform the Section 8 office within ten (10) days of the effective date of a change in family income, family composition, child care expenses, or medical expenses (in the case of an Elderly family). Any family who fails to report this information will be required to repay the Section 8 office their recomputed rent for the retroactive period for which they had income.
6. The tenant must provide the Section 8 office the necessary verifications and sign the required documents for an interim rent change no later than the 20th day of the month preceding the effective date of the rent change.
7. If the tenant should find it necessary to leave his or her unit unoccupied for more seven (7) consecutive days, the landlord and the Section 8 office must be notified of the absence.
8. The family must notify the HA and the Landlord before the family moves out of the unit or terminates the lease.
9. The family will be notified that they are not allowed to move from one unit to another unit during the first year of their Lease unless they are certified by the Section 8 office for a legitimate reasons, such as change in family composition, Owner's neglect to keep the unit up to HQS, or mutual agreement between owner and tenant to rescind Lease. (Ref. 24 CFR 982.314(c)(2))
10. The family will be informed that no side payments may be paid to the landlord. Only the amount of Tenant Rent designated in the Lease or Lease Amendment

is to be paid.

11. The family will be told that, if they decide to cancel off the Program, they must give the owner and the Section 8 office proper written notice of their intent to go off the Program. Should they not give the proper notice, they may lose their Security Deposit (if applicable) and, in certain circumstances, could be ineligible for future participation in the Section 8 Program.
  12. The family may not commit any serious or repeated violations of the lease.
  13. The family may not assign the lease or transfer the unit.
  14. The family may not sublease or let the unit.
  15. The family must allow the HA and the Landlord to inspect the unit at reasonable times and after reasonable notice.
  16. The family must pay for utilities that the owner is not required to pay for.
  17. The family must provide and maintain any appliances that the owner is not required to provide.
  18. An member of the household or any guest thereof must not damage the dwelling unit.
  19. The family must correct, within 24 hours, any life-threatening HQS breach caused by it and, within 30 days, any non-threatening HQS breach caused by it.
  20. The family must promptly give the HA a copy of any owner eviction notice.
  21. The members of the family may not engage in drug-related criminal activities or violent criminal activities.
  22. An assisted family, or members of the family, may not receive Section 8 assistance while receiving another housing subsidy.
2. LANDLORD/OWNER RESPONSIBILITIES (Ref. 24 CFR 982.404(a) and 24 CFR 982.452)
1. Landlords must perform all of their obligations under the HAP Contract and the lease.
  2. Landlords must perform all management and rental functions for the assisted unit, including selecting a certificate/voucher holder to lease the unit and

deciding if the family is suitable for tenancy of the unit.

3. Landlords must ensure that tenants are in place and that their unit meets HQS before accepting and cashing the HAP check.
4. Landlords must take prompt and vigorous action to correct HQS failures.
5. Landlords must correct, within 24 hours, any life-threatening HQS failures and, within 30 days, any non-threatening HQS failures.
6. Landlords must perform ordinary maintenance on the unit.
7. Landlords must enforce the Lease Agreement to include ensuring that only the appropriate family members are occupying the unit.
8. Landlords are responsible for the collection of the security deposit and tenant contribution and any charges for unit damage by the family.
9. Landlords must collect no more than the HA approved Security Deposit from the family.
10. Landlords must collect only the amount of rent that is designated on the Lease or the Lease Amendment, whichever is applicable.
11. Landlords must pay for utilities and services not paid by the family under the lease.
12. Landlords must notify the HA immediately when the family vacates the unit.
13. The landlord shall not discriminate against any person on the grounds of race, color, religion, sex, national origin, handicap, familial status, or age.
14. The landlord shall cooperate with the HA and HUD in conducting compliance reviews and complaint investigations pursuant to all applicable civil rights statutes, Executive Orders, and all related rules and regulations.
15. The landlord shall provide any information pertinent to the HAP Contract which the HA or HUD may reasonably require.
16. The landlord shall permit the HA or HUD or any of their authorized representatives to have access to the premises and, for the purposes of audit and examination, to have access to any books, documents, papers, and records of the landlord to the extent necessary to determine compliance with the HAP Contract, including the verification of information pertinent to the Housing

Assistance Payments.

17. The landlord must not make any transfer in any form of the HAP Contract without the prior written consent of the HA.
18. The landlord shall not terminate the tenancy of the Family except for:
  3. Serious or repeated violations of the terms and conditions of the Lease;
  4. Violations of Federal, State, or Local Law which imposes obligations on the Family in connection with the occupancy and use of the dwelling unit and surrounding premises; or
  5. Other good cause.
19. Landlords must have the unit organized and ready for HQS inspection. Units that are unorganized or in the process of being rehabilitated will not be inspected. Upon the initial inspection of the unit, the condition of the unit should be as close to the requirements stated on the basic requirements list as possible. In case of owner dispute concerning the inspector's refusal to inspect the unit, the final decision will be determined by the Executive Director.
20. Any landlord owing the HA a past balance under any HAP Contract will not be allowed to participate in the Section 8 Program again until such balance is paid in full.

## **VII. PAYMENTS TO OWNERS**

A Housing Assistance Payments Register will be kept for the purpose of recording information regarding payments made to the owner (and tenant when applicable). Each tenant will have a sheet in the register which will contain the following information: Tenant's name and address, Owner's name and address, the certificate number, utility allowance, total HAP, family contribution, contract rent, beginning date of Lease, HAP in form of Utility Reimbursement Payment (URP) to family (if applicable), and certificate unit size. The preparation of checks will be started in sufficient time to allow them to be mailed to reach the owner by the 5th of each month, unless the 5th falls on a weekend or holiday, in which case the checks will be mailed to reach the owner as soon after the fifth as possible. URP to Tenants will be picked up at the Section 8 Office by the Tenant and will be made payable to the Head of Household and utility company of choice.

Internal controls used to assure integrity of the payments system include the use of a check voucher system requiring the signature of the Executive Director and one of the Board of Commissioners. The Journal Entries and records required by HUD are prepared each month by the Fee Accountant or the Administrative Assistant/Bookkeeper. A separate bank account is used for all Section 8 monies, and the bank statement is reconciled each month by local staff as well as the Fee Accountant or Administrative Assistant/Bookkeeper. The staff has contact with

the clients of this Program several times a year which gives this Agency the opportunity to confirm that the Lease arrangements remain as agreed.

## **VIII. REVIEW OF FAMILY CIRCUMSTANCES**

1. Reexamination will be made each year for each family on the Section 8 Program following the procedure outlined in 24 CFR 882.212. When reexaminations are made, questions will be asked of the tenant that could detect fraud or unauthorized payments made by the tenant to the landlord. The HA will notify the tenant and owner of the date and requirements for reexamination. The tenant and landlord have certain identified responsibilities mentioned in the letter of the notice for reexamination. If the tenant does not come in or contact the office by the deadline date in the letter, a 30-day written notice of cancellation will be sent to both the tenant and landlord. The notice of termination for failure to cooperate with the re-exam process will be included in the initial letter advising the tenant and landlord of the requirements for reexamination. Any tenant canceled from the Program for failure to re-certify will have the option of a hearing to appeal this decision.
2. The HA will maintain a cardex system of units under contract files by month to insure systematic reviews of contract rents, allowances for utilities and other services, and housing quality in accordance with the requirement for annual reexamination.
3. A survey of the utility rate increases within the City of Paris is made annually and the Schedule for Utility Allowances and Other Services is adjusted by the Coordinator if needed, at the time the Fair Market Increases are published by HUD.
4. Requests from families for reviews and/or inspections of units are handled in a timely manner. If the quality control check of files reveals a need for a special review, the HA promptly performs one. Files which have been marked "unstable" because of fluctuating family circumstances are reviewed regularly until the situation stabilizes. Re-exams are done annually, 12 months from the date of their last annual reexamination or at the anniversary of the family's initial entry into the program.
5. Reexaminations, other than annual, for the purpose of adjusting the Total Tenant Payment are scheduled as follows:
  1. Tenants claiming to be without any income at all are required to report to the Section 8 office every thirty (30) days. During this visit, they must provide proof of application for employment from three (3) different employers or places of employment or proof of application for monetary assistance. These tenants receive special attention and each case is monitored closely by the staff. Tenants who do not cooperate with this procedure will be canceled from the Program.



2. For families whose annual income cannot be projected with any reasonable degree of accuracy, reexaminations shall not be less than every thirty (30) days nor more than every ninety (90) days.
  3. For families where an error was made at admission or reexamination (family will not be charged retroactively for error made by HA personnel).
  4. When an increase is required by HUD regulations.
  5. For families whose rent has been based on false or incomplete information supplied by applicant.
  6. For families who request a review due to a decrease in income or increase in allowable expenses.
  7. For families who have had their rent reduced under a previous interim reexamination.
  8. For families who have added and deleted member(s) of their household from the original family composition.
  9. For families whose income source has changed.
6. Increases in the Total Tenant Rent are effective the first day of the second month following verification of the change. Retroactive increases are charged when a Certificate holder has failed to provide information within the required time period.
- H. Families are required to complete a re-exam, within thirty (30) days from the date of income change, regarding an increase in income or decrease in expenses, regardless of source, when the family has previously received a reduction in the Total Tenant Payment as a result of an interim redetermination.

