

PHA Plans

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

**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: Knox County Housing Authority

PHA Number: IL085

PHA Fiscal Year Beginning: 04/01/2003

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 2000 - 2004
[24 CFR Part 903.5]

A. Mission

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

- The mission of the PHA is the same as that of the Department of Housing and Urban Development: To promote adequate and affordable housing, economic opportunity and a suitable living environment free from discrimination.
- The PHA's mission is:
Recognizing that the need for shelter falls only slightly below that of nutrition in the hierarchy of human needs, the Knox County Housing Authority's mission is to be the leader in making excellent, affordable housing available for low and moderate income persons in Knox County. This mission is expanded to include partnering with other agencies and families served to plan and implement programs and services that will help those families develop and thrive. Effective management and the wise stewardship of public funds being primary considerations throughout.

B. Goals

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

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

- PHA Goal: Expand the supply of assisted housing
Objectives:
- Apply for additional rental vouchers:
 - Reduce public housing vacancies:
 - Leverage private or other public funds to create additional housing opportunities:
 - Acquire or build units or developments
 - Other (list below)
- PHA Goal: Improve the quality of assisted housing
Objectives:
- Improve public housing management: (PHAS score) 94

- Improve voucher management: (SEMAP score)
- Increase customer satisfaction: (RASS score 90)
- Concentrate on efforts to improve specific management functions: (list; e.g., public housing finance; voucher unit inspections)
- Renovate or modernize public housing units: (Ongoing effort OE)
- Demolish or dispose of obsolete public housing:
- Provide replacement public housing:
- Provide replacement vouchers:
- Other: (list below)

PHA Goal: Increase assisted housing choices

Objectives:

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

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

PHA Goal: Provide an improved living environment

Objectives:

- Implement measures to deconcentrate poverty by bringing higher income public housing households into lower income developments:
- Implement measures to promote income mixing in public housing by assuring access for lower income families into higher income developments:
- Implement public housing security improvements:
- Designate developments or buildings for particular resident groups (elderly, persons with disabilities)
- Other: (list below)
 - 1) Install central air conditioning in family housing units
 - 2) Construct porches, patios and storage areas for family housing units

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

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

Objectives:

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

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

PHA Goal: Ensure equal opportunity and affirmatively further fair housing

Objectives:

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

Other PHA Goals and Objectives:

PHA Goal: Increase overall level of lease compliance by residents

Objectives:

- 1) Establish more stringent policies to encourage timely payment of rent and charges
- 2) Establish more effective program of documenting lease violations to assure success in civil court action when necessary to remove chronic lease violators.

Annual PHA Plan
PHA Fiscal Year 2000
[24 CFR Part 903.7]

i. Annual Plan Type:

Select which type of Annual Plan the PHA will submit.

Standard Plan

Streamlined Plan:

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

Troubled Agency Plan

ii. Executive Summary of the Annual PHA Plan

[24 CFR Part 903.7 9 (r)]

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

iii. Annual Plan Table of Contents

[24 CFR Part 903.7 9 (r)]

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

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Annual Plan

i. Executive Summary

Table Library

ii. Table of Contents

1. Housing Needs
2. Financial Resources
3. Policies on Eligibility, Selection and Admissions
4. Rent Determination Policies
5. Operations and Management Policies
6. Grievance Procedures
7. Capital Improvement Needs
8. Demolition and Disposition
9. Designation of Housing
10. Conversions of Public Housing
11. Homeownership
12. Community Service Programs
13. Crime and Safety
14. Pets (Inactive for January 1 PHAs)
15. Civil Rights Certifications (included with PHA Plan Certifications)
16. Audit
17. Asset Management
18. Other Information

Attachments

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

Required Attachments:

- Admissions Policy for Deconcentration N/A
- FY 2000 Capital Fund Program Annual Statement
- Most recent board-approved operating budget (Required Attachment for PHAs that are troubled or at risk of being designated troubled ONLY)

Optional Attachments:

- PHA Management Organizational Chart
- FY 2000 Capital Fund Program 5 Year Action Plan
- Public Housing Drug Elimination Program (PHDEP) Plan N/A
- Comments of Resident Advisory Board or Boards (must be attached if not included in PHA Plan text)
- Other (List below, providing each attachment name)

Supporting Documents Available for Review

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

List of Supporting Documents Available for Review		
Applicable & On Display	Supporting Document	Applicable Plan Component
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
N/A	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;

List of Supporting Documents Available for Review		
Applicable & On Display	Supporting Document	Applicable Plan Component
X	Public Housing Admissions and (Continued) Occupancy Policy (A&O), which includes the Tenant Selection and Assignment Plan [TSAP]	Annual Plan: Eligibility, Selection, and Admissions Policies
X	Section 8 Administrative Plan	Annual Plan: Eligibility, Selection, and Admissions Policies
N/A	Public Housing Deconcentration and Income Mixing Documentation: 1. PHA board certifications of compliance with deconcentration requirements (section 16(a) of the US Housing Act of 1937, as implemented in the 2/18/99 <i>Quality Housing and Work Responsibility Act Initial Guidance; Notice</i> and any further HUD guidance) and 2. Documentation of the required deconcentration and income mixing analysis	Annual Plan: Eligibility, Selection, and Admissions Policies
X	Public housing rent determination policies, including the methodology for setting public housing flat rents <input checked="" type="checkbox"/> check here if included in the public housing A & O Policy	Annual Plan: Rent Determination
X	Schedule of flat rents offered at each public housing development <input type="checkbox"/> check here if included in the public housing A & O Policy	Annual Plan: Rent Determination
X	Section 8 rent determination (payment standard) policies <input checked="" type="checkbox"/> check here if included in Section 8 Administrative Plan	Annual Plan: Rent Determination
X	Public housing management and maintenance policy documents, including policies for the prevention or eradication of pest infestation (including cockroach infestation)	Annual Plan: Operations and Maintenance

Table Library

List of Supporting Documents Available for Review		
Applicable & On Display	Supporting Document	Applicable Plan Component
X	Public housing grievance procedures <input checked="" type="checkbox"/> check here if included in the public housing A & O Policy	Annual Plan: Grievance Procedures
X	Section 8 informal review and hearing procedures <input checked="" type="checkbox"/> check here if included in Section 8 Administrative Plan	Annual Plan: Grievance Procedures
X	The HUD-approved Capital Fund/Comprehensive Grant Program Annual Statement (HUD 52837) for the active grant year	Annual Plan: Capital Needs
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
N/A	Approved HOPE VI applications or, if more recent, approved or submitted HOPE VI Revitalization Plans or any other approved proposal for development of public housing	Annual Plan: Capital Needs
N/A	Approved or submitted applications for demolition and/or disposition of public housing	Annual Plan: Demolition and Disposition
	Approved or submitted applications for designation of public housing (Designated Housing Plans)	Annual Plan: Designation of Public Housing
N/A	Approved or submitted assessments of reasonable revitalization of public housing and approved or submitted conversion plans prepared pursuant to section 202 of the 1996 HUD Appropriations Act	Annual Plan: Conversion of Public Housing
N/A	Approved or submitted public housing homeownership programs/plans	Annual Plan: Homeownership
X	Policies governing any Section 8 Homeownership program <input checked="" type="checkbox"/> check here if included in the Section 8 Administrative Plan	Annual Plan: Homeownership
X	Any cooperative agreement between the PHA and the TANF	Annual Plan: Community

Table Library

List of Supporting Documents Available for Review		
Applicable & On Display	Supporting Document	Applicable Plan Component
	agency	Service & Self-Sufficiency
	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 (PHDEP) semi-annual performance report for any open grant and most recently submitted PHDEP application (PHDEP Plan)	Annual Plan: Safety and Crime Prevention
	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)]

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-ability	Size	Locatio n
Income <= 30% of AMI	549	5	2	2	2	4	5
Income >30% but <=50% of AMI	183	4	2	3	2	3	3
Income >50% but <80% of AMI	122	3	2	4	3	3	2
Elderly	144	2	1	1	1	2	1
Families with Disabilities	125	5	4	3	4	3	3
Race/Ethnicity W	432						
Race/Ethnicity B	247						
Race/Ethnicity H	19						
Race/Ethnicity O	2						

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

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

A local study was done of all subsidized complexes and other major landlords in Galesburg to determine housing needs as of November 2002.

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

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

Housing Needs of Families on the Waiting List			
Waiting list type: (select one)			
<input type="checkbox"/>	Section 8 tenant-based assistance		
<input type="checkbox"/>	Public Housing		
<input checked="" type="checkbox"/>	Combined Section 8 and Public Housing		
<input type="checkbox"/>	Public Housing Site-Based or sub-jurisdictional waiting list (optional)		
If used, identify which development/sub jurisdiction:			
	# of families	% of total families	Annual Turnover
Waiting list total	498		118
Extremely low income <=30% AMI	444	89%	
Very low income	50	10%	

Table Library

Housing Needs of Families on the Waiting List			
(>30% but <=50% AMI)			
Low income (>50% but <80% AMI)	4	1%	
Families with children	399	80%	
Elderly families	18	4%	
Families with Disabilities	80	16%	
Race/ethnicity W	263	53%	
Race/ethnicity B	218	44%	
Race/ethnicity H	17	3%	
Race/ethnicity O	0	0%	
Characteristics by Bedroom Size (Public Housing Only)			
1BR	4	3%	81
2 BR	50	45%	42
3 BR	39	35%	41
4 BR	12	11%	10
5 BR	4	3%	2
5+ BR	0	0%	0

Table Library

Housing Needs of Families on the Waiting List

Is the waiting list closed (select one)? No Yes

If yes:

How long has it been closed (# of months)?

