PHA Plans

5 Year Plan for Fiscal Years 2003 - 2007 Annual Plan for Fiscal Year 2003

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

PHA Plan Agency Identification

PHA Name: Decatur Housing Authority						
PHA Number: IL012						
PHA Fiscal Year Beginning: 04/2003						
Public Access to Information						
Information regarding any activities outlined in this plan can be obtained by contacting: (select all that apply) Main administrative office of the PHA PHA development management offices PHA local offices						
Display Locations For PHA Plans and Supporting Documents						
The PHA Plans (including attachments) are available for public inspection at: (select all that apply) Main administrative office of the PHA PHA development management offices PHA local offices Main administrative office of the local government Main administrative office of the County government Main administrative office of the State government Public library PHA website Other (list below)						
PHA Plan Supporting Documents are available for inspection at: (select all that apply) Main business office of the PHA PHA development management offices Other (list below)						

5-YEAR PLAN PHA FISCAL YEARS 2003 – 2007

[24 CFR Part 903.5]

1. N	<u> Iission</u>
	e PHA's mission for serving the needs of low-income, very low income, and extremely low-income 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)
comn	provide and maintain quality affordable housing with access to nunity resources for low to moderate income families and individuals." Foals
The goal emphase identify PHAS SUCCI (Quantity)	als and objectives listed below are derived from HUD's strategic Goals and Objectives and those sized in recent legislation. PHAs may select any of these goals and objectives as their own, or other goals and/or objectives. Whether selecting the HUD-suggested objectives or their own, ARE STRONGLY ENCOURAGED TO IDENTIFY QUANTIFIABLE MEASURES OF ESS IN REACHING THEIR OBJECTIVES OVER THE COURSE OF THE 5 YEARS. If it is the measures would include targets such as: numbers of families served or PHAS scores ed.) PHAs should identify these measures in the spaces to the right of or below the stated objectives.
HUD housii	Strategic Goal: Increase the availability of decent, safe, and affordable ng.
	PHA Goal: Expand the supply of assisted housing Objectives:
	PHA Goal: Improve the quality of assisted housing Objectives: Improve public housing management: (PHAS score) Improve voucher management: (SEMAP score) Increase customer satisfaction:

	(list; e.g., public housing finance; voucher unit inspections)Where we need improvement plans: a) % Leased, and b) Time to Lease
	HA Goal: Increase assisted housing choices bjectives: Provide voucher mobility counseling: Conduct outreach efforts to potential voucher landlords Increase voucher payment standards Implement voucher homeownership program: Implement public housing or other homeownership programs: Implement public housing site-based waiting lists: Convert public housing to vouchers: Other: (list below) Designate existing and new construction facilities as elderly or disabled only. Pategic Goal: Improve community quality of life and economic vitality
P.	HA Goal: Provide an improved living environment bjectives: Implement measures to deconcentrate poverty by bringing higher income public housing households into lower income developments:
and indi Pandindi Pandindi	HA Goal: Promote self-sufficiency and asset development of assisted ds
O	bjectives:

	 ✓ Increase the number and percentage of employed persons in assisted families: ✓ Provide or attract supportive services to improve assistance recipients' employability: ✓ Provide or attract supportive services to increase independence for the elderly or families with disabilities. ✓ Other: (list below) Attract additional supportive services for all residents as needed.
HUD :	trategic 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)
I. Object 1. Di 2. Di	PHA Goals and Objectives: (list below) Adapt the Decatur Housing Authority's housing stock by increasing the affordable housing supply for elderly by age and elderly by disability as stated in the Consolidated Plan (See Consolidated Plan Part III, Needs and Strategies, 1.3 Rental Housing, 1.4 Elderly Housing, and 1.5 Housing for Persons with Special Needs), and completing the Hope VI for Longview Place. ives: IA will build or acquire up to 449 new affordable housing units by Dec. 31, 2008. IA HOPE VI Developer will apply for tax credits this year (2003) and each of next ollowing years to support HOPE VI Redevelopment Programs.
Includ housin	ease opportunities for low and moderate income persons to attain homeownership. In the following Consolidated Plan strategic goals: 1.6 Barriers to affordable goals, 1.7 Lead Based Paint Monitoring and Abatement, 1.8 Housing Counseling and Housing.

Objectives:

- 1. DHA will construct 8 units of public housing homeownership units by Dec. 31, 2005.
- 2. DHA will construct 115 homeownership affordable housing units by Dec. 31, 2005.
- III. Seek new income sources to support the creation of additional affordable housing for the community and support for programs.

Objectives:

- 1. DHA Hope VI Developer will apply for tax credits in the coming five years.
- 2. DHA will find community partners (banks, S & L's) by Dec. 31, 2005.
- IV. Provide ethical stewardship of all programs and services.

Objectives:

- 1. Faithfully administer all federal programs in accordance with laws and regulations (ongoing).
- 2. Maintain a system for residents and community members to recommend needed changes in DHA's housing stock and service provision (ongoing).
- 3. Provide excellent customer service.
- 4. Utilize an asset management approach to public housing by Dec. 31, 2005.
- 5. Manage as a team, cooperating and assisting residents toward self-sufficiency by Dec.

31, 2006.

Annual PHA Plan PHA Fiscal Year 2003

[24 CFR Part 903.7]

i. Annual Plan Type:
Select which type of Annual Plan the PHA will submit.
Standard Plan
Streamlined Plan:
High Performing PHA
Small Agency (<250 Public Housing Units)
Administering Section 8 Only
Troubled Agency Plan
ii. Executive Summary of the Annual PHA Plan
[24 CFR Part 903.7 9 ®]
Provide a brief overview of the information in the Annual Plan, including highlights of major initiatives and discretionary policies the PHA has included in the Annual Plan.

The Decatur Housing Authority staff has examined the needs of families in the Decatur metropolitan area and those of both the Public Housing and Section 8 tenant based waiting list to develop this Agency Plan.

The housing needs of the community were derived by utilizing the Decatur Consolidated Plan, U.S. Census data, the American Housing Survey data, and the Public Housing and Section 8 applicant lists. There are over 300 families on the combined waiting list for Public Housing and Section 8 at the current time. The two barriers, found most commonly in the community and among applicants were housing affordability and the supply of decent affordable housing in Decatur, Illinois. (See Annual Plan, Page 5-8) Staff met regularly with City of Decatur Community Development members to assure compliance with the Consolidated Plan.

The Decatur Housing authority has reviewed and revised all applicable policy and procedure manuals to bring them current with the Quality Housing and Work Responsibility Act of 1998. These changes include a series of modifications to the Admissions and Continued Occupancy Policy for Public Housing and the Administrative Plan for the Section 8 Tenant Based Program.

The Operations and Management Section beginning on Page 26 includes an Organizational Chart, and review of the programs under Decatur Housing Authority

management, and a listing of policies available for review at the time of an independent audit.

The Capital Improvement needs are examined and presented in both the Capital Fund Program Annual Statement and the Five-Year Action Plan. As you are aware, the Decatur Housing Authority received a HOPE VI grant and therefore, must discuss activities planned under the HOPE VI Program in the forthcoming year. These include demolition of Longview Place and the construction of 449 housing units, up to 292 of which will be Public Housing and up to 157 of which will be homeownership.

The Decatur Housing Authority has also included a section for the designation of public housing for occupancy by elderly or families with disabilities. In a review of our existing housing stock, it was deemed that at least two of our existing public housing facilities could reasonably be dedicated to the needs of elderly families and that during the construction of the HOPE VI.

Under component 12 the Housing Authority examined its community service and self-sufficiency programs starting on Page 35. These include the array of services available to residents of public and assisted housing and the working relationship between Decatur Housing Authority and the Department of Human Services. Also included is the Annual Plan for the Drug Elimination Program. DHA lists activities undertaken within that program, and coordination of all activities with local community police resources.

At the conclusion of the plan, on Page 46, is a Public Housing Asset Management Table that reviews, on one chart, major activities that the Housing Authority will undertake in the forthcoming year.

The Decatur Housing Authority has also sought input into this Agency Plan from both Public Housing and Section 8 residents, and the public comments will be included and taken into consideration before the final plan is submitted to the Department of Housing & Urban Development.

iii. Annual Plan Table of Contents [24 CFR Part 903.7 9 ®]

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

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Αt	tacl	nments	
B, SE	etc.) PAR	which attachments are provided by selecting all that apply. Provide the attachment's n in the space to the left of the name of the attachment. Note: If the attachment is provide the file submission from the PHA Plans file, provide the file name in parentheses in ght of the title.	ded as a
Re	quii	red Attachments:	
]	Admissions Policy for Deconcentration	
\succeq		FY 2002 Capital Fund Program Annual Statement (File Name: il012a0	
		Most recent board-approved operating budget (Required Attachment for	r PHAs
		that are troubled or at risk of being designated troubled ONLY)	
	Op	otional Attachments:	
	\boxtimes	PHA Management Organizational Chart (File Name: il012b02)	

☐ Public Housing Drug Elimination Program (PHDEP) Plan
Comments of Resident Advisory Board or Boards (must be attached if not
included in PHA Plan text) File Name: il012c02
Other (List below, providing each attachment name)
Community Service (File Name il012d02)
Pet Policy (File Name: il012f01 and il012g02)
Decatur Housing Authority Project Based Section 8 Plan Supplement (File
Name: il012h02)
Capital Fund Program Annual P & E Report IL06P01250100(File Name:
il012i02)
Capital Fund Program Annual P & E Report IL06P01250101 (File Name:
il012j02)
Capital Fund Program Annual P & E Report IL06P01250102 (File Name:
il012k02)

Supporting Documents Available for Review

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

List of Supporting Documents Available for Review							
Applicable &	Supporting Document	Applicable Plan Component					
On Display	DILL DI G CC C C C C C C C C C C C C C C C C C	5 X 1 A 1 D1					
X	PHA Plan Certifications of Compliance with the PHA Plans and Related Regulations	5 Year and Annual Plans					
X	State/Local Government Certification of Consistency with the Consolidated Plan	5 Year and Annual Plans					
X	Fair Housing Documentation: Records reflecting that the PHA has examined its programs or proposed programs, identified any impediments to fair housing choice in those programs, addressed or is addressing those impediments in a reasonable fashion in view of the resources available, and worked or is working with local jurisdictions to implement any of the jurisdictions' initiatives to affirmatively further fair housing that require the PHA's involvement.	5 Year and Annual Plans					
X	Consolidated Plan for the jurisdiction/s in which the PHA is located (which includes the Analysis of Impediments to Fair Housing Choice (AI))) and any additional backup data to support statement of housing needs in the jurisdiction	Annual Plan: Housing Needs					
X	Most recent board-approved operating budget for the public housing program	Annual Plan: Financial Resources;					
X	Public Housing Admissions and (Continued) Occupancy Policy (A&O), which includes the Tenant Selection and Assignment Plan [TSAP]	Annual Plan: Eligibility, Selection, and Admissions Policies					
X	Section 8 Administrative Plan	Annual Plan: Eligibility, Selection, and Admissions					

List of Supporting Documents Available for Review						
Applicable &	Supporting Document	Applicable Plan Component				
On Display		omponent				
		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 Quality Housing and Work Responsibility Act Initial Guidance; Notice and any further HUD guidance) and 2. Documentation of the required deconcentration and income mixing analysis	Annual Plan: Eligibility, Selection, and Admissions Policies				
	Public housing rent determination policies, including the methodology for setting public housing flat rents check here if included in the public housing A & O Policy	Annual Plan: Rent Determination				
	Schedule of flat rents offered at each public housing development Check here if included in the public housing A & O Policy	Annual Plan: Rent Determination				
	Section 8 rent determination (payment standard) policies 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				
	Public housing grievance procedures Check here if included in the public housing A & O Policy	Annual Plan: Grievance Procedures				
	Section 8 informal review and hearing procedures 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				
N/A	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				
X	Approved HOPE VI applications or, if more recent, approved or submitted HOPE VI Revitalization Plans or any other approved proposal for development of public housing	Annual Plan: Capital Needs				
N/A	Approved or submitted applications for demolition and/or disposition of public housing	Annual Plan: Demolition and Disposition				
N/A	N/A Approved or submitted applications for designation of public housing (Designated Housing Plans) Annual Plan: Designated Public Housing					
N/A	Approved or submitted assessments of reasonable revitalization of public housing and approved or submitted	Annual Plan: Conversion of Public Housing				

List of Supporting Documents Available for Review							
Applicable & On Display	Supporting Document	Applicable Plan Component					
0 == = == F === y	conversion plans prepared pursuant to section 202 of the 1996 HUD Appropriations Act						
N/A	Approved or submitted public housing homeownership programs/plans	Annual Plan: Homeownership					
N/A	Policies governing any Section 8 Homeownership program 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					
X	FSS Action Plan/s for public housing and/or Section 8	Annual Plan: Community Service & Self-Sufficiency					
N/A	Most recent self-sufficiency (ED/SS, TOP or ROSS or other resident services grant) grant program reports	Annual Plan: Community Service & Self-Sufficiency					
X	The most recent Public Housing Drug Elimination Program (PHEDEP) 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					
N/A	Troubled PHAs: MOA/Recovery Plan	Troubled PHAs					
	Other supporting documents (optional) (list individually; use as many lines as necessary)	(specify as needed)					

1. Statement of Housing Needs

[24 CFR Part 903.7 9 (a)]

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	1522	5	5	4	1	2	5
Income >30% but <=50% of AMI	524	5	5	4	1	2	5
Income >50% but							

Housing Needs of Families in the Jurisdiction by Family Type							
Family Type	Overall	Afford- ability	Supply	Quality	Access- ibility	Size	Loca- tion
<80% of AMI	231	5	5	4	1	2	5
Elderly	2914	5	5	4	1	3	3
Families with							
Disabilities	483	5	5	4	4	5	3
African American	650	5	5	4	1	1	5
Race/Ethnicity							
Race/Ethnicity							
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.)

\boxtimes	Consolidated Plan of the Jurisdiction/s
	Indicate year: 2000-2004
\boxtimes	U.S. Census data: the Comprehensive Housing Affordability Strategy
	("CHAS") dataset
\boxtimes	American Housing Survey data
	Indicate year: 1997
	Other housing market study
	Indicate year:
\boxtimes	Other sources: (list and indicate year of information)

Public Housing & Section 8 Applicants - 2001

www.census.gov - 1999

SODCS: Census Data Retrieval

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	g Needs of Fami	lies on the Waiting Li	st	
Waiting list type: (select one)					
	8 tenant-base	d assistance			
Nublic I	Public Housing				
Combin	Combined Section 8 and Public Housing				
Public I	Public Housing Site-Based or sub-jurisdictional waiting list (optional)				
If used	If used, identify which development/subjurisdiction:				
	#	of families	% of total families	Annual Turnover	

Housing Needs of Families on the Waiting List				
Waiting list total	255		20%	
Extremely low				
income <=30% AMI	47	86		
Very low income				
(>30% but <=50%		13		
AMI)	32			
Low income				
(>50% but <80%	2	1		
AMI)				
Families with				
children	190	75		
Elderly families	7	3		
Families with				
Disabilities	72	28		
African American	171	67		
Race/ethnicity	1	-		
Race/ethnicity				
Race/ethnicity				
Characteristics by				
Bedroom Size				
(Public Housing				
Only)				
1BR	43	17%		
2 BR	100	39%		
3 BR	57	22%		
4 BR	49	19%		
5 BR	6	3%		
5+ BR	N/A	N/A		
Is the waiting list clos	sed (select one)?	No X Yes		
If yes:				
How long has it been closed (# of months)? 1 month				
Does the PHA expect to reopen the list in the PHA Plan year? \(\subseteq \text{No} \text{ Yes} \)				
Does the PHA permit specific categories of families onto the waiting list, even if				
generally closed? No Yes Elderly/Disabled/4&5BR Families				
TT				
Housing Needs of Families on the Waiting List				

Housing	riccus	OI I	annics	UII	шс	* *	aiung	LIST

Housing Needs of Families on the Waiting List					
Waiting list type: (sele	ect one)				
	t-based assistance				
Public Housing					
	ion 8 and Public Housi	ng			
	Site-Based or sub-juri	•	(optional)		
	y which development/s	•	\ 1 /		
,	# of families	% of total families	Annual Turnover		
Waiting list total	233		20%		
Extremely low					
income <=30% AMI	133	57			
Very low income					
(>30% but <=50%		155			
AMI)	34				
Low income					
(>50% but <80%	66	28			
AMI)					
Families with					
children	166	72			
Elderly families	42	18			
Families with					
Disabilities	24	10			
African American	186	80			
Race/ethnicity					
Race/ethnicity					
Is the waiting list close	ed (select one)? No	Yes			
If yes:					
	it been closed (# of mo				
Does the PHA expect to reopen the list in the PHA Plan year? No Yes					
Does the PHA permit specific categories of families onto the waiting list, even if					
generally closed? No Yes Elderly/Disabled					
 Strategy for Addressing Needs Provide a brief description of the PHA's strategy for addressing the housing needs of families in the 					