**IX. ABSENCES FROM UNIT (Ref. 24 CFR 982.551(i))**

In the event the family will be absent from the unit for more than seven (7) consecutive days, the family must promptly notify the HA of such absence and provide any information requested on the purposes of the family absence. The family may be absent for brief periods of time because of vacation or hospitalization, but may not be absent from the unit for more than thirty (30) consecutive days or sixty (60) non-consecutive days. In the event of hospitalization due to a serious illness, the HA may consider an extension of the maximum length of time upon written request by the family; however, under no circumstances shall such absence exceed sixty (60) consecutive calendar days.

The HA may, in its discretion, verify family occupancy or absence through the use of letters to

the family at the unit, phone calls, visits, or questions to the landlord or neighbors.

Housing assistance payments terminate if the family is absent for longer than thirty (30) consecutive days. The term of the HAP contract and assisted lease also terminate. (The owner must reimburse the HA for any housing assistance payment for the period after the termination.) If a family has been absent for more than the permitted time period, the HAP payments have been terminated, and the HAP contract and assisted lease have been terminated, the family will be required to reapply for assistance under the Section 8 programs. No resumption of assistance will be permitted.

Absence means that no member of the family is residing in the unit.

24. **FAMILY BREAK-UPS; DETERMINATION OF CONTINUED ASSISTANCE (Ref. 24 CFR 982.315)**

1. In the event of a family break-up due to divorce or separation, the Certificate/Voucher will remain with the family member(s):
  1. Who is elderly;
  2. Who is disabled;
  3. With whom minor children or ill, elderly, or disabled family members reside.
  4. Who has a serious illness as confirmed by a physician;
  5. Who are forced to leave the unit as a result of actual or threatened physical violence against them by a spouse or other member of the household; or
  6. Who remains in the original assisted unit.
2. If a court determines the disposition of property between members of the assisted family in a divorce or separation under a settlement or judicial decree, the HA shall be bound by the court's determination of which family members continue to receive assistance in the program.

**XI. TENANT MOBILITY; PROCESSING CLAIMS**

1. Each year when they are being re-certified, families will be reminded of their responsibility to notify the Section 8 Office and owner if they plan to move. Tenant must give landlord and the HA thirty (30) days prior notice in writing. If they wish to move to another unit and continue as a participant in the Program, they will be given another Certificate/Voucher Holder's packet and a list of owners to assist them in finding another unit. The HA WILL NOT issue a new Certificate/Voucher and the family will not be allowed to relocate if:
  1. The family moves out without giving proper notice to the owner and the Authority;
  2. The family notifies the Authority that they wish to voluntarily terminate their

- assistance; or
1. The family owes an unpaid balance to either Section 8 or Public Housing Programs.
  2. If the Security Deposit is insufficient for the reimbursement of Tenant damages, or if the Owner did not collect a Security Deposit, the Owner may seek to collect the balance from the tenant.
  3. The HA may terminate a HAP Contract if the Tenant is not maintaining the unit in decent, safe, and sanitary condition as determined at annual or special inspections by Section 8 Staff or the Landlord. If a Landlord is not willing to evict a Tenant who is preventing a unit from meeting HQS, he or she is not complying with obligations of the Owner under the HAP Contract.
  4. If the HA has found it necessary to terminate the HAP Contract due to Owner's failure to respond to notification that a unit no longer meets the minimum HQS, and the current Section 8 participating family has found it necessary to move in order to continue receiving assistance, the Authority will not approve the unit for Housing Assistance Payment Contract with a new Certificate/Voucher Holder for a minimum of one (1) year and ONLY then upon receiving written assurances from the Owner that he or she will fulfill the requirements of the minimum HQS in the future.
  5. Owner's are required to follow eviction procedures consistent with their Contract, and must comply with the requirements of Federal, State, and Local Law. The HA must be provided with a copy of such notice within five (5) days.
  6. If the Family has committed fraud or misrepresentation in connection with the HA Section 8 Existing/Rental Rehabilitation Program, the HA may terminate assistance and cancel the HAP Contract. The HA will make every effort recover any overpayments made as a result of tenant fraud or abuse.
  7. If the landlord has committed fraud or misrepresentation in connection with the HA Section 8 Existing/Rental Rehabilitation Program, the HA terminates the HAP Contract and reviews the circumstances and family's involvement to determine if the family is eligible for recertification to relocate to another unit and continuation of assistance. The HA makes every effort to recover any overpayments made as a result of landlord fraud or abuse.
  8. Owners who have refused a tenant continued occupancy and/or have canceled their Existing Contract for business or economic reasons shall not be permitted to re-enter the unit under the Section 8 Program.
  9. Owner's claims for payment for vacancy loss under the Section 8 Existing/Rental Rehabilitation Program are reviewed for accuracy and completeness and compared

with Authority internal records on the unit such as initial inspection report and on-site move-out inspection. The HA checks tenant files to ascertain if the family gave proper notice of its intent to move.

1. To claim vacancy loss, landlord must meet the minimum requirements of having notified the Inspection Department by calling the Section 8 Coordinator to add the unit to the "Interested Owner's List" maintained by the HA within three (3) days of the date of move out, following said call by written notice of the unit's availability, and an ad shall have been placed in the local newspaper offering the unit "For Lease" and specifying "Section 8 Families Welcome". The HA will check the Interested Owners List to insure owner has complied with this policy and owner shall furnish the HA with a copy of the advertisement and the dates advertised at time of submission of vacancy loss claim. No eligible tenant may have been denied housing in order for owner to claim vacancy loss.
2. Proof or verification that owner has attempted to collect any monies owed directly from tenant must be submitted with the vacancy loss claims. Landlords must mail said request for payment by Certified Mail, Return Receipt Requested, to the tenant's last known address, with a request for the post office to "Please forward," and a copy of said letter in care of (c/o) tenant's next of kin, which the landlord shall have obtained at the time of tenant's move-in.
3. All claims must be submitted within sixty (60) days of the date of move-out.
10. Vacancy loss claims are not permitted or approved under the Voucher Program.
11. Damage claims are not permitted under any Section 8 Program.
12. When a HAP Contract is terminated and the Family does not continue in the program, the HA promptly issues a Certificate/Voucher to the family next in line on the waiting list.

## **XII. TERMINATION OF PARTICIPATION**

The HA will terminate the participation of any family for the following reasons:

1. The Family moves out of their dwelling unit without giving proper written notice to the HA and their Landlord;
2. The HA determines that the Landlord is entitled to payments due to non-payment of rent, damages, or other amounts owed under the Landlord's lease by the Family and the Family has failed to satisfy any such liability by repayment to the HA;

3. The Family notifies the HA that they wish to voluntarily terminate their assistance;
4. Any member of the Family has engaged drug-related criminal activity or violent criminal activity as defined in 24 CFR 882.118(b)(4), 24 CFR 982.4, or 24 CFR 982.553;
5. Any member of the Family has violated any Family obligation under the Section 8 Program as outlined in 24 CFR 982.551, as amended;
6. Any member of the Family is determined by the HA to be illegally using a controlled substance;
7. Any member of the Family is determined by the HA to abuse alcohol to such an extent that it would interfere with the health, safety, or right to peaceful enjoyment of the premises by other residents; or
8. Any member of the Family commits fraud, bribery, or any other corrupt or act in connection with any federal housing program.

### **XIII. INFORMAL HEARINGS AND REVIEWS**

General Requirements: The purpose of review and hearing procedures is to resolve applicant/participant disputes with the HA without legal action and to correct any HA errors. A “Review” is for applicants and a “Hearing” is for Program participants.

1. INFORMAL REVIEWS FOR APPLICANTS (Ref. 24 CFR 982.554)
  1. The HA must provide applicants with the opportunity for an informal review of decisions denying assistance.
  2. Informal reviews are not required for the following:
    1. Discretionary administrative determinations;
    2. General policy issues or class grievances;
    3. Determination of family unit size on the Certificate/Voucher;
    4. Rejection of a unit that does not meet HQS;
    5. Rejection of a unit that does not meet HQS because of the family size or composition;
    6. Determination not to grant approval to lease a unit or to approve a proposed lease; or
    7. Refusal to extend or suspend a Certificate/Voucher.
  3. The denial notice must describe:

1. The reasons for the decision;
  2. The family's right to an informal review; and,
  3. The procedures and time frames for obtaining a review.
4. The review must be conducted by persons other than those who made or approved the decision. Applicants may present oral or written objections to the decisions.
  5. After review is completed, the HA shall promptly notify the applicant in writing of the final decision and state the reason(s) for its determination.
2. **INFORMAL HEARINGS FOR PROGRAM PARTICIPANTS (Ref. 24 CFR 982.555)**
    1. The HA must provide Program participants with the opportunity for an informal hearing for the decisions related to:
      1. Determination of annual or adjusted income;
      2. Calculation of the TTP;
      3. Determination of the appropriate utility allowance;
      4. Termination of assistance because of family's action or failure to act;
      5. Termination for absence from unit;
      6. Determination that a family is over-housed and is denied an exception to the occupancy standards; or
      7. Determination of family unit size entered on the Certificate/Voucher.
    2. Informal hearings are not required for the following:
      1. Discretionary administrative determinations;
      2. General policy issues or class grievances;
      3. Failure of a unit for HQS violations;
      4. Refusal to extend or suspend a Certificate/Voucher; or
      5. Imposition of sanctions against an owner who is not in compliance with Program requirements.
    3. The HA **MUST** give participants a prompt written notice of the determination. The notice must describe:
      1. The reasons for the decision;
      2. The family's right to an information informal hearing; and
      3. The procedures and time frames for obtaining a hearing.
3. **PROCEDURE**

1. The applicant, Certificate/Voucher Holder, or Program Participant should submit a written request to the HA for an informal hearing or review within seven (7) working days after notification of ineligibility or termination and prior to actual termination of assistance.
  2. An appointment will be scheduled with an HA staff member other than the person who made or approved the initial decision. This could be a Commissioner if the Executive Director was involved in the decision. This individual will serve as Officer at the review/hearing.
  3. The family has the right to legal counsel at their own expense.
  4. The family has the right to examine, prior to the hearing, any relevant HA documents, and the family may copy such documents at their own expense.
  5. The HA has the right to examine, prior to the hearing, at the HA office, any relevant family documents, and the HA may copy such documents at its own expense.
  6. The Officer may regulate the conduct of the review/hearing.
  7. Both the family and the HA will have opportunity to present evidence and question witnesses.
  8. A final decision stating the reason(s) will be issued by the Officer within seven (7) working days of the date of the review/hearing with a copy to the family.
5. The HA is not bound by any hearing decisions which qualify under 24 CFR 982.555(f).