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

C. Strategy for Addressing Needs

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

(1) Strategies

Need: Shortage of affordable housing for all eligible populations

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

Select all that apply

- Employ effective maintenance and management policies to minimize the number of public housing units off-line
- Reduce turnover time for vacated public housing units
- Reduce time to renovate public housing units
- Seek replacement of public housing units lost to the inventory through mixed finance development **N/A**
- Seek replacement of public housing units lost to the inventory through section 8 replacement housing resources **N/A**
- Maintain or increase section 8 lease-up rates by establishing payment standards that will enable families to rent throughout the jurisdiction
- Undertake measures to ensure access to affordable housing among families assisted by the PHA, regardless of unit size required
- Maintain or increase section 8 lease-up rates by marketing the program to owners, particularly those outside of areas of minority and poverty concentration

- Maintain or increase section 8 lease-up rates by effectively screening Section 8 applicants to increase owner acceptance of program
- Participate in the Consolidated Plan development process to ensure coordination with broader community strategies
- Other (list below)

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

Select all that apply

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

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

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

Select all that apply

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

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

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

Select all that apply

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

Other: (list below)

Need: Specific Family Types: The Elderly

Strategy 1: Target available assistance to the elderly:

Select all that apply

There are currently many vacant, subsidized, elderly housing units in the jurisdiction. Targeting this population not seen as a need at this time

- 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

Select all that apply

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

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

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

Select if applicable

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

Strategy 2: Conduct activities to affirmatively further fair housing

Select all that apply

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

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

(2) Reasons for Selecting Strategies

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

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

2. Statement of Financial Resources

[24 CFR Part 903.7 9 (b)]

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

Table Library

Financial Resources: Planned Sources and Uses		
Sources	Planned \$	Planned Uses
1. Federal Grants (FY 2000 grants)		
a) Public Housing Operating Fund	\$726,202.00	
b) Public Housing Capital Fund	\$996,990.00	
c) HOPE VI Revitalization		
d) HOPE VI Demolition		
e) Annual Contributions for Section 8 Tenant-Based Assistance	\$1,268,857.00	
f) Public Housing Drug Elimination Program (including any Technical Assistance funds)	-0-	
g) Resident Opportunity and Self-Sufficiency Grants		
h) Community Development Block Grant		
i) HOME		
Other Federal Grants (list below)		
2. Prior Year Federal Grants (unobligated funds only) (list below)		
Drug Elimination	\$ 34,634.00	
Capital Fund	\$2,023,390.00	Cap Improvements (see cap fund plan)

Table Library

Financial Resources: Planned Sources and Uses		
Sources	Planned \$	Planned Uses
3. Public Housing Dwelling Rental Income	\$570,000.00	Operation and Maintenance
4. Other income (list below)		
Interest	\$20,000.00	Operation & Maint.
4. Non-federal sources (list below)		
Laundry income, Tenant damage		
Charges, Non-dwelling rental	\$45,000.00	Operation & Maint
Total resources	\$5,685,073.00	

3. PHA Policies Governing Eligibility, Selection, and Admissions

[24 CFR Part 903.7 9 (c)]

A. Public Housing

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

(1) Eligibility

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

- When families are within a certain number of being offered a unit: (state number)
- When families are within a certain time of being offered a unit: (state time)
- Other: (describe)

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

- Criminal or Drug-related activity
- Rental history
- Housekeeping
- Other (describe) Prior public housing and "section 8" program compliance

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

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

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

(2)Waiting List Organization

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

- Community-wide list
- Sub-jurisdictional lists
- Site-based waiting lists (Elderly separate from family)
- Other (describe) Elderly/handicapped may specify development in either Galesburg or Abingdon, Illinois or be considered for first vacancy in either.)

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

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

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

1. How many site-based waiting lists will the PHA operate in the coming year? 3

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

3. Yes No: May families be on more than one list simultaneously
If yes, how many lists? 2 (Either Galesburg or Abingdon)

4. Where can interested persons obtain more information about and sign up to be on the site-based waiting lists (select all that apply)?

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

(3) Assignment

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

- One
- Two
- Three or More

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

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

(4) Admissions Preferences

a. Income targeting:

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

b. Transfer policies:

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

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

c. Preferences

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

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

Former Federal preferences:

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

Other preferences: (select below)

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

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

Date and Time

Former Federal preferences:

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

1 High rent burden

Other preferences (select all that apply)

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

4. Relationship of preferences to income targeting requirements:

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

(5) Occupancy

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

- The PHA-resident lease
- The PHA's Admissions and (Continued) Occupancy policy
- PHA briefing seminars or written materials
- Other source (list) "House Rules" lease addendum

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

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

(6) Deconcentration and Income Mixing

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

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

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

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

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

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

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

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

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

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

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

B. Section 8

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

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

(1) Eligibility

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

- 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) Record of program compliance during former participation in federally subsidized housing programs
- Other (list below)

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

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

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

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

- Criminal or drug-related activity
- Other (describe below) The names of former landlords and information received from them.

(2) Waiting List Organization

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

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

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

- PHA main administrative office

Other (list below)

(3) Search Time

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

If yes, state circumstances below: If voucher holder proves that she/he is actively searching two additional 30-day search periods may be granted.

(4) Admissions Preferences

a. Income targeting

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

b. Preferences

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

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

Former Federal preferences

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

Other preferences (select all that apply)

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

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

Date and Time

Former Federal preferences

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

Other preferences (select all that apply)

- Working families and those unable to work because of age or disability
- Veterans and veterans' families
- Residents who live and/or work in your jurisdiction
- Those enrolled currently in educational, training, or upward mobility programs

- Households that contribute to meeting income goals (broad range of incomes)
- Households that contribute to meeting income requirements (targeting)
- Those previously enrolled in educational, training, or upward mobility programs
- Victims of reprisals or hate crimes
- Other preference(s) (list below)

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

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

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

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

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

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

(5) Special Purpose Section 8 Assistance Programs N/A

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

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

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

- Through published notices
 Other (list below)

4. PHA Rent Determination Policies

[24 CFR Part 903.7 9 (d)]

A. Public Housing

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

(1) Income Based Rent Policies

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

a. Use of discretionary policies: (select one)

- The PHA will not employ any discretionary rent-setting policies for income based rent in public housing. Income-based rents are set at the higher of 30% of adjusted monthly income, 10% of unadjusted monthly income, the welfare rent, or minimum rent (less HUD mandatory deductions and exclusions). (If selected, skip to sub-component (2))

---or---

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

b. Minimum Rent

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

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

2. Yes No: Has the PHA adopted any discretionary minimum rent hardship exemption policies? Not necessary, minimum rent set at zero.

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: Per QHWRA, income of newly employed household member exempted. Also, rent reviewed only annually unless interim requested by family.

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

For the earned income of a previously unemployed household member

For increases in earned income

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

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

For household heads

For other family members

For transportation expenses

For the non-reimbursed medical expenses of non-disabled or non-elderly families

Other (describe below)

e. Ceiling rents

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

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

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

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

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

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

Other (list below)

f. Rent re-determinations:

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

Never

At family option

Any time the family experiences an income increase

Any time a family experiences an income increase above a threshold amount or percentage: (if selected, specify threshold)_____

Other (list below) Increases in income must be reported as they occur but will only result in rent adjustments at annual or per provisions of QHWRA.

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

(2) Flat Rents

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

The section 8 rent reasonableness study of comparable housing

Survey of rents listed in local newspaper

Survey of similar unassisted units in the neighborhood

Other (list/describe below)

B. Section 8 Tenant-Based Assistance

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

(1) Payment Standards

Describe the voucher payment standards and policies.

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

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

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

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

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

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

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

- Annually
- Other (list below)

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

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

(2) Minimum Rent

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

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

b. Yes No: Has the PHA adopted any discretionary minimum rent hardship exemption policies? (if yes, list below)
Not necessary, minimum rent is zero.

5. Operations and Management

[24 CFR Part 903.7 9 (e)]

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

A. PHA Management Structure

Describe the PHA's management structure and organization.

(select one)

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

B. HUD Programs Under PHA Management

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

Program Name	Units or Families Served at Year Beginning	Expected Turnover
Public Housing	430	40%
Section 8 Vouchers	280	40%
Section 8 Certificates		
Section 8 Mod Rehab		
Special Purpose Section 8 Certificates/Vouchers (list individually)		
Public Housing Drug Elimination Program (PHDEP)		
Other Federal Programs(list individually)		

C. Management and Maintenance Policies

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

(1) Public Housing Maintenance and Management: (list below)

(2) Section 8 Management: (list below)

6. PHA Grievance Procedures

[24 CFR Part 903.7 9 (f)]

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

A. Public Housing

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

If yes, list additions to federal requirements below:

2. Which PHA office should residents or applicants to public housing contact to initiate the PHA grievance process? (select all that apply)

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

B. Section 8 Tenant-Based Assistance

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

If yes, list additions to federal requirements below:

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

- PHA main administrative office
 Other (list below)

7. Capital Improvement Needs

[24 CFR Part 903.7 9 (g)]

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

A. Capital Fund Activities

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

(1) Capital Fund Program Annual Statement

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

Select one:

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

-or-

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

Table Library

(2) Optional 5-Year Action Plan

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

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

b. If yes to question a, select one:

The Capital Fund Program 5-Year Action Plan is provided as an attachment to the PHA Plan at Attachment (state name
-or-

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

B. HOPE VI and Public Housing Development and Replacement Activities (Non-Capital Fund)

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

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

1. Development name:

2. Development (project) number:

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

Revitalization Plan under development

Table Library

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

Yes No: c) Does the PHA plan to apply for a HOPE VI Revitalization grant in the Plan year?
If yes, list development name/s below:

Yes No: d) Will the PHA be engaging in any mixed-finance development activities for public housing in the Plan year?
If yes, list developments or activities below:

Yes No: e) Will the PHA be conducting any other public housing development or replacement activities not discussed in the Capital Fund Program Annual Statement?
If yes, list developments or activities below:

8. Demolition and Disposition

[24 CFR Part 903.7 9 (h)]

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

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

2. Activity Description

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

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

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

[24 CFR Part 903.7 9 (i)]

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

1. Yes No: Has the PHA designated or applied for approval to designate or does the PHA plan to apply to designate any public housing for occupancy only by the elderly families or only by families with disabilities, or by elderly families and families with disabilities or will apply for designation for occupancy by only elderly families or only families with disabilities, or by elderly families and families with disabilities as provided by section 7 of the U.S. Housing Act of 1937 (42 U.S.C. 1437e) in the upcoming fiscal

year? (If “No”, skip to component 10. If “yes”, complete one activity description for each development, unless the PHA is eligible to complete a streamlined submission; PHAs completing streamlined submissions may skip to component 10.)