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:

its carrent resources by
Select all that apply

	Employ effective maintenance and management policies to minimize the
\boxtimes	number of public housing units off-line Reduce turnover time for vacated public housing units
\boxtimes	Reduce time to renovate public housing units
	Seek replacement of public housing units lost to the inventory through mixed finance development
	Seek replacement of public housing units lost to the inventory through section
	8 replacement housing resources
	Maintain or increase section 8 lease-up rates by establishing payment standards that will enable families to rent throughout the jurisdiction
	Undertake measures to ensure access to affordable housing among families assisted by the PHA, regardless of unit size required
	Maintain or increase section 8 lease-up rates by marketing the program to owners, particularly those outside of areas of minority and poverty concentration
	Maintain or increase section 8 lease-up rates by effectively screening Section 8 applicants to increase owner acceptance of program
\boxtimes	Participate in the Consolidated Plan development process to ensure
	coordination with broader community strategies Other (list below)
	gy 2: Increase the number of affordable housing units by:
Select a	н шат аррту
\boxtimes	Apply for additional section 8 units should they become available Leverage affordable housing resources in the community through the creation
\boxtimes	of mixed – finance housing Pursue housing resources other than public housing or Section 8 tenant-based
\boxtimes	assistance. Other: (list below)
	* Hope VI Redevelopment Housing * Acquisition/Rehab
	* Homewonership
	* Section 8 Project Based Units
	* Others as Available in conjunction w/ Hope VI
Need:	Specific Family Types: Families at or below 30% of median
	gy 1: Target available assistance to families at or below 30 % of AMI
~01001 a	·· ····· ·· ·· ·· ·· · · · · · · · · ·

	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
Need:	Other: (list below) Specific Family Types: Families at or below 50% of median
	gy 1: Target available assistance to families at or below 50% of AMI
	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
	gy 1: Target available assistance to the elderly:
	Seek designation of public housing for the elderly Apply for special-purpose vouchers targeted to the elderly, should they become available Other: (list below)
Need:	Specific Family Types: Families with Disabilities
	gy 1: Target available assistance to Families with Disabilities:
Select al	Seek designation of public housing for families with disabilities Carry out the modifications needed in public housing based on the section 504 Needs Assessment for Public Housing Apply for special-purpose vouchers targeted to families with disabilities, should they become available Affirmatively market to local non-profit agencies that assist families with disabilities Other: (list below) Have targeted programs.
Need: needs	Specific Family Types: Races or ethnicities with disproportionate housing

Strategy 1: Increase awareness of PHA resources among families of races and ethnicities with disproportionate needs: Select if applicable \boxtimes 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 \bowtie Counsel section 8 tenants as to location of units outside of areas of poverty or minority concentration and assist them to locate those units \boxtimes 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) **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

2. Statement of Financial Resources

Other: (list below)

Results of consultation with advocacy groups

[24 CFR Part 903.7 9 (b)]

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

public housing capital improvements, public housing safety/security, public housing supportive services, Section 8 tenant-based assistance, Section 8 supportive services or other.

Financial Resources:				
Sources Planned S	Sources and Uses Planned \$	Planned Uses		
1. Federal Grants (FY 2002 grants)	таппси ф	Trainicu Oses		
a) Public Housing Operating Fund	2,401,450			
b) Public Housing Capital Fund	1,381,366			
c) HOPE VI Revitalization	6,800,000			
d) HOPE VI Demolition	N/A			
e) Annual Contributions for Section	11/11			
8 Tenant-Based Assistance	4,336,550			
f) Public Housing Drug Elimination	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
Program (including any Technical				
Assistance funds)	214,980			
g) Resident Opportunity and Self-	,			
Sufficiency Grants	N/A			
h) Community Development Block				
Grant	N/A			
i) HOME	N/A			
Other Federal Grants (list below)				
ROSS	38,924	Resident Opportunities And Self-Sufficiency		
2. Prior Year Federal Grants (unobligated funds only) (list below)		·		
CFP IL06P01250101	0			
CFP IL06P01250102	347,938			
3. Public Housing Dwelling Rental Income	655,680	PH Operations		
	023,000	тт орошноно		
4. Other income (list below)				
4. Non-federal sources (list below)				
Public Housing Investment Inc.	48,480	PH Operations		
Section 8 Investments	15,000	Section 8 Operations		
	15,000	Section 8 Operations		

rma	ncial Resources:	
Planned	l Sources and Uses	
Sources	Planned \$	Planned Uses
Total resources	18,218,249	
3. PHA Policies Governing Elig [24 CFR Part 903.7 9 (c)]	gibility, Selection, and	Admissions
A. Public Housing Exemptions: PHAs that do not administer publ 3A.	lic housing are not required to co	omplete subcomponent
(1) Eligibility		
 a. When does the PHA verify eligibility that apply) When families are within a certanumber) When families are within a certanumber Other: (describe) When family in the certanumber 	ain number of being offered a	d a unit: (state
b. Which non-income (screening) factor admission to public housing (select a Criminal or Drug-related activity Rental history Housekeeping Other (describe)	all that apply)?	ablish eligibility for
enforcement age d. Yes No: Does the PHA requent forcement age e. Yes No: Does the PHA acc	encies for screening purpos ess FBI criminal records fr eses? (either directly or thro	ses? State law ses? om the FBI for
(2)Waiting List Organization		

Sub-jurisdictional lists Site-based waiting lists Other (describe)
 b. Where may interested persons apply for admission to public housing? PHA main administrative office PHA development site management office Other (list below) Various Local Service Agencies
c. If the PHA plans to operate one or more site-based waiting lists in the coming year, answer each of the following questions; if not, skip to subsection (3) Assignment
1. How many site-based waiting lists will the PHA operate in the coming year? TWO
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? ALL
 3. Yes No: May families be on more than one list simultaneously If yes, how many lists? ALL 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 or all available
b. Xes 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

	me targeting: s No: Does the PHA plan to exceed the federal targeting requirements by targeting more than 40% of all new admissions to public housing to families at or below 30% of median area income?
In what 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)
	ferences 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)
con	nich of the following admission preferences does the PHA plan to employ in the ming year? (select all that apply from either former Federal preferences or other ferences)
_	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 p	oreferences: (select below) Working families and those unable to work because of age or disability Veterans and veterans' families Residents who live and/or work in the jurisdiction Those enrolled currently in educational, training, or upward mobility programs Households that contribute to meeting income goals (broad range of incomes) Households that contribute to meeting income requirements (targeting)

	Those previously enrolled in educational, training, or upward mobility
	Programs Victims of reprisals or hate crimes Other preference(s) (list below)
the spa priority throug	the PHA will employ admissions preferences, please prioritize by placing a "1" in acceptant represents your first priority, a "2" in the box representing your second y, and so on. If you give equal weight to one or more of these choices (either than absolute hierarchy or through a point system), place the same number next in. That means you can use "1" more than once, "2" more than once, etc.
	Date and Time (As a tie breaker only)
Forme 1 2 2 1 2 2	r Federal preferences: Involuntary Displacement (Disaster, Government Action, Action of Housing Owner, Inaccessibility, Property Disposition) Victims of domestic violence Substandard housing Homelessness High rent burden
Other	Preferences (select all that apply) Working families and those unable to work because of age or disability Veterans and veterans' families Residents who live and/or work in the jurisdiction Those enrolled currently in educational, training, or upward mobility programs Households that contribute to meeting income goals (broad range of incomes) Households that contribute to meeting income requirements (targeting) Those previously enrolled in educational, training, or upward mobility programs Victims of reprisals or hate crimes Other preference(s) (list below)
4. Rel	ationship 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) Oc	<u>ecupancy</u>
	at reference materials can applicants and residents use to obtain information ut the rules of occupancy of public housing (select all that apply) The PHA-resident lease The PHA's Admissions and (Continued) Occupancy policy

Deconcentration Policy for Covered Developments			
Development Name:	Number of Units	Explanation (if any) [see step 5 at §903.2 (c)(1)(iv)]	Deconcentration policy (if no explanation) [see step 5 at §903.2©(1)(v)]
Scattered Sites 12-4	43	Over 115%	Included in Policy
Lexington	100	Over 115%	
Townhouses	25	Under 85%	

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) What is required by law.
b. Yes No: Does the PHA request criminal records from local law enforcement agencies for screening purposes?
e. Yes No: Does the PHA request criminal records from State law enforcement agencies for screening purposes?
d. Yes No: Does the PHA access FBI criminal records from the FBI for screening purposes? (either directly or through an NCIC-authorized source)
e. Indicate what kinds of information you share with prospective landlords? (select all that apply)
Criminal or drug-related activity Other (describe below) What is in compliance with regulations.
(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)
 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. X Yes No: Does the PHA give extensions on standard 60-day period to search for a unit?

If yes, state circumstances below: As an accommodation to disabled.

(4) Admissions Preferences a. Income targeting Yes No: Does the PHA plan to exceed the federal targeting requirements by targeting more than 75% of all new admissions to the section 8 program to families at or below 30% of median area income? b. Preferences 1. Yes No:Has the PHA established preferences for admission to section 8 tenant-based assistance? (other than date and time of application) (if no, skip to subcomponent (5) Special purpose section 8 assistance programs) 2. Which of the following admission preferences does the PHA plan to employ in the coming year? (select all that apply from either former Federal preferences or other preferences) Former Federal preferences Involuntary Displacement (Disaster, Government Action, Action of Housing Owner, Inaccessibility, Property Disposition) Victims of domestic violence Substandard housing Homelessness High rent burden (rent is > 50 percent of income) Other preferences (select all that apply) Working families and those unable to work because of age or disability Veterans and veterans' families Residents who live and/or work in your jurisdiction Those enrolled currently in educational, training, or upward mobility programs Households that contribute to meeting income goals (broad range of incomes) Households that contribute to meeting income requirements (targeting) Those previously enrolled in educational, training, or upward mobility programs Victims of reprisals or hate crimes

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

Other preference(s) (list below)

choices (either through an absolute hierarchy or through a point system), place the same number next to each. That means you can use "1" more than once, "2" more than once, etc.

Date and Time

_	
Forme	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)
	nong applicants on the waiting list with equal preference status, how are plicants selected? (select one) Date and time of application Drawing (lottery) or other random choice technique
	he PHA plans to employ preferences for "residents who live and/or work in the sdiction" (select one) This preference has previously been reviewed and approved by HUD The PHA requests approval for this preference through this PHA Plan
6. Rel □ ⊠	ationship of preferences to income targeting requirements: (select one) The PHA applies preferences within income tiers Not applicable: the pool of applicant families ensures that the PHA will meet income targeting requirements

(5) Special Purpose Section 8 Assistance Programs
 a. In which documents or other reference materials are the policies governing eligibility, selection, and admissions to any special-purpose section 8 program administered by the PHA contained? (select all that apply) The Section 8 Administrative Plan Briefing sessions and written materials Other (list below)
 b. How does the PHA announce the availability of any special-purpose section 8 programs to the public? Through published notices Other (list below)
4. PHA Rent Determination Policies [24 CFR Part 903.7 9 (d)]
A. Public Housing Exemptions: PHAs that do not administer public housing are not required to complete sub-componer 4A.
(1) Income Based Rent Policies
Describe the PHA's income based rent setting policy/ies for public housing using, including discretionary (that is, not required by statute or regulation) income disregards and exclusions, in the appropriate spaces below.
a. Use of discretionary policies: (select one)
The PHA will not employ any discretionary rent-setting policies for income based rent in public housing. Income-based rents are set at the higher of 30% of adjusted monthly income, 10% of unadjusted monthly income, the welfare rent, or minimum rent (less HUD mandatory deductions and exclusions). (If selected, skip to sub-component (2))
or

selected, continue to question b.)

The PHA employs discretionary policies for determining income based rent (If

b. Minimum Rent
1. What amount best reflects the PHA's minimum rent? (select one) \$0\$ \$1-\$25\$ \$26-\$50
2. Yes No: Has the PHA adopted any discretionary minimum rent hardship exemption policies?
3. If yes to question 2, list these policies below:
c. Rents set at less than 30% than adjusted income
1. Yes No: Does the PHA plan to charge rents at a fixed amount or percentage less than 30% of adjusted income?
2. If yes to above, list the amounts or percentages charged and the circumstances under which these will be used below:
 d. Which of the discretionary (optional) deductions and/or exclusions policies does the PHA plan to employ (select all that apply) For the earned income of a previously unemployed household member For increases in earned income Fixed amount (other than general rent-setting policy) If yes, state amount/s and circumstances below:
Fixed percentage (other than general rent-setting policy) If yes, state percentage/s and circumstances below:
For household heads For other family members For transportation expenses For the non-reimbursed medical expenses of non-disabled or non-elderly families Other (describe below)
e. Ceiling rents
1. Do you have ceiling rents? (rents set at a level lower than 30% of adjusted income) (select one)

	Yes for all developments
	Yes but only for some developments
	No
2. Fo	r 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)
	lect the space or spaces that best describe how you arrive at ceiling rents (select that apply)
	Market comparability study Fair market rents (FMR) 95 th 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
f Pan	Other (list below) t re-determinations:
1. Bet	ween income reexaminations, how often must tenants report changes in income family composition to the PHA such that the changes result in an adjustment to at? (select all that apply)
income	Never At family option Any time the family experiences an income increase Any time a family experiences an income increase above a threshold amount or percentage: (if selected, specify threshold) Oher (list below) anytime family composition changes families may report e changes anytime.
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

	setting the market-based flat rents, what sources of information did the PHA use 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. S	ection 8 Tenant-Based Assistance
Exempt comple the ten	tions: PHAs that do not administer Section 8 tenant-based assistance are not required to the sub-component 4B. Unless otherwise specified, all questions in this section apply only to ant-based section 8 assistance program (vouchers, and until completely merged into the r program, certificates).
	yment Standards
	the voucher payment standards and policies.
	- mar Paramara Parama
a. Wh standa	at is the PHA's payment standard? (select the category that best describes your rd)
	At or above 90% but below100% of FMR
	100% of FMR Above 100% but at or below 110% of FMR
	Above 100% but at of below 110% of FWR Above 110% of FMR (if HUD approved; describe circumstances below)
	he payment standard is lower than FMR, why has the PHA selected this ndard? (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)
	he payment standard is higher than FMR, why has the PHA chosen this level?
	ect all that apply) EMPs are not adequate to argue average arrang assisted families in the DIIA's
\boxtimes	FMRs are not adequate to ensure success among assisted families in the PHA's segment of the FMR area
	Reflects market or submarket
\boxtimes	To increase housing options for families
	Other (list below)

d. How often are payment Annually Other (list below)	nt standards reevaluated fo	r adequacy? (select one)	
e. What factors will the F standard? (select all the Success rates of as Rent burdens of as Other (list below)	aat apply) ssisted families	nent of the adequacy of its pa	ayment
(2) Minimum Rent			
 □ \$0 ⋈ \$1-\$25 □ \$26-\$50 b. □ Yes ⋈ No: Has the state of the state of	mption policies? (if yes, li	tionary minimum rent hardsl	hip
-	5: High performing and small P must complete parts A, B, and C	HAs are not required to complete	this
		(-)	
A. PHA Management S Describe the PHA's management			
(select one)	and organization.		
An organization c organization is att	hart showing the PHA's mached. File Name: IL012bn of the management struct	_	РНА
B. HUD Programs Unde	er PHA Management		
List Federal programs adn	ninistered by the PHA, number of expected turnover in each. (Use	of families served at the beginning e "NA" to indicate that the PHA do	
Program Name	Units or Families	Expected	
	Served at Year	Turnover	
	Beginning		
Public Housing	875	20%	
Section 8 Vouchers	943	20%	
Section 8 Certificates	0	N/A	

Section 8 Mod Rehab	0	N/A
Special Purpose Section		
8 Certificates/Vouchers	0	0
(list individually)		
Public Housing Drug		
Elimination Program	875	20%
(PHDEP)		
Other Federal		
Programs(list		
individually)		
Capital Fund Program	875	13.7
Elderly Services	328	10%
Coordinator		

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 and Continued Occupancy Policy

Blood Borne Disease Policy

Capital Inventory Policy

Check Signing Policy

Criminal Records Management Policy

Disposition Policy

Drug Free Policy

Equal Housing Opportunity Policy

Facilities Use Policy

Hazardous Materials Policy

Investment Policy

Maintenance Policy

Pest Control Policy

Procurement Policy

Public Housing Lease

(2) Section 8 Management: (list below)

Section 8 Administrative Plan

6. PHA Grievance Procedures

[24 CFR Part 903.7 9 (f)]

E C C III 1 C C DIIA
Exemptions from component 6: High performing PHAs are not required to complete component 6. Section 8-Only PHAs are exempt from sub-component 6A.
A. Public Housing 1. Yes No: Has the PHA established any written grievance procedures in addition to federal requirements found at 24 CFR Part 966, Subpart B, for residents of public housing? If yes, list additions to federal requirements below:
 2. Which PHA office should residents or applicants to public housing contact to initiate the PHA grievance process? (select all that apply) PHA main administrative office PHA development management offices Other (list below)
B. Section 8 Tenant-Based Assistance 1. Yes No: Has the PHA established informal review procedures for applicants to the Section 8 tenant-based assistance program and informal hearing procedures for families assisted by the Section 8 tenant-based assistance program in addition to federal requirements found at 24 CFR 982?
If yes, list additions to federal requirements below:
 2. Which PHA office should applicants or assisted families contact to initiate the informal review and informal hearing processes? (select all that apply) PHA main administrative office Other (list below)
7. Capital Improvement Needs [24 CFR Part 903.7 9 (g)] Exemptions from Component 7: Section 8 only PHAs are not required to complete this component and
may skip to Component 8.
A. Capital Fund Activities Exemptions from sub-component 7A: PHAs that will not participate in the Capital Fund Program may skip to component 7B. All other PHAs must complete 7A as instructed.
(1) Capital Fund Program Annual Statement Using parts I, II, and III of the Annual Statement for the Capital Fund Program (CFP), identify capital activities the PHA is proposing for the upcoming year to ensure long-term physical and social viability of its public housing developments. This statement can be completed by using the CFP Annual Statement tables provided in the table library at the end of the PHA Plan template OR, at the PHA's

option, by completing and attaching a properly updated HUD-52837.

