

U.S.DepartmentofHousingandUrbanDevelopment  
OfficeofPublicandIndianHousing

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# PHAPlans

5YearPlanforFiscalYears2003 -2007  
AnnualPlanforFiscalYear2003

**NOTE:THISPHAPLANSTEMPLATE(HUD50075)ISTOBE COMPLETEDIN  
ACCORDANCEWITHINSTRUCTIONSLOCATEDINAPPLICABLEPIHNOTICES**

## PHA Plan Agency Identification

**PHAName:** TiftonHousingAuthority

**PHANumber:** GA101

**PHAFiscalYearBeginning:(mm/yyyy)** 102003

### 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**  
**PHAF ISCAL YEARS 2003 -2007**  
 [24CFRPart903.5]

**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)

**The Tifton Housing Authority is committed to achieving excellence in providing safe, clean and modern housing while promoting self -sufficiency and upward mobility to its residents.**

**B.Goals**

The goals and objectives listed below are derived from HUD's strategic Goals and Objectives and those emphasized in recent legislation. PHA 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 EN COURAGED TO IDENTIFY QUANTIFIABLE MEASURES OF SUCCESS IN REACHING THEIR OBJECTIVES OVER THE COURSE OF THE 5 YEARS .** (Quantifiable measures would include targetssuch as: numbers of families served or PHAScores achieved.) PHA should identify these measures in the space 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 one effort to improve specific management functions: **Safety**  
(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 effort 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 assistancerecipients' 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)**

**AnnualPHAPlan  
PHAFiscalYear2003**

[24CFRPart903.7]

**i. AnnualPlanType:**

SelectwhichtypeofAnnualPlanthePHAwillsubmit.

**StandardPlan**

**StreamlinedPlan:**

- HighPerformingPHA**
- SmallAgency(<250PublicHousingUnits)**
- AdministeringSection8Only**

**TroubledAgencyPlan**

**ii. ExecutiveSummaryoftheAnnualPHAPlan**

[24CFRPart903.79(r)]

ProvideabriefoverviewoftheinformationintheAnnualPlan,includinghighlightsofmajorinitiativesanddiscretionarypolicies,thePHAhasincludedintheAnnualPlan.

**The Agency Plan contains the mission, goals, objectives, policies, funding sources, and renovation plans for the Tifton Housing Authority. Also, listed below are significant policy and goal changes to the agency plan from the previous year.**

**In the 2003 Agency Plan, the Tifton Housing Authority will continue to work toward developing a non-profit housing organization, improving our PHA scores and increasing the level of customer satisfaction.**

**Significant changes to the plan include restoring the community service requirements to the Admissions and Continued Occupancy Policy and the lease. This change comes as a result of HUD reinstating the policy requiring eight hours monthly community service.**

**Additionally, the Housing Authority will renovate the Administrative Office for the purpose of adding more services.**

**iii. Annual Plan Table of Contents**

[24CFR Part 903.79(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**

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**Attachments**

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

Required Attachments:

- 1 Admissions Policy for Deconcentration
- FY2003 Capital Fund Program Annual Statement (ga101a01)
- Community Service Implementation Plan
- 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

- FY2003 Capital Fund Program 5 Year Action Plan (ga101b01)
  - 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)
- Capital Fund Program Annual Statement/Revision #12001 (ga101c01)**  
**Capital Fund Program 2002 Annual Statement/P&E Report (ga101d01)**

**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 jurisdiction 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
	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	Annual Plan: Eligibility, Selection, and Admissions Policies



<b>List of Supporting Documents Available for Review</b>		
<b>Applicable &amp; On Display</b>	<b>Supporting Document</b>	<b>Applicable Plan Component</b>
	income mixing analysis	
X	Public housing rent determination policies, including the methodology for setting public housing flat rents <input checked="" type="checkbox"/> check here if included in the public housing A&O Policy	Annual Plan: Rent Determination
X	Schedule of flat rents offered each public housing development <input checked="" type="checkbox"/> check here if included in the public housing A&O Policy	Annual Plan: Rent Determination
	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 infestation)	Annual Plan: Operations and Maintenance
X	Public housing grievance procedures <input type="checkbox"/> check here if included in the public housing A&O Policy	Annual Plan: Grievance Procedures
	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
	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
	Approved HOPEVI applications or, if more recent, approved or submitted HOPEVI Revitalization Plans or any other approved proposal for development of public housing	Annual Plan: Capital Needs
	Approved or submitted applications for demolition and/or disposition of public housing	Annual Plan: Demolition and Disposition
	Approved or submitted applications for designation of public housing (Designated Housing Plans)	Annual Plan: Designation of Public Housing
	Approved or submitted assessments of reasonable revitalization of public housing and approved or submitted conversion plans prepared pursuant to section 202 of the 1996 HUD Appropriations Act	Annual Plan: Conversion of Public Housing
	Approved or submitted public housing homeownership programs/plans	Annual Plan: Homeownership
	Policies governing any Section 8 Homeownership program <input type="checkbox"/> check here if included in the Section 8 Administrative Plan	Annual Plan: Homeownership
X	Any cooperative agreement between the PHA and the TANF agency	Annual Plan: Community Service & Self-Sufficiency

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

## 1. Statement of Housing Needs

[24 CFR Part 903.79(a)]

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

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

Housing Needs of Families in the Jurisdiction by Family Type							
Family Type	Overall	Afford-ability	Supply	Quality	Access-ibility	Size	Loca-tion
Income <= 30% of AMI	932	4	3	3	3	3	3
Income > 30% but <= 50% of AMI	286	3	3	3	3	3	3
Income > 50% but < 80% of AMI	290	2	3	4	3	3	3
Elderly	333	3	3	3	4	3	3
Families with Disabilities	N/A						
Race/Ethnicity	1391	3	3	3	3	3	3
Race/Ethnicity	2407	3	3	3	3	3	3
Race/Ethnicity	60	3	3	3	3	3	3
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	54		102
Extremely low income <= 30% AMI	51	94%	
Very low income (> 30% but <= 50% AMI)	3	6%	
Low income (> 50% but < 80% AMI)	0	0	
Families with	36	67%	

<b>Housing Needs of Families on the Waiting List</b>			
children			
Elderly families	2	4%	
Families with Disabilities	8	15%	
Race/ethnicity (B)	48	89%	
Race/ethnicity (W)	6	11%	
Race/ethnicity			
Race/ethnicity			
Characteristics by Bedroom Size (Public Housing Only)			
1BR	22	41%	
2BR	23	42%	
3BR	7	13%	
4BR	2	4%	
5BR			
5+BR			
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 open 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 financed development
- Seek replacement of public housing units lost to the inventory through section 8 replacement housing resources
- Maintain or increase section 8 lease 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 rates by marketing the program to owners, particularly those outside of areas of minority and poverty concentration
- Maintain or increase section 8 lease rates by effectively screening Section 8 applicants to increase owner acceptance of program
- Participate in the Consolidated Plan development process to ensure coordination with broader community strategies
- Other (list below)