#### **XIV. ONGOING INFORMATION AND ASSISTANCE FOR PARTICIPATING FAMILIES**

1. The HA will provide on-going information and assistance to families while they are Section 8 Certificate/Voucher participants. The Authority will:
  1. Provide updated lists of available units for families required to relocate;
  2. Provide information on procedures related to relocating and a list of available units for families desiring to relocate when eligible for transfer or those who need to relocate due to health or other factors;
  3. Respond to complaints from families to insure that owners honor their responsibilities under the HAP Contract and applicable housing standards by

maintaining dwelling units in decent, safe, and sanitary condition;

4. Inspect dwelling units at least annually or as otherwise needed;
5. Make HAP payments to owners on the family's behalf;
6. Make interim re-examinations of families, especially when they have experienced loss of family income, adjusting their HAP accordingly;
7. Provide counseling to families on Program matters and in instances of alleged discrimination or unfair treatment by an owner. This will include assistance and guidance in completing the appropriate Complaint Forms; and
8. Provide housing information to families and referral to the appropriate social service agencies when requested or needed.

#### **XV. MANDATORY SOCIAL SECURITY NUMBERS**

1. Families are required to provide Social Security Numbers for all family members age 6 and older prior to admission, if they have been issued a number by Social Security Administration. All members of the family defined above must either:
  1. Submit Social Security Number documentation; or
  2. Sign a certification if they have not been assigned a Social Security Number. If the individual is under 18, the certification must be executed by his or her parent or guardian. If the Participant who has signed a certification form obtains a Social Security Number, it must be disclosed at the next regularly scheduled income re-examination.
2. Verification will be done through the provision of a valid Social Security card issued by SSA.
3. The HA will accept copies of the Social Security card only when it is necessary for the HA to verify by mail the continuing eligibility of participant families.
4. Applicants may not become Participants until the documentation is provided. The applicant will retain his/her position on the Waiting List during this period.

#### **XVI. SECTION 13. PORTABILITY**

1. Assisted families may choose a unit anywhere in the United States where there is a HA administering the Section 8 Certificate and Voucher programs. There are a few conditions:
  1. When the family initially receives a Certificate or Voucher from a Public



Housing Agency (PHA), the family must have been living in that PHA's jurisdiction at the time when the family first submitted their application before they can move to another jurisdiction under portability.

2. If the family was not living in the jurisdiction of the PHA that issues the Certificate or Voucher at the time of initial application, the family must first rent a unit and live in that jurisdiction for the first 12 months of their assistance.
  3. A family must be income-eligible in the area where the family initially leases a unit and, if transferring between the certificate and voucher programs, must be income-eligible for the new program in the area where the family is transferring to. Income-eligibility is not redetermined unless a family transfers between programs.
  4. A family eligible for portability must first consult with the PHA that issued the Certificate or Voucher and let them know that they wish to move to another jurisdiction. The PHA can inform the family of the procedures for portability.
  5. The family must comply with the lease provisions for the unit they currently live in. This includes giving proper notice of intent to vacate. Also, as always, it is the family's responsibility to locate acceptable housing in the jurisdiction to which they wish to move.
2. A family must contact the HA if it wants to move out of the area, and HA staff will assist the family in completing a *Request for Portability* and provide the family with important information.
  3. The HA will assume the responsibilities of the issuing PHA toward the family. HA will either bill the issuing PHA for the housing assistance payments on behalf of the family or provide assistance to the family utilizing funding under its ACC.
  4. If no PHA with a certificate program has jurisdiction under State Law for the area where the dwelling unit is located to which the family moves under statutory portability, the HA will fulfill the responsibilities under the certificate program and provide assistance to the family at the new dwelling unit. In such cases, the HA may administer the assistance directly or may subcontract with another PHA in the immediate vicinity, or otherwise subcontract administration of the HA responsibilities. For this purpose, Federal Law overrides State Law limitations of HA jurisdiction and permits the HA to administer outside its normal State-law jurisdiction or out of State.

## **XVII. MONITORING PROGRAM PERFORMANCE**

Monthly statistical reports are maintained and monitored for reviewing the waiting list, the

outstanding Certificates/Vouchers, and the HAP register to assure achievement of the outreach goal and leasing schedule.

Changes in approach are initiated on an as-needed basis, subject to program regulations and funding limitations.

The HA shall keep a record of all units, which have been allowed an increase of up to 10% over the Fair Market Rent. In no case shall more than 20% of the allocated units be allowed to exceed the 10% increase allowable above the FMR.

## **XVII. THRESHOLD FOR OPERATING RESERVES EXPENDITURES**

During the annual budget cycle, the Board of Commissioners approves a combined operating budget for all Section 8 Programs, including an approved total for capital expenditures and operating transfers to other programs for eligible purposes. The Section 8 Coordinator approves all routine budgeted expenditures. The Executive Director or his/her designee approves all non-routine expenditures. In the event HUD makes available to the HA funding for special purposes, the budget for the expenditure of such funds is approved by the Board of Commissioners and routine expenditures of such fund is approved by the Executive Director.

THE ONE STRIKE POLICY  
FOR THE SECTION 8 PROGRAM  
FOR THE HOUSING AUTHORITY OF THE CITY OF PARIS

PASSED AND ADOPTED ON November 11, 1999  
RESOLUTION 99-063

**PURPOSE**

All federally assisted housing is intended to provide a safe and decent place<sup>4</sup> for eligible families to live, free of violent criminal activity and the illegal sale and use of drugs, alcohol and related activity. It is the intention of the Housing Authority of the City of Paris to fully endorse and implement a policy that is designed to:

1. Keep our program participants free from threats to their personal and family safety;
2. Help maintain a safe and drug-free community environment where families can live safely, free of the dangers associated with illegal drug activity.

**ADMINISTRATION**

1. All screening and eviction procedures shall be administered fairly and in such a way so as not to discriminate on the basis of race, color, nationality, religion, sex, familial status, disability or other legally protected groups, and not to violate one's right to privacy.
2. To the maximum extent possible, and permissible by law, the housing authority will involve other community and governmental entities, as well as resident organizations, in the promotion and enforcement of this policy.
3. This policy will be incorporated in the Administration Plan and posted on the agency's bulletin board, with copies made readily available to residents and/or applicants at each annual recertification and/or eligibility determination meeting.

**SCREENING OF APPLICANTS**

1. In an effort to deter illegal drug-related and other criminal activity, as well as other patterns of behavior that pose a threat to health, safety, or the right to peaceful enjoyment of the premises by other residents, this agency will endeavor to screen applicants as thoroughly and fairly as possible in accordance with HUD prescribed regulations and guidance, and local laws governing the jurisdiction of this agency.

2. Such screening will apply to all members of the household who are of adult age.
3. Reasonable cause of drug related criminal activity which may pose a threat to the health, safety or right to peaceful enjoyment of the premises by other residents may be grounds for denial of assistance. Drug related criminal activity is defined as the illegal manufacture, sale, distribution, use or possession with intent to manufacture, sell, distribute, or use a controlled substance.
4. Reasonable cause to believe that a person's pattern of alcohol abuse may pose a threat to the health, safety or right to peaceful enjoyment of the premises by other residents may be grounds for denial of assistance.
5. In both 3 and 4 above, the housing authority may waive its policy of denying assistance if the person demonstrates to the housing authority 's satisfaction that he/she is no longer engaging in illegal use of a controlled substance or abuse of alcohol and:
  - A. Has successfully completed a supervised drug or alcohol rehabilitation program;
  - B. Has otherwise been rehabilitated successfully; or
  - C. Is participating in a supervised drug or alcohol rehabilitation program.
6. Persons evicted from Public Housing, Indian Housing, Section 23 or any Section 8 program because of drug related criminal activity are ineligible for admission to the Section 8 programs for a three (3) year period beginning on the date of such eviction. Housing authorities may waive this requirement if:
  - A. The person demonstrates successful completion of a rehabilitation program approved by the housing agency; or
  - B. The circumstances leading to the eviction no longer exist(e.g. the individual involved in drugs and or weapons or a violent crime is no longer in the household because the person is incarcerated.)

### **ENFORCEMENT THROUGH TERMINATION OF HOUSING ASSISTANCE**

The housing authority shall enforce this one strike policy with respect to drug related and or weapon, violent criminal activity which may pose a threat to the health , safety or right to peaceful enjoyment of the premises by other residents. Evidence of such activity may be grounds for termination from Section 8 Assistance.

In addition the housing authority will yearly at the time of the recertification process submit a police screening on all adults 18 and over. If any violations of this policy have occurred the housing authority will take action to terminate the lease.

Owners most recent rent charged \$ \_\_\_\_\_  
 Owners purposed contract rent \$ \_\_\_\_\_  
 gross rent \$ \_\_\_\_\_  
 Applicant fmr \$ \_\_\_\_\_

What utilities, appliances or services does this include?