2. Activity Description

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

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

10. Conversion of Public Housing to Tenant-Based Assistance

[24 CFR Part 903.7 9 (j)]

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

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

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

2. Activity Description

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

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

- 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 now has less than 300 units
- Other: (describe below)

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

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

11. Homeownership Programs Administered by the PHA

[24 CFR Part 903.7 9 (k)]

A. Public Housing

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

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

2. Activity Description

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

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

(DD/MM/YYYY)
5. Number of units affected:
6. Coverage of action: (select one)
<input type="checkbox"/> Part of the development
<input type="checkbox"/> Total development

B. Section 8 Tenant Based Assistance

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

2. Program Description:

a. Size of Program

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

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

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

b. PHA-established eligibility criteria

Yes No: Will the PHA’s program have eligibility criteria for participation in its Section 8 Homeownership Option program in addition to HUD criteria?

If yes, list criteria below:

12. PHA Community Service and Self-sufficiency Programs

[24 CFR Part 903.7 9 (1)]

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

A. PHA Coordination with the Welfare (TANF) Agency

1. Cooperative agreements:

- Yes No: Has the PHA entered into a cooperative agreement with the TANF Agency, to share information and/or target supportive services (as contemplated by section 12(d)(7) of the Housing Act of 1937)?

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

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

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

B. Services and programs offered to residents and participants

(1) General

a. Self-Sufficiency Policies

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

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

b. Economic and Social self-sufficiency programs

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

Services and Programs				
Program Name & Description (including location, if appropriate)	Estimated Size	Allocation Method (waiting list/random selection/specific criteria/other)	Access (development office / PHA main office / other provider name)	Eligibility (public housing or section 8 participants or both)
Transition to work course	20	First come	KCHA & local com.	PH residents

Table Library

			college	
GED prep	12	First come	@ housing sites	PH residents
Structured after school prog	75 youth	All welcome	@ housing sites	PH residents
Summer Day Camp	75 youth	All Welcome	@ housing sites	PH residents
CPR class	20	First come	@ housing sites/ Red Cross	PH residents

(2) Family Self Sufficiency program/s

a. Participation Description N/A

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

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

C. Welfare Benefit Reductions

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

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

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

13. PHA Safety and Crime Prevention Measures

[24 CFR Part 903.7 9 (m)]

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

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

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

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

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

- Safety and security survey of residents
- Analysis of crime statistics over time for crimes committed “in and around” public housing authority
- Analysis of cost trends over time for repair of vandalism and removal of graffiti
- Resident reports
- PHA employee reports
- Police reports
- Demonstrable, quantifiable success with previous or ongoing anticrime/anti drug programs
- Other (describe below)

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

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

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

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

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

IL 085-2

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)

IL085-2

D. Additional information as required by PHDEP/PHDEP Plan

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

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

14. RESERVED FOR PET POLICY

[24 CFR Part 903.7 9 (n)]

15. Civil Rights Certifications

[24 CFR Part 903.7 9 (o)]

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

16. Fiscal Audit

[24 CFR Part 903.7 9 (p)]

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

17. PHA Asset Management

[24 CFR Part 903.7 9 (q)]

Exemptions from component 17: Section 8 Only PHAs are not required to complete this component. High performing and small PHAs are not required to complete this component.

1. Yes No: Is the PHA engaging in any activities that will contribute to the long-term asset management of its public housing stock , including how the Agency will plan for long-term operating, capital investment, rehabilitation, modernization, disposition, and other needs that have **not** been addressed elsewhere in this PHA Plan?
2. What types of asset management activities will the PHA undertake? (select all that apply)
 - Not applicable
 - Private management
 - Development-based accounting

- Comprehensive stock assessment
- Other: (list below)

3. Yes No: Has the PHA included descriptions of asset management activities in the **optional** Public Housing Asset Management Table?

18. Other Information

[24 CFR Part 903.7 9 (r)]

A. Resident Advisory Board Recommendations

1. Yes No: Did the PHA receive any comments on the PHA Plan from the Resident Advisory Board/s?

2. If yes, the comments are: (if comments were received, the PHA **MUST** select one)

- Attached at Attachment (File name)
- Provided below:

3. In what manner did the PHA address those comments? (select all that apply)

- Considered comments, but determined that no changes to the PHA Plan were necessary.
- The PHA changed portions of the PHA Plan in response to comments
List changes below:

Other: (list below)

Comments received were suggestions for work items in capital fund program. They were referred to Capital Fund Program Coordinator for consideration and/or inclusion in plans.

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

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

3. Description of Resident Election Process

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

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

b. Eligible candidates: (select one)

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

c. Eligible voters: (select all that apply)

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

C. Statement of Consistency with the Consolidated Plan

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

1. Consolidated Plan jurisdiction: (provide name here) State of 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)

- Other: (list below)

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

D. Other Information Required by HUD

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

I. PROGRESS REPORT

KNOX COUNTY HOUSING AUTHORITY FIVE-YEAR PLAN PROGRESS REPORT

November, 2002

Mission Statement:

Recognizing that the need for shelter falls only slightly below that of nutrition in the human hierarchy of needs, the Knox County Housing Authority's mission is to be the leader in making excellent, affordable housing available to persons with lower income in Knox County. This mission is expanded to include partnering with other agencies and the families served to plan and implement programs and services that will help those families develop and thrive. Effective management and the wise stewardship of public funds are primary considerations throughout.

The above mission statement remains descriptive of the direction and emphasis of the housing authority. Each year since it was written over 250 new families have leased dwellings from the KCHA public housing inventory or have begun receiving rental assistance through its Housing Choice Voucher Program. For these families decent, safe and sanitary housing has become an affordable reality.

The KCHA resident initiatives staff, along with the network of other agencies it is a part of continues to provide a wide range of services to assist residents in their efforts to develop skills and attitudes needed to succeed. Each year these programs have been evaluated to determine that they are still viable and that they have kept pace with changing needs. The following is a list of agencies that have been included in that network in the past year and the programs they are associated with:

City of Galesburg Park and Recreation Department providing summer day camp, after school program on and off site

Galesburg Police and Fire Departments providing crime, drug, fire prevention activities on site

Bridgeway, a local mental health agency providing drug prevention programs on site and intervention services on and off site

Carl Sandburg Community College providing GED preparatory and computer literacy classes on site and "Transitions to Employment" classes off site

First Church of God for the use of their building for summer day camp activities

Illinois Cooperative Extension (University of Illinois) 4-H programs on site

Safe Harbor, domestic violence intervention and prevention agency services on and off site

Girl Scouts of America, programs on site

Knox County Area Project, tutoring on-site, swimming lessons off site

Galesburg School District 205, reading programs on-site and “Bright Futures” program for “at risk” children three and under, on site.

The KCHA five-year plan sets a series of goals. Achievement of these goals, or progress toward their achievement is as follows:

D) Expand the supply of affordable housing in the area.

Last year we reported that we had signed a cooperative agreement with a private developer who planned to build 62 apartments in Galesburg. These units were to be available for rental to “Section 8” housing choice voucher holders. These have been completed and many are now being leased by voucher holders. Additionally, KCHA applied for and received authorization to set its “Section 8” payment standards at the 50th percentile. This change has permitted our voucher holders to have a much wider choice of housing options than before. Our lease-up success rate has increased from 82% to 96%. Were it not for an interruption in the funding for that program during the past year we very likely would be at the 100%+ now.

II) Improve the quality of assisted housing

The KCHA capitol improvement grant program proceeds on schedule. Improvements have been under way throughout the year. KCHA received ten points out of the possible ten on the resident satisfaction component of the Public Housing Resident Satisfaction Survey. KCHA’s most recent total PHAS score was 94 putting the authority in the “high performer” category for the second year in a row.

III) Increase assisted housing choices

As discussed in last years progress report, we determined that there was an ample supply of rental housing in the jurisdiction but that rents for much of it were beyond the reach of our voucher holders. Also as reported last year, we applied for and received authorization to set our payment standards at the 50th percentile. Since then we confirmed that we could still make a local determination to use 110% of the applicable standard. The result has been that voucher holders have expanded, and more diverse housing options. They are also able to select housing in virtually any section of the community.

IV) Provide an improved living environment

Hallway and common areas in both of our senior/handicapped complexes have been redecorated with improved lighting. New landscaping has now been added to both of these developments. As indicated above, we received 10 out of a possible 10 points on the resident satisfaction component of the Public Housing Assessment System.

V) Promote self-sufficiency and asset development of families and individuals

See comments under Mission Statement above

VI) Ensure equal opportunity and affirmatively further fair housing

All measures prescribed by HUD regulations and by various laws are being taken to assure equal opportunity. Populations in developments reflect the diversity in the community. To date, no complaints of unfair housing practices have been lodged against the PHA.

PHA Goal: Increase the overall level of lease compliance on the part of residents.