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

Select all that apply

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

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

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

Select all that apply

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

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

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

Select all that apply

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

**Need: Specific Family Types: The Elderly**

**Strategy 1: Target available assistance to the elderly:**

Select all that apply

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

**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 voucher targeted to families with disabilities, should they become available
- Affirmatively market to local non -profit agencies that assist families with disabilities
- Other: (list below)

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

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

Select if applicable

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

**Strategy 2: Conduct activities to affirmatively further fair housing**

Select all that apply

- Counsel section 8 tenants as to location of units outside of areas of poverty or minority concentration and assist them to locate those units
- Market the section 8 program to owners outside of areas of poverty/minority concentrations
- Other: (list below)

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

**(2) Reasons for Selecting Strategies**

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

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

**2. Statement of Financial Resources**

[24CFR Part 903.79(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 support services, Section 8 tenant -based assistance, Section 8 support 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	553,603	
b) Public Housing Capital Fund	516,671	
c) HOPEVI Revitalization		
d) HOPEVI Demolition		
e) Annual Contributions for Section 8 Tenant -Based Assistance		
f) Public Housing Drug Elimination Program (including any Technical Assistance funds)		
g) Resident Opportunity and Self - Sufficiency Grants		
h) Community Development Block Grant		
i) HOME		
Other Federal Grants (list below)		
<b>2. Prior Year Federal Grants (unobligated funds only) (list below)</b>		
CFP2001	77,803	
CFP2002	250,027	
<b>3. Public Housing Dwelling Rental Income</b>	354,810	
<b>4. Other income (list below)</b>		
Interest	8,900	
Maintenance	10,500	
<b>4. Non -federal sources (list below)</b>		
<b>Total resources</b>	1,772,314	Operations & Mainten.



### **3.PHAPoliciesGoverningEligibility,Selection,andAdmissions**

[24CFRPart903.79(c)]

#### **A.PublicHousing**

Exemptions:PHAsthatdonotadministerpublichousingarenotrequiredto completesubcomponent3A.

##### **(1)Eligibility**

a.WhendoesthePHAverifyeligibilityforadmissiontopublichousing?(selectallthat apply)

- Whenfamiliesarewithinacertainnumberofbeingofferedaunit:(statenumber)
- Whenfamiliesarewithinacertaintimeofbeingofferedaunit:(statetime)
- Other:(describe) **Atthetimeofapplication.**

b.Whichnon-income(screening)factorsdoesthePHAusetoestablisheligibilityfor admissiontopublichousing(selectallthatapply)?

- CriminalorDrug-relatedactivity
- Rentalhistory
- Housekeeping
- Other(describe) **AttendanceatHousingAuthoritySponsoredHousekeeping Seminar**

c.  Yes  No:DoesthePHArequestcriminalrecordsfromlocallawenforcement agenciesforscreeningpurposes?

d.  Yes  No:DoesthePHArequestcriminalrecordsfromStatelawenforcement agenciesforscreeningpurposes?

e.  Yes  No:DoesthePHAaccess FBIcriminalrecordsfromtheFBIfor screeningpurposes?(eitherdirectlyorthroughanNCIC-authorizedsource)

##### **(2)WaitingListOrganization**

a.WhichmethodsdoesthePHAplantousetoorganizeitstopublichousingwaitinglist (selectallthatapply)

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

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

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

c. If the PHA plan 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? 1

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? 3

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 families at or below 30% of median area income? ngto

b. Transfer policies:

In what circumstances will transfer 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

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

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

Former Federal preferences:

- Involuntary Displacement (Disaster, Government Action, Action of Housing Owner, Inaccessibility, Property Disposition) using
- 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
- Household that contribute to meeting income goals (broad range of incomes)
- Household 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) ( **Elderly Preference** )

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 points system), place the same number next to each. That means you can use "1" more than once, "2" more than once, etc.

1 Date and Time

Former Federal preferences:

- 1 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  
 Household that contribute to meeting income goals (broad range of incomes)  
 Household 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
- Anytime 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 development 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)

- Additionalaffirmativemarketing
- Actionstoimprovethearketabilityofcertaindevelopments
- Adoptionoradjustmentofceilingrentsforcertaindevelopments
- Adoptionofrentincentiv estoencourageconcentrationofpovertyandincome mixing
- Other(listbelow)

f. Based on the results of the required analysis, in which developments will the PHA make special effort 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:  
**GA101-6 Hill Homes**

g. Based on the results of the required analysis, in which developments will the PHA make special effort 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:  
**GA101-5 Golden Apartments (40 Units)**

## 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 NCI C-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
- Household that contribute to meeting income goals (broad range of incomes)
- Household 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 admission 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 points 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 the 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 admission 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.PHARentDeterminationPolicies**

[24CFRPart903.79(d)]

### **A.PublicHousing**

Exemptions:PHAsthatdonotadministerpublichousingarenotrequiredto completesub -component4A.

#### **(1)IncomeBasedRentPolicies**

DescribethethePHA'sincomebasedrentsettingpolicy/iesforpublichousingusing,includingdiscretionary (thatis,notrequire dbystatuteorregulation)incomedisregardsandexclusions,intheappropriatespaces below.

a.Useofdiscretionarypolicies:(selectone)

ThePHAwillnotemployanydiscretionaryrent -settingpoliciesforincomebased rentinpubl ichousing.Income -basedrentsaresetatthehigherof30%of adjustedmonthlyincome,10%ofunadjustedmonthlyincome,thewelfarerent,or minimumrent(lessHUDmandatorydeductionsandexclusions).(Ifselected, skiptosub -component(2))

---or---

ThePHAemploysdiscretionarypoliciesfordeterminingincomebasedrent(If selected,continuetoquestionb.)

b.MinimumRent

1.WhatamountbestreflectsthePHA'sminimumrent?(selectone)

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

2.  Yes  No: HasthePHAadoptedanydiscretionaryminimumrenthardship exemptionpolicies?

3.If yestoquestion2,listthesepoliciesbelow :

c. Rentssetatlessthan30%thanadj ustedincome

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 re-examinations, 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
- Anytime the family experiences an income increase
- Anytime a family experiences an income increase above a threshold amount or percentage: (if selected, specify threshold) \_\_\_\_\_
- Other (list below)