Water Sewer Trash Electric Gas Range Refrigerator

Justification for any approved increased \_\_\_\_\_  
 rent for the unit higher than rents the owner charges for comparable unassisted units?  
 \_\_\_\_\_ Yes \_\_\_\_\_ No

The undersigned hereby certifies that the contract rent for this unit is reasonable in relationship to rents currently being charged for comparable units in the private unassisted market taking into account location, size, type, quality, amenities, facilities, management, and maintenance service of each unit, and is not in excess of rents currently being charged by the owner for comparable unassisted units.

Name \_\_\_\_\_ Title \_\_\_\_\_

\*\*\*\*\*

HUD FAIR MARKETS RENTS

Efficiency-275.00

1 Bedroom \$341.00      2 Bedroom \$401.00  
 3 Bedroom \$561.00      4 Bedroom \$663.00

Utility of Service Schedule	EFFic	1BDR	2BDR	3BDR	4BDR
Heating:	13.09	16.60	21.79	25.56	27.11
A: Natural Gas					
B: Electric	10.96	14.47	22.76	25.71	30.73
.Cooking:	1.46	2.21	2.90	3.65	3.91
A. Natural gas	3.23	4.88	7.36	3.31	9.94
B. ELECTRIC					
Other Electric: lighting, fans, A/C, Refrigeration, ECT.	9.71	10.64	16.74	18.90	22.60
Water Heating	5.27	7.84	10.30	13.07	13.86
A. Natural Gas	8.73	12.76	20.08	22.68	27.12
B. Electric					
Water	11.12	15.57	22.24	24.46	31.14
Sewer	12.43	17.40	24.85	27.34	34.79
Trash collection	7.00	7.00	7.00	7.00	7.00
Range	5.00	5.00	5.00	5.00	5.00
Refrigerator	5.00	5.00	5.00	5.00	5.00



STATEMENT OF PROCUREMENT POLICY  
FOR THE HOUSING AUTHORITY OF CITY OF PARIS

TABLE OF CONTENTS

1. GENERAL PROVISIONS
2. PROCUREMENT AUTHORITY AND ADMINISTRATION
3. PROCUREMENT METHODS
4. CONTRACTOR QUALIFICATIONS AND DUTIES
5. TYPES OF CONTRACTS, CLAUSES, AND CONTRACT ADMINISTRATION
6. SPECIFICATIONS
7. APPEALS AND REMEDIES
8. ASSISTANCE TO SMALL AND OTHER BUSINESSES
9. ETHICS IN PUBLIC CONTRACTING

## STATEMENT OF PROCUREMENT POLICY

Established for Public Housing Agency/Authority name Paris Housing Authority by Board on May 18, 1995, and revised the 20<sup>th</sup> day of May, 1999. This Statement of Procurement Policy complies with HUD's Annual Contributions Contract (ACC), HUD Handbook 7460.8, "Procurement Handbook for Public Housing Agencies," and the procurement standards of 24 CFR 85.36.

### 1. GENERAL PROVISIONS

#### 1. PURPOSE

The purpose of this Statement of Procurement Policy is to: provide for the fair and equitable treatment of all persons or firms involved in treatment of all persons or firms involved in purchasing by the PHA; assure that supplies, services, and construction are procured efficiently, effectively, and at the most favorable prices available to the PHA; promote competition in contracting; provide safeguards for maintaining a procurement system of quality and integrity; and assure the PHA purchasing actions are in full compliance with applicable Federal standards, HUD regulations, and State and local laws.

#### B. APPLICATION

This Statement of Procurement Policy applies to all contracts for the procurement of supplies, services, and construction entered into by the PHA after the effective date of this Statement. It shall apply to every expenditure of funds by the PHA for public purchasing, irrespective of the source of funds, including contracts which do not involve an obligation of funds (such as concession contracts); however, nothing in this Statement shall prevent the PHA from complying with the terms and conditions of any grant, contract, gift or bequest that is otherwise consistent with law. The term "procurement," as used in this Statement, includes both contracts and modifications (including change orders) for construction or services, as well as purchase, lease, or rental of supplies and equipment.

Updated 5/20/99

### C. PUBLIC ACCESS TO PROCUREMENT INFORMATION

Procurement information shall be a matter of public record to the extent provided in



[cite the State Freedom of Information Act or similar law] and shall be available to the public as provided in that statute.

Updated 5/20/99

3. PROCUREMENT METHODS

1. SELECTION OF METHOD

If it has been decided that the PHA will directly purchase the required items, one of the following procurement methods shall be chosen, based on the nature and anticipated dollar value of the total requirement.

2. SMALL PURCHASE PROCEDURES

1. General. Any contract not exceeding \$15,000.00 may be made in accordance with the small purchase procedures authorized in this section. Contract requirements shall not be artificially divided so as to constitute a small purchase under this section (except as may be reasonably necessary to comply with Section VIII of this Statement).
2. Petty Cash Purchases. Small purchases under \$ 75.00 which can be satisfied by local sources may be processed through the use of a petty cash account. Petty cash purchases will be for miscellaneous items that are needed immediately; routine items will not be purchased this way; security is maintained and only authorized individuals have access to the account; the account is periodically reconciled and replenished by submission of a voucher to the PHA bookkeeper; and, the account is periodically audited by the finance officer or designee to validate proper use and to verify that the account total equals cash on hand plus the total of accumulated vouchers.
3. Small purchases of \$1,000 or less. For small purchases below \$1,000, only one quotation need be solicited if the price received is considered reasonable. Such purchases must be distributed equitably

Updated 5/20/99

among qualified sources. If practicable, a quotation shall be solicited from other than the previous source before placing a repeat order.

4. Small purchases over \$1,000. For small purchases in excess of \$1,000 but not exceeding \$15,000 no less than three offerors shall be solicited to submit price quotations, which may be obtained orally, by telephone, or in writing, as allowed by State or local laws. Award shall be made to the

offeror providing the lowest acceptable quotation, unless justified in writing based on price and other specified factors, such as for architect-engineer contracts. If non-price factors are used, they shall be disclosed to all those solicited. The names, addresses, and/or telephone numbers of the offerors and persons contacted, and the date and amount of each quotation shall be recorded and maintained as a public record.

3. SEALED BIDS

1. Conditions for Use. Contracts shall be awarded based on competitive sealed bidding if the following conditions are present: a complete, adequate, and realistic specification or purchase description is available; two or more responsible bidders are willing and able to compete effectively for the work; the procurement lends itself to a firm fixed price contract; and the selection of the successful bidder can be made principally on the basis of price. Sealed bidding is the preferred method for construction procurement. For procurements under the Comprehensive Improvement Assistance Program (CIAP), sealed bidding shall be used for all construction and equipment contracts exceeding the small purchase limitation. For professional services contracts, sealed bidding should not be used.

Updated 5/20/99

Unless otherwise required by State or local laws or regulations:

- (1) a bid guarantee from each bidder equivalent to 5% of the bid price; and
- (2) one of the following:
  - (i) a performance and payment bond for 100% of the contract price; and

- (ii) a 20% cash escrow; or
- (iii) a 25% irrevocable letter of credit.

3. In the case of construction under the Comprehensive Improvement and Assistance Program (CIAP funded pursuant to the U.S. Housing Act of 1937, for any contract over \$15,000.00 the contractor shall be required to submit the following, unless otherwise required by State or local laws or regulations:

- (1) a bid guarantee from each bidder equivalent to 5% of the bid price; and
- (2) one of the following:
  - (i) a performance and payment bond for 100% of the contract price; or
  - (ii) separate performance and payment bonds, each for 50% or more of the contract price; or
  - (iii) a 20% cash escrow; or
  - (iv) a 25% irrevocable letter of credit.

Updated 5/20/99

not be directed to reduce their proposed prices to a specific amount in order to be considered for award. A common deadline shall be established for receipt of proposal revisions based on negotiations.

- 4. Award. After evaluation of proposal revisions, if any, the contract shall be awarded to the responsible firm whose qualifications, price and other factors considered, are the most advantageous to the PHA.
- 5. Architect/Engineer Services. Architect/Engineer Services in the excess of the small purchase limitation (or less if required by State or local law) may be obtained by the qualifications-based selection procedures, unless State law

mandates the specific method. Sealed bidding, however, shall not be used to obtain architect/engineer services. Under qualifications-based selection procedures, competitors; qualifications are evaluated and the most qualified competitor is selected, subject to the negotiation of fair and reasonable compensation. Price is not used as a selection factor under this method. Qualifications-based selection procedures shall not be used to purchase other types of services even though architect-engineer firms are potential sources.

## 5. NONCOMPETITIVE PROPOSALS

1. Conditions for use. Procurements shall be conducted competitively to the maximum extent possible. Procurement by noncompetitive proposals may be used only when the award of a contract is not feasible using small purchase procedures, sealed bids, or competitive proposals, and one of the following applies:
  1. The item is available only from a single source, based on a good faith review of available sources;

Updated 5/20/99

Adopted May 24, 1994 Resolution # 603

#### DISPOSITION POLICY

Personal property shall not be sold or exchanged for less than its fair value. Personal property of the value of \$1,000, which is to be sold to other than a public body for a public use, shall be sold at public sale.