This is an ongoing effort. Higher occupancy levels have resulted in more compliance issues. Certain provisions of our leases have been updated and clarified to strengthen our legal position and reduce the possibility that non-compliant tenants might prevail in cases where it is necessary to seek possession of a dwelling unit in a court of law.

II. CHANGES TO THE PUBLIC HOUSING ADMINISTRATIVE PLAN:

A. Revised preference point system 0.0 Tenant Selection and Assignment Plan

10.1 Preferences, SELECTION FROM THE WAITING LIST

The KCHA will select families from the waiting list based on the following preference point system:

- A. Displaced person(s): Individuals or families displaced by government action or whose dwelling has been extensively damaged or destroyed as a result of a fire (not caused by the applicant family) or disaster declared or otherwise formally recognized pursuant to Federal disaster relief laws, families who are otherwise without or about to be without housing for reasons other than eviction for lease violation. (*Applicants claiming this preference must establish that a lease agreement existed between themselves and their former landlord. This agreement must have at least defined the dwelling under lease and stipulated a regular rent amount to be collected. They must also produce a written eviction notice from the owner or authorized agent of their former dwelling which states a cause for eviction other than for a lease violation*) Persons or families displaced due to domestic violence, hate crimes or the threat of reprisals shall, upon verification of their status, qualify for this preference.
100 points
- B. Applicants who are paying more than 50% of their incomes for rent.
100 points
- C. Applicants who are living in substandard housing. 100 points
- D. Applicant households with at least one family member who resides in or has been employed in Knox County for at least 12 consecutive months prior to the date of application.
25 points
- E. Applicant households with at least one member who can provide employer verification that employment in Knox County is assured if he or she moves to the county. 10 points
- F. Applicant households in which one or more persons are veterans with at least two years of military service with other than a dishonorable discharge. 10 points.

- G. Where two applicants for a given sized unit have an equal number of points, families with dependents, elderly families, or families with disabled members will be selected. Lacking other means of prioritizing, the earliest dated applicant will be selected first.

Notwithstanding the above, applicants who are elderly or disabled will be offered housing before other single persons. Where necessary to assure that the housing authority meets the federal requirement for 60% of its new admissions to have incomes below 30% of the area median, some applicants on the may be moved ahead of others on the waiting list. 10.0 Tenant Selection and Assignment Plan

III. CHANGES TO THE SECTION 8 ADMINISTRATIVE PLAN

A. Revised preference point system

10.1 Preferences, SELECTION FROM THE WAITING LIST

The KCHA will select families from the waiting list based on the following preference point system:

- A. Displaced person(s): Individuals or families displaced by government action or whose dwelling has been extensively damaged or destroyed as a result of a fire (not caused by the applicant family) or disaster declared or otherwise formally recognized pursuant to Federal disaster relief laws, families who are otherwise without or about to be without housing for reasons other than eviction for lease violation. (*Applicants claiming this preference must establish that a lease agreement existed between themselves and their former landlord. This agreement must have at least defined the dwelling under lease and stipulated a regular rent amount to be collected. They must also produce a written eviction notice from the owner or authorized agent of their former dwelling which states a cause for eviction other than for a lease violation*) Persons or families displaced due to domestic violence, hate crimes or the threat of reprisals shall, upon verification of their status, qualify for this preference.
100 points
- B. Applicants who are paying more than 50% of their incomes for rent.
100 points
- C. Applicants who are living in substandard housing. 100 points
- D. Applicant households with at least one family member who resides in or has been employed in Knox County for at least 12 consecutive months prior to the date of application.
25 points
- E. Applicant households with at least one member who can provide employer verification that employment in Knox County is assured if he or she moves to the county. 10 points
- F. Applicant households in which one or more persons are veterans with at least two years of military service with other than a dishonorable discharge. 10 points.
- G. Where two applicants for a given sized unit have an equal number of points, families with dependents, elderly families, or families with

disabled members will be selected. Lacking other means of prioritizing, the earliest dated applicant will be selected first.

Notwithstanding the above, applicants who are elderly or disabled will be offered housing before other single persons. Where necessary to assure that the housing authority meets the federal requirement for 60% of its new admissions to have incomes below 30% of the area median, some applicants on the may be moved ahead of others on the waiting list.

A. Revised Causes for Termination of “Section 8” Assistance

15.0 Termination of assistance to the family by the KCHA

The Housing Authority may at any time terminate program assistance for a participant, because of any of the actions or inaction by the household:

- A. If the family violates any family obligations under the program.
- B. If a family member fails to sign and submit consent forms.
- C. If a family fails to establish citizenship or eligible immigrant status and is not eligible for or does not elect continuation of assistance, pro-ration of assistance, or temporary deferral of assistance. If the KCHA determines that a family member has knowingly permitted an ineligible noncitizen (other than any ineligible noncitizens listed on the lease) to permanently reside in their Section 8 unit, the family’s assistance will be terminated. Such family will not be eligible to be readmitted to Section 8 for a period of 24 months from the date of termination.
- D. If any member of the family has ever been evicted from public housing.
- E. If the Housing Authority has ever terminated assistance under the Certificate or Voucher Program for any member of the family.
- F. If any member of the family commits drug-related criminal activity, or violent criminal activity that person will be barred from participation in the “Section 8” program for five years. If a household member manufactures sells, or otherwise distributes illegal or controlled substances (drugs) or methamphetamines that member will be barred form participation for life.
- G. If any member of the family commits fraud, bribery or any other corrupt or criminal act in connection with any Federal housing program.
- H. If the family currently owes rent or other amounts to the Housing Authority or to another Housing Authority in connection with Section 8 or public housing assistance under the 1937 Act.
- I. If the family has not reimbursed any Housing Authority for amounts paid to an owner under a HAP contract for rent, damages to the unit, or other amounts owed by the family under the lease.

- J. If the family breaches an agreement with the Housing Authority to pay amounts owed to a Housing Authority, or amounts paid to an owner by a Housing Authority. (The Housing Authority, at its discretion, may offer a family the opportunity to enter an agreement to pay amounts owed to a Housing Authority or amounts paid to an owner by a Housing Authority. The Housing Authority may prescribe the terms of the agreement.)
- K. If a family participating in the FSS program fails to comply, without good cause, with the family's FSS contract of participation.
- L. If the family has engaged in or threatened abusive or violent behavior toward Housing Authority personnel.
- M. If any household member is subject to a lifetime registration requirement under a State sex offender registration program.

**IV. REVISED DWELLING UNIT LEASE
KNOX COUNTY HOUSING AUTHORITY
PUBLIC HOUSING LEASE**

1. **PARTIES AND DWELLING UNIT:** The parties to this Lease are The Knox County Housing Authority, referred to as Landlord, and, the occupying family, referred to as the Resident. The Landlord leases to the Resident the premises located at _____.

The premises leased are for the exclusive use and occupancy of the Resident and the Resident's household consisting of the following named persons who will live in the dwelling unit:

Name	Date of Birth	Social Security Number
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Any additions to the household members listed above require the advance written approval of the Landlord. This includes Live-in Aides and foster children or adults, but excludes natural births and adopted minor children. The Landlord shall approve the additions if they pass the screening and an appropriate size unit is available. Deletions from the household shall be reported to the Landlord within ten (10) days.

The Resident shall designate, in writing, a person or persons to be contacted in the event that he or she becomes incapable of complying with this Lease.

2. **LEASE TERM:** This Lease shall begin on: _____ The term shall be one year and shall renew automatically for another year, unless terminated as provided by this Lease.
3. **RENTAL PAYMENT:** Resident shall pay monthly rent of \$_____. If this Lease begins on a day other than the first day of the month, the first month's rent shall be \$_____.

_____This rent is based on the Authority-determined flat rent for this unit.

_____This rent is based on the income and other information reported by the Resident.

(Check one)

Families may change rent calculation methods at any recertification. Families who have chosen the flat rent option may request a reexamination and change to the formula-based method at any time if the family's income has decreased, their on-going expenses for such purposes as child care and medical care have changed or any other circumstances that create a hardship for the family that would be alleviated by a change.

This amount is due on the first day of each month at the Knox County Housing Authority office and shall remain in effect until adjusted in accordance with the provisions of this lease. If a reasonable accommodation on where to pay rent is needed, other arrangements will be made. Cash payments will not be accepted.

If Resident fails to make the rent payment by the fifth day of the month a \$25.00 late charge will be assessed and a notice to vacate will be issued to the Resident. A check returned for non-sufficient funds shall be considered non-payment of rent and in addition to the late charge a \$25.00 returned check fee will be charged.

In the event legal proceedings are required to recover possession of the premises, the Resident will be charged with the actual cost of such proceedings.

4. **SECURITY DEPOSIT:** The Resident has paid the amount of \$_____ to the Landlord as a Security Deposit.

The Landlord, the Security Deposit may be made in three payments -- one third in advance, one third with the second rent payment, and one third with the third rent payment. The Landlord will hold this security deposit for the period the Resident occupies the dwelling unit. The Landlord shall not use the Security Deposit for rent or other charges while the Resident is living in the dwelling unit. As provided by Illinois law, no interest will be paid on security deposit funds held by the Landlord.

Within 30 days after the Resident has permanently moved out of the dwelling unit and all necessary cleaning, repairs and redecorating have been completed, the Landlord shall return the Security Deposit after deducting whatever amount is needed to pay the cost of:

- a. unpaid rent;
- b. repair of damages that exceed normal wear and tear as listed on the Move-Out Inspection Report; and
- c. other charges due under the Lease.

The Landlord shall provide the Resident with a written list of any charges made against the Security Deposit. If the Resident disagrees with the amounts deducted, the Landlord will meet with the Resident to discuss the charges.