Select one:	
The Capital Fund Program Annual Statement is provided as an attachment to the PHA Plan at Attachment (state name) il012a02	
-or-	
The Capital Fund Program Annual Statement is provided below: (if selected, copy the CFP Annual Statement from the Table Library and insert here)	
(2) Optional 5-Year Action Plan	
Agencies are encouraged to include a 5-Year Action Plan covering capital work items. This statement can be completed by using the 5 Year Action Plan table provided in the table library at the end of the PHA Plan template OR by completing and attaching a properly updated HUD-52834.	
a. X Yes No: Is the PHA providing an optional 5-Year Action Plan for the Capital Fund? (if no, skip to sub-component 7B)	
 b. If yes to question a, select one: The Capital Fund Program 5-Year Action Plan is provided as an attachment to the PHA Plan at Attachment (state name) il012a02 -or- 	0
The Capital Fund Program 5-Year Action Plan is provided below: (if selected copy the CFP optional 5 Year Action Plan from the Table Library and insert here)	1,
B. HOPE VI and Public Housing Development and Replacement Activities (Non-Capital Fund)	
Applicability of sub-component 7B: All PHAs administering public housing. Identify any approved HOPE VI and/or public housing development or replacement activities not described in the Capital Fu Program Annual Statement.	nd
Yes No: a) Has the PHA received a HOPE VI revitalization grant? (if no, skip to question c; if yes, provide responses to question b for each grant, copying and completing as many times as necessar b) Status of HOPE VI revitalization grant (complete one set of questions for each grant)	y)
 Development name: Longview Place Development (project) number: IL012-01 	

3. Stati	us of grant: (select the statement that best describes the current	
stati		
	Revitalization Plan under development	
	Revitalization Plan submitted, pending approval	
	Revitalization Plan approved	
	Activities pursuant to an approved Revitalization Plan	
	underway	
Yes No: c)	Does the PHA plan to apply for a HOPE VI Revitalization grant	
	in the Plan year?	
	If yes, list development name/s below:	
\boxtimes Yes \square No: d)	Will the PHA be engaging in any mixed-finance development	
	activities for public housing in the Plan year?	
	If yes, list developments or activities below:	
	Longview Place Hope VI Affordable Housing	
\boxtimes Yes \bigsqcup 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:	
HOPE VI will utilize mixed finance to create 449 units of housing, up to 292 Public		
	Housing and up to 157 Homeownership	
8. <u>Demolition and Disposition</u>		
[24 CFR Part 903.7 9 (h)]		
Applicability of componer	nt 8: Section 8 only PHAs are not required to complete this section.	
1 V V - 1 N - 1	Describe DITA when the second section of the second	
1. Yes I No:	Does the PHA plan to conduct any demolition or disposition	
	activities (pursuant to section 18 of the U.S. Housing Act of	
	1937 (42 U.S.C. 1437p)) in the plan Fiscal Year? (If "No",	
	skip to component 9; if "yes", complete one activity description	
	for each development.)	
2 Antivity Denomination	_	
2. Activity Description		
Yes No:	Has the PHA provided the activities description information in	
	the optional Public Housing Asset Management Table? (If	
	"yes", skip to component 9. If "No", complete the Activity	
	Description table below.)	
	Description dole below.)	
	Demolition/Disposition Activity Description	

1b. Development (project) number: 2. Activity type: Demolition Disposition Disposition
<i>, ,</i> ,
Disposition
3. Application status (select one)
Approved
Submitted, pending approval
Planned application
4. Date application approved, submitted, or planned for submission: (DD/MM/YY) 5. Number of units affected:
6. Coverage of action (select one)
Part of the development
Total development
7. Timeline for activity:
a. Actual or projected start date of activity:
b. Projected end date of activity:
9. Designation of Public Housing for Occupancy by Elderly Families
or Families with Disabilities or Elderly Families and Families with
Disabilities
[24 CFR Part 903.7 9 (i)]
Exemptions from Component 9; Section 8 only PHAs are not required to complete this section.
1. Yes No: Has the PHA designated or applied for approval to designate or
does the PHA plan to apply to designate any public housing for
occupancy only by the elderly families or only by families with
disabilities, or by elderly families and families with disabilities
or will apply for designation for occupancy by only elderly
families or only families with disabilities, or by elderly families
and families with disabilities as provided by section 7 of the
U.S. Housing Act of 1937 (42 U.S.C. 1437e) in the upcoming
fiscal year? (If "No", skip to component 10. If "yes", complete
one activity description for each development, unless the PHA is
eligible to complete a streamlined submission; PHAs completing streamlined submissions may skip to component
10.)
10.)
2. Activity Description
Yes No: Has the PHA provided all required activity description
information for this component in the optional Public Housing
Asset Management Table? If "yes", skip to component 10. If
"No", complete the Activity Description table below.

Designation of Public Housing Activity Description			
1a. Development name:			
1b. Development (pro	ject) number:		
2. Designation type:	_		
	only the elderly		
1 0	families with disabilities		
	only elderly families and families with disabilities		
3. Application status	·		
	luded in the PHA's Designation Plan		
	nding approval 🔲		
Planned applic	cation		
4. Date this designati	on approved, submitted, or planned for submission: (DD/MM/YY)		
5. If approved, will the	nis designation constitute a (select one)		
New Designation	Plan		
	viously-approved Designation Plan?		
6. Number of units a	ffected:		
7. Coverage of action	n (select one)		
Part of the develo	pment		
Total developmen	nt		
10. Conversion of Public Housing to Tenant-Based Assistance [24 CFR Part 903.7 9 (j)] Exemptions from Component 10; Section 8 only PHAs are not required to complete this section.			
A. Assessments of Reasonable Revitalization Pursuant to section 202 of the HUD FY 1996 HUD Appropriations Act			
1. ☐ Yes ⊠ No:	Have any of the PHA's developments or portions of developments been identified by HUD or the PHA as covered under section 202 of the HUD FY 1996 HUD Appropriations Act? (If "No", skip to component 11; if "yes", complete one activity description for each identified development, unless eligible to complete a streamlined submission. PHAs completing streamlined submissions may skip to component 11.)		
2. Activity Description Yes No:	Has the PHA provided all required activity description information for this component in the optional Public Housing Asset Management Table? If "yes", skip to component 11. If "No", complete the Activity Description table below.		

Conversion of Public Housing Activity Description		
1a. Development name:		
1b. Development (project) number: N/A		
2. What is the status of the required assessment?		
Asessment underway Assessment results submitted to HUD		
Assessment results approved by HUD (if marked, proceed to next		
question)		
Other (explain below)		
Other (explain below)		
3. Yes 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)		
Conversion Plan in development		
Conversion Plan submitted to HUD on: (DD/MM/YYYY)		
Conversion Plan approved by HUD on: (DD/MM/YYYY)		
Activities pursuant to HUD-approved Conversion Plan underway		
5. Description of how requirements of Section 202 are being satisfied by means other than conversion (select one) Units addressed in a pending or approved demolition application (date submitted or approved: Units addressed in a pending or approved HOPE VI demolition application (date submitted or approved: Units addressed in a pending or approved HOPE VI Revitalization Plan (date submitted or approved: Requirements no longer applicable: vacancy rates are less than 10 percent Requirements no longer applicable: site has less than 300 units Other: (describe below) No site other that the Hope VI site has over 300 units		
B. Reserved for Conversions pursuant to Section 22 of the U.S. Housing Act of		
1937		
C. Reserved for Conversions pursuant to Section 33 of the U.S. Housing Act of 1937		
11. Homeownership Programs Administered by the PHA		

[24 CFR Part 903.7 9 (k)]

- 1. Plan 30 Public housing homeownership—HOPE VI
- 2. Plan up to 123 homeownership in HOPE VI

A. Public Housing					
Exemptions from Compo	Exemptions from Component 11A: Section 8 only PHAs are not required to complete 11A.				
1. ☐ Yes ⊠ No:	Does the PHA administer any homeownership programs administered by the PHA under an approved section 5(h) homeownership program (42 U.S.C. 1437c(h)), or an approved HOPE I program (42 U.S.C. 1437aaa) or has the PHA applied or plan to apply to administer any homeownership programs under section 5(h), the HOPE I program, or section 32 of the U.S. Housing Act of 1937 (42 U.S.C. 1437z-4). (If "No", skip to component 11B; if "yes", complete one activity description for each applicable program/plan, unless eligible to complete a streamlined submission due to small PHA or high performing PHA status. PHAs completing streamlined submissions may skip to component 11B.)				
2. Activity Description Yes No:	Has the PHA provided all required activity description information for this component in the optional Public Housing Asset Management Table? (If "yes", skip to component 12. If "No", complete the Activity Description table below.)				
Public Housing Homeownership Activity Description (Complete one for each development affected)					
1a. Development nam	ne: Longview Place				
1b. Development (pro	oject) number: IL06-P012-001				
2. Federal Program authority: HOPE I 5(h) Turnkey III Section 32 of the USHA of 1937 (effective 10/1/99)					
3. Application status:					
Approved Submitted	l; included in the PHA's Homeownership Plan/Program d, pending approval application				
4. Date Homeownership Plan/Program approved, submitted, or planned for submission:					
(01/10/2001)					
5. Number of units a	affected: Being Determined				

6. Coverage of action	n: (select one)		
Part of the development			
Total developme	nt		
B. Section 8 Tena	ant 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 Descripti	on:		
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			
it	eligibility criteria I the PHA's program have eligibility criteria for participation in s Section 8 Homeownership Option program in addition to HUD riteria? Tyes, list criteria below:		
12. PHA Commu [24 CFR Part 903.7 9 (1)]	nity Service and Self-sufficiency Programs		
	nent 12: High performing and small PHAs are not required to complete this nly PHAs are not required to complete sub-component C.		
A. PHA Coordinati	on with the Welfare (TANF) Agency		
Yes No: Has	ments: (Through Family Investment Project) the PHA has entered into a cooperative agreement with the ANF Agency, to share information and/or target supportive		

services (as contemplated by section 12(d)(7) of the Housing Act of 1937)? Through Family Investment Project

If yes, what was the date that agreement was signed? 15/10/95

	her coordination efforts between the PHA and TANF agency (select all that
	oply)
\boxtimes	Client referrals Information sharing regarding mutual clients (for rant determinations and
	Information sharing regarding mutual clients (for rent determinations and otherwise)
	Coordinate the provision of specific social and self-sufficiency services and
	programs to eligible families
	Jointly administer programs
	Partner to administer a HUD Welfare-to-Work voucher program
	Joint administration of other demonstration program
	Other (describe) Hope VI Grant to move residents from welfare to self
suffici	iency.
B. Se	ervices 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
	Section 8 admissions policies Preference in admission to section 8 for certain public housing families
	Section 8 admissions policies Preference in admission to section 8 for certain public housing families Preferences for families working or engaging in training or education
	programs for non-housing programs operated or coordinated by the
	PHA
	Preference/eligibility for public housing homeownership option
	participation
	Preference/eligibility for section 8 homeownership option participation
	Other policies (list below)
	b. Economic and Social self-sufficiency programs
	Yes No: Does the PHA coordinate, promote or provide any
	programs to enhance the economic and social self-
	sufficiency of residents? (If "yes", complete the following

table; if "no" skip to sub-component 2, Family Self Sufficiency Programs. The position of the table may be altered to facilitate its use.)

	Serv	vices and Progra	ms	
Program Name & Description (including location, if appropriate)	Estimated Size	Allocation Method (waiting list/random selection/specific criteria/other)	Access (development office / PHA main office / other provider name)	Eligibility (public housing or section 8 participants or both)
Family Investment Project	50	Self Selection	PHA Main Office and Decatur Community Partnership Office	Public Housing
Remco/Family Council	458	Automatic	Longview Place	Public Housing
NAACP	35	Self Selection	Longview Place	Public Housing
DHA Hireback Security Program	2400	Automatic	All Developments	Public Housing
Community Health Improvement Center	250	Application	Families	Public & Sect. 8
Consumer Credit Counseling	15	Application	All Residents	Public & Sect. 8
Heritage Behavioral Health Center	200	Application	All Residents	Public & Sect. 8
WIS	50	Application	Youth & Adults	Public & Sect. 8
Macon County Health Department	150	Register	All Residents	Public & Sect. 8
EFNEP	60	Register	Longview Place	Public
Self- Start Daycare	30	Application	Community Residents	Public & Sect. 8
Longview Day Care	55	Application	Community Residents	Public & Sect. 8
Decatur Park District	250	Register	Youth	Public
Girl Scouts	18	Register	Longview Place	Public
Boys & Girl's Club of Decatur	65	Register	Longview Place	Public
Richland Community College	48	Application	Community Residents	Public & Sect. 8
Macon Resources	12	Application	Community Residents	Public & Sect. 8
New Life Pregnancy Center	30	Application	Community Residents	Public & Sect. 8
Planned Parenthood	125	Application	Community Residents	Public & Sect. 8
Salvation Army	220	Referral	Community Residents	Public & Sect. 8
St. John's Community Fund	40	Referral	Community Residents	Public & Sect. 8
Visiting Nurse Association	65	Application	Community Residents	Public & Sect. 8
YMCA	10	Membership	Community Residents	Public & Sect. 8
NWRAPS	6	Selection	Community Residents	Public & Sect. 8
Neighborhood Housing Development Corporation	8	Selection	Community Residents	Public & Sect. 8
Habitat for Humanity	6	Selection	Community Residents	Public & Sect. 8
Growing Strong Sexual Assault Center	18	Register	Community Residents	Public & Sect. 8
DOVE	32	Application	Community Residents	Public & Sect. 8

(2) Family Self Sufficiency program/s

a.	Partici	pation	Descri	ption

a. Participation Descripti	on		
	Family Self Sufficiency (FSS) Participa	ation	
Program	Required Number of Participants	Actual Number of Participants	
	(start of FY 2000 Estimate)	(As of: DD/MM/YY)	
Public Housing			
Continue 0			
Section 8			
* Voluntary local self-suf	iciency program	I .	
	ne PHA is not maintaining the mir	nimum program size	
	aired by HUD, does the most rece		
	steps the PHA plans to take to ach		
	<u> </u>	neve at least the minimum	
<u> </u>	gram size?		
II 1	o, list steps the PHA will take belo	OW:	
C. Welfare Benefit Reductions			
1. The PHA is complying	with the statutory requirements o	f section 12(d) of the U.S.	
Housing Act of 1937 (elating to the treatment of income	changes resulting from	
	ements) by: (select all that apply)		
Adopting appropriate changes to the PHA's public housing rent determination			
	taff to carry out those policies	8 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
	s of new policy on admission and	reexamination	
	residents of new policy at times in		
reexamination.	residents of new poney at times in	ruddition to udinission and	
	cuina a aconorativo agraement vi	th all appropriate TANE	
	rsuing a cooperative agreement wi		
	the exchange of information and		
	ocol for exchange of information	with all appropriate I ANF	
agencies			
Other: (list below			