Sales of excess personal property shall be made in the following manner:

1. If the estimated sales value of the personal property offered for sale is less than \$100, the Executive Director may negotiate a sale in the open market after such informal inquiry as he considers necessary to ensure a fair return to the Authority. The sale shall be documented by an appropriate bill of sale.
2. For sales from \$100 to \$1000 the Executive Director shall solicit informal bids orally, by telephone, or in writing from all known prospective purchasers and a tabulation of all such bids received shall be prepared and retained as part of the permanent records. The sale shall be documented by an appropriate bill of sale.
3. Sales of \$1000 or more and the award of such contract shall be made only after advertising for formal bids. Such advertising shall be at least 15 days prior to award of the sales contract and shall be by advertisement in newspapers or circular letters to all prospective purchasers. In addition, notices shall be posted in public places specified in the advertisement. A tabulation of all bids received shall be prepared and filled with the contract as a part of the permanent records. The award shall be made to the highest bidder as to price.
4. The sale of personal property to a public body for public use may be negotiated at its fair value subject to prior approval of the Board. The transfer shall be documented by an appropriate bill of sale.

Personal property shall not be destroyed, abandoned, or donated without the prior approval of the Board. The Executive Director shall make every effort to dispose of excess personal property as outlined above. However, if the property has no scrap or salvage value and a purchaser cannot be found, a statement shall be prepared by the Executive Director listing the prospective bidders solicited and all other efforts made to sell the property, together with recommendations as to the manner of disposition. This statement shall be referred to the Board for its approval. A copy of the Board's approval, together with the complete documentation in support of the destruction, abandonment, or donation, shall be retained as a part of the permanent records.



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

---

# PHA Plans

5 Year Plan for Fiscal Years 2001 - 2005

Annual Plan for Fiscal Year 2001



**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:** City of Paris Housing Authority

**PHA Number:** TX048v02

**PHA Fiscal Year Beginning:** (07/2000)

### 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)

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)

**5-YEAR PLAN**  
**PHA FISCAL YEARS 2001 - 2005**  
[24 CFR Part 903.5]

**A. Mission**

State the PHA's mission for serving the needs of low-income, very low income, and extremely low-income families in the PHA's jurisdiction. (select one of the choices below)

- The mission of the PHA is the same as that of the Department of Housing and Urban Development: To promote adequate and affordable housing, economic opportunity and a suitable living environment free from discrimination.
- The PHA's mission is: (state mission here)

**B. Goals**

The goals and objectives listed below are derived from HUD's strategic Goals and Objectives and those emphasized in recent legislation. PHAs may select any of these goals and objectives as their own, or identify other goals and/or objectives. Whether selecting the HUD-suggested objectives or their own, **PHAS ARE STRONGLY ENCOURAGED TO IDENTIFY QUANTIFIABLE MEASURES OF SUCCESS IN REACHING THEIR OBJECTIVES OVER THE COURSE OF THE 5 YEARS.** (Quantifiable measures would include targets such as: numbers of families served or PHAS scores achieved.) PHAs should identify these measures in the spaces to the right of or below the stated objectives.

**HUD Strategic Goal: Increase the availability of decent, safe, and affordable housing.**

- PHA Goal: Expand the supply of assisted housing  
Objectives:
  - Apply for additional rental vouchers:
  - Reduce public housing vacancies:
  - Leverage private or other public funds to create additional housing opportunities:
  - Acquire or build units or developments
  - Other (list below)
- PHA Goal: Improve the quality of assisted housing  
Objectives:
  - Improve public housing management: (PHAS score)
  - Improve voucher management: (SEMAP score)
  - Increase customer satisfaction:
  - Concentrate on efforts to improve specific management functions: (list; e.g., public housing finance; voucher unit inspections)

- Renovate or modernize public housing units:
- Demolish or dispose of obsolete public housing:
- Provide replacement public housing:
- Provide replacement vouchers:
- Other: (list below)

- PHA Goal: Increase assisted housing choices

Objectives:

- Provide voucher mobility counseling:
- Conduct outreach efforts to potential voucher landlords
- Increase voucher payment standards
- Implement voucher homeownership program:
- Implement public housing or other homeownership programs:
- Implement public housing site-based waiting lists:
- Convert public housing to vouchers:
- Other: (list below)

**HUD Strategic Goal: Improve community quality of life and economic vitality**

- PHA Goal: Provide an improved living environment

Objectives:

- Implement measures to deconcentrate poverty by bringing higher income public housing households into lower income developments:
- Implement measures to promote income mixing in public housing by assuring access for lower income families into higher income developments:
- Implement public housing security improvements:
- Designate developments or buildings for particular resident groups (elderly, persons with disabilities)
- Other: (list below)

**HUD Strategic Goal: Promote self-sufficiency and asset development of families and individuals**

- PHA Goal: Promote self-sufficiency and asset development of assisted households

Objectives:

- Increase the number and percentage of employed persons in assisted families:
- Provide or attract supportive services to improve assistance recipients' employability:
- Provide or attract supportive services to increase independence for the elderly or families with disabilities.

Other: (list below)

**HUD Strategic Goal: Ensure Equal Opportunity in Housing for all Americans**

- PHA Goal: Ensure equal opportunity and affirmatively further fair housing  
Objectives:
- Undertake affirmative measures to ensure access to assisted housing regardless of race, color, religion national origin, sex, familial status, and disability:
  - Undertake affirmative measures to provide a suitable living environment for families living in assisted housing, regardless of race, color, religion national origin, sex, familial status, and disability:
  - Undertake affirmative measures to ensure accessible housing to persons with all varieties of disabilities regardless of unit size required:
  - Other: (list below)

**Other PHA Goals and Objectives: (list below)**

**Annual PHA Plan**  
**PHA Fiscal Year 2001**  
[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**

*The Housing Authority of the City of Paris currently manages and operates 258 units in the Low-Rent Public Housing Program. These units are located through out the city of Paris in five different locations. George W. Wright Homes has 140 units of project based housing and Booker T. Washington has 68 units of project based housing built in 1950's. There are three scattered sites built in 1993, Jackson Court, Clovis Graves Homes and Price Circle. These new scattered site homes make up the remaining 50 units. It is a challenge to the public housing staff to service these families in the scattered locations in as efficient way as possible. There is no time to be wasted with the demands of the operations of this unit.*

*The Housing Authority of the city of Paris currently administers 131 certificates, that are being transferred to vouchers, 95 vouchers and recently 25 additional vouchers have been added to the budget authority for the Fair Housing Service Center to assist families in making desegregated moves into the community. This is part of the efforts in the Young Litigation. The authority also is the contract administrator to a 120-unit moderate rehab contract.*

*The basic goal of the HACP is to provide low-income families affordable housing that is decent, safe and sanitary, and provide services and programs that improve the residents' quality of life and provide the opportunity to become self-sufficient. In this effort the*

*HACP is committed to the efficient delivery of quality services to the residents of public housing.*

*We, the employees, fulfill the mission through personal and organizational commitment to the following values:*

*~~✓~~~~✓~~**Accountability**, accepting responsibility as stewards of public resources and investing pride in our work;*

*~~✓~~~~✓~~**Initiative**, taking positive action to accomplish our mission;*

*~~✓~~~~✓~~**Respecting** our differences, treating each other with understanding and dignity;*

*~~✓~~~~✓~~**Development**, enhancing our skills and increasing our knowledge to achieve our personal best;*

*~~✓~~~~✓~~**Communication**, each employee openly sharing and receiving information;*

*~~✓~~~~✓~~**Leadership** at all levels, challenging the process, inspiring the vision, and modeling the way;*

*~~✓~~~~✓~~**Teamwork**, approaching decision-making and problem-solving by involving all employees, focusing on people first, then processes;*

*~~✓~~~~✓~~**Continuous improvement** as a way of life.*

*We believe that our commitment is the foundation of all our endeavors to make public housing a better place now and for future generations.*

*The purpose of this 5 Year Comprehensive Plan is to continue to chart the course of action for the HACP to continue the efforts to improve the physical and management in the overall operation and management of the programs.*

*The Housing Authority plans to continue the effort of getting all families in the area we service aware of the affordable housing and*

*working to educate the families of their responsibilities in order for them to continue to have this housing as long as needed, therefore reducing the turnovers.*

*In the efforts to educate the families the administration is working to give the families the resources to better their lives and become self-sufficient. The authority has adopted the flat rent schedule and will work to encourage the families to keep the jobs that they have by allowing them to pay a flat rent. For Section 8 the program has had much success of bringing many new landlords on the program with a good housing stock. The efforts over the next 5 years is to work to keep the landlords and keeping the program at 100%. If this goal is attainable the authority will be working to put a home ownership program in place.*

*The authority has worked to utilize any funds available to the authority in the best possible way.*

*The Comprehensive Grant has allowed the agency to keep the public housing stock upgraded, the reserves have been invested for the last 2 years allowing the agency to expand these resources and the HA has once again received a PHDEP grant to further the security measures. Measures are being taken like putting up gates that will continue to provide security even if funds do not continue. In S8 program a large amount of housing has been added to the program allowing the agency to work to get program at 100 % bringing the administrative fees up to the maximum.*

### **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.

#### **Table of Contents**

Page #

#### **Annual Plan**

- i. Executive Summary
- ii. Table of Contents
  1. Housing Needs
  2. Financial Resources
  3. Policies on Eligibility, Selection and Admissions
  4. Rent Determination Policies
  5. Operations and Management Policies
  6. Grievance Procedures



7. Capital Improvement Needs
8. Demolition and Disposition
9. Designation of Housing
10. Conversions of Public Housing
11. Homeownership
12. Community Service Programs
13. Crime and Safety
14. Pets (Inactive for January 1 PHAs)
15. Civil Rights Certifications (included with PHA Plan Certifications)
16. Audit
17. Asset Management
18. Other Information

**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:

- X *Admissions Policy for Deconcentration :The PHA is Included in the pending Ruling from the Justice system on the Young vs. Martinez litigation. Template of required questions attached.*
- X FY 2001 Capital Fund Program Annual Statement
- X Most recent board-approved operating budget (Required Attachment for PHAs that are troubled or at risk of being designated troubled ONLY)

Optional Attachments:

- PHA Management Organizational Chart
- X FY 2000 Capital Fund Program 5 Year Action Plan
- X Public Housing Drug Elimination Program (PHDEP) Plan
- Comments of Resident Advisory Board or Boards (must be attached if not included in PHA Plan text)
- 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.