5. **OCCUPANCY:** The Resident shall use the premises as a private dwelling for himself or herself and the persons named in of this Lease, with the exception of minor children born or adopted into the household during this tenancy, and shall not permit its use for any other purpose without the written permission of the Landlord.

The Resident, the Residents household members and household guests shall not:

- a. provide accommodations for boarders or lodgers or permit any persons other than those listed above and minor children which are born or adopted into the household during this tenancy, to reside in the dwelling unit; *Hosting of household guests will be permitted for a total of no*

more than fourteen (14) days each year unless the prior written approval of the Landlord is obtained. For these purposes the year will commence on the lease date and the anniversary of the lease date each year thereafter.

- b. sublet or assign the unit, or any part of the unit;
- c. engage in or permit unlawful activities in the unit, in the common areas, or on the property grounds;
- e. act in a manner that will disturb the rights or comfort of neighbors;
- f. permit any member of the household, a guest, or another person under the Resident's control to engage in any criminal activity that threatens the health, safety, or right to peaceful enjoyment of the premises by other residents or Authority employees;
- g. engage in any violent or drug-related criminal activity on or off the premises
- h. Permit any person known by them to be banned from Knox County Housing Authority present in the Resident's dwelling unit or on any Knox County Housing Authority premises.

With the written permission of the Landlord, the Resident may incidentally use the premises for legally permissible income producing purposes so long as the business does not infringe on the rights of other Residents. All such business-related uses of the premises must meet all zoning requirements and the Resident must have the proper business licenses.

The Resident has the right to exclusive use and occupancy of the dwelling unit, which includes reasonable accommodation of the Resident's guests, visitors (*up 14 days per year*) and, with the consent of the Landlord, foster children and/or adults and the live-in care giver of the Resident's family.

- 6. **CONDITION OF DWELLING:** By signing this Lease and the Unit Inspection Report, the Resident acknowledges that the dwelling unit is safe, clean and in good condition, and that all appliances and equipment in the dwelling unit are in good working order as described on the Move-in Unit Inspection Report. This report, signed by both the Resident and Landlord, is attached to this Lease.

At the time of move out, the Landlord shall complete another inspection of the dwelling unit. When the Resident notifies the Landlord of his or her intent to vacate, the Landlord shall advise the Resident of their opportunity to participate in the move-out inspection.

- 7. **UTILITIES:** The Knox County Housing Authority shall provide the following utilities as a part of this lease agreement but shall not be liable for the failure to provide service if beyond its control: (*check all that apply*)

Electricity_____ **Natural Gas**_____ **Water/Sewer**_____

The Resident agrees to pay for the following utilities:

Electricity_____ **Natural Gas**_____ **Water/Sewer**_____

The Utility Allowance Schedule for Resident Paid Utilities and the Schedule of Excess Utility Charges are available in the Landlord's office. The Resident shall pay any excess, Landlord-paid utilities consumed in their unit over and above that set forth in the Schedule. Utility allowance revisions shall become effective at each family's next annual reexamination.

8. **RENT RECERTIFICATIONS:** Each year, by the date specified by the Landlord, Residents who are paying rent based on their income or ceiling rent shall provide updated information regarding income, assets, expenses, and family composition. The Landlord shall verify the information supplied by the Resident and use the verified information to establish the amount of the Resident's rent for the next year. At the time of the annual review, the landlord shall advise the Resident of any income that will be excluded from consideration. Increased earnings due to employment shall be excluded during the twelve month period following hire for families whose income has increased because of the employment of a family member who was previously unemployed for one or more years or assisted by a State TANF program within the last six months. Income earned by a family participating in a self-sufficiency program will also be excluded for 12 months.

At the end of the 12-month period during which the above-listed income types are excluded an interim rent review will be performed. The income level initially reported will then be fully considered in the rent calculation. Additionally 50% any increase over that initial income will be factored into the rent calculation. The remaining 50% of any increase will continue to be excluded from the rent calculation for six more months.

No household member may qualify for more than one earned income exclusion during a tenancy.

Income reviews will be held every third year for Residents choosing the flat rent option. Residents who have chosen this option will be notified at the appropriate time for their recertification.

At the time of the review appointment the Resident may elect to change his or her rent choice option.

In cases where annual income cannot be projected for a twelve-month period or the Resident is reporting no income and Resident has chosen the percentage of income rent option, the Landlord will schedule special rent reviews every sixty (60) days. In addition, the Resident may request a change in the rent choice option before the date of the review if the family experiences a decrease in income; their circumstances have changed increasing their expenses for child care, medical, etc.; or other circumstances create a hardship on the family such that the formula method would be more financially feasible for the family.

Residents paying rent based on income may meet with the Landlord to discuss any change in rent resulting from the recertification process; and, if the Resident does not agree with the determination of Resident rent, the Resident may request a hearing in accordance with the landlord's grievance procedures.

9. **INTERIM RENT ADJUSTMENTS:** Within 10 days after they take place, residents must report and properly document to the Landlord any of the changes in household circumstances listed below which occur between Annual Rent Recertifications:
- a. A member has been added to the family through birth, adoption, or court-awarded custody.
 - b. A household member is leaving or has left the family unit.
 - c. Any increases in earned income (*Part or all of any earned income may be excluded from the rent calculation for a period of time as provided elsewhere in this lease but, the income must be reported and documented. Any increase in income, either earned or otherwise not reported within 10 days from the date the increase occurred will not be subject to exemption. Additionally,*

failure to report increases in income when they occur may subject the resident to “make-up” payments and or eviction.)

In addition, Residents paying rent based on a percentage of income may report the following activities that occur between Annual Rent Recertifications:

- a. A decrease in annual income;
- b. Childcare expenses for children under the age of 13 that are necessary to enable a member of the household to be employed or to go to school;
- c. Handicapped assistance expenses, which enable a family member to work;
- d. Medical expenses of elderly, disabled, or handicapped headed households that are not covered by insurance; or
- e. Other family changes that impact their adjusted income.

Notwithstanding the provisions listed above, a Resident’s rent shall not be reduced if the decrease in the family’s annual income is caused by a reduction in the welfare, Social Security, Supplemental Security Income or public assistance benefits received by the family that is a result of the Resident’s failure to comply with the conditions of the assistance program. In addition, if the decrease in the family’s annual income is caused by a reduction in welfare, Social Security, Supplemental Security Income, or public assistance benefits received by the family that is the result of an act of fraud, such decrease in income shall not result in a rent reduction. In such cases, the amount of income to be attributed to the family shall include what the family would have received had they complied with the welfare requirements or had not committed an act of fraud.

For purposes of rent adjustments, the reduction of welfare or public assistance benefits to a family that occurs as a result of the expiration of a time limit for the receipt of assistance will not be considered a failure to comply with program requirements. Accordingly, a Resident’s rent will be reduced as a result of such a decrease.

The Landlord shall verify the information provided by the Resident to determine if a decrease in the rent is warranted.

10. **EFFECTIVE DATE OF RENT CHANGE:** The Landlord shall give the Resident written notice of any change in the Resident’s rent. The notice shall be signed by the Landlord, state the new amount the Resident is required to pay, and the effective date of the new rental amount.
 - a. Rent Decreases: The Landlord shall process rent decreases so that the lowered rent amount becomes effective on the first day of the month after the Resident reports and properly documents in writing the change in household circumstances. This rent change may be made retroactive to the appropriate date if less than five (5) working days have been given to the Landlord to process this change.
 - b. Rent Increases: The Landlord shall process rent increases so that the Resident is given no less than 30 days advance written notice of the amount due.

Once the rental rate is established, it shall remain in effect until the effective date of the next annual review, unless another interim review and change is warranted or the Resident elects to change to or from flat rent calculation method.

11. **RESIDENT OBLIGATION TO REPAY:** Residents who pay rent based on income shall reimburse the Landlord for the difference between the rent that was paid and the rent that should have been charged if proper notice of income change had been given and if the following circumstances occur:
 - a. Resident does not submit rent review information by the date specified in the Landlord’s request; or

- b. Resident submits false information at Admission or at annual, special, or interim review.

Resident is not required to reimburse the Landlord for undercharges caused solely by the Landlord's failure to follow U.S. Department of Housing and Urban Development's procedures for computing rent.

12. **MAINTENANCE:**

The Resident Agrees To:

- a. keep the dwelling unit and any other areas assigned for the Resident's exclusive use in a clean and safe condition;
- b. use all appliances, fixtures and equipment in a safe manner and only for the purposes for which they are intended;
- c. not litter the grounds or common areas of the property;
- d. not undertake, or permit his or her family or guests to undertake any hazardous acts or do anything that will damage the property;
- e. not destroy, deface, damage, alter, or remove any part of the dwelling unit, common areas, or property grounds; *(A reasonable number of small, picture hanging devices may be used as long as the tenant agrees to remove same and repair the holes upon move-out. The application of wallpaper or other adhesive materials is prohibited.)*
- f. give the Landlord prompt notice of any defects in the plumbing, fixtures, appliances, heating equipment or any other part of the unit or related facilities;
- g. not park vehicles that are not in good working order, unregistered or uninsured on the Landlord's property or park any vehicle in an unauthorized location; *(This includes vehicles brought onto the premises by guests.)*
- h. remove garbage and other waste from the dwelling unit in a clean and safe manner. Take garbage containers to the designated pick-up points on the prescribed day and to retrieve them within ten (10) hours after they are emptied.
- i. pay reasonable charges for the repair of damages other than normal wear and tear to the premises, development buildings, facilities or common areas caused by the Resident, members of his or her household or guests, and to do so within 30 days after the receipt of the Landlord's itemized statement of the repair charges. The Damage and Service Charge Schedule is posted in the Landlord's office. If the item is not listed on the Schedule, the Resident shall be charged the actual cost the Landlord incurred in making the repair.
- j. Not to invite or permit individuals banned by the Landlord into the Resident's apartment or onto Knox County Housing Authority premises
- i. Keep a household pet *(other than fish in aquaria or no more than two (2) birds in a single cage)* other than in full compliance with the Knox County Housing Authority written pet policy.