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

13. PHA Safety and Crime Prevention Measures

[24 CFR Part 903.7 9 (m)]

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

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 \boxtimes High incidence of violent and/or drug-related crime in the areas surrounding or adjacent to the PHA's developments Residents fearful for their safety and/or the safety of their children Observed lower-level crime, vandalism and/or graffiti People on waiting list unwilling to move into one or more developments due to perceived and/or actual levels of violent and/or drug-related crime Other (describe below) 2. What information or data did the PHA used to determine the need for PHA actions to improve safety of residents (select all that apply). Safety and security survey of residents Analysis of crime statistics over time for crimes committed "in and around" public housing authority Analysis of cost trends over time for repair of vandalism and removal of graffiti Resident reports PHA employee reports Police reports Demonstrable, quantifiable success with previous or ongoing anticrime/anti drug programs Other (describe below) 3. Which developments are most affected? (list below) Longview Place Lexington Concord Townhouses Hartford Garden Apartments B. Crime and Drug Prevention activities the PHA has undertaken or plans to undertake in the next PHA fiscal year 1. List the crime prevention activities the PHA has undertaken or plans to undertake: (select all that apply) \boxtimes 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

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

Other (describe below)
2. Which developments are most affected? (list below) Same as Above
C. Coordination between PHA and the police
1. Describe the coordination between the PHA and the appropriate police precincts for carrying out crime prevention measures and activities: (select all that apply)
 ☑ Police involvement in development, implementation, and/or ongoing evaluation of drug-elimination plan ☑ Police provide crime data to housing authority staff for analysis and action ☑ Police have established a physical presence on housing authority property (e.g., community policing office, officer in residence) ☐ Police regularly testify in and otherwise support eviction cases ☑ Police regularly meet with the PHA management and residents ☐ Agreement between PHA and local law enforcement agency for provision of above-baseline law enforcement services ☐ Other activities (list below) 2. Which developments are most affected? (list below) 12-1, 12-2, 12-3, 12-4, 12-5, 12-6, 12-7, 12-8, 12-9, and 12-10
D. Additional information as required by PHDEP/PHDEP Plan
PHAs eligible for FY 2000 PHDEP funds must provide a PHDEP Plan meeting specified requirements prior to receipt of PHDEP funds.
 ✓ Yes ☐ No: Is the PHA eligible to participate in the PHDEP in the fiscal year covered by this PHA Plan? ✓ Yes ☐ No: Has the PHA included the PHDEP Plan for FY 2002 in this PHA Plan? ✓ Yes ☐ No: This PHDEP Plan is an Attachment. (Filename: IL012c02)
14. RESERVED FOR PET POLICY
[24 CFR Part 903.7 9 (n)]
15. Civil Rights Certifications [24 CFR Part 903.7 9 (o)]
Civil rights certifications are included in the PHA Plan Certifications of Compliance with the PHA Plans and Related Regulations.
16. Fiscal Audit

[24 CFR Part 903.7 9 (p)]

1. Yes No: Is the PHA required to have an audit conducted under section 5(h)(2) of the U.S. Housing Act of 1937 (42 U S.C. 1437c(h))? (If no, skip to component 17.)
2. Yes No: Was the most recent fiscal audit submitted to HUD?
3. Yes No: Were there any findings as the result of that audit?
4. Yes No: If there were any findings, do any remain unresolved?
If yes, how many unresolved findings remain?
5. Yes No: Have responses to any unresolved findings been submitted to HUD?
If not, when are they due (state below)?
17. PHA Asset Management [24 CFR Part 903.7 9 (q)]
[24 CFK Fait 903.7 9 (q)]
Exemptions from component 17: Section 8 Only PHAs are not required to complete this component. High performing and small PHAs are not required to complete this component.
1. Yes No: Is the PHA engaging in any activities that will contribute to the long-term asset management of its public housing stock, including how the Agency will plan for long-term operating, capital investment, rehabilitation, modernization, disposition, and other needs that have not been addressed elsewhere in this PHA Plan?
2. What types of asset management activities will the PHA undertake? (select all that apply)
Not applicable
Private management
Development-based accounting
Comprehensive stock assessment
Other: (list below)
3. Yes No: Has the PHA included descriptions of asset management activities in the optional Public Housing Asset Management Table?
18. Other Information [24 CFR Part 903.7 9 (r)]
A. Resident Advisory Board Recommendations
1. Xes No: Did the PHA receive any comments on the PHA Plan from the Resident Advisory Board/s?

2. If y □	*	s are: (if comments were received, the PHA MUST select one) achment (File name: IL012c02):			
3. In v ⊠	necessary.				
	Other: (list below)				
B. De	escription of Elec	ction 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 subcomponent C.)			
3. Des	scription of Resid	lent Election Process			
a. Non	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. Eliş	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: Decatur, Illinois
- 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)
 - 1. Hope VI for Longview Place
 - 2. 300 Additional Vouchers
- Other: (list below)

Hope VI/ Near North Redevelopment is a joint venture of the City of Decatur and Decatur Housing Authority.

- 3. The Consolidated Plan of the jurisdiction supports the PHA Plan with the following actions and commitments: (describe below)
 - 1. Longview Place HOPE VI demolition, new construction.
 - 2. 300 section 8 Certificates for Hope VI displacees.
 - 3. Designated Housing
 - 4. Affordable Home Ownerhship
 - 5. Fair Housing

D. Other Information Required by HUD

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

Definition of Significant Amendment and Substantial Deviation/Modification:

- Changes to rent or admissions policies or organization of the waiting list;
- Additions of non-emergency work items (items not included in the current Annual Statement or Five Year Action Plan) or change in the use of replacement reserve funds under the Capital Fund.
- Any change with regard to demolition or disposition, designation, homeownership programs or conversion activities.

Attachments

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

The following list is attachments that are included with this transmission:

```
il012a02 CFP Annual Statement/Five Year Action Plan
il012b02 Organizational Chart
il012c02 Resident Comments
il012d02 Community Service
il012e02 Resident Advisory Board
il012f02 Pet Policy
il012g02 Pet Policy Part II
il012h02 Decatur Housing Authority Project Based Section 8 Plan Supplement
il012i02 Capital Fund Prog. IL06P01250100 Annual P & E Report
il012j02 Capital Fund Prog. IL06P01250101 Annual P & E Report
il012k02 Capital Fund Prog. IL06P01250102 Annual P & E Report
```

The following PHA Plan Supporting Documents are available for inspection at the Main Office of the Decatur Housing Authority

Admissions and Continued Occupancy Policy
Section 8 Administrative Plan
Blood Borne Disease Policy
Capital Inventory Policy
Check Signing Policy
Criminal Records Management Policy
Disposition Policy
Drug Free Policy
Equal Housing Opportunity Policy
Facilities Use Policy
Hazardous Materials Policy

Hazardous Materials Policy

Investment Policy Maintenance Policy

Pest Control Policy

Pet Policy

Procurement Policy

Public Housing Lease

PHA Plan Table Library

Optional Public Housing Asset Management Table

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

		Public Hou	sing Asset M	I anagement				
	lopment ification		Activ	ity Description	n			
Name, Number, and Location	Number and Type of units	Capital Fund Program Parts II and III Component 7a	Development Activities Component 7b	Demolition / disposition Component 8	Designated housing Component 9	Conversion Component 10	Home- ownership Component 11a	Other (describe) Component 17
IL012-01	386-Row		Hope VI 449 units	386 Units	N/A	N/A	30 units	N/A
IL012-02	120 unit Highrise	See Capital Fund 5-Year Plan and Annual Plan Attachments	N/A	N/A				Congregate Care
IL012-03	58 unit Highrise	See Capital Fund 5-Year Plan and Annual Plan Attachments	N/A	N/A	58	N/A	N/A	
IL012- 04,5,6,7	Houses & Duplexes	See Capital Fund 5-Year Plan and Annual Plan Attachments	N/A	5 units				
IL012-09	175 Highrise, Garden Apts., Townhomes	See Capital Fund 5-Year Plan and Annual Plan Attachments	N/A	N/A	100	N/A	N/A	N/A
Hope VI	449 Single Family		449	N/A	24 Elderly 24 MI/DD	N/A	157	N/A

CAPITAL FUND PROGRAM TABLES START HERE Attachment: Il012a02

Ann	ual Statement/Performance and Evalua	ation Report			
Cap	ital Fund Program and Capital Fund P	rogram Replacement 1	Housing Factor ((CFP/CFPRHF) P	art I: Summary
	Name: Decatur Housing Authority	Grant Type and Number		· · · · · ·	Federal FY of Grant:
		Capital Fund Program Grant No: (CFP IL06P01250103		2003
		Replacement Housing Factor Gran			
	iginal Annual Statement \square Reserve for Disasters/ Eme)	
	formance and Evaluation Report for Period Ending:	Final Performance and			
Line	Summary by Development Account	Total Estimate	ed Cost	Total	Actual Cost
No.				0111	
	The state of the s	Original	Revised	Obligated	Expended
1	Total non-CFP Funds	\$0.00			
2	1406 Operations	\$272,277.00			
3	1408 Management Improvements	\$105,000.00			
4	1410 Administration	\$136,100.00			
5	1411 Audit	\$0.00			
6	1415 Liquidated Damages	\$0.00			
7	1430 Fees and Costs	\$25,000.00			
8	1440 Site Acquisition	\$0.00			
9	1450 Site Improvement	\$0.00			
10	1460 Dwelling Structures	\$45,000.00			
11	1465.1 Dwelling Equipment—Nonexpendable	\$22,500.00			
12	1470 Nondwelling Structures	\$0.00			
13	1475 Nondwelling Equipment	\$76,000.00			
14	1485 Demolition	\$0.00			
15	1490 Replacement Reserve	\$0.00			
16	1492 Moving to Work Demonstration	\$0.00			
17	1495.1 Relocation Costs	\$0.00			
18	1499 Development Activities	\$679,511.00			
19	1501 Collaterization or Debt Service	\$0.00			
20	1502 Contingency	\$0.00			
21	Amount of Annual Grant: (sum of lines 2 – 20)	\$1361,388.00			
22	Amount of line 21 Related to LBP Activities	\$0.00			
23	Amount of line 21 Related to Section 504 compliance	\$2,500.00			
24	Amount of line 21 Related to Security – Soft Costs	\$70,000.00			
25	Amount of Line 21 Related to Security – Hard Costs	\$0.00			
26	Amount of line 21 Related to Energy Conservation Measures	\$0.00			

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

Part II: Supporting Pages

PHA Name:		Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant No:				Federal FY of Grant:		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity		Estimated Cost T		Total Actual Cost	
				Original	Revised	Funds Obligated	Funds Expended	
12-1 Longview	Replacement Development	1499		\$679,511.00				
	a. Construct Units to Replace Those lost Thru HOPE VI Demolition			\$679,511.00				
12-6 Scattered Sites	Dwelling Structures	1460		\$10,000.00				
	a. Replace Roofs		6 Dus	\$10,000.00				
12-9 Garden Apartments	Dwelling Structures	1460		\$35,000.00				
-	a. Install Security Storm Doors		50 DUs	\$35,000.00				
PHA Wide	Operating Budget	1406		\$272,277.00				
	a. Operating Subsidy			\$272,277.00				
	Management Improvements	1408		\$105,000.00				
	a. Security			\$70,000.00				
	b. Software Improvements			\$20,000.00				
	c. Management Training			\$15,000.00				
	Dwelling Structures	1460		\$17,500.00				
	a. Accessibility Improvements			\$2,500.00				
	b. Replace Carpeting			\$15,000.00				
	Dwelling Equipment	1465.1		\$5,000.00				
	a. A/C Units			\$2,500.00				
	b. Replace Appliances			\$2,500.00				

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

PHA Name:		Grant Type and N Capital Fund Prog Replacement Hou	gram Grant No:	Federal FY of Grant:				
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 (Cont)	Non-Dwelling Equipment	1475		\$76,000.00				
	a. Replace Radios			\$3,000.00				
	b. Replace Misc. Tools			\$3,000.00				
	c. Computer Equipment			\$32,000.00				
	d. Replace Vehicles			\$35,000.00				
	e. Safety Equipment/Systems			\$3,000.00				
	Administration	1410		\$136,100.00				
	a. Technical Salaries			\$91,750.00				
	b. Employee Benefits			\$36,700.00				
	c. Travel & Training			\$6,000.00				
	1. CFP Training			\$5,000.00				
	2. Fuel for Inspections			\$1,000.00				
	d. Printing/Advertising			\$1,650.00				
	Fees & Costs	1430		\$25,000.00				
	a. Misc. A/E			\$25,000.00				

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

PHA Name: Decatur House	sing Authority	Grant	Type and Nur	nber			Federal FY of Grant:	
Capital Fund Program No: CFP IL06P01250103						2003		
	T	Repla	cement Housin	ng Factor No:				
Development Number	All	Fund Obligate	ed	A	ll Funds Expended	l	Reasons for Revised Target Dates	
Name/HA-Wide	(Quai	rter Ending Da	ate)	(Q	uarter Ending Date	e)		
Activities			Г		Т	1		
	Original	Revised	Actual	Original	Revised	Actual		
12-1 Longview	6/30/2005			6/30/2006				
12-6 Scattered Sites	6/30/2005			6/30/2006				
12-9 Garden Apartments	6/30/2005			6/30/2006				
PHA Wide	6/30/2005			6/30/2006				

Capital Fund Program Five-Year Action Plan

Part I: Summary

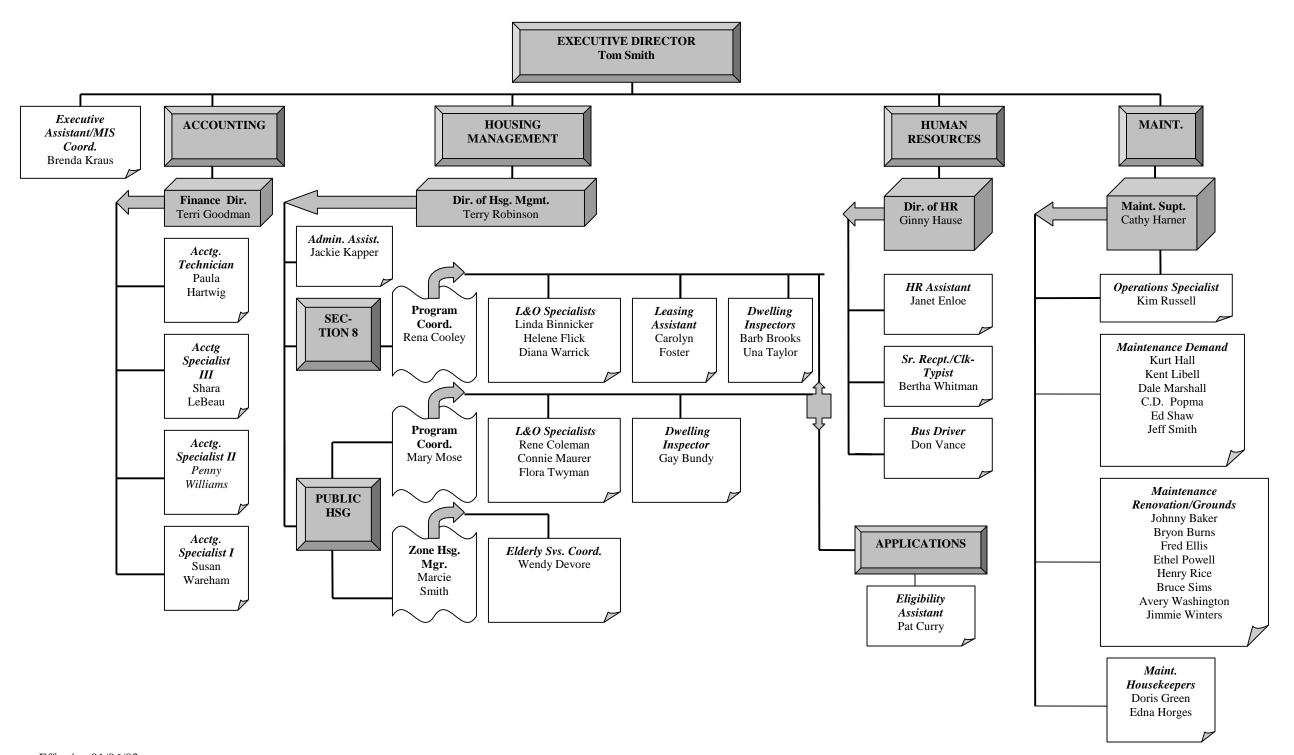
PHA Name				⊠Original 5-Year Plan □ Revision No:	
Development Number/Name/HA-Wide	Year 1	Work Statement for Year 2 FFY Grant: 2004 PHA FY: 2004	Work Statement for Year 3 FFY Grant: 2005 PHA FY: 2005	Work Statement for Year 4 FFY Grant: 2006 PHA FY: 2006	Work Statement for Year 5 FFY Grant: 2007 PHA FY: 2007
IL06-P012-001 Longview	Annual Statement	\$0.00	\$0.00	\$0.00	\$0.00
IL06-P012-002 Concord		\$202,011.00	\$211,011.00	\$0.00	\$0.00
IL06-P012-003 Hartford		\$0.00	\$0.00	\$0.00	\$0.00
IL06-P012-004 Scattered Sites		\$0.00	\$0.00	\$0.00	\$0.00
IL06-P012-005 Scattered Sites		\$0.00	\$0.00	\$0.00	\$20,000.00
IL06-P012-006 Scattered Sites		\$0.00	\$0.00	\$0.00	\$0.00
IL06-P012-007 Scattered Sites		\$0.00	\$0.00	\$0.00	\$0.00
IL06-P012-009 Mixed		\$0.00	\$0.00	\$108,500.00	\$183,011.00
Lexington		\$0.00	\$0.00	\$0.00	\$0.00
Garden Apartments		\$0.00	\$0.00	\$42,500.00	\$0.00
Townhomes		\$0.00	\$0.00	\$66,000.00	\$183.011.00
PHA Wide					
Management Improvements		\$120,000.00	\$120,000.00	\$120,000.00	\$120,000.00
HA –Wide Non-Dwelling Structures and Equip.		\$81,000.00	\$72,000.00	\$75,000.00	\$80,000.00
Administration		\$136,100.00	\$136,100.00	\$136,100.00	\$136,100.00
Other		\$50,000.00	\$50,000.00	\$50,000.00	\$50,000.00
Operations		\$272,277.00	\$272,277.00	\$272,277.00	\$272,277.00
Demolition		\$0.00	\$0.00	\$0.00	\$0.00
Replacement Reserve		\$0.00	\$0.00	\$0.00	\$0.00
Mod Used for Development		\$500,000.00	\$500,000.00	\$500,000.00	\$500,000.00
CFP Funds Listed for 5-year planning		\$1,361,388.00	\$1,361,388.00	\$1,361,388.00	\$1,361,388.00
Replacement Housing Factor Funds		\$0.00	\$0.00	\$0.00	\$0.00