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

## (2) Flat Rents

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

- The section 8 rent reasonableness study of comparable housing
- Survey of rents listed in local newspaper
- Survey of similar unassisted units in the neighborhood
- Other (list/describe below)

## 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

- Rentburdensofassistedfamilies
- Other(listbelow)

**(2)MinimumRent**

a. WhatamountbestreflectsthePHA’sminimumrent?(selectone)

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

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

**5.OperationsandManagement**

[24CFRPart903.79(e)]

ExemptionsfromComponent5:HighperformingandsmallPHAsarenotrequiredtocompletethis section.Section8onlyPHAsmustcompletepartsA,B,andC(2)

**A.PHAManagementStructure**

DescribethePHA’smanagementstructureandorganization. (selectone)

- AnorganizationchartshowingthePHA’smanagementstructureandorganization isattached.
- AbriefdescriptionofthemanagementstructureandorganizationofthePHA follows:

**ReportstotheExecutiveDirector** –OfficeManager,OccupancyClerk ,HousingManager, MaintenanceClerk,ResidentInitiativesCoordinator,MaintenanceSupervisor

**ReportstotheMaintenanceSupervisor** –5MechanicAssistants,2Laborers

**ReportstotheResidentInitiativesManager** –ProgramCoordinator

**B.HUDProgramsUnderPHAManagement**

– ListFederalprogramsadministeredbythePHA,numberoffamilieservedatthebeginningofthe upcomingfiscalyear,andexpectedturnoverineach.(Use“NA”toindicatethatthePHAdoesnot operateanyoftheprogramslistedbelow.)

ProgramName	UnitsorFamilies ServedatYear Beginning	Expected Turnover
PublicHousing	383	102

Section 8 Vouchers		
Section 8 Certificates		
Section 8 Mod Rehab		
Special Purpose Section 8 Certificates/Vouchers (list individually)		
Public Housing Drug Elimination Program (PHDEP)		
Other Federal Programs (list individually)		

### 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)

- Admissions & Occupancy Policy
- Capitalization Policy
- Check Signing Policy
- Community Building Policy
- Community Service Implementation Plan
- Deconcentration Policy
- Disposition Policy
- Dwelling Lease
- Grievance Procedure
- Insurance Policy
- Investment Policy
- Maintenance Charge Schedule
- Maintenance Plan
- One Strike Policy
- Personnel Policy w/ Organizational Chart
- Pest Control Policy
- Pet Policy
- Procurement Policy
- Rent Determination Policy

- Resident Advisory Board Policy
- Resident Initiatives Policy
- Safety Policy
- Security Deposit Policy
- Travel Policy

(2) Section 8 Management: (list below)

## **6. PHA Grievance Procedures**

[24CFR Part 903.79(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 24CFR Part 966, Subpart B, for residents of public housing?

If yes, list additions to federal requirements below:

2. Which PHA offices 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 24CFR 982?

If yes, list additions to federal requirements below:

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

- PHA main administrative office



Other(listbelow)

## **7.CapitalImprovementNeeds**

[24CFRPart903.79(g)]

ExemptionsfromComponent7:Section8onlyPHAsarenotrequiredtocompletethiscomponentandmay skiptoComponent8.

### **A.CapitalFundActivities**

Exemptionsfromsub -component7A:PHAsthatwillnotparticipateintheCapitalFundProgrammay skip tocomponent7B.AllotherPHAsmustcomplete7Aasinstructed.

#### **(1)CapitalFundProgramAnnualStatement**

UsingpartsI,II,and IIIoftheAnnualStatementfortheCapitalFundProgram(CFP),identifycapital activitiesthePHAisproposingfortheupcomingyeartoensurelong -termphysicalandsocialviabilityofits publichousingdevelopments.Thisstatementcanbecompletedb yusingtheCFPAnnualStatementtables providedinthetablelibraryattheendofthePHAPlantemplate **OR**,atthePHA'soption,bycompleting andattachingaproperlyupdatedHUD -52837.

Selectone:

TheCapitalFundProgramAnnualS tatementisprovidedasanattachmenttothe PHAPlanatAttachment(statename) **ga101a01**

-or-

TheCapitalFundProgramAnnualStatementisprovidedbelow:(ifselected, copytheCFPAnnualStatementfromtheTableLibrary andinsertthere)

#### **(2)Optional5 -YearActionPlan**

Agenciesareencouragedtoincludea5 -YearActionPlancoveringcapitalworkitems.Thisstatementcan becompletedbyusingthe5YearActionPlantableprovidedinthetablelibraryattheendofthe PHAPlan template **OR**bycompletingandattachingaproperlyupdatedHUD -52834.

a.  Yes  No:IsthePHAprovidinganoptional5 -YearActionPlanfortheCapital Fund?(ifno,skiptosub -component7B)

b.Ifyes to questiona,selectone:

TheCapitalFundProgram5 -YearActionPlanisprovidedasanattachmenttothe PHAPlanatAttachment(statename **ga101b01**)

-or-

TheCapitalFundProgram5 -YearActionPlanispro videdbelow:(ifselected, copytheCFPOptional5YearActionPlanfromtheTableLibraryandinsertthere)

## **B. HOPEVI and Public Housing Development and Replacement Activities (Non -Capital Fund)**

Applicability of sub-component 7B: All PHAs administering public housing. Identify any approved HOPEVI 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 HOPEVI 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 HOPEVI 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 Plans 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 HOPEVI revitalization grant in the Plan year?
- If yes, list development name/s below:

- Yes  No: d) Will the PHA be engaging in any mixed -financed 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**

[24CFR Part 903.79(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

(42U.S.C.1437p)intheplanFiscalYear?(If“No”,skipto component9;if“yes”,completeoneactivitydescriptionforeach development.)

2.ActivityDescription

Yes  No: HasthePHAprovidedtheactivitiesdescriptioninformationinthe **optional**PublicHousingAssetManagementTable?(If“yes”,skipto component9.If“No”,completetheActivityDescriptiontable below.)