The Landlord Agrees To:

- a. maintain the premises and the property in decent and safe condition;
- b. comply with requirements of applicable building codes, housing codes materially affecting health and safety, and U.S. Department of Housing and Urban Development regulations;
- c. make necessary repairs to the premises;
- d. keep property buildings, facilities and common areas, not otherwise assigned to the Resident for maintenance and upkeep, in a clean and safe condition;
- e. maintain in good and safe working order and condition electrical, plumbing, sanitary, heating, ventilating, and other facilities and appliances, including elevators, supplied or required to be supplied by the Landlord;
- f. provide and maintain appropriate receptacles and facilities for the deposit of garbage, rubbish, and other waste removed from the premises by the Resident; and

If the dwelling unit is rendered uninhabitable, regardless of cause:

- a. The Resident shall immediately notify the Landlord;
- b. The Landlord shall be responsible for repair of the unit within a reasonable time. If the Resident, household members or guests caused the damage, the reasonable cost of the repairs shall be charged to the Resident.
- c. The Landlord shall offer standard alternative accommodations, if available, when necessary repairs cannot be made within a reasonable time.
- d. The Landlord shall make a provision for rent abatement in proportion to the seriousness of the damage and loss in value if repairs are not made within a reasonable time. No abatement of rent or relocation shall occur if the Resident caused the damage or rejects the alternative accommodations. If the Resident, Resident's household, or guests caused the damage eviction proceedings may be initiated.

13. **RESTRICTION ON ALTERATIONS:** The Resident shall not do any of the following without first obtaining the Landlord's written permission:

- a. dismantle, change or remove any part of the appliances, fixtures or equipment in the dwelling unit;
- b. install wallpaper, contact paper, or paint (*without the Landlord's written permission*) in the dwelling unit;
- c. attach awnings or window guards in the dwelling unit;
- d. attach or place any fixtures, signs, or fences on the building(s), the common areas, or the property grounds;
- e. attach any shelves, screen doors, or make other permanent modifications to the dwelling unit;
- f. install or alter carpeting, resurface floors or alter woodwork;
- g. install washing machines, dryers, fans, heaters, or air conditioners in an elderly dwelling unit;
- h. place any aerials, antennas or other electrical connections on the dwelling unit;
install additional or different locks or gates on any doors or windows of the dwelling unit; or
- e. operate a business as an incidental use in the dwelling unit without written permission from the Landlord.

14. **ACCESS BY LANDLORD:** The Landlord shall provide two (2) days written advance notice to the Resident of his or her intent to enter the dwelling unit for the purpose of performing routine inspections and preventive maintenance, extermination or to show the dwelling unit for re-renting. The notice shall specify the date, time, and purpose for the entry. The Resident shall permit the Landlord, his or her agents, or other persons, when accompanied by the Landlord, to enter the dwelling unit for these purposes. In the event that the Resident and all adult members of the household are absent from the dwelling unit at the time of entry, the Landlord shall leave a card stating the date, time and name of the person entering the dwelling unit and the purpose of the visit.

The Landlord may enter the unit to perform maintenance requested by the tenant without other written notice. However, the tenant must give consent at the time the maintenance is requested for the Landlord or the Landlord's designated representative to enter the tenant's unit if no adult member of the household is present.

The Landlord may enter the dwelling unit at any time without advance notice when there is reasonable cause to believe that an emergency exists which poses a threat to the safety of other individuals or to the integrity of the Landlord's property or equipment.

15. **SIZE OF DWELLING:** The Resident understands that the Landlord assigns dwelling units according to the Occupancy Standards published in its Admissions and Continued Occupancy

Policy (ACOP). The Standards consider the type (such as dwelling units designed for the elderly or handicapped) and size of the dwelling unit required by the number of household members. If the Resident is or becomes eligible for a different type or size dwelling unit and an appropriate dwelling unit under this program and the Landlord's transfer policy becomes available, the Resident shall be given a reasonable period of time to move. This time shall not exceed seven (7) days after a suitable unit is made available unless an unusual hardship condition exists. If the Resident fails to move to the designated dwelling unit within the notice period specified by the Landlord, the Landlord may deny future requests to transfer or terminate this lease.

If the Landlord determines that a Resident must transfer to another unit based on family composition, the Landlord shall notify the Resident. The Resident may ask for an explanation stating the specific grounds of the determination. If the Resident does not agree with the determination, the Resident may submit a written request to be permitted to remain in their current unit. The Landlord shall grant that request as long as there are no more than two persons in the household for every living and sleeping room in that unit. The Resident may also request a hearing in accordance with the Landlord's grievance procedures.

16. **LEASE TERMINATION BY LANDLORD:** Any termination of this Lease shall be carried out in accordance with U.S. Department of Housing and Urban Development regulations, State and local law, and the terms of this Lease.

The Landlord shall not terminate or refuse to renew the Lease other than for serious or repeated violation of material terms of the Lease on the part of the Resident, all members of the Resident's household and all visitors/guests of the Resident such as, but not limited to, the following:

- a. nonpayment of rent or other charges due under the Lease (i.e. utilities), or repeated chronic late payment of rent (four times in a twelve month period);
- b. failure to provide timely and accurate statements of income, assets, expenses and family composition at Admission, Interim, Special or Annual Rent Recertifications, to attend scheduled reexamination interviews or to cooperate in the verification process if the Resident has chosen to pay rent based on a percentage of income;
- c. furnishing false or misleading information during the application or review process;
- d. assignment or subleasing of the premises or providing accommodation for boarders or lodgers;
- e. use of the premises for purposes other than solely as a dwelling unit for the Resident and Resident's household as identified in this Lease, or permitting its use for any other purpose without the written permission of the Landlord;
- f. failure to abide by necessary and reasonable rules made by the Landlord for the benefit and well being of the housing development and the Residents;
- g. failure to abide by applicable building and housing codes materially affecting health or safety;
- h. failure to dispose of garbage, waste and rubbish in a safe and sanitary manner;
- i. failure to use electrical, plumbing, sanitary, heating, ventilating, air conditioning and other equipment, including elevators, in a safe manner;
- j. acts of destruction, defacement or removal of any part of the premises, or failure to cause guests to refrain from such acts;
- k. failure to pay reasonable charges for the repair of damages to the premises, property buildings, facilities or common areas;
- l. any activity that threatens the health, safety, or right to peaceful enjoyment of the premises by other Residents or employees of the Authority;
- m. any violent or drug-related criminal activity on or off the premises (*not just on or near the premises*);
- n. alcohol abuse that the Landlord determines interferes with the health, safety, or right to peaceful enjoyment of the premises by other residents;
- o. failure to perform required community service or be exempted therefrom;
- p. failure to allow inspection or routine pest extermination treatment of the dwelling unit;

- q. determination that a family member has knowingly permitted an ineligible non-citizen not listed on the lease to permanently reside in their public housing unit;
- r. determination or discovery that a resident is a registered sex offender; or
- s. any other good cause.

17. **NOTICE OF LEASE TERMINATION:** If the Landlord proposes to terminate this Lease, the Resident shall be given written notice of the proposed termination, as listed below:

- a. for failure to pay rent, at least fourteen (14) days;
- b. for creation or maintenance of a threat to health or safety of other Residents or Landlord's employees, a reasonable time between three and thirty days based on the urgency of the situation (*Evictions for drug or violent criminal activity shall be upon three (3) days notice.*); or
- c. for all other cases, thirty (30) days, unless State law permits a shorter period.

The Notice to Vacate required by State or local law may be combined with or run concurrently with a Notice of Lease termination required by this lease. Lessees having been served a notice of lease termination continue to be liable for payment of dwelling rent until such time as they relinquish possession of the dwelling. Regular and timely payment of rent or other charges during this period, and the acceptance thereof by the Landlord, shall in no way establish any form of lease agreement between the Landlord and the Lessee nor shall it void or mitigate the terms of the notice to quit.

The Notice of Lease Termination from the Landlord shall be either personally delivered to the Resident or to an adult member of the Resident's family residing in the dwelling unit, or sent to the Resident by First Class Mail, properly addressed, postage pre-paid. The notice shall:

- a. specify the date the Lease shall be terminated;
- b. state the grounds for termination with enough detail for the Resident to prepare a defense. The Landlord shall rely solely on the grounds stated in the Notice of Lease Termination in the event eviction action is initiated;
- c. advise the Resident of the right to reply as he or she may wish, to examine the Landlord's documents directly relevant to the termination or eviction, to use the Grievance Policy to contest the termination, and/or to defend the action in court.

18. **LEASE TERMINATION BY RESIDENT:** The Resident shall give the Landlord 30 days written notice before moving from the dwelling unit. If the Resident does not give the full notice, the Resident shall be liable for rent to the end of the notice period or to the date the dwelling unit is re-rented, whichever date comes first.

TERMINATION OF LEASE UPON DEATH OR INCAPACITY OF RESIDENT: Upon the death of the Resident, or if there is more than one Resident, upon the death of all Residents, either the Landlord or the personal representative of the Resident's estate may terminate this Lease upon 30 days written notice, to be effective on the last day of a calendar month. If full notice is not given, the Resident's estate shall be liable for rent to the end of the notice period or to the date the unit is re-rented, whichever date comes first. The termination of a Lease under this section shall not relieve the Resident's estate from liability either for payment of rent or other amounts owed prior to or during the notice period, or for the payment of amounts necessary to restore the premises to their condition at the beginning of the Resident's occupancy, normal wear and tear excepted.