<b>List of Supporting Documents Available for Review</b>		
<b>Applicable &amp; On Display</b>	<b>Supporting Document</b>	<b>Applicable Plan Component</b>
X	PHA Plan Certifications of Compliance with the PHA Plans and Related Regulations	5 Year and Annual Plans
X	State/Local Government Certification of Consistency with	5 Year and Annual Plans

<b>List of Supporting Documents Available for Review</b>		
<b>Applicable &amp; On Display</b>	<b>Supporting Document</b>	<b>Applicable Plan Component</b>
	the Consolidated Plan	
X	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
X	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
X	Most recent board-approved operating budget for the public housing program	Annual Plan: Financial Resources;
X	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
X	Section 8 Administrative Plan	Annual Plan: Eligibility, Selection, and Admissions Policies
X	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
X	Public housing rent determination policies, including the methodology for setting public housing flat rents <input type="checkbox"/> check here if included in the public housing A & O Policy	Annual Plan: Rent Determination
X	Schedule of flat rents offered at each public housing development <input type="checkbox"/> check here if included in the public housing A & O Policy	Annual Plan: Rent Determination
X	Section 8 rent determination (payment standard) policies <input type="checkbox"/> check here if included in Section 8 Administrative Plan	Annual Plan: Rent Determination
X	Public housing management and maintenance policy documents, including policies for the prevention or eradication of pest infestation (including cockroach	Annual Plan: Operations and Maintenance

<b>List of Supporting Documents Available for Review</b>		
<b>Applicable &amp; On Display</b>	<b>Supporting Document</b>	<b>Applicable Plan Component</b>
	infestation)	
X	Public housing grievance procedures <input type="checkbox"/> check here if included in the public housing A & O Policy	Annual Plan: Grievance Procedures
X	Section 8 informal review and hearing procedures <input type="checkbox"/> check here if included in Section 8 Administrative Plan	Annual Plan: Grievance Procedures
X	The HUD-approved Capital Fund/Comprehensive Grant Program Annual Statement (HUD 52837) for the active grant year	Annual Plan: Capital Needs
X	Most recent CIAP Budget/Progress Report (HUD 52825) for any active CIAP grant	Annual Plan: Capital Needs
	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
	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
X	Policies governing any Section 8 Homeownership program <input type="checkbox"/> check here if included in the Section 8 Administrative Plan	Annual Plan: Homeownership
X	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
X	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
X	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

<b>List of Supporting Documents Available for Review</b>		
<b>Applicable &amp; On Display</b>	<b>Supporting Document</b>	<b>Applicable Plan Component</b>
	Other supporting documents (optional) (list individually; use as many lines as necessary)	(specify as needed)

## **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.

<b>Housing Needs of Families in the Jurisdiction by Family Type</b>							
<b>Family Type</b>	<b>Overall</b>	<b>Afford-ability</b>	<b>Supply</b>	<b>Quality</b>	<b>Access-ibility</b>	<b>Size</b>	<b>Loca-tion</b>
Income <= 30% of AMI	963	4	4	3	4	4	4
Income >30% but <=50% of AMI	680	3	3	4	3	2	3
Income >50% but <80% of AMI	410	2	3	2	2	2	1
Elderly	508	3	3	4	4	2	3
Families with Disabilities	NA	NA	NA	NA	NA	NA	NA
Race/Ethnicity	1151.7	3	2	3	3	2	3
Race/Ethnicity	837.63	3	2	3	4	2	4
Race/Ethnicity	NA	NA	NA	NA	NA	NA	NA
Race/Ethnicity	NA	NA	NA	NA	NA	NA	NA

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.

<b>Housing Needs of Families on the Waiting List</b>			
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	56	100%	48%
Extremely low income <=30% AMI	39.5%	70%	
Very low income (>30% but <=50% AMI)	16.5%	30%	
Low income (>50% but <80% AMI)	0	0	
Families with children	36	64%	
Elderly families	0	0	
Families with	4	.1%	

<b>Housing Needs of Families on the Waiting List</b>			
Disabilities			
Race/ethnicity 1	7	13%	
Race/ethnicity 2	49	88%	
Race/ethnicity3	0	0	
Race/ethnicity			
Characteristics by Bedroom Size (Public Housing Only)			
1BR	22	39%	15%
2 BR	17	30%	74%
3 BR	11	20%	10%
4 BR	6	11%	1%
5 BR	NA	NA	NA
5+ BR	NA	NA	NA
Is the waiting list closed (select one)? X 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			

<b>Housing Needs of Families on the Waiting List</b>			
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/sub jurisdiction:			
	# of families	% of total families	Annual Turnover
Waiting list total	191	100%	18%
Extremely low income <=30% AMI	0	0	
Very low income (>30% but <=50% AMI)	133	70%	
Low income (>50% but <80% AMI)	58	30%	
Families with	128	67%	

<b>Housing Needs of Families on the Waiting List</b>			
children			
Elderly families	13	.07%	
Families with Disabilities	11	.06%	
Race/ethnicity 1	14	.07%	
Race/ethnicity 2	177	93%	
Race/ethnicity3	0	0	
Race/ethnicity			
Characteristics by Bedroom Size (Public Housing Only)			
1BR	NOT APPLICABLE	NOT APPLICABLE	NOT APPLICABLE
2 BR	NOT APPLICABLE	NOT APPLICABLE	NOT APPLICABLE
3 BR	NOT APPLICABLE	NOT APPLICABLE	NOT APPLICABLE
4 BR	NOT APPLICABLE	NOT APPLICABLE	NOT APPLICABLE
5 BR	NOT APPLICABLE	NOT APPLICABLE	NOT APPLICABLE
5+ BR	NOT APPLICABLE	NOT APPLICABLE	NOT APPLICABLE
Is the waiting list closed (select one)? X X 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			

### **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
- X 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.
- X 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
- X 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



- X 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
- X 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

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

- X 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
- X 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
- X Results of consultation with local or state government
- X Results of consultation with residents and the Resident Advisory Board
- X Results of consultation with advocacy groups
- X Other: *Results of consultation with other organizations that work with other low income families.*

**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.

<b>Financial Resources: Planned Sources and Uses</b>		
<b>Sources</b>	<b>Planned \$</b>	<b>Planned Uses</b>
<b>1. Federal Grants (FY 2000 grants)</b>		
a) Public Housing Operating Fund	\$493,772.00	
b) Public Housing Capital Fund	\$443,107.00	
c) HOPE VI Revitalization	NA	
d) HOPE VI Demolition	NA	

<b>Financial Resources: Planned Sources and Uses</b>		
<b>Sources</b>	<b>Planned \$</b>	<b>Planned Uses</b>
e) Annual Contributions for Section 8 Tenant-Based Assistance	\$1,119,686.00	
f) Public Housing Drug Elimination Program (including any Technical Assistance funds)	\$63,388.00	
g) Resident Opportunity and Self-Sufficiency Grants	NA	
h) Community Development Block Grant	NA	NA
i) HOME	NA	NA
Other Federal Grants (list below)	NA	NA
<b>2. Prior Year Federal Grants (unobligated funds only) (list below)</b>		
		NA
1999 Comprehensive Grant	\$0.00	NA
2000 Capital Fund	\$443,107.00	
<b>3. Public Housing Dwelling Rental Income</b>	\$264,452.75	Administrative, Maintenance, Salaries, Utilities, Insurance, Routine expenditures
<b>4. Other income (list below)</b>	NA	
<b>4. Non-federal sources (list below)</b>	NA	
<b>Total resources</b>	\$2,827,512.75	

### **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)
- X Other: *When applying we begin screening and begin offering, this is due to the shortage of applicants on the waiting list.*

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

- X Criminal or Drug-related activity
- X Rental history
- X Housekeeping

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

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

e.  Yes X 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
- X Other: *Applicants are put on the waiting list by order of date and time of the application.*

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

- X 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)
  - X One
  - Two
  - Three or More
- b. X 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:
  - X 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)
  - X Emergencies
  - Overhoused
  - X Underhoused

- X Medical justification
- X Administrative reasons determined by the PHA (e.g., to permit modernization work)
- Resident choice: (state circumstances below)
- Other: (list below)

c. Preferences

1.  Yes X 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)

- X The PHA-resident lease
- X The PHA's Admissions and (Continued) Occupancy policy
- X PHA briefing seminars or written materials
- 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**

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)  
X Criminal or drug-related activity only to the extent required by law or regulation  
X Criminal and drug-related activity, more extensively than required by law or Regulation  
X More general screening than criminal and drug-related activity (list factors below)

*The Housing Authority does additional screening to determine whether an applicant owes any monies to the Authority or if they have been evicted from any other housing assistance program.*

- Other (list below)

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

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

d.  Yes X 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)

- X Criminal or drug-related activity  
X Other (describe below) Current Residence and landlord.

**(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**

~~2.2~~ a. Yes  No: Does the PHA give extensions on standard 60-day period to search for a unit?