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

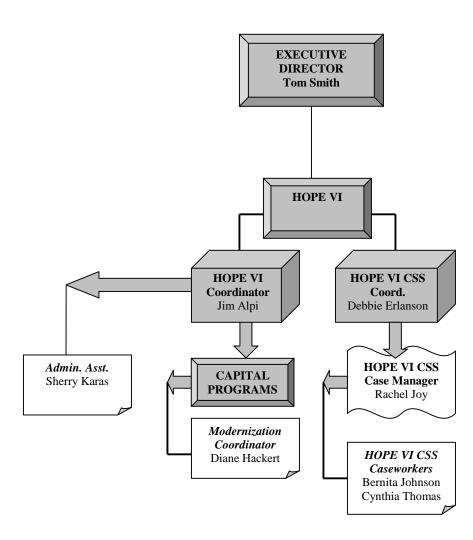
Activities	The Same	Activities for Year :2			Activities for Year: 3 FFY Grant: 2005	
for Year 1		FFY Grant: 2004 PHA FY: 2004		PHA FY: 2005		
	Development Name/Number	Major Work Categories	Estimated Cost	Development Name/Number	Major Work Categories	Estimated Cost
See	12-1 Longview	New Construction	\$500,000.00	12-1 Longview	New Construction	\$500,000.00
Annual	12-2 Concord	Replace Windows	\$202,011.00	12-2 Concord	Replace Windows	\$211,011.00
Statement						
	PHA Wide	Operating Subsidy	\$272,277.00	PHA Wide	Operating Subsidy	\$272,277.00
		Accessibility Improvements	\$5,000.00		Accessibility Improvements	\$5,000.00
		Replace Floor Coverings	\$5,000.00		Replace Floor Coverings	\$3,000.00
		Replace Appliances	\$4,000.00		Replace Appliances	\$3,000.00
		Replace Window A/C Units	\$5,000.00		Replace Window A/C Units	\$3,000.00
		Replace Radios	\$6,000.00		Replace Radios	\$3,000.00
		Replace Misc. Tools	\$6,000.00		Replace Misc. Tools	\$10,000.00
		Computer Equipment	\$22,000.00		Computer Equipment	\$22,000.00
		Replace Vehicles	\$25,000.00		Replace Vehicles	\$20,000.00
		Safety Equipment/Systems	\$3,000.00		Safety Equipment/Systems	\$3,000.00
	Fees & Costs	A/E for Comp. Modernization	\$30,000.00	Fees & Costs	A/E for Comp. Modernization	\$30,000.00
		Misc. A./E	\$20,000.00		Misc. A/E	\$20,000.00
		Total CFP Estimated Cost	\$1,105,288.00			\$1,105,288.00

Capital Fund Program Five-Year Action Plan Part II. Sunnorting Pages—Work Activities

Fart II: Supporting	ng Pages—Work Activi	lues					
	Activities for Year : 4		Activities for Year: 5 FFY Grant:				
	FFY Grant: PHA FY:						
		Estimated Cost	Donalommont	PHA FY:	Estimated Cost		
Development Name/Number	Major Work Categories	Estimated Cost	Development Name/Number	Major Work Categories	Estimated Cost		
12-1 Longview	New Construction	\$500,000.00	12-1 Longview	New Construction	\$500,000.00		
(Replacement Housing)			(Replacement Housing)				
12-4B Davis Center	Re-Pave Parking	\$99,511.00	12-5 Scattered Sites	Replace Storage Room Doors	\$20,000.00		
12-9 Garden Apartments	Replace Dumpster Enclosures	\$30,000.00	12-10 Townhomes	Remodel Kitchen, Baths, Floors	\$183,011.00		
	Install Ducted Range Hoods	\$12,500.00					
			PHA Wide	Operating Subsidy	\$272,277.00		
12-10 Townhomes	Parking Lot Overlay	\$66,000.00		Accessibility Improvements	\$3,000.00		
				Replace Floor Coverings	\$3,000.00		
PHA Wide	Operating Subsidy	\$272,277.00		Replace Appliances	\$3,000.00		
	Accessibility Improvements	\$3,000.00		Replace A/C Units	\$3,000.00		
	Replace Floor Coverings	\$3,000.00		Replace Radios	\$3,000.00		
	Replace Appliances	\$3,000.00		Replace Misc. Tools	\$10,000.00		
	Replace A/C Units	\$3,000.00		Computer Equipment	\$22,000.00		
	Replace Radios	\$3,000.00		Replace Vehicles	\$30,000.00		
	Replace Misc. Tools	\$5,000.00		Safety Equipment/Systems	\$3,000.00		
	Computer Equipment	\$22,000.00					
	Replace Vehicles	\$30,000.00	Fees & Costs	A/E for Comp. Modernization	\$30,000.00		
	Safety Equipment/Systems	\$3,000.00		Misc. A/E	\$20,000.00		
Fees & Costs	A/E for Comp. Modernization	\$30,000.00					
	Misc. A/E	\$20,000.00					
To	otal CFP Estimated Cost	\$1,105,288.00			\$1,105,288.00		



Effective 01/06/03



RESIDENT ADVISORY BOARD COMMENTS: Attachment: il012c02

1. The residents of the Garden apartments would like to have new security screen doors.

Response: This is included in the plan.

2. The residents at the Garden Apartments would also like new site signage. Also at the townhouses.

Response: This work is in the plan.

3. The townhouse residents expressed the need for more kitchen lighting for instance above the kitchen sink.

Response: This work may be included in the townhouse interior improvements.

4. The elderly residents would like to have a security camera at the entrances.

Response: This work is included in the plan.

5. Need new prime doors at the Townhouses.

Response: This work is under advisement.

6. Need automatic entry doors at all highrises.

Response: This work is included in the plan.

7. New tile in the Kitchens at the Lexington, slide out shelves in the cabinets, and sprayers at the sinks.

Response: This work can be included in the cabinet project.

8. Replace closet doors at the scattered sites with a different type.

Response: This work is under advisement.

9. New screen doors at Scattered Sites.

Response: This work is under advisement.

10. New towel rods at Scattered Sites

Response: This work can be included with bathroom remodeling at the Scattered Sites.

11. DHA staff has identified the need for cyclical replacement of emergency lighting and systems to conform to code requirements.

Response: The Five-Year Action Plan and the Annual Statement have been revised to include this work item.

COMMUNITY SERVICE

Attachment: il012d02

24 CFR 960.603-960.611

A. REQUIREMENT

Each adult resident of the PHA shall:

Contribute 8 hours per month of community service (not including political activities) within the community in which that adult resides; or

Participate in an economic self-sufficiency program (defined below) for 8 hours per month.

Perform 8 hours per month of combined activities (community service and economic self-sufficiency program).

B. EXEMPTIONS

The PHA shall provide an exemption from the community service requirement for any individual who:

Is 62 years of age or older;

is a blind or disabled individual, as defined under section 216[i][l] or 1614 of the Social Security Act, and who is unable to comply with this section, or is a primary caretaker of such individual;

Is engaged in a work activity as defined in section 407[d] of the Social Security Act;

Meets the requirements for being exempted from having to engage in a work activity under the State program funded under part A of title IV of the Social Security Act, or under any other welfare program of the State in which the public housing agency is located, including a State-administered welfare-to-work program; or

Is in a family receiving assistance under a State program funded under part A of title IV of the Social Security Act, or under any other welfare program of the State in which the public housing agency is located, including a State-administered welfare-to-work program, and has not been found by the State or other administering entity to be in noncompliance with such program.

The PHA will re-verify exemption status annually except in the case of an individual who is 62 years of age or older.

The PHA will permit residents to change exemption status during the year if status changes.

C. DEFINITION OF ECONOMIC SELF-SUFFICIENCY PROGRAM

For purposes of satisfying the community service requirement, participating in an economic selfsufficiency program is defined, in addition to the exemption definitions described above, by one of the following:

Participating in the Family Self-Sufficiency Program and being current in the steps outlined in the Individual Training and Services Plan;

Participating in an educational or vocational training program designed to lead to employment, at least 30 hours per week;

Improving the physical environment of the resident's development;

Volunteer work in a local school, hospital, child care center, homeless shelter, or other community service organization;

Working with youth organizations;

Helping neighborhood groups on special projects;

Raising young (pre-school) children at home where spouse is working;

Participation in programs that develop and strengthen resident self-responsibility such as:

Drug and alcohol abuse counseling and treatment

Household budgeting

Credit counseling

English proficiency

Other activities as approved by the PHA on a case-by-case basis.

The PHA will give residents the greatest choice possible in identifying community service opportunities.

The PHA will consider a broad range of self-sufficiency opportunities.

D. ANNUAL DETERMINATIONS

Requirement – For each public housing resident subject to the requirement of community service, the PHA shall, 30 days before the expiration of each lease term, review and determine the compliance of the resident with the community service requirement.

Such determination shall be made in accordance with the principles of due process and on a nondiscriminatory basis.

The PHA will verify compliance annually. If qualifying activities are administered by an organization other than the PHA, the PHA will require verification of family compliance from

such third parties. Family members are required to provide signed, verifiable statements of completion of service.

Family members may be permitted to self-certify that they have complied with community service requirements.

E. NONCOMPLIANCE

If the PHA determines that a resident subject to the community service requirement has not complied with the requirement, the PHA shall notify the resident of such noncompliance, and that:

The determination of noncompliance is subject to the administrative grievance procedure under the PHA's Grievance Procedures; and

Unless the resident enters into an agreement to comply with the community service requirement, the resident's lease will not be renewed, and

The PHA may not renew or extend the resident's lease upon expiration of the lease term and shall take such action as is necessary to terminate the tenancy of the household, unless the PHA enters into an agreement, before the expiration of the lease term, with the resident providing for the resident to cure any noncompliance with the community service requirement, by participating in an economic self-sufficiency program for or contributing to community service as many additional hours as the resident needs to comply in the aggregate with such requirement over the 12-month term of the lease.

Ineligibility for Occupancy for Noncompliance

The PHA shall not renew or extend any lease, or provide any new lease, for a dwelling unit for any household that includes an adult member who was subject to the community service requirement and failed to comply with the requirement.

F. PHA RESPONSIBILITY

The PHA will ensure that all community service programs are accessible for persons with disabilities.

The PHA will ensure that:

It supplies a list of potential volunteer work sites to tenants.

The work is not labor that would be performed by the PHA's employees responsible for essential maintenance and property services; or

The work is not otherwise unacceptable.

G. PHA IMPLEMENTATION OF COMMUNITY SERVICE REQUIREMENT

The PHA will administer its own community service program, with cooperative relationships with other entities.

RESIDENT ADVISORY BOARD

Attachment: il012e02

Don Deetz, President 1221 N. Van Dyke #420 Decatur, IL 62522 Hanley Morrison, Resident on Board of Commissioners 333 E. Center #310 Decatur IL 62522

Yvonne Basden, President 1462 N. Poole St. Decatur, IL 62521 Gordon Maldaner, Vice President 1221 N. Van Dyke #219 Decatur, IL 62522

Coleen Sangster, Vice President 1128 N. Calhoun St. Decatur, IL 62521 Evelyn Meador, Secretary 1221 N. Van Dyke #517 Decatur, IL 62522

Gina Basden, Treasurer 1090 E. Leafland Decatur, IL 62521 Jo Maldaner, Treasurer 1221 N. Van Dyke #219 Decatur, IL 62522

Mary Finley, President 333 E. Center #205 Decatur, IL 62526 Barbara McElrath, President 1518 N. Poole St. Decatur, IL 62526

Jane Flake, Vice President 333 E. Center #213 Decatur, IL 62526 Bryant Peppers, Vice President 1031 E. Cantrell Decatur, IL 62521

George Hendereen, Secretary 333 E. Center #502 Decatur, IL 62526 Linda Curry, Secretary 1428 N. Poole St. Decatur, IL 62526

Hanley Morrison, Treasurer 333 E. Center #310 Decatur, IL 62526

Viola Anderson, Assist. Treasurer 1550 N. Poole St. Decatur, IL 62526

Sandra Armour, Acting Treas. 1096 W. Decatur #204 Decatur, IL 62522 Martha Lake, Treasurer 1442 N. Poole St. Decatur, IL 62526

Ann Kates, Sect. 8 1290 N. 18th Decatur, IL 62521

DECATUR HOUSING AUTHORITY PET AGREEMENT

Attachment: il012f02

ADDENDUM TO LEASE

This Agreement entered into this day of,, by and between DECATUR HOUSING AUTHORITY, OWNER, and, TENANT, in consideration of their mutual promises agree as follows:
1. TENANT desires and has received permission from the OWNER to keep the pet named and described as:
2. This AGREEMENT is an ADDENDUM to and a part of the Lease between OWNER and TENANT executed on In the event of default by TENANT of any terms of this AGREEMENT, TENANT agrees, upon proper written notice of default from OWNER, to satisfy the default, by either removing the PET or vacate the premises.
3. As a special deposit, TENANT agrees to pay OWNER the sum of \$300.00 which shall be paid in an initial payment of \$, and monthly payments of \$ each thereafter until paid in full. This deposit will be maintained by the agent and refunded according to the Illinois Security Deposit laws. The Pet DEPOSIT under the Pet AGREEMENT is not a limit of the TENANT's liability for property damages, cleaning, deodorization, defleaing, replacements, and/or personal injuries as herein further specified. In addition, if the resident vacates the unit owing Decatur Housing Authority for charges such as, but not limited to, rent, maintenance, or cablevision, all or part of the Pet Deposit may be held by the Authority to cover those charges still outstanding after the resident's regular Security Deposit has been applied to the account.
The TENANT's liability includes, but is not limited to, carpets, doors, drapes, woodwork, windows, screens, furniture, appliances and any other part of the dwelling unit, landscaping, or other improvements to OWNER's property. Furthermore, TENANT shall be liable for the entire amount of any injury to the

4. TENANT agrees to comply with:

person or property of others, caused by such pet.

- a. The Health and Safety Code; and
- b. All other applicable governmental laws and regulations, such as, but not limited to licensing, inoculations, etc.
- c. All provisions of DHA's Pet Policy.