If during the term of this Lease the Resident, by reason of physical or mental impairment, is no longer able to comply with the material provisions of this Lease and the Landlord cannot make a reasonable accommodation to enable the Resident to comply with the Lease; then action shall be taken. The Landlord will assist the Resident or designated member(s) of the Resident's family to move the Resident to more suitable housing. If there are no family members, the Landlord will

work with appropriate agencies to secure suitable housing. This Lease will terminate upon the Resident moving from the unit. However, should conditions in the Resident's unit pose a hazard or nuisance to other tenants or neighbors or compromise the integrity of the building and its systems the Landlord shall seek possession of the unit through the eviction procedure.

20. **PROPERTY ABANDONMENT:** If a Resident abandons the dwelling unit, the Landlord shall take possession of the Resident's personal property remaining on the premises, and shall store and care for the property. The landlord will consider the unit to be abandoned when a resident has fallen behind in rent and has clearly indicated by words and actions an intention not to continue living in the unit. The Landlord has a claim against the Resident for reasonable costs and expenses incurred in removing the property, in storing and caring for the property, and in selling the property. The Landlord can collect from the Resident all these costs.

The Landlord may sell or otherwise dispose of the property 60 days after the Landlord receives actual notice of abandonment or 60 days after it reasonably appears to the Landlord that the Resident has abandoned the premises, whichever date occurs last. At least 14 days prior to the sale, the Landlord agrees to make reasonable efforts to notify the Resident of the sale by sending written notice of the sale by certified mail, return receipt requested, to the Resident's last known address or likely living quarters if that is known by the Landlord. The Landlord shall also post a notice of sale in a clearly visible place on the premises for at least two weeks before the sale. The Landlord may use the money from the sale to pay off any debts the Resident owes the Landlord. Any amount above this belongs to the Resident, if the Resident has written and asked for it.

21. **DELIVERY OF NOTICES:**

Notice by Landlord: Any notice from the Landlord shall be in writing and either personally delivered to the Resident or to an adult member of the Resident's family residing in the dwelling unit, or sent to the Resident by first class, U. S. Mail.

Notice by Resident: Any notice to the Knox County Housing Authority shall be in writing, and either personally delivered to the Landlord at the Landlord's Office, or sent to Landlord by first-class, U.S. mail.

If the Resident is visually impaired, notices shall be in accessible format.

22. **GRIEVANCES:** All individual grievances or appeals, with the exception of those cases concerning eviction or termination of tenancy which are based upon a Resident's creation or maintenance of a threat to health or safety of other Residents or Landlord employees, shall be processed under the Grievance Policy. This policy is posted in the Landlord's Office where copies are available upon request.

Before the Landlord shall schedule a Grievance Hearing for any grievance concerning the amount of rent the Landlord claims is due, the Resident must first bring his or her rent account current by paying to the Landlord an amount equal to the amount of rent due and payable as of the first of the month preceding the month in which the act or failure to act took place. After the hearing is scheduled, the Resident shall continue to deposit this same monthly rent amount into the Landlord's escrow account until the complaint is resolved by the decision of the hearing officer.

When the Housing Authority is required to afford the Resident the opportunity for a hearing in accordance with the authority's grievance procedure for a grievance concerning the Lease termination, the tenancy shall not terminate (even if any notice to vacate under State or local law has expired) until the time for the Resident to request a grievance hearing has expired, and (if a hearing was timely requested by the Resident) the grievance process has been completed.

23. **HOUSE RULES:** The Resident agrees to obey any House Rules, which are reasonably related to the safety, care and cleanliness of the building and the safety, comfort and convenience of the Residents. Such rules may be modified by the Landlord from time to time provided that the Resident receives written notice of the proposed change, reasons for the change and an opportunity to submit written comments during a 30 day comment period at least 30 days before the proposed effective date of the change in the Rule. Existing House Rules, if any, are posted in the property and are attached to this Lease.
24. **DISCRIMINATION PROHIBITED:** The Landlord shall not discriminate based upon race, color, creed, religion, national origin, sex, martial status, age, handicap or disability, familial status, or recipients of public assistance and shall comply with all nondiscrimination requirements of Federal, State and local law.
25. **ATTACHMENTS TO THE LEASE:** The Resident certifies that he/she has received a copy of this Lease and the following Attachments to this Lease, and understands that these Attachments are part of this Lease.

Attachments: House Rules

Signatures:

<u>RESIDENT:</u>	1) _____	_____
		Date
	2) _____	_____
		Date
<u>LANDLORD:</u>	_____	_____
		Date

V. RESIDENT ADVISORY COUNCIL MEETING MINUTES AND MEMBERSHIP LISTING

The meeting for the 2003 Agency Plan was held at Pizza Hut on Tuesday, November 12, 2002 at 12:30 p.m. The following Resident Advisory Council members were found to be present and absent.

The Resident Advisory Board of the Knox County Housing Authority consists of one representative from each of the five public housing sites operated by the Authority. Meetings are held quarterly or more often if necessary to discuss current issues. The Executive Director and the Administrative Assistant of the Authority also attend the meetings. The persons serving on this Board and their area of representation are as follows:

PRESENT:

Dale Parsons, Resident from the Moon Towers Elderly High-rise

Sherry Bain, Resident from the Moon Towers Elderly High-rise

Esther Lawson, Resident from the Blue Bell Elderly High-rise

Earl Day, Resident from the Blue Bell Elderly High-rise

Gary Cutts, Resident from the McKnight Street Family Site

Michael Burns, Resident from the Iowa Avenue Family Site

ABSENT:

Carletha Davis, Resident from the Berrien/ South Street Family Site

Tracy Shamblin- Resident from the McKnight Street Family Site

Denise Basley- Resident from the Iowa Avenue Family Site/ also Resident Commissioner

Carol Daniels- Resident from the Section 8 Program

Jayne Pierce, Resident from the Blue Bell Elderly High-rise

Also present were Donald Tomlin, Executive Director; and Kelsey Cole, Administrative Assistant.

Mr. Tomlin presented the following information as the meeting began:

Interests in our housing programs have increased significantly in the past year. Occupancy in our apartment complexes have been 97% recently and the utilization of our rental assistance program also near 100%. The few vacancies we do have of lately are generally the result of unit turn over, but even this has decreased. People are staying with us. While internal improvements in the housing authority operations have been contributing factors, a declining local economy has had an equal or greater impact. Fewer people can afford to pay full price for rental dwellings and more come to us.

Because we were not fully utilizing our capacities in the past we welcomed applications from other areas. Now as of recently it appears as though local families need our help. With this in mind, we would like to give them some priority for our services. While our housing authority, like most, relies largely on federal funding we may not exclude persons from outside of our county from our programs. We are permitted to give local residents a small advantage, however. Our new plan would contain a provision for doing that by allowing them 25 preference points. These points will not outweigh any of the three major (100 point) preference categories, being without or about to be without housing, paying more than 50% of income for housing, or living in sub-

standard housing, but they will break a tie between a local family and one from elsewhere. We propose an additional 10 point award to households with at least one person who is employed in Knox County.

Other proposed changes involve our lease. They include: service of a 14-day lease termination notice when rent is not paid by the sixth day of the month, a provision making it clear that acceptance of rent from a tenant who has been given an eviction notice does not constitute a new lease with that tenant, discontinuing the use of ceiling rents, and instituting flat rents in keeping with HUD requirements. (Actually the new flat rents are currently the same amounts as the former ceiling rents.)

While our leases currently contain language stating that making threats of bodily harm to staff and/or tenants may be grounds for lease termination, our "Section 8" administrative plan currently does not make such activity grounds for termination from the "Section 8" program.

This inclusion is proposed as is the addition of a provision to that plan making permanent loss of rental assistance a penalty of selling all controlled substances, including methamphetamines.

Generally, since we anticipate that more people will need housing assistance in the coming year, we believe that we should be less willing to accept or retain households who do not abide by necessary laws and rules.

After presenting the above material Mr. Tomlin discussed the completion of the Drug Elimination Grant. After this statement, Capital Funding came into discussion and suggestions were made. First, Mr. Burns mentioned that outlets on the outside of the Family units would be helpful for many Tenants. Mr. Burns also added that storage sheds should be placed on the Family sites for storage purposes. Second, Ms. Bain stated that security cameras on all floors would support the current security system in Moon Towers. Third, Mrs. Lawson stated that the Blue Bell parking lot (on the north end) needs more lighting. Mr. Day at this time replied that tree trimming would solve this problem. Also at Blue Bell an extra fin tube at the end units would help with warm air flow. Fourth, Mr. Cutts stated the clean water intake grater on B Site needs attention daily due to litter and water problems. Last, Mr. Cutts mentioned that the living rooms in the Family sites do not have a switch for lighting- only outlets for lamps. Could some type of switch be placed in the living room area for easy access lighting?

The items suggested by residents will be taken into consideration in the final preparation of the Annual Plan.

Meeting adjourned at 1:45 p.m.

Respectfully submitted,

Kelsey M. Cole
Administrative Assistant

VI. MEMBERSHIP OF PHA GOVERNING BOARD

MEMBERSHIP OF THE GOVERNING BOARD

NOVEMBER, 2002

Listed below are the members of the Knox County Housing Authority Board of Commissioners and their term expiration dates.