If yes, state circumstances below:

**(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:

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)

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)  
 95<sup>th</sup> 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: *Any time a family experiences a decrease in income that is not as a result of the tenants' actions.*

- 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)

*Comparability of other authorities with same characteristics.*

**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)

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 903.79 (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. (TX048V04A01)
- 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.)

<b>Program Name</b>	<b>Units or Families Served at Year Beginning</b>	<b>Expected Turnover</b>
Public Housing	258	73.5%
Section 8 Vouchers	95	10.3%
Section 8 Certificates	131	15.6%
Section 8 Mod Rehab	120	50.1%
Special Purpose Section 8 Certificates/Vouchers (list individually)	25	0%
Public Housing Drug Elimination Program (PHDEP)	258	NA
Other Federal Programs(list individually)	NA	NA

### **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)

(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:

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)

#### **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:

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)

## **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 Statement is provided as an attachment to the PHA Plan at Attachment

-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. X 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 (state name)

-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 (Non-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 X 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 X 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:

- Yes X 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:

- Yes X 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:

## **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

- X 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.)

<b>Demolition/Disposition Activity Description</b>
1a. Development name:
1b. Development (project) number:
2. Activity type: Demolition <input type="checkbox"/> Disposition <input type="checkbox"/>
3. Application status (select one) Approved <input type="checkbox"/> Submitted, pending approval <input type="checkbox"/> Planned application <input type="checkbox"/>
4. Date application approved, submitted, or planned for submission: (DD/MM/YY)
5. Number of units affected:
6. Coverage of action (select one) <input type="checkbox"/> Part of the development <input type="checkbox"/> Total development
7. Timeline for activity: a. Actual or projected start date of activity: b. Projected end date of activity:

## **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 X 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.

<b>Designation of Public Housing Activity Description</b>	
1a. Development name:	
1b. Development (project) number:	
2. Designation type:	Occupancy by only the elderly <input 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 type="checkbox"/> Submitted, pending approval <input type="checkbox"/> Planned application <input type="checkbox"/>
4. Date this designation approved, submitted, or planned for submission: (DD/MM/YY)	
5. If approved, will this designation constitute a (select one)	<input type="checkbox"/> New Designation Plan <input type="checkbox"/> Revision of a previously-approved Designation Plan?
6. Number of units affected:	
7. Coverage of action (select one)	<input 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.

<b>Conversion of Public Housing Activity Description</b>	
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)	<input type="checkbox"/> Units addressed in a pending or approved demolition application (date submitted or approved: _____) <input type="checkbox"/> Units addressed in a pending or approved HOPE VI demolition application (date submitted or approved: _____) <input type="checkbox"/> Units addressed in a pending or approved HOPE VI Revitalization Plan (date submitted or approved: _____) <input type="checkbox"/> Requirements no longer applicable: vacancy rates are less than 10 percent <input type="checkbox"/> Requirements no longer applicable: site now has less than 300 units <input type="checkbox"/> 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

- X 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.)

<b>Public Housing Homeownership Activity Description (Complete one for each development affected)</b>
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 X 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 X 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:

X 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)?

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)

X Client referrals

X Information sharing regarding mutual clients (for rent determinations and otherwise)

X 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)

### **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

X 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. )

<b>Services and Programs</b>				
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)
<i>Northeast Texas Council on alcohol and drug abuse</i>	<i>NA</i>	<i>Per referral</i>	<i>Social Service Office</i>	<i>Public Housing</i>
<i>Texas agriculture Extension Services</i>	<i>NA</i>	<i>Per referral</i>	<i>Social Service Office</i>	<i>Public Housing</i>
<i>Consumer Credit Counseling Service</i>	<i>NA</i>	<i>Per referral</i>	<i>Social Service Office</i>	<i>Public Housing</i>
<i>Lamar County Head Start</i>	<i>NA</i>	<i>Per referral</i>	<i>Social Service Office</i>	<i>Public Housing</i>
<i>Northeast Texas Technical Assistance Office</i>	<i>NA</i>	<i>Per referral</i>	<i>Social Service Office</i>	<i>Public Housing</i>
<i>Paris Junior College Special Population Office</i>	<i>NA</i>	<i>Per referral</i>	<i>Social Service Office</i>	<i>Public Housing</i>
<i>Even Start</i>	<i>NA</i>	<i>Per referral</i>	<i>Social Service Office</i>	<i>Public Housing</i>
<i>Red River County Girl Scouts</i>	<i>NA</i>	<i>Per referral</i>	<i>Social Service Office</i>	<i>Public Housing</i>
<i>Department of Human Services</i>	<i>NA</i>	<i>Per referral</i>	<i>Social Service Office</i>	<i>Public Housing</i>
		<i>Per referral</i>	<i>Social Service Office</i>	<i>Public Housing</i>

**(2) Family Self Sufficiency program/s**

a. Participation Description

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

- b.  Yes X 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.
  - X 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)

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

*The Housing Authority of the City of Paris will be implementing a community Service/Self Sufficiency Policy. The policy is an attachment to the Admissions and Occupancy Policy used for the administering of the Public Housing Program. It includes definitions of Community Service, Self Sufficiency Activities, Exemptions and Requirements. The exemption form will be implemented into the admissions packet at briefing and all current residents of the program will be given the policy and exemption form. There will be meetings held to discuss and explain this new policy and procedure to the residents prior to the implementation.*

### 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)

- X High incidence of violent and/or drug-related crime in some or all of the PHA's developments
- X High incidence of violent and/or drug-related crime in the areas surrounding or adjacent to the PHA's developments
- X Residents fearful for their safety and/or the safety of their children
- X Observed lower-level crime, vandalism and/or graffiti
- X 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
- X Other: Sparta security assessment.

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).

- X Safety and security survey of residents
- X 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
- X Resident reports
- X PHA employee reports
- X Police reports
- X Demonstrable, quantifiable success with previous or ongoing anticrime/anti drug programs
- Other (describe below)

3. Which developments are most affected? George Wright Homes and Booker T. Washington.

**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)

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

2. Which developments are most affected? All sites

**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)

- X Police involvement in development, implementation, and/or ongoing evaluation of drug-elimination plan
- X Police provide crime data to housing authority staff for analysis and action
- X Police have established a physical presence on housing authority property (e.g., community policing office, officer in residence)
- X Police regularly testify in and otherwise support eviction cases
- X Police regularly meet with the PHA management and residents
- X Agreement between PHA and local law enforcement agency for provision of above-baseline law enforcement services
- X Other activities: cops program covers all Housing Authority Sights.

2. Which developments are most affected? All

**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.

- x Yes  No: Is the PHA eligible to participate in the PHDEP in the fiscal year covered by this PHA Plan?
- Yes X No: Has the PHA included the PHDEP Plan for FY 2000 in this PHA Plan?
- X Yes  No: This PHDEP Plan is an Attachment. (Attachment Filename: \_\_\_\_)

**14. RESERVED FOR PET POLICY**

[24 CFR Part 903.7 9 (n)]

**15. Civil Rights Certifications**

[24 CFR Part 903.7 9 (o)]

*The Housing Authority of the City of Paris has adopted a pet ownership policy that includes pet rules, violation procedure, termination information. Also, included in this policy is a pet agreement and a pet policy certification. This will become effective the new July 1, 2002 fiscal year replacing the old policy that needed to be updated. Prior to the implementation of the policy meetings will be held so that the current resident can be told of the policy and it will be implemented into the briefing information for the upcoming residents.*

*This policy is an addendum to the Admissions and Occupancy Policy used to administer public housing program.*

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. X 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. X Yes  No: Was the most recent fiscal audit submitted to HUD?
3. X Yes  No: Were there any findings as the result of that audit? **YES**
4.  Yes X No: If there were any findings, do any remain unresolved?  
If yes, how many unresolved findings remain? NA \_\_\_
5.  Yes  No: Have responses to any unresolved findings been submitted to HUD?  
If not, when are they due (state below)? NA

## **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 X 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 X 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. X 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 (File name)

X Provided below:

*Comments made at the meeting were as follows:*

*We need more lighting in GW and BT Homes. Housing needs to keep the off duty policing active to keep crime down.*

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:

x Other: (list below)

*The lighting has been addressed in the 200 Cap8tal Fund that has not been released due to the revision being made for lead based testing in GW and BT Homes.*

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

1.  Yes X 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 X 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
- X Other: mayor appoints resident commissioners, based on recommendation of the PHA.

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
- x Other (list)  
*Any adult member in Public Housing in good financial standings with the Housing Authority.*

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)
  - X 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.
  - X The PHA has consulted with the Consolidated Plan agency during the development of this PHA Plan.
  - X 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.