<b>Demolition/Disposition ActivityDescription</b>	
1a.Developmentname:	
1b.Development(project)number:	
2.Activitytype:Demolition <input type="checkbox"/>	
Disposition <input type="checkbox"/>	
3.Applicationstatus(selectone)	
Approved <input type="checkbox"/>	
Submitted,pendingapproval <input type="checkbox"/>	
Plannedapplication <input type="checkbox"/>	
4.Dateapplicationapproved,submitted,orplannedforsubmission: (DD/MM/YY)	
5.Numberofunitsaffected:	
6.Coverageofaction(selectone)	
<input type="checkbox"/> Partofthedevelopment	
<input type="checkbox"/> Totaldevelopment	
7.Timelineforactivity:	
a.Actualorprojectedstartdateofactivity:	
b.Projectendeddateofactivity:	

**9. DesignationofPublicHousingforOccupancybyElderlyFamiliesor FamilieswithDisabilitiesorElderlyFamiliesandFamilieswith Disabilities**

[24CFRPart903.79(i)]

ExemptionsfromComponent9;Section8onlyPHAsarenottorequiredtocompletethissection.

1.  Yes  No: HasthePHAdesignatedorappliedforapprovaltodesignateor doesthePHAplantoapplytodesignateanypublichousingfor occupancyonlybytheelderlyfamiliesoronlybyfamilieswith disabilities,orbyelderlyfamiliesandfamilieswithdisabilitiesor willapplyfordesignationfor occupancybyonlyelderlyfamiliesor onlyfamilieswithdisabilities,orbyelderlyfamiliesandfamilies withdisabilitiesasprovidedbysection7oftheU.S.HousingAct

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 903.79(j)]

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

**A. Assessment of Reasonable Revitalization Pursuant to section 202 of the HUD FY1996 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 FY1996 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 HOPEVI demolition application (date submitted or approved: _____) <input type="checkbox"/> Units addressed in a pending or approved HOPEVI 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**

[24CFR Part 903.79(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"/> HOPEI <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 903.79(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 entered into a cooperative agreement with the TANF Agency, to share information and/or target support 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 programsto 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 home ownership option participation
- Preference/eligibility for section 8 home ownership 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 thefollowingtable;if“no”skip tosub -component2,FamilySelfSufficiencyPrograms.The positionofthetablemaybealterredtofacilitateitsuse.)

<b>ServicesandPrograms</b>				
ProgramName&Description (includinglocation,ifappropriate)	Estimated Size	Allocation Method (waiting list/random selection/specific criteria/other)	Access (developmentoffice/ PHAmainoffice/ otherprovidername)	Eligibility (publichousingor section8 participantsor both)
<i>ComputerLab/InternetAccess</i>	<i>Varies</i>	<i>None</i>	<i>CommunityBuilding</i>	<i>PublicHousing</i>
<i>AbstinenceEducationProgram</i>	<i>120</i>	<i>SpecificCriteria</i>	<i>CommunityBuilding</i>	<i>PublicHousing</i>
<i>GEDPreparationComputer Programs</i>	<i>Varies</i>			
<i>ParentingProgram</i>	<i>15</i>		<i>CommunityBldg.</i>	<i>PHA/Comm.</i>

**(2)FamilySelfSufficiencypr ogram/s**

a.ParticipationDescription

<b>FamilySelfSufficiency(FSS)Participation</b>		
Program	RequiredNumberofParticipants (startofFY2000Estimate)	ActualNumberofParticipants (Asof:DD/MM/YY)
PublicHousing	0	
Section8	N/A	

b.  Yes  No: IfthePHAisnotmaintainingtheminimumprogramsizerequired byHUD,doesthemostrecentFSSActionPlanaddressthe steps thePHAplanstotaketoachieveatleasttheminimumprogram size? Ifno,liststepsthePHAwilltakebelow:

**C.WelfareBenefitReductions**

1.ThePHAiscomplyingwiththestatutoryrequirements ofsection12(d)oftheU.S. HousingActof1937(relatingtothetreatmentofincomechangesresultingfrom welfareprogramrequirements)by:(select allthatapply)

- AdoptingappropriatechangestothePHA’spublichousingrentdetermination policiesandtrainstafftocarryoutthosepolicies
- Informingresidentsofnewpolicyonadmissionandreexamination
- Activelynotifyingresidentsofnewpolicyattimesinadditiontoadmissionand 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**

[24CFR Part 903.79(m)]

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

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

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

- High incidence of violent and/or drug -related crime in some or all of the PHA's developments
- High incidence of violent and/or drug -related crime in the area 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 use 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/antidrug programs

Other(describ below)

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

**101-2 Deas Apartments**

**101-7B Old Omega Road Apartments**

**B. Crime and Drug Prevention activities the PHA has undertaken or plan to undertake in the ext PHA fiscal year**

1. List the crime prevention activities the PHA has undertaken or plan 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(describ below )

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

**101-1**

**101-2**

**101-7B**

**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) **Police sponsor summer recreation program for public housing youth.**

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

- 101-1**
- 101-2**
- 101-7B
- 101-7C

**D. Additional information as required by PHDEP/PHDEP Plan**

PHA eligible for FY2000 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 FY2000 in this PHA Plan?
- Yes  No: This PHDEP Plan is an Attachment. (Attachment Filename: \_\_\_\_)

**14. RESERVED FOR PET POLICY**

[24CFR Part 903.79(n)]

**15. Civil Rights Certifications**

[24CFR Part 903.79(o)]

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

**16. Fiscal Audit**

[24CFR Part 903.79(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.PHAAssetManagement**

[24CFRPart903.79(q)]

Exemptionsfromcomponent17: Section8OnlyPHAsarenotrequiredto completethiscomponent.High performingandsmallPHAsarenotrequiredto completethiscomponent.

1.  Yes  No: IsthePHAengaginginanyactivities thatwillcontribute tothelong - termassetmanagementofitspublichousingstock,includinghow theAgencywillplanforlong -termoperating,capitalinvestment, rehabilitation,modernization,disposition,andotherneedsthathave **not**beenaddressedelsewhereinthisPHAPlan?
  
2. WhattypesofassetmanagementactivitieswillthePHAundertake?(selectallthat apply)
  - Notapplicable
  - Privatemanagement
  - Development-basedaccounting
  - Comprehensivestockassessment
  - Other:(listbelow)
  
3.  Yes  No: HasthePHAincludeddescriptions ofassetmanagementactivities in the **optional**PublicHousingAssetManagementTable?

## **18.OtherInformation**

[24CFRPart903 .79(r)]

### **A.ResidentAdvisoryBoardRecommendations**

1.  Yes  No: DidthePHAreceiveanycommentsonthePHAPlanfromthe ResidentAdvisoryBoard/s?
  
- 2.Ifyes,thecommentsare:(ifcommentswerereceived,thePH A **MUST**selectone)
  - AttachedatAttachment(Filename)
  - Providedbelow:
    - **101-8A –Requestedremovalofgasrangesandinstallationofelectric ranges**

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)

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

- 1.  Yes  No: Does the PHA meet the exemption criteria provided section 2(b)(2) of the U.S. Housing Act of 1937? (If no, continue to question 2; if yes, skip to sub-component C.)
- 2.  Yes  No: Was the resident who serves on the PHA Board elected by the residents? (If yes, continue to question 3; if no, skip to sub-component C.)