- 5. TENANT represents the pet <u>is quiet</u> and housebroken and will not cause any property damage or annoy other tenants, guests, or staff.
- 6. TENANT agrees that the pet will not be permitted outside the TENANT's unit, <u>unless the pet is restrained</u> (until exiting the building, if in a highrise). Pets will, at ALL times, be under the direct control of the owner. Pets may NOT be tethered/chained to trees, structures or any device and left unattended. No pets are permitted to walk in any common corridors, elevators, community rooms, laundry rooms, country stores, beauty shops, libraries, or offices.

Violation of this regulation will result in automatic a warning letter (three warnings total). Repeated offenses will result in removing the pet by animal control authorities or terminating the Lease.

- 7. TENANT shall not permit the pet to cause any damage, discomfort, annoyance, nuisance, or in any other way to inconvenience or cause complaints from any other tenant, guests, neighbors, or staff. It is the pet owner's responsibility to clean up completely behind his/her pet. Building managers may designate areas for usage by pets.
- 8. Any pet left unattended for four (4) hours or more or whose health is jeopardized by the TENANT's neglect, mistreatment, or inability to care for the animal shall be reported to the ANIMAL CONTROL WARDEN or other appropriate authority. Such circumstances shall be deemed an emergency for the purposes of the OWNER's right to enter the TENANT's unit to allow such authority to remove the animal from the premises. The OWNER accepts no responsibility for any pet so removed.
- 9. TENANT acknowledges that three (3) violations of the policies is considered "Material Non-Compliance" of the pet AGREEMENT and is considered grounds for termination of same.
- 10. TENANT has read and agrees to comply with the Pet Policies, which are herein incorporated by reference, and agrees to comply with such rules and regulations as may be reasonably revised and implemented by OWNER.

DECATUR HOUSING AUTHORITY	TENANT(S):
BY	1)
TITLE:	Head of Household 2) Co Head/Space
DATE:	Co-Head/Spouse DATE:

DECATUR HOUSING AUTHORITY PET REGISTRATION

→ THIS FORM IS TO BE COMPLETED ANNUALLY ←

	☐ 1 st Time Application	☐ Yearl	y Update	
Resident's Name	Ac	ldress		Phone
Animal's Name:		☐ Male	☐ Female	
Type of Animal:		Breed:		
Color/Markings:				
Size at Adult Weight:	☐ Small (less than 10 lbs	s) 🛮 Mediui	n (11-15 lbs)	☐ Large (16- 25 lbs)
A	age of Pet:	Year of bir	th (if known):	
REQUIRED PAPERS ((enter date provided):			
 * City License * Spaying Certificate * Neutering Certificate (All above items should leading) 	* Proof of * Signed H * Home vison to this form)	rabies shots, in fold Harmless sit evaluation	noculations & Agreement conducted (if a	pplicable)
Veterinarian:		Pho	ne:	
Alternate Custodian (in c	case of emergency to owner)):		
Name	Address		Pho	ne
contained therein, and that persons or property caused	ecatur Housing Authority's Pet Decatur Housing Authority by my pet. I further understandered from the premises and ma	will not be held nd that failure t	d responsible for obey these ru	or any damage/injuries to
☐ Security D	eposit (\$300) paid in full	☐ On Payme	nt Plan for Secu	urity Deposit
Resident's Signature:			Date:	
DHA Representative:			Date:	

HOLD HARMLESS AGREEMENT

In consideration of Decatur Housing Authority (DHA) permitting me/us to house a pet in
my/our unit, being: Decatur, Illinois,
I/we agree to indemnify and hold harmless DHA and its agents, employees, and
representatives, from and against all claims for personal injury or property damage, including
claims against DHA, its agents, employees, and representatives, and all losses or expenses,
including but not limited to, attorney's fees, that may be incurred by DHA in defending such
claims, rising out of or resulting from any personal injury or property damage caused in
whole or in part by my/our pet, the indemnification obligation under this paragraph shall not
be limited in any way by any limitation on the amount or type of claims, actions, causes of
action, demands, rights, damages, costs, loss of service, expenses or compensation
whatsoever.
Signed, this Day of,
Head of Household
Co-head/Spouse
Accepted by Decatur Housing Authority:
By:
Its:
"Proc/nets 9-99"

Chapter 10

PET POLICY

Attachment: il012g02

24 CFR 5.309

INTRODUCTION

PHAs have discretion to decide whether or not to develop policies pertaining to the keeping of pets in public housing units. This Chapter explains the PHA's policies on the keeping of pets and any criteria or standards pertaining to the policy. The rules adopted are reasonably related to the legitimate interest of this PHA to provide a decent, safe and sanitary living environment for all tenants, to protecting and preserving the physical condition of the property, and the financial interest of the PHA.

The purpose of this policy is to establish the PHA's policy and procedures for ownership of pets to ensure that no applicant or resident is discriminated against regarding admission or continued occupancy because of ownership of pets. It also establishes reasonable rules governing the keeping of common household pets.

Nothing in this policy or the dwelling lease limits or impairs the right of persons with disabilities to own animals that are used to assist them.

ANIMALS THAT ASSIST PERSONS WITH DISABILITIES

Pet rules will not be applied to animals who assist persons with disabilities.

To be excluded from the pet policy, the resident/pet owner must certify:

That there is a person with disabilities in the household;

That the animal has been trained to assist with the specified disability

A. MANAGEMENT APPROVAL OF PETS

All pets must be approved in advance by the PHA management.

The pet owner must submit and enter into a Pet Agreement with the PHA.

Registration of Pets

Pets must be registered with the PHA before they are brought onto the premises. Registration includes certificate signed by a licensed veterinarian or State/local authority that the pet has received all inoculations required by State or local law, and that the pet has no communicable disease(s) and is pest-free.

Registration must be renewed and will be coordinated with the annual recertification date and proof of license and inoculation will be submitted at least 30 days prior to annual reexamination.

Dogs and cats must be spayed or neutered.

Execution of a Pet Agreement with the PHA stating that the tenant acknowledges complete responsibility for the care and cleaning of the pet will be required.

Approval for the keeping of a pet shall not be extended pending the completion of these requirements.

Refusal To Register Pets

The PHA may not refuse to register a pet based on the determination that the pet owner is financially unable to care for the pet. If the PHA refuses to register a pet, a written notification will be sent to the pet owner stating the reason for denial and shall be served in accordance with HUD Notice requirements.

The PHA will refuse to register a pet if:

The pet is not a *common household pet* as defined in this policy;

Keeping the pet would violate any House Pet Rules;

The pet owner fails to provide complete pet registration information, or fails to update the registration annually;

The PHA reasonably determines that the pet owner is unable to keep the pet in compliance with the pet rules and other lease obligations. The pet's temperament and behavior may be considered as a factor in determining the pet owner's ability to comply with provisions of the lease.

The notice of refusal may be combined with a notice of a pet violation.

A resident who cares for another resident's pet must notify the PHA and agree to abide by all of the pet rules in writing.

B. STANDARDS FOR PETS

If an approved pet gives birth to a litter, the resident must remove all pets from the premises except one.

Pet rules will not be applied to animals who assist persons with disabilities.

Persons With Disabilities

To be excluded from the pet policy, the resident/pet owner must certify:

That there is a person with disabilities in the household;

That the animal has been trained to assist with the specified disability; and

That the animal actually assists the person with the disability.

Types of Pets Allowed

NO TYPES OF PETS OTHER THAN THE FOLLOWING MAY BE KEPT BY A RESIDENT.

Tenants are not permitted to have more than one type of pet.

1. Dogs

Maximum number: One

Maximum adult weight: 25 pounds

Must be housebroken

Must be spayed or neutered (a veterinarian's verification is required)

Must have all required inoculations (annual verification is required)

Must be licensed as specified now or in the future by State law and local ordinance

2. Cats

Maximum number: One

Must be spayed or neutered (a veterinarian's verification is required)

Must have all required inoculations (annual verification is required)

Must be trained to use a litter box or other waste receptacle

Must be licensed as specified now or in the future by State law or local ordinance

3. Birds

Maximum number: Two

Must be enclosed in a cage at all times

4. Fish

Maximum aquarium size 25 gallons

Must be maintained on an approved stand

5. Rodents (Rabbit, guinea pig, hamster, or gerbil ONLY)

Maximum number: Two

Must be enclosed in an acceptable cage at all times

Must have any or all inoculations as specified now or in the future by State law or local ordinance

6. Turtles

Maximum number: Two

Must be enclosed in an acceptable cage or container at all times.

C. PETS TEMPORARILY ON THE PREMISES

Pets which are not owned by a tenant will not be allowed.

Residents are prohibited from feeding or harboring stray animals.

This rule excludes visiting pet programs sponsored by a humane society or other non-profit organization and approved by the PHA.

D. ADDITIONAL FEES AND DEPOSITS FOR PETS

The resident/pet owner shall be required to pay a refundable deposit of \$300 for a dog and \$150 for other types of pets (as listed above) for the purpose of presence of a pet.

An initial payment of 20% on or prior to the date the pet is properly registered and brought into the apartment, and;

Monthly payments in an amount no less than \$20 until the specified deposit has been paid.

The PHA reserves the right to change or increase the required deposit by amendment to these rules.

The PHA will refund the Pet Deposit to the tenant, less any damage caused by the pet to the dwelling unit, upon removal of the pet or the owner from the unit.

The PHA will return the Pet Deposit to the former tenant or to the person designated by the former tenant in the event of the former tenant's incapacitation or death.

The PHA will provide the tenant or designee identified above with a written list of any charges against the pet deposit. If the tenant disagrees with the amount charged to the pet deposit, the PHA will provide a meeting to discuss the charges.

All reasonable expenses incurred by the PHA as a result of damages directly attributable to the presence of the pet in the project will be the responsibility of the resident, including:

The cost of repairs and replacements to the resident's dwelling unit;

Fumigation of the dwelling unit;

Common areas of the project.

Pet Deposits are not a part of rent payable by the resident.

E. ALTERATIONS TO UNIT

Residents/pet owners shall not alter their unit, patio, premises or common areas to create an enclosure for any animal. Installation of pet doors is prohibited.

F. PET WASTE REMOVAL CHARGE

A separate pet waste removal charge of \$15 per occurrence will be assessed against the resident for violations of the pet policy.

Pet deposit and pet waste removal charges are not part of rent payable by the resident.

All reasonable expenses incurred by the PHA as the result of damages directly attributable to the presence of the pet will be the responsibility of the resident, including:

The cost of repairs and replacements to the dwelling unit;

Fumigation of the dwelling unit.

If the tenant is in occupancy when such costs occur, the tenant shall be billed for such costs as a current charge.

If such expenses occur as the result of a move-out inspection, they will be deducted from the pet deposit. The resident will be billed for any amount which exceeds the pet deposit.

The pet deposit will be refunded when the resident moves out or no longer has a pet on the premises, whichever occurs first.

The expense of flea deinfestation shall be the responsibility of the resident.

G. PET AREA RESTRICTIONS

Pets must be maintained within the resident's unit. When outside of the unit (within the building or on the grounds) dogs and cats must be kept on a leash or carried and under the control of the resident or other responsible individual at all times. Pets may not be chained/tethered outside the resident's unit. When the pet is in the unit and the tenant is not at home, the pet must be caged.

Pets are not permitted in common areas including lobbies, community rooms and laundry areas except for those common areas which are entrances to and exits from the building.

An area of the development grounds may be designated as the area in which to exercise animals and to permit dogs to relieve themselves of bodily waste.

H. NOISE

Pet owners must agree to control the noise of pets so that such noise does not constitute a nuisance to other residents or interrupt their peaceful enjoyment of their housing unit or premises. This includes, but is not limited to loud or continuous barking, howling, whining, biting, scratching, chirping, or other such activities.

I. CLEANLINESS REQUIREMENTS

<u>Litter Box Requirements</u>. All animal waste or the litter from litter boxes shall be picked up immediately by the pet owner, disposed of in sealed plastic trash bags, and placed in a trash bin.

Litter shall not be disposed of by being flushed through a toilet.

Litter boxes shall be stored inside the resident's dwelling unit.

<u>Removal of Waste From Other Locations</u>. The Resident/Pet Owner shall be responsible for the removal of waste from the exercise area by placing it in a sealed plastic bag and disposing of it in an outside trash bin.

Any unit occupied by a dog, cat, or rodent will be fumigated at the time the unit is vacated at the tenant's expense.

The resident/pet owner shall take adequate precautions to eliminate any pet odors within or around the unit and to maintain the unit in a sanitary condition at all times.

J. PET CARE

No pet (excluding fish) shall be left unattended in any apartment for a period in excess of four hours.

All residents/pet owners shall be responsible for adequate care, nutrition, exercise and medical attention for his/her pet.

Residents/pet owners must recognize that other residents may have chemical sensitivities or allergies related to pets, or may be easily frightened or disoriented by animals. Pet owners must agree to exercise courtesy with respect to other residents.

K. RESPONSIBLE PARTIES

The resident/pet owner will be required to designate one responsible party for the care of the pet if the health or safety of the pet is threatened by the death or incapacity of the pet owner, or by other factors that render the pet owner unable to care for the pet.

L. INSPECTIONS

The PHA may, after reasonable notice to the tenant during reasonable hours, enter and inspect the premises, in addition to other inspections allowed.

M. PET RULE VIOLATION NOTICE

If a determination is made on objective facts supported by written statements, that a resident/pet owner has violated the Pet Rule Policy, written notice will be served.

The Notice will contain a brief statement of the factual basis for the determination and the pet rule(s) which were violated. The notice will also state:

That the resident/pet owner has five (5) days from the effective date of the service of notice to correct the violation or make written request for a meeting to discuss the violation;

That the resident pet owner is entitled to be accompanied by another person of his or her choice at the meeting; and

That the resident/pet owner's failure to correct the violation, request a meeting, or appear at a requested meeting may result in initiation of procedures to terminate the pet owner's tenancy.

If the pet owner requests a meeting within the five-day period, the meeting will be scheduled no later than ten calendar days before the effective date of service of the notice, unless the pet owner agrees to a later date in writing.

N. NOTICE FOR PET REMOVAL

If the resident/pet owner and the PHA are unable to resolve the violation at the meeting or the pet owner fails to correct the violation in the time period allotted by the PHA, the PHA may serve notice to remove the pet.

The Notice shall contain:

A brief statement of the factual basis for the PHA's determination of the Pet Rule that has been violated;

The requirement that the resident /pet owner must remove the pet within five (5) days of the notice; and

A statement that failure to remove the pet may result in the initiation of termination of tenancy procedures.

0. TERMINATION OF TENANCY

The PHA may initiate procedures for termination of tenancy based on a pet rule violation if:

The pet owner has failed to remove the pet or correct a pet rule violation within the time period specified; and

The pet rule violation is sufficient to begin procedures to terminate tenancy under terms of the lease.

P. PET REMOVAL

If the death or incapacity of the pet owner threatens the health or safety of the pet, or other factors occur that render the owner unable to care for the pet, the situation will be reported to the Responsible Party designated by the resident/pet owner. Includes pets who are poorly cared for or have been left unattended for over four hours.

If the responsible party is unwilling or unable to care for the pet, or if the PHA after reasonable efforts cannot contact the responsible party, the PHA may contact the appropriate State or local agency and request the removal of the pet.

If the pet is removed as a result of any aggressive act on the part of the pet, the pet will not be allowed back on the premises.

Q. EMERGENCIES

The PHA will take all necessary steps to insure that pets which become vicious, display symptoms of severe illness, or demonstrate behavior that constitutes an immediate threat to the health or safety of others, are referred to the appropriate State or local entity authorized to remove such animals.

If it is necessary for the HA to place the pet in a shelter facility, the cost will be the responsibility of the tenant/pet owner.

Attachment: il012h02

Decatur Housing Authority Project Based Section 8 Plan Supplement

Statement of the projected number of project based units and general locations and how project basing would be consistent with the PHA Plan.

In accordance with Federal Register notices of January 16, 2001, Docket No. FR-4633-N-01, the Housing Authority is hereby supplementing its annual plan to include description of its plan for incorporating Project Based Section 8 as part of its existing Section 8 Tenant based program. Regulations allow a PHA to designate up to 20% of its Section 8 funding available for tenant based assistance for use in project based voucher programs in accordance with Section 232. It is DHA's intent to utilize up to 20% of its Section 8 allocation for project based vouchers in support of Low Income Housing Tax Credit Units being developed in conjunction with the Longview Place HOPE VI Revitalization Program. This program will be implemented in a minimum of three phases, with a phase one tax credits having been received, and 21 units being designated for Section 8 project based vouchers. These units will be constructed and managed by the mixed finance developer selected through competitive selection processes as part of the Authority's HOPE VI Revitalization program. For phase two and phase three the revitalization program will be implemented within the next five years and will designate a minimum of 10% of future tax credit units be incorporated in the DHA's Section 8 Project Based voucher program, provided the total number of units in the program does not exceed 20% of the annual value of the authority's Section 8 tenant based program.