## Attachments

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

# PHA Plan Table Library

## Component 7 Capital Fund Program Annual Statement Parts I, II, and II

### Annual Statement Capital Fund Program (CFP) Part I: Summary

Capital Fund Grant Number TX21PO48501-01 FFY of Grant Approval: (07/01/2001)

Original Annual Statement

Line No.	Summary by Development Account	Total Estimated Cost
1	Total Non-CGP Funds	
2	1406 Operations	\$44,310.00
3	1408 Management Improvements	\$14,920.00
4	1410 Administration	\$56,840.00
5	1411 Audit	NA
6	1415 Liquidated Damages	NA
7	1430 Fees and Costs	NA
8	1440 Site Acquisition	NA
9	1450 Site Improvement	\$96,868.00
10	1460 Dwelling Structures	\$90,290.00
11	1465.1 Dwelling Equipment-Nonexpendable	\$34,626.00
12	1470 Nondwelling Structures	\$59,753.00
13	1475 Nondwelling Equipment	\$45,500.00
14	1485 Demolition	NA
15	1490 Replacement Reserve	NA
16	1492 Moving to Work Demonstration	NA
17	1495.1 Relocation Costs	NA
18	1498 Mod Used for Development	NA
19	1502 Contingency	NA
20	<b>Amount of Annual Grant (Sum of lines 2-19)</b>	\$443,107.00
21	Amount of line 20 Related to LBP Activities	NA
22	Amount of line 20 Related to Section 504 Compliance	\$0.00
23	Amount of line 20 Related to Security	\$68,286.00
24	Amount of line 20 Related to Energy Conservation Measures	\$27,029.00

**Annual Statement**  
**Capital Fund Program (CFP) Part II: Supporting Table**

Development Number/Name HA-Wide Activities	General Description of Major Work Categories	Development Account Number	Total Estimated Cost
TX048-001	Add off street parking area	1450	\$30,905.00
	Add Community Center Parking	1450	\$14,200.00
	Increase Complex Lighting	1450	\$16,663.00
	Replace floor fixture	1460	\$9,800.00
	New Passage Hardware	1460	\$14,000.00
	Flow Restrictors (water)	1460	\$4,900.00
	Replace/repair bath kitchen floors	1460	\$19,080.00
	Roach/vermin/termite treatment	1460	\$5,600.00
	Replace Refrigerators	1465	\$16,250.00
	Replace Ranges	1465	\$7,020.00
TX048-002 Booker T. Washington Homes	Top soil/ Sod	1450	\$2,400.00
	Underground Drainage	1450	\$9,000.00
	Improve Complex Lighting	1450	\$6,500.00
	Replace Floor fixtures	160	\$4,760.00
	Exterior steel door replacement	1460	\$15,000.00
	Flow restrictors (water)	1460	\$2380.00
	New passage hardware	1460	\$6,800.00
	Roach/Vermin/Termite Treatment	1460	\$2,720.00
	Replace Refrigerators	1465	\$7,378.00
	Replace Ranges	1465	\$3,978.00
TX048-004 Jackson Court	Lawn Care Maintenance	1450	\$8,800.00
	Install floor fixtures	1460	\$1,750.00
	Install Flow Restrictors (water)	1460	\$875.00

TX048-004 Clovis Graves Sites	Lawn Care Maintenance	1450	\$7,200.00
	Install Floor Fixtures	1460	\$1,330.00
	Install Flow Restrictors (water)	1460	\$665.00
TX048-004 Price Circle	Lawn Care Maintenance	1450	\$1,200.00
	Install Floor Fixtures	1460	\$420.00
	Install Flow Restrictors (water)	1460	\$210.00
Agency Wide	Covered Pavillon Playground	1470	\$20,625.00
	Maintenance / Storage Facility	1470	\$39,128.00
	Mowing Equipment	1475	\$14,000.00
	Maintenance Tool/Supplies	1475	\$15,000.00
	Computer System Update	1475	\$7,000.00
	Community Center Supplies	1475	\$1,000.00
	Playground Park Improvements	1475	\$8,500.00
	Social Services Coordinator	1410	\$25,000.00
	Comp/Resident Services Clerk	1410	\$15,680.00
	Prorate Maint./Coord. Salary	1410	\$6,160.00
Sundry expense	1410	\$1,000.00	
Benefits	1410	\$10,000.00	
Operations	Staff Training	1408	\$1,000.00
	Capital Fund update Courses	1408	\$12,000.00
	Money budgeting classes for residents	1408	\$2,000.00
	Self Sufficiency Classes	1408	\$2,000.00
	Housekeeping classes for residents	1408	\$120.00
	Home Ownership classes for residents	1408	\$100.00
	Staff Computer Training	1408	\$3,500.00
	Resident Participation Activities	1408	\$4,000.00
		1406	\$44,310.00

**Table Library**



**Annual Statement**  
**Capital Fund Program (CFP) Part III: Implementation Schedule**

Development Number/Name HA-Wide Activities	All Funds Obligated (Quarter Ending Date)	All Funds Expended (Quarter Ending Date)
<b>TX048</b>	<b>9/30/2003</b>	<b>9/30/2004</b>



## Optional Table for 5-Year Action Plan for Capital Fund (Component 7)

Complete one table for each development in which work is planned in the next 5 PHA fiscal years. Complete a table for any PHA-wide physical or management improvements planned in the next 5 PHA fiscal year. Copy this table as many times as necessary. Note: PHAs need not include information from Year One of the 5-Year cycle, because this information is included in the Capital Fund Program Annual Statement.

<b>Optional 5-Year Action Plan Tables</b>			
<b>Development Number</b>	<b>Development Name (or indicate PHA wide)</b>	<b>Number Vacant Units</b>	<b>% Vacancies in Development</b>
<b>TX048-001</b>	<b>George Wright Homes</b>		
<b>Description of Needed Physical Improvements or Management Improvements</b>		<b>Estimated Cost</b>	<b>Planned Start Date (HA Fiscal Year)</b>
<b>Replace Cabinets and Sinks</b>		<b>\$40,000.00</b>	<b>2002</b>
<b>Replace Balance of Cabinets and Sinks</b>		<b>\$44,020.00</b>	<b>2003</b>
<b>Replace Lavatories with Vanity Cabinets</b>		<b>\$32,000.00</b>	<b>2003</b>
<b>Replace Lavatories with Vanity Cabinets</b>		<b>\$56,000.00</b>	<b>2003</b>
<b>Covered Pavilion Playground</b>		<b>\$26,121.00</b>	<b>2004</b>
<b>Interior Painting</b>		<b>\$14,000.00</b>	<b>2004</b>
<b>Replace Furnaces</b>		<b>\$72,400.00</b>	<b>2004</b>
<b>Replace Tubs</b>		<b>\$52,000.00</b>	<b>2005</b>
<b>Replace Balance of Furnaces</b>		<b>\$35,700.00</b>	<b>2005</b>
<b>Exterior Painting</b>			

<b>Total estimated cost over next 5 years</b>	<b>\$332,120.00</b>	

<b>Optional 5-Year Action Plan Tables</b>				
<b>Development Number</b>	<b>Development Name (or indicate PHA wide)</b>	<b>Number Vacant Units</b>	<b>% Vacancies in Development</b>	
<b>TX048-002</b>	<b>Booker T. Washington Homes</b>			
<b>Description of Needed Physical Improvements or Management Improvements</b>			<b>Estimated Cost</b>	<b>Planned Start Date (HA Fiscal Year)</b>
<b>Replace Furnaces</b>			<b>\$28,000.00</b>	<b>2002</b>
<b>Replace Tubs</b>			<b>\$43,560.00</b>	<b>2004</b>
<b>Rehab 2 Buildings</b>			<b>\$14,000.00</b>	<b>2004</b>
<b>Total estimated cost over next 5 years</b>			<b>\$85,560.00</b>	

<b>Optional 5-Year Action Plan Tables</b>				
<b>Development Number</b>	<b>Development Name (or indicate PHA wide)</b>	<b>Number Vacant Units</b>	<b>% Vacancies in Development</b>	
<b>TX048-004</b>	<b>Jackson Court</b>			
<b>Description of Needed Physical Improvements or Management Improvements</b>			<b>Estimated Cost</b>	<b>Planned Start Date (HA Fiscal Year)</b>
<b>Total estimated cost over next 5 years</b>				

<b>Optional 5-Year Action Plan Tables</b>				
<b>Development Number</b>	<b>Development Name (or indicate PHA wide)</b>	<b>Number Vacant Units</b>	<b>% Vacancies in Development</b>	
	Agency Wide			
<b>Description of Needed Physical Improvements or Management Improvements</b>			<b>Estimated Cost</b>	<b>Planned Start Date (HA Fiscal Year)</b>
Recreation Area Facilities			\$31,000.00	2005
<b>Total estimated cost over next 5 years</b>			<b>\$31,000.00</b>	

**Table Library**

## Optional Public Housing Asset Management Table

See Technical Guidance for instructions on the use of this table, including information to be provided.

Public Housing Asset Management								
Development Identification		Activity Description						
Name, Number, and Location	Number and Type of units	Capital Fund Program Parts II and III <i>Component 7a</i>	Development Activities <i>Component 7b</i>	Demolition / disposition <i>Component 8</i>	Designated housing <i>Component 9</i>	Conversion <i>Component 10</i>	Home-ownership <i>Component 11a</i>	Other (describe) <i>Component 17</i>
NA	NA	NA	NA	NA	NA	NA	NA	NA

## Board of Commissioners

	<b>Address</b>	<b>Home#</b>	<b>Office#</b>
<i>Chairman-</i> Rick Poston	930 41st SW	785-0929	737-5350
<i>Vice Chairman-</i> Jeff Hoog, ext. 241	400 Sherman	785-5137	785-7541
<i>Commissioners-</i> Kathleen Edge	3740 Woodland Lane	784-3521	737-5234
<i>Commissioners-</i> Zeph Gibson	1520 Johnson	785-4343	
<i>Commissioners-</i> Lillian Brooks	519 GWH	783-9895	

## Resident Council Board Members

Sybil Bills	Board President	202 Booker T. Washington	784-8861
Mary Hughes	Vice President	519 Booker T. Washington	785-6714
Lillian Brooks	Secretary	514 George Wright Homes	783-9395
Jacquelyn Mason	Treasurer	508 Booker T. Washington	784-2656
Lee Taylor	Housing Authority Liaison	100 George Wright Homes	784-4668