### 3. Description of Resident Election Process

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

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

b. Eligible candidates: (select one)

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

c. Eligible voters: (select all that apply)

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

### **C. Statement of Consistency with the Consolidated Plan**

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

1. Consolidated Plan jurisdiction: (provide name here) **State of Georgia 1995 -2000**

2. The PHA has taken the following steps to ensure consistency of this PHA Plan with the Consolidated Plan for the jurisdiction: (select all that apply)

- The PHA has based its statement of needs of families in the jurisdiction on the needs expressed in the Consolidated Plan/s.
- The PHA has participated in any consultation process organized and offered by the Consolidated Plan agency in the development of the Consolidated Plan.
- The PHA has consulted with the Consolidated Plan agency during the development of this PHA Plan.
- Activities to be undertaken by the PHA in the coming year are consistent with the initiatives contained in the Consolidated Plan. (list below)
- Other: (list below)

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

#### **D. Other Information Required by HUD**

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

#### **Definition of Standard Deviation and Significant Amendment**

1. **A change to development account number on the capital fund program in excess of the greater of 10% of the grant amount or \$100,000.**
2. **A change in the selection preferences for admission.**

Attachment #1

### **TIFTON HOUSING AUTHORITY Deconcentration Policy**

#### **I. INTRODUCTION**

The Quality Housing and Work Responsibility Act of 1998 (QHWRA) requires that the Authority adopt policies and procedures governing the deconcentration of very low -income families and income mixing as required by section 10(a)(3)(B) of the 1937 Housing Act. To implement this requirement, the Authority will compare the relative incomes of each

development occupied predominantly by families with children. A development with more than 50% of its occupants being families with children shall be considered to fall under this policy.

The goal of this policy is to create mixed-income communities and lessen the concentration of very low-income families within the Authority's public housing developments through admissions practices designed to bring higher income tenants into lower income developments and lower income tenants into higher income developments.

The Deconcentration Policy is intended to work in conjunction with the Authority's annual income targeting requirements that require that 40% of all new admissions to public housing developments during a fiscal year must be residents whose household income, at the time of admission, is equal to or lower than 30% of the Area Median Income. This income targeting requirement is separate from the Deconcentration Policy, which is comparative in nature.

## II. DEFINITIONS

The following definitions are provided in order to clearly define the affected developments and families under this Deconcentration Policy.

*PHA-Wide Average Household Income:* The average annual household income of all residents of all developments with more than 50% of its occupants being families with children.

*Development Average Household Income:* The average annual household income of all residents of a specific development with more than 50% of its occupants being families with children.

*Higher Income Development:* A development where the Development Average Household Income is greater than 115% of the PHA-Wide Average Household Income.

*Lower Income Development:* A development where the Development Average Household Income is less than 85% of the PHA-Wide Average Household Income.

*Higher Income Family:* A family whose annual household income is greater than 115% of the PHA-Wide Average Household Income.

*Lower Income Family:* A family whose annual household income is less than 85% of the PHA-Wide Average Household Income.

## III. TESTING

In order to achieve and maintain deconcentration, the Authority will calculate the PHA-Wide Average Household Income for all developments with 50% or more of its occupants being families with children on at least an annual basis. At the same time, the Authority will calculate the Development Average Household Income for each development with 50% or more of its occupants being families with children. The results shall be documented as follows:

- A. If the Development Average Household Income for a particular development is greater than 115% of the PHA-Wide Average Household Income, then that development shall be identified as a High-Income Development.



- B. If the Development Average Household Income for a particular development is less than 85% of the PHA -Wide Average Household Income, then that development shall be identified as a Low -Income Development.

*Testing can be run more frequently to determine the effectiveness of various initiatives employed to achieve deconcentration.*

**IV. CORRECTIVE ACTION**

Once a development has been identified as a High -Income Development or a Low -Income Development, the Authority will define and communicate specific procedures to be employed with the goal of achieving deconcentration. It is the goal of the Authority to generally increase the level of income for residents of public housing, create more stratified developments, and obtain agency self-sufficiency, therefore; the Deconcentration Policy shall not be employed to be counterproductive to that goal. In addition, the policy will, under no circumstances, be employed though steering or in any way reducing the choice in residence of the individual family.

*In order to correct a concentrated development, the Authority will, to the greatest extent possible, provide incentives to promote a Lower -Income Family to select a Higher -Income Development and to promote a Higher -Income Family to select a Lower -Income Development.*

Procedures to be employed in the development of a corrective action plan may include:

- A. Incentives to select particular developments.
- B. Payment Plans for deposits.
- C. Flexibility in move -in dates.

Since it is impossible to design a policy that will address every scenario, the Authority will, upon the identification of a need to deconcentrate, develop a specific Action Plan that will be included in the Annual Plan update.

**Attachment #2 Resident Council List**

**Officers**

President: Wendy Murray (Golden)  
 Vice President: Angela Hart (Maple)  
 Secretary: Tocora Graydon (Bellview)  
 Treasurer: Edward Turner (Ed Powell Apts.)

**Council Members**

Beatrice Woods (Bellview)  
 Tommy Pettiford (Hill)  
 John Savage (Elderly Village)  
 Peggy Bailey (Deas Apts)  
 Corinne Barrett (Ed Powell/William Johnson)

KathyJohnson(OldOmegaRdApts.)