The Authority will apply for HUD permission to maintain a site based waiting list for these project based Section 8 units. This list will be used by both the Authority and the developer's property manager. Additionally, the Authority is requesting permission from HUD to maintain a site based waiting list for public housing/ACC units which will be a portion of the Wabash Crossing HOPE VI mixed income/mixed finance revitalization area.

The Decatur Housing Authority is requesting and exception rent waiver from HUD to allow rents for the 21 project based Section 8 units to be up to 120 percent of FMR.

CAPITAL FUND PROGRAM TABLES START HERE Attachment: il012i02

Ann	Annual Statement/Performance and Evaluation Report									
Cap	ital Fund Program and Capital Fund P	rogram Replacemen	t Housing Factor (C	FP/CFPRHF) Par	t I: Summary					
	ame: Decatur Housing Authority	Grant Type and Number		·	Federal FY of Grant:					
		Capital Fund Program Grant No			2000					
Replacement Housing Factor Grant No: Original Annual Statement Reserve for Disasters/ Emergencies Revised Annual Statement (revision no:)										
	ginal Annual StatementReserve for Disasters/ Emer formance and Evaluation Report for Period Ending: 9.									
☑Performance and Evaluation Report for Period Ending: 9/30/2002 ☐ Final Performance and Evaluation Report Line Summary by Development Account Total Estimated Cost Total Actual Cost										
No.	Summary by Development Account	Total Estili	aicu Cosi	Total Ac	tuai Cost					
1100		Original	Revised	Obligated	Expended					
1	Total non-CFP Funds			_						
2	1406 Operations	\$353,091.00	\$353,091.00	\$353,091.00	\$353,091.00					
3	1408 Management Improvements	\$107,476.50	\$107,476.50	\$107,476.50	\$107,476.50					
4	1410 Administration	\$131,076.04	\$131,076.04	\$131,076.04	\$48,466.79					
5	1411 Audit	\$0.00	\$0.00	\$0.00	\$0.00					
6	1415 Liquidated Damages	\$0.00	\$0.00	\$0.00	\$0.00					
7	1430 Fees and Costs	\$0.00	\$0.00	\$0.00	\$0.00					
8	1440 Site Acquisition	\$0.00	\$0.00	\$0.00	\$0.00					
9	1450 Site Improvement	\$17,221.54	\$17,221.54	\$17,221.54	\$17,221.54					
10	1460 Dwelling Structures	\$748,065.08	\$748,065.08	\$748,065.08	\$530,158.46					
11	1465.1 Dwelling Equipment—Nonexpendable	\$34,585.04	\$34,585.04	\$34,585.04	\$34,585.04					
12	1470 Nondwelling Structures	\$313,424.86	\$313,424.86	\$313,424.86	\$313,424.86					
13	1475 Nondwelling Equipment	\$60,514.94	\$60,514.94	\$60,514.94	\$60,514.94					
14	1485 Demolition	\$0.00	\$0.00	\$0.00	\$0.00					
15	1490 Replacement Reserve	\$0.00	\$0.00	\$0.00	\$0.00					
16	1492 Moving to Work Demonstration	\$0.00	\$0.00	\$0.00	\$0.00					
17	1495.1 Relocation Costs	\$0.00	\$0.00	\$0.00	\$0.00					
18	1499 Development Activities	\$0.00	\$0.00	\$0.00	\$0.00					
19	1501 Collaterization or Debt Service	\$0.00	\$0.00	\$0.00	\$0.00					
20	1502 Contingency	\$0.00	\$0.00	\$0.00	\$0.00					
21	Amount of Annual Grant: (sum of lines 2 – 20)	\$1,765,455.00	\$1,765,455.00	\$1,765,455.00	\$415,578.94					
22	Amount of line 21 Related to LBP Activities	\$0.00	\$0.00	\$0.00	\$0.00					
23	Amount of line 21 Related to Section 504 compliance	\$485.95	\$485.95	\$485.95	\$485.95					
24	Amount of line 21 Related to Security – Soft Costs	\$0.00	\$0.00	\$0.00	\$0.00					
25	Amount of Line 21 Related to Security – Hard Costs	\$0.00	\$0.00	\$0.00	\$0.00					
26	Amount of line 21 Related to Energy Conservation Measures	\$0.00	\$0.00	\$0.00	\$0.00					

Part II:	Supporting	Pages
DHA Nama	Desetur Housing	Authority

PHA Name: Decatu	PHA Name: Decatur Housing Authority		Grant Type and Number				Federal FY of Grant:			
	•	Capital Fund Prog					2000			
		Replacement House								
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		
Activities				Original	Revised	Funds Obligated	Funds Expended			
12-1 Longview	Dwelling Structures	1460	386 DUs	\$0.00	\$0.00	\$0.00	\$0.00			
	a. Emergency Repairs									
12-2 Concord	Non-Dwelling Structures	1470	2 Doors	\$0.00	\$0.00	\$0.00	\$0.00			
	a. Handicapped Accessible Entry Doors			\$0.00	\$0.00	\$0.00	\$0.00	Postponed		
12-4 Scattered Sites	Dwelling Structures	1460	55 DUs	\$210,572.15	\$210,572.15	\$210,572.15	\$194,656.40			
	a. Interior Improvements	1.00	00 2 0 5	\$210,572.15	\$210,572.15	\$210,572.15	\$194,656.40	In Progress		
12-5 Scattered Sites	Dwelling Structures	1460	32 DUs	\$250,450.00	\$250,450.00	\$250,450.00	\$211,170.76			
12 5 Scattered Sites	a. Interior Improvements	1400	32 003	\$250,450.00	\$250,450.00	\$250,450.00	\$211,170.76	In Progress		
12-7 Scattered Sites	Dwelling Structures	1460	42 DHa	\$206.556.00	\$20 <i>6</i> 55 6 00	\$206.556.00	\$123,845.35			
12-7 Scattered Sites	Dwening Structures	1400	43 DUs	\$286,556.98 \$286,556.98	\$286,556.98 \$286,556.98	\$286,556.98 \$286,556.98	\$123,845.35	In Progress		
		1150		47.000.00						
12-8 Lexington	Site Improvements Site Signage	1450		\$5,000.00 \$5,000.00	\$0.00 \$0.00	\$0.00 \$0.00	\$0.00 \$0.00	Postponed		
	Site Signage			42,000.00	φοιοσ	φοίου	Ψ0.00	1 osuponed		
	Dwelling Structures	1460		\$104,123.00	\$0.00	\$0.00	\$0.00			
	a. Re-Face Kitchen Cabinets		100 DUs	\$104,123.00	\$0.00	\$0.00	\$0.00	Postponed		
	Non-Dwelling Structures	1470		\$0.00	\$313,014.00	\$313,424.86	\$264,064.67			
	a. Heating Systems Improvements		100 DUs	\$0.00	\$313,014.00	\$313,424.86	\$264,064.67	In Progress		
	Dwelling Equipment	1465.1		\$34,014.00	\$34,014.00	\$34,014.00	\$34,014.00			
	a. Replace Stoves		100	\$34,014.00	\$34,014.00	\$34,014.00	\$34,014.00	Purchased		

PHA Name: Decatu	PHA Name: Decatur Housing Authority		Grant Type and Number				Federal FY of Grant:			
		Capital Fund Progr	am Grant No: IL	06P01250100		2000				
		Replacement Housing Factor Grant No:								
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estin	nated Cost	Total Actual Cost		Status of Work		
				Original	Revised	Funds Obligated	Funds Expended			
12-9 Garden Apartments	Site Improvements	1450		\$8,000.00	\$16,608.04	\$16,608.04	\$16,608.04			
	a. Site Signage			\$0.00	\$0.00	\$0.00	\$0.00			
	b. Property Line Fence			\$0.00	\$16,608.04	\$16,608.04	\$16,608.04	Installed		
12-10 Townhomes	Site Improvements	1450		\$0.00	\$0.00	\$0.00	\$0.00			
	a. Site Signage			\$0.00	\$0.00	\$0.00	\$0.00	Postponed		
PHA Wide	Operating Budget	1406		\$353,091.00	\$353,091.00	\$353,091.00	\$353,091.00			
THA WILL	a. Operating Subsidy	1400		\$353,091.00	\$353,091.00	\$353,091.00	\$353,091.00	Disbursed		
	a. Operating Substay			\$333,091.00	\$333,091.00	\$333,091.00	\$333,091.00	Disbursed		
	Management Improvements	1408		\$107,476.50	\$107,476.50	\$107,476.50	\$107,476.50			
	a. Security			\$0.00	\$0.00	\$0.00	\$0.00			
	b. PHMAP Compliance			\$0.00	\$0.00	\$0.00	\$0.00			
	c. Marketing/Advertising			\$3,468.50	\$3,468.50	\$3,468.50	\$3,468.50			
	d. Software Improvements			\$4,008.00	\$4,008.00	\$4,008.00	\$4,008.00	Items Purchased		
	e. HOPE VI Consultant			\$100,000.00	\$100,000.00	\$100,000.00	\$100,000.00	Contract		
	Dwelling Structures	1460		\$485.95	\$485.95	\$485.95	\$485.95			
	a. Accessibility Improvements			\$485.95	\$485.95	\$485.95	\$485.95	Items Purchased		
	b. Replace Floor Covering			\$0.00	\$0.00	\$0.00	\$0.00			
	Site Improvements	1450		\$613.50	\$613.50	\$613.50	\$613.50			
	a. Site Signage	1430		\$613.50	\$613.50	\$613.50	\$613.50	Purchased		
	a. Die Digitage			ψ013.30	ψ013.30	Ψ013.30	ψ013.30	Turchaseu		
	Dwelling Equipment	1465		\$551.04	\$551.04	\$551.04	\$551.04			
	a. Replace Misc. Stoves & Refrigerators			\$238.94	\$238.94	\$238.94	\$238.94	Purchased		
	b. Replace Misc. A/C Units			\$312.10	\$312.10	\$312.10	\$312.10	Purchased		
PHA Wide (Cont)	Non-Dwelling Equipment	1475.2		\$9,751.94	\$9,751.94	\$9,751.94	\$9,751.94			

Part II:	Suppor	ting Pages
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	PHA Name: Decatur Housing Authority		Grant Type and Number				Federal FY of Grant:			
		Capital Fund Progr					2000			
		Replacement Housing Factor Grant No:				<u> </u>				
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estin	nated Cost	Total Actual Cost		Status of Work		
				Original	Revised	Funds Obligated	Funds Expended			
	a. Replace Radios			\$0.00	\$0.00	\$0.00	\$0.00			
	b. Replace Maint. Tools			\$0.00	\$0.00	\$0.00	\$0.00			
	c. Computer Equipment			\$9,751.94	\$9,751.94	\$9,751.94	\$9,751.94	Items Purchased		
	Non-Dwelling Equipment	1475.7		\$50,763.00	\$50,763.00	\$50,763.00	\$50,763.00			
	a. Replace Maintenance Vehicles			\$50,763.00	\$50,763.00	\$50,763.00	\$50,763.00	Purchased		
	Administration	1410		\$135,000.00	\$135,000.00	\$127,300.00	\$48,466.79			
	a. Technical Salaries			\$96,600.00	\$96,600.00	\$96,600.00	\$39,341.23	Disbursed		
	b. Employee Benefits			\$30,700.00	\$30,700.00	\$30,700.00	\$5,349.50	Disbursed		
	c. Travel & Training			\$4,700.00	\$4,700.00	\$822.61	\$822.61			
	1. CFP Training			\$3,500.00	\$3,500.00	\$318.97	\$318.97			
	2. Fuel for Inspections			\$1,200.00	\$1,200.00	\$503.64	\$503.64			
	d. Printing/Advertising			\$2,953.43	\$2,953.43	\$2,953.43	\$2,953.43			
	Fees & Costs	1430		\$0.00	\$0.00	\$0.00	\$0.00			
	a. Replacement Housing			\$0.00	\$0.00	\$0.00	\$0.00			
	b. Misc. A/E			\$0.00	\$0.00	\$0.00	\$0.00			
	c. A/E Hartford Window Replacement			\$0.00	\$0.00	\$0.00	\$0.00			
						ı				

			Type and Nun				Federal FY of Grant:
	Capital Fund Prog Replacement Hous				P01250100		2000
Development Number Name/HA-Wide Activities		fund Obligate er Ending Da	bligated All Funds Expended			Reasons for Revised Target Dates	
	Original	Revised	Actual	Original	Revised	Actual	
12-1 Longview	3/31/02	3/31/02	3/31/02	9/30/03			<u> </u>
12-2 Concord	3/31/02	3/31/02	3/31/02	9/30/03			
12-3 Hartford	3/31/02	3/31/02	3/31/02	9/30/03			
12-8 Lexington	3/31/02	3/31/02	3/31/02	9/30/03			
PHA Wide	3/31/02	3/31/02	3/31/02	9/30/03			

CAPITAL FUND PROGRAM TABLES START HERE Attachment: il012j02

Annual Statement/Performance and Evaluation Report										
Capi	ital Fund Program and Capital Fund P	rogram Replacemen	nt Housing Factor (CFP/CFPRHF) Par	t I: Summary					
	ame: Decatur Housing Authority	Grant Type and Number	8 \	,	Federal FY of Grant:					
	Capital Fund Program Grant No: CFP IL06P01250101									
Ori	Replacement Housing Factor Grant No: Original Annual Statement Reserve for Disasters/ Emergencies Revised Annual Statement (revision no:)									
⊠Per	Performance and Evaluation Report for Period Ending: 9/30/02									
Line	Summary by Development Account	Total Estin	nated Cost	Total Act	tual Cost					
No.										
		Original	Revised	Obligated	Expended					
1	Total non-CFP Funds	\$0.00	\$0.00	\$0.00	\$0.00					
2	1406 Operations	\$170,732.00	\$361,064.00	\$361,064.00	\$361,064.00					
3	1408 Management Improvements	\$120,000.00	\$95,568.00	\$4,017.59	\$4,017.59					
4	1410 Administration	\$140,723.00	\$140,723.00	\$137,131.87	\$5,408.87					
5	1411 Audit	\$0.00	\$0.00	\$0.00	\$0.00					
6	1415 Liquidated Damages	\$0.00	\$0.00	\$0.00	\$0.00					
7	1430 Fees and Costs	\$90,000.00	\$90,000.00	\$0.00	\$0.00					
8	1440 Site Acquisition	\$0.00	\$0.00	\$0.00	\$0.00					
9	1450 Site Improvement	\$19,868.00	\$13,000.00	\$0.00	\$0.00					
10	1460 Dwelling Structures	\$1,100,000.00	\$909,536.00	\$1,227.54	\$1,227.54					
11	1465.1 Dwelling Equipment—Nonexpendable	\$6,000.00	\$6,000.00	\$927.49	\$927.49					
12	1470 Nondwelling Structures	\$76,000.00	\$96,000.00	\$50,360.00	\$360.00					
13	1475 Nondwelling Equipment	\$82,000.00	\$82,000.00	\$6,455.57	\$6,455.57					
14	1485 Demolition	\$0.00	\$0.00	\$0.00	\$0.00					
15	1490 Replacement Reserve	\$0.00	\$0.00	\$0.00	\$0.00					
16	1492 Moving to Work Demonstration	\$0.00	\$0.00	\$0.00	\$0.00					
17	1495.1 Relocation Costs	\$0.00	\$11,432.00	\$9,963.25	\$9,963.25					
18	1499 Development Activities	\$0.00	\$0.00	\$0.00	\$0.00					
19	1501 Collaterization or Debt Service	\$0.00	\$0.00	\$0.00	\$0.00					
20	1502 Contingency	\$0.00	\$0.00	\$0.00	\$0.00					
21	Amount of Annual Grant: (sum of lines 2 – 20)	\$1,805,323.00	\$1,805,323.00	\$571,147.31	\$389,424.31					
22	Amount of line 21 Related to LBP Activities\$0.00	\$0.00	\$0.00	\$0.00	\$0.00					
23	Amount of line 21 Related to Section 504 compliance	\$14,000.00	\$5,000.00	\$1,227.54	\$1,227.54					
24	Amount of line 21 Related to Security – Soft Costs	\$70,000.00	\$25,568.00	\$0.00	\$0.00					
25	Amount of Line 21 Related to Security – Hard Costs	\$0.00	\$0.00	\$0.00	\$0.00					
26	Amount of line 21 Related to Energy Conservation Measures	\$0.00	\$0.00	\$0.00	\$0.00					