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

PHAName: Tifton Housing Authority	Grant Type and Number Capital Fund Program Grant No: GA06P10150203 Replacement Housing Factor Grant No:	Federal FY of Grant: 2003
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Original Annual Statement     Reserve for Disasters/Emergencies     Revised Annual Statement (revision no: )  
 Performance and Evaluation Report for Period Ending:     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	45,000			
4	1410 Administration	18,000			
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	43,000			
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	65,000			
11	1465.1 Dwelling Equipment — Nonexpendable	10,671			
12	1470 Nondwelling Structures	330,000			
13	1475 Nondwelling Equipment	5,000			
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1499 Development Activities				
19	1501 Collateralization or Debt Service				
20	1502 Contingency				
21	Amount of Annual Grant: (sum of lines 2 – 20)	<b>516,671</b>			
22	Amount of line 21 Related to LBP Activities				
23	Amount of line 21 Related to Section 504 compliance				

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

PHAName: Tifton Housing Authority	Grant Type and Number Capital Fund Program Grant No: GA06P10150203 Replacement Housing Factor Grant No:	Federal FY of Grant: 2003
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Original Annual Statement     Reserve for Disasters/Emergencies     Revised Annual Statement (revision no:    )  
 Performance and Evaluation Report for Period Ending:     Final Performance and Evaluation Report

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
24	Amount of line 21 Related to Security – Soft Costs				
25	Amount of Line 21 Related to Security – Hard Costs				
26	Amount of line 21 Related to Energy Conservation Measures				

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

PHA Name: Tifton		<b>Grant Type and Number</b> Capital Fund Program Grant No: GA06P10150203 Replacement Housing Factor Grant No:			<b>Federal FY of Grant: 2003</b>			
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
PHA-Wide	Resident Initiatives Coordinator	1408	1	32,000				
	Staff Training	1408	N/A	12,000				
	Computer Software	1408	N/A	1,000				
	Executive Director	1410	1	9,000				
	Maintenance Supervisor	1410	1	9,000				
	Architectural & Engineering Fees	1430	N/A	23,000				
	Inspection Costs	1430	N/A	20,000				
	Refrigerators	1465.1	20	5,671				
	Ranges	1465.1	20	5,000				
	Administrative Office Expansion & Renovation	1470	1	330,000				
	Computer Hardware	1475	N/A	5,000				
	<b>PHA Wide Total</b>			<b>452,000</b>				
GA101-2 Deas Apts.	Roof Replacement	1460	10 Bldgs.	65,000				
	<b>Grand Total</b>			<b>516,671</b>				

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

PHAName: Tifton		Grant Type and Number Capital Fund Program No: GA06P10150203 Replacement Housing Factor No:					Federal FY of Grant: 2003
Development Number Name/HA-Wide Activities	All Fund Obligated (Quarter Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates
	Original	Revised	Actual	Original	Revised	Actual	
GA101-2							
Deas Apartments	12/31/04			12/31/05			
PHAWide	12/31/04			12/31/05			

## CapitalFundProgramFive -YearActionPlan

### PartI:Summary

PHAName <b>Tifton</b>						<input checked="" type="checkbox"/> <b>Original5 -YearPlan</b>
						<input type="checkbox"/> <b>RevisionNo:</b>
Development Number/Name/H A-Wide	Year1	WorkStatementfor Year2 FFYGrant:2004 PHAFY:2004	WorkStatementforYear3 FFYGrant:2005 PHAFY:2005	WorkStatementfor Year4 FFYGrant:2006 PHAFY:2006	WorkStatementfor Year5 FFYGrant:2007 PHAFY:2007	
	Annual Statement					
101-1Peterson		100,000				
101-2Deas		75,000				337,000
101-3EdPowell		176,671				
101-4Johnson		37,000				
101-5Golden						
101-6Hill						20,000
101-7AEld.Vill.						
101-7BMaple				95,671		
101-7COld Omega			350,671	285,000		
101-8AEld.Vill.						
101-8BBellview						
PHAWide		128,000	166,000	136,000		159,671
CFPFundsListed for5 -year planning		<b>516,671</b>	<b>516,671</b>	<b>516,671</b>		<b>516,671</b>
Replacement HousingFactor Funds						

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

Activities for Year 1	Activities for Year: <u>2</u> FFY Grant: 2004 PHAFY: 2004			Activities for Year: <u>2</u> FFY Grant: 2004 PHAFY: 2004		
	Development Name/Number	Major Work Categories	Estimated Cost	Development Name/Number	Major Work Categories	Estimated Cost
See Annual Statement	101-1 Peterson	Window Replace.	100,000	101-3 Ed Powell	Remove Propane /Install Heat Pumps	75,000
	101-2 Deas	Window Replace.	75,000		Site Improvements Landscaping, Fencing, & Erosion Playground Equip. Parallel Park Pads	20,000   22,000 40,671
	PHAWide	Administration Resident Manager Architect/Engineer Inspection Costs Staff Training	20,000 33,000 35,000 25,000 15,000	101-4 Wm. Johnson	Replace Ranges Replace Refrigerat. Install Screen Doors Remove Propane /Install Heat Pumps Replace Ranges Replace Refrigerat. Site Improvements Install Screen Doors	6,000 7,000 6,000  25,000  2,500 2,500 5,000 2,000
	<b>Total CFPEstimatedCost</b>					<b>\$516,671</b>





**CapitalFundProgramFive -YearActionPlan  
PartII:SupportingPages —WorkActivities**

ActivitiesforYear: \_\_ 5\_\_  
FFYGrant:2007  
PHAFY:2007

ActivitiesforYear: \_\_  
FFYGrant:  
PHAFY:

<b>Development Name/Number</b>	<b>MajorWork Categories</b>	<b>EstimatedCost</b>	<b>Development Name/Number</b>	<b>MajorWork Categories</b>	<b>EstimatedCost</b>
101-2Deas	RoofReplacement	42,000			
PhaseI	Kitch.Cab.Replace	75,000			
(1-24)	HeatPumpInstall	105,000			
	Painting&Drywall	55,000			
	SiteImprovements	10,000			
	RangeReplacement	10,000			
	ReplaceRefrigerat.	10,000			
	Relocation	10,000			
	ReplaceWindows	20,000			
PHAWide	ResidentManager	36,000			
	Adminstration	25,000			
	A&E	45,000			
	StaffTraining	12,000			
	Inspection	26,671			
	ComputerSoftware	5,000			
	ComputerHardware	10,000			
101-6Hill	PlaygroundEquip	20,000			
<b>TotalCFPEstimatedCost</b>		<b>\$516,671</b>			

Annual Statement/Performance and Evaluation Report  
 Comprehensive Grant Program (CGP) Part I: Summary

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

OMB Approval No. 2577-0157 (Exp. 7/31/98)

HAName <b>Housing Authority of the City of Tifton, Georgia</b>		Comprehensive Grant Number <b>GA06P10150101</b>		FFY of Grant Approval <b>2001</b>	
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disaster/Emergencies <input checked="" type="checkbox"/> Revised Annual Statement/Revision Number <input type="checkbox"/> Final Performance and Evaluation Report		<b>REVISION#1</b>		4/10/2003	
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost (2)	
		Original	Revised (1)	Obligated	Expended
1	Total Non-CGPF Funds				
2	1406 Operations (				
3	1408 Management Improvements	44,500.00	49,500.00	36,990.00	29,281.18
4	1410 Administration	21,000.00	\$ 21,000.00	21,000.00	20,000.00
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	60,000.00	60,000.00	60,000.00	50,245.67
8	1440 Site Acquisition				
9	1450 Site Improvement	114,000.00	119,293.70	64,000.00	64,000.00
10	1460 Dwelling Structures	420,700.00	420,700.00	420,700.00	420,700.00
11	1465.1 Dwelling Equipment-Nonexpendable	29,000.00	29,000.00	29,000.00	27,551.00
12	1470 Nondwelling Structures				
13	1475 Nondwelling Equipment	7,500.00	17,500.00	7,500.00	7,500.00
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1495.1 Relocation Costs	10,000.00	10,000.00	10,000.00	10,000.00
17	1501 Collateralization or Debt Service				
18	1502 Contingency	20,885.00	591.30	591.30	591.30
19	<b>Amount of Annual Grant (Sum of lines 2-15)</b>	<b>727,585.00</b>	<b>727,585.00</b>	<b>649,781.30</b>	<b>629,869.15</b>
20	Amount of line 19 Related to LBP Activities				
21	Amount of line 19 Related to Section 504 Compliance				
22	Amount of line 19 Related to Security				
23	Amount of Line 19 Related to Energy Conservation Measures				
Signature of Executive Director and Date		Signature of Public Housing Director/Office of Native American Programs Administrator and Date			

(1) To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

(2) To be completed for the Performance and Evaluation Report.

<b>Annual Statement/ Performance and Evaluation Report</b>				<b>U.S. Department of Housing and Urban Development</b>					
Part II: Supporting Pages				Office of Public and Indian Housing					
CAPITAL FUND PROGRAM GA06P10150101								OMB Approval 2577-0157 (Exp. 7/31/98)	
<b>Development</b>				<b>Total Estimated Cost</b>		<b>Total Actual Cost</b>		<b>Status of Proposed Work(2)</b>	
<b>Number/Name</b>	<b>General Description of Major Work Categories</b>	<b>Development Account</b>	<b>Quantity</b>	<b>Original</b>	<b>Revised(1)</b>	<b>Funds</b>	<b>Funds</b>		
<b>HA-Wide</b>		<b>Number</b>				<b>Obligated(2)</b>			
<b>Activities</b>									
PHAWIDE	Resident Int. Manager	1408		27,510	27,510.00	20,000.00	14,086.39		
	Staff Training	1408		11,000	16,000.00	11,000.00	11,000.00		
	Computer Software	1408		3,500	3,500.00	3,500.00	1,704.79		
	Utility Allowance update	1408		1,490	1,490.00	1,490.00	1,490.00	completed	
	PHAS CERTIFICATION	1408		1,000	1,000.00	1,000.00	1,000.00	completed	
	Bidding Costs	1410		1,000	1,000.00	1,000.00	0.00		
	Executive Director	1410		10,000	10,000.00	10,000.00	10,000.00	completed	
	Maintenance Supervisor	1410		10,000	10,000.00	10,000.00	10,000.00	completed	
	Architectural Fees	1430		35,000	35,000.00	35,000.00	30,745.67		
	Inspection Costs	1430		25,000	25,000.00	25,000.00	19,500.00		
	Computer Equipment	1475		7,500	17,500.00	7,500.00	7,500.00		
	Contingency	1502		20,885	591.30	\$ 591.30	591.30	completed	
	<b>PHAWide Total</b>			<b>153,885</b>	<b>148,591.30</b>	<b>\$ 126,081.30</b>	<b>\$ 107,618.15</b>		
Signature of Executive Director & Date:				Signature of Public Housing Director					
X				X					



Annual Statement/ Performance and Evaluation Report			U.S. Department of Housing and Urban Development							
PART II: SUPPORTING PAGES			Office of Public and Indian Housing							
CAPITAL FUND PROGRAM GA06P10150101										
							OMB Approval 2577-0157 (Exp. 7/31/98)			
Development			Total Estimated Cost		Total Actual Cost					
Number/Name	General Description of Major		Development	Quantity	Original	Revised(1)	Funds	Funds	Status of Proposed Work(2)	
HA-Wide	Work Categories		Account				Obligated(2)	Expended(2)		
Activities			Number							
GA-101-1	Roof Replacement		1460	11 BLDGS	55,000	55,000.00	55,000.00	55,000.00	JCICONT.	completed
Nichols-	Kitchen Cabinet Replacement		1460	38	90,000	90,000.00	90,000.00	90,000.00	JCICONT.	completed
Peterson	Heat pump Installation		1460	38	150,000	150,000.00	150,000.00	150,000.00	JCICONT.	completed
	Electrical Panel Upgrade		1460	38	60,000	60,000.00	60,000.00	60,000.00	JCICONT.	completed
	Range Hood Fire Detention Systems		1460	38	5,700	5,700.00	5,700.00	5,700.00	JCICONT.	completed
	Painting & Drywall		1460	38	60,000	60,000.00	60,000.00	60,000.00	JCICONT.	completed
	Site Improvements: Fencing, Grading		1450	N/A	59,000	59,000.00	59,000.00	59,000.00	JCICONT.	completed
	Landscaping, Drainage Repair									
	Development Sign		1450	1	5,000	5,000.00	5,000.00	5,000.00	JCICONT	completed
	Ranges		1465.1	38	14,000	14,000.00	14,000.00	12,551.00		in progress
	Refrigerators		1465.1	38	15,000	15,000.00	15,000.00	15,000.00		completed
	Relocation		1495.1	38	10,000	10,000.00	10,000.00	10,000.00		completed
	<b>TOTAL</b>				<b>523,700</b>	<b>523,700.00</b>	<b>523,700.00</b>	<b>522,251.00</b>		
GA-101-7C	Site Improvements: Erosion repair &		1450	N/A	50,000.00	55,293.70			Let for Bid	
Old Omega Rd.	Landscaping									
Apartments	<b>TOTAL</b>				<b>50,000</b>					
Signature of Executive Director & Date:							Signature of Public Housing Director			
X							X			
1 To be completed for the Performance and Evaluation Report or a Revised Annual Statement.										
2 To be completed for the performance and Evaluation Report.										