Part II:	Supporting	Pages

PHA Name: Decat	PHA Name: Decatur Housing Authority		Grant Type and Number				Federal FY of Grant:		
	, , , , , , , , , , , , , , , , , , ,	Capital Fund Progr			0101		2001		
		Replacement Housing Factor Grant No:							
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	ntity Total Estimated Cost		Total Actual Cost		Status of Work	
				Original	Revised	Funds	Funds		
				, and the second		Obligated	Expended		
12-1 Longview	Dwelling Structures	1460	386 DUs	\$801,000.00	\$799,536.00	\$0.00	\$0.00		
-	a. Comprehensive Modernization			\$800,000.00	\$798,536.00	\$0.00	\$0.00		
	b. Emergency Repairs			\$1,000.00	\$1,000.00	\$0.00	\$0.00		
12-2 Concord	Non-Dwelling Structures	1470		\$6,000.00	\$6,000.00	\$0.00	\$0.00		
	a. Security Hardware			\$3,000.00	\$3,000.00	\$0.00	\$0.00		
	b. Automatic Entry Access			\$3,000.00	\$3,000.00	\$0.00	\$0.00		
12-3 Hartford	Dwelling Structures	1460		\$289,000.00	\$0.00	\$0.00	\$0.00		
	a. Replace Windows			\$289,000.00	\$0.00	\$0.00	\$0.00	Moved to CGP708	
	Non-Dwelling Structures	1470		\$6,000.00	\$6,000.00	\$0.00	\$0.00		
	a. Security Hardware			\$3,000.00	\$3,000.00	\$0.00	\$0.00		
	b. Automatic Entry Access			\$3,000.00	\$3,000.00	\$0.00	\$0.00		
12-5 Scattered Sites	Relocation Costs	1495		\$0.00	\$11,432.00	\$9,963.25	\$9,963.25		
	a. Relocation Associated with Interior Improvement Project (Flooring)			\$0.000	\$11,432.00	\$9,963.25	\$9,963.25		
12-8 Lexington	Site Improvements	1450		\$0.00	\$5,000.00	\$0.00	\$0.00		
	a. Site Signage			\$0.00	\$5,000.00	\$0.00	\$0.00		
	Dwelling Structures	1460		\$0.00	\$100,000.00	\$0.00	\$0.00		
	a. Re-Face Kitchen Cabinets			\$0.00	\$100,000.00	\$0.00	\$0.00		

	PHA Name: Decatur Housing Authority		umber			Federal FY of Grant:			
	ar from the frame of the first	Capital Fund Progr			0101	2001			
		Replacement Hous	ing Factor Grant l						
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estin	mated Cost	Total Ac	tual Cost	Status of Work	
				Original	Revised	Funds Obligated	Funds Expended		
12-8 Lexington (Cont)	Non-Dwelling Structures	1470		\$51,000.00	\$50,360.00	\$0.00	\$0.00		
	a. Security Hardware			\$3,000.00	\$3,000.00	\$0.00	\$0.00		
	b. Heating System Improvements			\$30,000.00	\$30,000.00	\$0.00	\$0.00		
	c. Garbage Compactor			\$15,000.00	\$15,000.00	\$0.00	\$0.00		
	d. Automatic Entry Access			\$3,000.00	\$3,000.00	\$0.00	\$0.00		
12-9 Garden Apartments	Site Improvements	1450		\$19,868.00	\$0.00	\$0.00	\$0.00		
	a. Boundary Fence			\$19,868.00	\$0.00	\$0.00	\$0.00	Moved to Prev. year	
PHA Wide	Operating Budget	1406		\$170,732.00	\$361,064.00	\$361,064.00	\$361,064.00		
	a. Operating Subsidy			\$170,732.00	\$361,064.00	\$361,064.00	\$361,064.00	Disbursed	
	Management Improvements	1408		\$120,000.00	\$120,000.00	\$0.00	\$0.00		
	a. Security			\$70,000.00	\$70,000.00	0.00	\$0.00		
	b. Software Improvements			\$40,000.00	\$40,000.00	\$0.00	\$0.00		
	c. Marketing/Advertising			\$10,000.00	\$10,000.00	\$4,017.59	\$4,017.59	Radio Spots	
	Dwelling Structures	1460		\$10,000.00	\$10,000.00	\$1227.54	\$1,227.54		
	a. Accessibility Improvements			\$5,000.00	\$5,000.00	\$1,227.54	\$1,227.54	Items Purchased	
	b. Replace Carpeting			\$5,000.00	\$5,000.00	\$0.00	\$0.00		
	Dwelling Equipment	1465.1		\$6,000.00	\$6,000.00	\$0.00	\$0.00		
	a. Window A/C Units			\$3,000.00	\$3,000.00	\$927.49	\$927.49	Items Purchased	
	b. Replace Appliances			\$3,000.00	\$3,000.00	\$0.00	\$0.00		
PHA Wide (Cont)	Non-Dwelling Structures	1470		\$13,000.00	\$13,000.00	\$0.00	\$0.00		

	our Housing Authority	Grant Type and N	Federal FY of Grant:					
	2		ram Grant No: CI	FP IL06P0125	2001			
		Replacement House	sing Factor Grant I	No:				
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	
	a. Office Security Hardware			\$3,000.00	\$3,000.00	\$0.00	\$0.00	
	b. Office Remodeling			\$10,000.00	\$10,000.00	\$0.00	\$0.00	
	Non-Dwelling Equipment	1475		\$82,000.00	\$82,000.00	\$0.00	\$0.00	
	a. Replace Radios			\$6,000.00	\$6,000.00	\$0.00	\$0.00	
	b. Replace Misc. Tools			\$6,000.00	\$6,000.00	\$3,533.99	\$3,533.99	Items Purchased
	c. Computer Equipment			\$30,000.00	\$30,000.00	\$2,921.58	\$2,921.58	Items Purchased
	d. Replace Vehicles			\$40,000.00	\$40,000.00	\$0.00	\$0.00	
	Administration	1410		\$140,723.00	\$140,723.00	\$137,131.87	\$0.00	
	a. Technical Salaries			\$99,723.00	\$99,723.00	\$99,723.00	\$0.00	
	b. Employee Benefits			\$32,000.00	\$32,000.00	\$32,000.00	\$0.00	
	c. Travel & Training			\$5,500.00	\$4,500.00	\$1,395.92	\$1,395.92	
	1. CFP Training			\$4,000.00	\$3,000.00	\$590.00	\$590.00	
	2. Fuel for Inspections			\$1,500.00	\$1,500.00	\$805.92	\$805.92	
	d. Printing & Advertising			\$3,500.00	\$4,500.00	\$4,012.95	\$4,012.95	
	Fees & Costs	1430		\$90,000.00	\$90,000.00	\$0.00	\$0.00	
	a. A/E for Comprehensive Modernization			\$70,000.00	\$70,000.00	\$0.00	\$0.00	
	b. Misc. A/E			\$20,000.00	\$20,000.00	\$0.00	\$0.00	

PHA Name: Decatur Housing Authority			Grant Type and Number				Federal FY of Grant:
		Capital Fund Program No: CFP IL06P01250101 Replacement Housing Factor No:				2001	
Development Number Name/HA-Wide Activities		Fund Obligate rter Ending D		All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates
	Original	Revised	Actual	Original	Revised	Actual	
12-1 Longview	12/31/02			6/30/04			
12-2 Concord	12/31/02			6/30/04			
12-3 Hartford	12/31/02			6/30/04			
12-5 Scattered Sites	12/31/02			6/30/04			
12-8 Lexington	12/31/02			6/30/04			
12-9 Garden Apartments	12/31/02			6/30/04			
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CAPITAL FUND PROGRAM TABLES START HERE Attachment: il012k02

	Annual Statement/Performance and Evaluation Report								
	ital Fund Program and Capital Fund P Name: Decatur Housing Authority	Grant Type and Number Capital Fund Program Grant N Replacement Housing Factor O	Federal FY of Grant: 2002						
Ori	Original Annual Statement Reserve for Disasters/ Emergencies Revised Annual Statement (revision no:								
	Performance and Evaluation Report for Period Ending: 9/30/2002 Final Performance and Evaluation Report								
Line	Summary by Development Account	Total Estin			tual Cost				
No.	The state of the s								
		Original	Revised	Obligated	Expended				
1	Total non-CFP Funds	\$0.00	\$0.00	\$0.00	\$0.00				
2	1406 Operations	\$272,277.00	\$272,277.00	\$272,277.00	\$136,138.00				
3	1408 Management Improvements	\$95,000.00	\$95,000.00	\$7,430.03	\$7,430.00				
4	1410 Administration	\$115,400.00	\$115,400.00	\$0.00	\$0.00				
5	1411 Audit	\$0.00	\$0.00	\$0.00	\$0.00				
6	1415 Liquidated Damages	\$0.00	\$0.00	\$0.00	\$0.00				
7	1430 Fees and Costs	\$100,000.00	\$100,000.00	\$0.00	\$0.00				
8	1440 Site Acquisition	\$0.00	\$0.00	\$0.00	\$0.00				
9	1450 Site Improvement	\$0.00	\$0.00	\$0.00	\$0.00				
10	1460 Dwelling Structures	\$26,000.00	\$26,000.00	\$0.00	\$0.00				
11	1465.1 Dwelling Equipment—Nonexpendable	\$22,711.00	\$22,711.00	\$0.00	\$0.00				
12	1470 Nondwelling Structures	\$30,000.00	\$30,000.00	\$0.00	\$0.00				
13	1475 Nondwelling Equipment	\$0.00	\$0.00	\$0.00	\$0.00				
14	1485 Demolition	\$0.00	\$0.00	\$0.00	\$0.00				
15	1490 Replacement Reserve	\$0.00	\$0.00	\$0.00	\$0.00				
16	1492 Moving to Work Demonstration	\$0.00	\$0.00	\$0.00	\$0.00				
17	1495.1 Relocation Costs	\$0.00	\$0.00	\$0.00	\$0.00				
18	1499 Development Activities	\$700,000.00	\$700,000.00	\$0.00	\$0.00				
19	1501 Collaterization or Debt Service	\$0.00	\$0.00	\$0.00	\$0.00				
20	1502 Contingency	\$0.00	\$0.00	\$0.00	\$0.00				
21	Amount of Annual Grant: (sum of lines 2 – 20)	\$1,361,388.00	\$1,361,388.00	\$279,707.03	\$143,568.03.00				
22	Amount of line 21 Related to LBP Activities	\$0.00	\$0.00	\$0.00	\$0.00				
23	Amount of line 21 Related to Section 504 compliance	\$0.00	\$0.00	\$0.00	\$0.00				
24	Amount of line 21 Related to Security – Soft Costs	\$35,000.00	\$35,000.00	\$0.00	\$0.00				
25	Amount of Line 21 Related to Security – Hard Costs	\$0.00	\$0.00	\$0.00	\$0.00				
26	Amount of line 21 Related to Energy Conservation Measures	\$0.00	\$0.00	\$0.00	\$0.00				

Part II:	Supporting	Pages
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PHA Name: Decatur Housing Authority		Grant Type and N	umber			Federal FY of Grant:		
	,	Capital Fund Progr	ram Grant No: CF	FP IL06P01250)102	2002		
		Replacement Hous	ing Factor Grant N	Vo:				
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
Honvinos				Original	Revised	Funds Obligated	Funds Expended	
12-1 Longview	Replacement Development	1499		\$700,000.00	\$700,000.00	\$0.00	\$0.00	
	a. Construct Units to Replace units lost thru HOPE VI Demolition			\$700,000.00	\$700,000.00	\$0.00	\$0.00	
	b. Emergency Repairs			\$0.00	\$0.00	\$0.00	\$0.00	
12-2 Concord	Non-Dwelling Structures	1470		\$0.00	\$0.00	\$0.00	\$0.00	
	a. Replace Air Handler Coil			\$0.00	\$0.00	\$0.00	\$0.00	
	b. Security Camera System			\$0.00	\$0.00	\$0.00	\$0.00	
12-8 Lexington	Non-Dwelling Structures	1470		\$30,000.00	\$30,000.00	\$0.00	\$0.00	
	a. Replace Air Handler Coil			\$0.00	\$0.00	\$0.00	\$0.00	
	b. Security Camera System			\$0.00	\$0.00	\$0.00	\$0.00	
	c. Exterior Painting			\$30,000.00	\$30,000.00	\$30,000.00	\$30,000.00	
12-9 Garden Apartments	Dwelling Structures	1460		\$0.00	\$0.00	\$0.00	\$0.00	
	a. Install Security Storm Doors			\$0.00	\$0.00	\$0.00	\$0.00	
PHA Wide	Operating Budget	1406		\$272,277.00	\$272,277.00	\$272,277.00	\$136,138.00	
	a. Operating Subsidy			\$272,277.00	\$272,277.00	\$272,277.00	\$136,138.00	
	Management Improvements	1408		\$95,000.00	\$95,000.00	\$7,430.00	\$7,430.00	
	a. Security			\$35,000.00	\$35,000.00	\$0.00	\$0.00	
	b. Software Improvements			\$20,000.00	\$20,000.00	\$0.00	\$0.00	
	c. Marketing/Advertising			\$10,000.00	\$10,000.00	\$0.00	\$0.00	
	d. Compensation Study			\$15,000.00	\$15,000.00	\$0.00	\$0.00	
	e. Staff Training EDP			\$15,000.00	\$15,000.00	\$2,475.00	\$2,475.00	

	cur Housing Authority	Grant Type and N Capital Fund Progr Replacement Hous	ram Grant No: Cl	Federal FY of Grant: 2002				
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estir	Total Estimated Cost		Total Actual Cost	
				Original	Revised	Funds Obligated	Funds Expended	
PHA Wide	Dwelling Structures	1460		\$26,000.00	\$26,000.00	\$0.00	\$0.00	
	a. Accessibility Improvements			\$0.00	\$0.00	\$0.00	\$0.00	
	b. Replace Carpeting			\$26,000.00	\$26,000.00	\$0.00	\$0.00	
	Dwelling Equipment	1465.1		\$22,711.00	\$22,711.00	\$0.00	\$0.00	
	a. Window A/C Units			\$19,711.00	\$19,711.00	\$0.00	\$0.00	
	b. Replace Appliances			\$3,000.00	\$3,000.00	\$0.00	\$0.00	
	Non-Dwelling Structures	1450		\$0.00	\$0.00	\$0.00	\$0.00	
	a. Re-Pave Parking/Davis Center			\$0.00	\$0.00	\$0.00	\$0.00	
	Non-Dwelling Equipment	1475		\$0.00	\$0.00	\$0.00	\$0.00	
	a. Replace Radios			\$0.00	\$0.00	\$0.00	\$0.00	
	b. Replace Misc. Tools			\$0.00	\$0.00	\$0.00	\$0.00	
	c. Computer Equipment			\$0.00	\$0.00	\$0.00	\$0.00	
	d. Replace Vehicles			\$0.00	\$0.00	\$0.00	\$0.00	
	Administration	1410		\$115,400.00	\$115,400.00	\$0.00	\$0.00	
	a. Technical Salaries			\$76,000.00	\$76,000.00	\$0.00	\$0.00	
	b. Employee Benefits			\$30,400.00	\$30,400.00	\$0.00	\$0.00	
	c. Travel & Training			\$6,000.00	\$6,000.00	\$0.00	\$0.00	
	1. CFP Training			\$5,000.00	\$5,000.00	\$0.00	\$0.00	
	2. Fuel for Inspections			\$1,000.00	\$1,000.00	\$0.00	\$0.00	
	d. Printing & Advertising			\$3,000.00	\$3,000.00	\$0.00	\$0.00	
	Fees & Costs	1430		\$100,000.00	\$100,000.00	\$0.00	\$0.00	
	a. Misc. A/E			\$100,000.00	\$100,000.00	\$0.00	\$0.00	

PHA Name: Decatur Housing Authority			Type and Nur	nber		Federal FY of Grant:		
			al Fund Progra	m No: CFP IL06	P01250102	2002		
				ng Factor No:				
Development Number	All	Fund Obligate	ed	A	Il Funds Expended	l	Reasons for Revised Target Dates	
Name/HA-Wide	(Qua	rter Ending D	ate)	(Q	uarter Ending Date	e)		
Activities								
	Original	Revised	Actual	Original	Revised	Actual		
12-1 Longview	6/30/04			6/30/05				
12-2 Concord	6/30/04			6/30/05				
12-3 Hartford	6/30/04			6/30/05				
12-8 Lexington	6/30/04			6/30/05				
12-9 Garden Apartments	6/30/04			6/30/05				
PHA Wide	6/30/04			6/30/05				