<b>Annual Statement/ Performance and Evaluation Report</b>						<b>U.S. Department of Housing and Urban Development</b>			
<b>Part III: Implementation Schedule</b>						Office of Public and Indian Housing			
CAPTIAL FUND PROGRAM GA06P10150101									
						OMB Approval No. 2577-0157 (Exp. 7/31/98)			
<b>Development</b>									
<b>Number/Name</b>	<b>All Funds Obligated (Quarter Ending Date)</b>			<b>All Funds Expended (Quarter Ending Date)</b>			<b>Reasons for Revised Target Dates (2)</b>		
<b>HA-Wide Activities</b>	<b>Original</b>	<b>Revised (1)</b>	<b>Actual (2)</b>	<b>Original</b>	<b>Revised (1)</b>	<b>Actual (2)</b>			
PHAWide	12/31/2002		6/30/2003	12/31/2003					
GA101-1 NICHOLS- PETERSON	12/31/2002		8/6/2002	12/31/2003		2/28/2003			
GA101-7C OLDOMEGARD	12/31/2002			12/31/2003					
To be completed for the Performance and Evaluation Report or a Revised Annual Statement.					(2) To be completed for the Performance and Evaluation Report				
Signature of Executive Director and Date					Signature of Public Housing Director/Office of Native American Programs Administrator and Date				

Annual Statement/Performance and Evaluation Report  
 Comprehensive Grant Program (CGP) Part I: Summary

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

OMB Approval No. 2577-0157 (Exp. 7/31/98)

HAName <b>Housing Authority of the City of Tifton, Georgia</b>		Comprehensive Grant Number FFY of Grant Approval <b>GA06P10150102</b> <b>2002</b>			
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disaster/Emergencies <input checked="" type="checkbox"/> Revised Annual Statement/Revision Number_					
<input type="checkbox"/> Final Performance and Evaluation Report		3/30/2003			
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost (2)	
		Original	Revised (1)	Obligated	Expended
1	Total Non-CGPF Funds				
2	1406 Operations (				
3	1408 Management Improvements	47,000.00		14,000.00	1,684.27
4	1410 Administration	20,000.00		20,000.00	20,000.00
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	55,000.00		0.00	0.00
8	1440 Site Acquisition				
9	1450 Site Improvement	95,000.00		533.99	533.99
10	1460 Dwelling Structures	249,000.00		217,000.00	192,889.39
11	1465.1 Dwelling Equipment-Nonexpendable	27,000.00		0.00	0.00
12	1470 Nondwelling Structures				
13	1475 Nondwelling Equipment	8,000.00		8,000.00	710.00
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1495.1 Relocation Costs	5,000.00		2,000.00	1,175.70
17	1501 Collateralization or Debt Service				
18	1502 Contingency	10,671.00		273.64	273.64
19	<b>Amount of Annual Grant (Sum of lines 2-15)</b>	<b>516,671.00</b>		<b>261,807.63</b>	<b>217,267.47</b>
20	Amount of line 19 Related to LBP Activities				
21	Amount of line 19 Related to Section 504 Compliance				
22	Amount of line 19 Related to Security				
23	Amount of Line 19 Related to Energy Conservation Measures				
Signature of Executive Director and Date		Signature of Public Housing Director/Office of Native American Programs Adminis			

(1) To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

(2) To be completed for the Performance and Evaluation Report.





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Annual Statement/ Performance and Evaluation Report			U.S. Department of Housing and Urban Development								
PART II: SUPPORTING PAGES			Office of Public and Indian Housing						12/10/2002		
CAPITAL FUND PROGRAM GA06P1015202											
						OMB Approval 2577-0157 (Exp. 7/31/98)					
Development			Total Estimated Cost			Total Actual Cost			Status of Proposed Work(2)		
Number/Name	General Description of Major		Development	Quantity	Original	Revised(1)	Funds	Funds			
HA-Wide	Work Categories		Account				Obligated(2)	Expended(2)			
Activities			Number								
GA-101-1	Roof Replacement		1460	4 Bldgs.	25,000.00		25,000.00	25,000.00	JCICONT.		
Nichols-	Kitchen Cabinet Replacement		1460	16	50,000.00		50,000.00	50,000.00	JCICONT.		
Peterson	Heat pump Installation		1460	16	68,000.00		68,000.00	68,000.00	JCICONT.		
	Electrical Panel Upgrade		1460	16	32,000.00		20,000.00	20,000.00	JCICONT.		
	Range Hood Fire Detection Systems		1460	16	5,000.00		5,000.00	1,240.24			
	Painting & Drywall		1460	16	32,000.00		32,000.00	15,380.55	Drywall Ent.		
	Site Improvements: Fencing, Grading		1450	N/A	10,000.00		533.99	533.99	Completed		
	Landscaping, Drainage Repair										
	Ranges		1465.1	16	6,000.00						
	Refrigerators		1465.1	16	6,000.00		4,770.00	4,770.00			
	Relocation		1495.1	16	5,000.00		2,000.00	1,175.70			
	<b>TOTAL</b>				<b>239,000.00</b>		<b>207,303.99</b>	<b>186,100.48</b>			
101-8A	Replace Windows		1460	32	12,000.00		12,000.00	12,000.00	Completed		
Eld. Village	Vinyl Siding Installation		1460	4	25,000.00		5,000.00	1,268.60	Completed		
	<b>TOTAL</b>				<b>37,000.00</b>		<b>17,000.00</b>	<b>13,268.60</b>			
101-8B	Playground Equipment		1450	NA	20,000.00				Proposals Accepted		
Bellview											
Signature of Executive Director & Date:						Signature of Public Housing Director					
X						X					
1 To be completed for the Performance and Evaluation Report or a Revised Annual Statement.											
2 To be completed for the performance and Evaluation Report.											



Signature of Executive Director & Date:					Signature of Public Housing Director			
X					X			

<b>Annual Statement/ Performance and Evaluation Report</b>						<b>U.S. Department of Housing and Urban Development</b>			
<b>Part III: Implementation Schedule</b>						Office of Public and Indian Housing			
CAPTIAL FUND PROGRAM GA06P101502									
						OMB Approval No. 2577-0157 (Exp. 7/31/98)			
<b>Development</b>									
<b>Number/Name</b>	<b>Original Target Dates(Quarter Ending Date)</b>			<b>All Funds Expended(Quarter Ending Date)</b>			<b>Reasons for Revised Target Dates(2)</b>		
<b>HA-Wide Activities</b>	<b>Original</b>	<b>Revised(1)</b>	<b>Actual(2)</b>	<b>Original</b>	<b>Revised(1)</b>	<b>Actual(2)</b>			
GA101-1 Peterson	12/31/2003		12/31/2001						
GA101-8A	12/31/2003		12/31/2004						
GA101-8B	12/31/2003		12/31/2004						
PHAWide	12/31/2003		12/31/2004						
To be completed for the Performance and Evaluation Report or a Revised Annual Statement.					(2) To be completed for the Performance and Evaluation Report				
Signature of Executive Director and Date					Signature of Public Housing Director/Office of Native American Programs Administrator and Date				