Mr. Constant Johnson
747 Bateman Street
Galesburg, IL 61401

Term Expiration: May 28, 2006

Mr. Lomac Payton
545 West South Street
Galesburg, IL 61401

Term Expiration: May 28, 2003

Mr. Roger Peterson
1558 Bridge Avenue
Galesburg, IL 61401

Term expiration: May 28, 2007

Mr. Ray Landon
801 W. Martin Street
Abingdon, IL 61410

Term Expiration: May 28, 2005

Ms. Denise Basley
476 Michigan Avenue
Galesburg, IL 61401

Term Expiration: April 30, 2004 (Ms. Basley
is the new Resident Commissioner fulfilling the
unexpired term of Harry Eaton)

All commissioners named to the Knox County Board of Commissioners are appointed by the Knox County Board

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

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

Capital Fund Grant Number 50103 FFY of Grant Approval: (10/01/03)

Original Annual Statement

Line No.	Summary by Development Account	Total Estimated Cost
1	Total Non-CGP Funds	
2	1406 Operations	0
3	1408 Management Improvements	104,600
4	1410 Administration	83,090
5	1411 Audit	
6	1415 Liquidated Damages	
7	1430 Fees and Costs	54,000
8	1440 Site Acquisition	
9	1450 Site Improvement	
10	1460 Dwelling Structures	517,500
11	1465.1 Dwelling Equipment-Nonexpendable	221,500
12	1470 Nondwelling Structures	
13	1475 Nondwelling Equipment	10,000
14	1485 Demolition	
15	1490 Replacement Reserve	
16	1492 Moving to Work Demonstration	
17	1495.1 Relocation Costs	
18	1498 Mod Used for Development	
19	1502 Contingency	
20	Amount of Annual Grant (Sum of lines 2-19)	990,690
21	Amount of line 20 Related to LBP Activities	
22	Amount of line 20 Related to Section 504 Compliance	
23	Amount of line 20 Related to Security	
24	Amount of line 20 Related to Energy Conservation Measures	

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

Development Number/Name HA-Wide Activities	General Description of Major Work Categories	Development Account Number	Total Estimated Cost
Mgmt. Improv.	Staff Training	1408	12,000
	Resident Initiatives Coordinator	“	47,000
	Resident Programs	“	40,000
	Physical Needs Assessment	“	5,600
Admin	Mod Coordinator, Ex. Dir., Clerical	1410	80,500
	Sundry	“	2,590
Fees & Costs	A & E Services	1430	48,000
	Consultant	“	6,000
Non-Dwelling Equipment	Computer Upgrade	1475	5,000
	Maintenance Program	“	5,000
85-1 Moon Towers	Replace fire alarm system	1460	87,000
	Clean, repair and paint stairwells	“	32,000
	Replace bi-fold doors in units	“	142,500
	Install window treatment	“	95,000
	Replace community room closet doors	“	7,500
	Install individual heat controls in units	1465	114,000
	Rebalance air handler & replace controls	“	11,500
	Replace boiler controls	“	20,000
85-2 Scattered Sites	Replace kitchen and bathroom faucets	1460	71,500
	Replace refrigerators	1465	76,000
85-6 Bluebell Tower	Replace fire alarm system	1460	82,000

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

Development Number/Name HA-Wide Activities	All Funds Obligated (Quarter Ending Date)	All Funds Expended (Quarter Ending Date)
Mgmt. Improvements	09/30/05	09/30/06
Admin	09/30/05	09/30/06
HA Wide	09/30/05	09/30/06
85-1 Moon Towers	09/30/05	09/30/06
85-2 Scattered Sites	09/30/05	09/30/06
85-6 Bluebell Tower	09/30/05	09/30/06
	09/30/05	09/30/06

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

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

Optional 5-Year Action Plan Tables				
Development Number	Development Name (or indicate PHA wide)	Number Vacant Units	% Vacancies in Development	
IL085	PHA Wide	10	2%	
Description of Needed Physical Improvements or Management Improvements			Estimated Cost	Planned Start Date (HA Fiscal Year)
Resident Initiatives Coordinator			42,000	2004
Resident Programs			27,000	
Administration			74,000	
Sundry			638	
A&E Services			48,000	
Office Furniture			6500	
Resident Initiatives Coordinator			42,000	2005
Resident Programs			27,000	
Administration			80,500	
Sundry			638	
A&E Services			48,000	
Resident Initiatives Coordinator			42,000	2006
Resident Programs			27,000	
Administration			80,500	
Sundry			638	
A&E Services			48,000	
Staff Training			12,000	2007
Resident Initiatives Coordinator			42,000	
Administration			80,500	
Sundry			638	
Preventive Maintenance Program			15,500	
A&E Services			48,000	
			15,000	
Total estimated cost over next 5 years			1,019,360	

Optional 5-Year Action Plan Tables				
Development Number	Development Name (or indicate PHA wide)	Number Vacant Units	% Vacancies in Development	
IL085-1	Moon Towers	7	4%	
Description of Needed Physical Improvements or Management Improvements			Estimated Cost	Planned Start Date (HA Fiscal Year)
Replace trash compactors & dumpsters			67,500	2004
Install hardwired smoke detectors			64,000	
Install roll-in showers in handicapped units			27,500	
Replace tile and plumbing fixtures in showers			216,000	2005
Replace lavatory, medicine cabinet and light			95,000	
Convert 10 efficiency apartments to 5 larger units			340,000	
Redesign front lobby in annex office (improve energy efficiency)			15,000	2006
Replace carpet in corridors			83,000	
Replace hot water heaters			32,552	
Install Carpet in Apartments			228,000	2007
Paint Corridors and Common Areas			20,000	
Replace mailboxes			12,000	
Replace office lighting			3,000	
Renovate community space			15,000	
Replace refrigerators			71,250	
Construct stub wall between bedroom/LR area (efficiency units)			45,000	
Replace garage roof			25,000	
Replace windows in community room			18,000	
Site work			36,000	
Landscaping			25,000	
Total estimated cost over next 5 years			1,438,802	

Optional 5-Year Action Plan Tables				
Development Number	Development Name (or indicate PHA wide)	Number Vacant Units	% Vacancies in Development	
IL085-2	Scattered Sites	2	1%	
Description of Needed Physical Improvements or Management Improvements			Estimated Cost	Planned Start Date (HA Fiscal Year)
Install insulation into walls of units			291,000	2004
Replace refrigerators			76,000	
Replace floor tile			169,000	
Erosion Control, drainage and landscaping			100,000	2005
Replace ranges			41,552	
Replace furnaces			172,000	2006
Install storage buildings			165,000	
Site work			67,000	2007
Upgrade electrical service-10 four bedroom units			15,000	
Install fencing			10,500	

Replace soffits	53,000	
Security Lighting	12,000	
Install exterior outlets @ each unit	25,000	
Total estimated cost over next 5 years	1,187,052	

Optional 5-Year Action Plan Tables				
Development Number	Development Name (or indicate PHA wide)	Number Vacant Units	% Vacancies in Development	
IL085-6	Bluebell Tower	1	2%	
Description of Needed Physical Improvements or Management Improvements			Estimated Cost	Planned Start Date (HA Fiscal Year)
Install safety features for elevator			16,000	2004
Install hard wired smoke detectors			20,470	
Replace trash compactor and dumpsters			32,000	
Clean and paint stairwells			13,000	
Install clean-out at sewer system			16,352	2005
Replace roof			220,000	
Replace windows			105,000	2006
Site Work			15,000	2007
Replace hot water heaters			6,500	
Replace refrigerators			34,400	
Replace ranges			15,300	
Replace community room appliances			4,800	
Replace booster pump-domestic hot water			12,500	2007
Install additional heating fins in each corner unit			12,000	
Total estimated cost over next 5 years			513,052	

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

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

RESIDENT ADVISORY COUNCIL MEETING MINUTES

The meeting for the 2003 Agency Plan was held at Pizza Hut on Tuesday, November 12, 2002 at 12:30 p.m. The following Resident Advisory Council members were found to be present and absent.

The Resident Advisory Board of the Knox County Housing Authority consists of one representative from each of the five public housing sites operated by the Authority. Meetings are held quarterly or more often if necessary to discuss current issues. The Executive Director and the Administrative Assistant of the Authority also attend the meetings. The persons serving on this Board and their area of representation are as follows:

PRESENT:

Dale Parsons, Resident from the Moon Towers Elderly High-rise

Sherry Bain, Resident from the Moon Towers Elderly High-rise

Esther Lawson, Resident from the Blue Bell Elderly High-rise

Earl Day, Resident from the Blue Bell Elderly High-rise

Gary Cutts, Resident from the McKnight Street Family Site

Michael Burns, Resident from the Iowa Avenue Family Site

ABSENT:

Carletha Davis, Resident from the Berrien/ South Street Family Site

Tracy Shamblin- Resident from the McKnight Street Family Site

Denise Basley- Resident from the Iowa Avenue Family Site/ also Resident Commissioner

Carol Daniels- Resident from the Section 8 Program

Jayne Pierce, Resident from the Blue Bell Elderly High-rise

Also present were Donald Tomlin, Executive Director; and Kelsey Cole, Administrative Assistant.

Mr. Tomlin presented the following information as the meeting began:

Interests in our housing programs have increased significantly in the past year. Occupancy in our apartment complexes have been 97% recently and the utilization of our rental assistance program also near 100%. The few vacancies we do have of lately are generally the result of unit turn over, but even this has decreased. People are staying with us. While internal improvements in the housing authority operations have been contributing factors, a declining

local economy has had an equal or greater impact. Fewer people can afford to pay full price for rental dwellings and more come to us.

Because we were not fully utilizing our capacities in the past we welcomed applications from other areas. Now as of recently it appears as though local families need our help. With this in mind, we would like to give them some priority for our services. While our housing authority, like most, relies largely on federal funding we may not exclude persons from outside of our county from our programs. We are permitted to give local residents a small advantage, however. Our new plan would contain a provision for doing that by allowing them 25 preference points. These points will not outweigh any of the three major (100 point) preference categories, being without or about to be without housing, paying more than 50% of income for housing, or living in sub-standard housing, but they will break a tie between a local family and one from elsewhere. We propose an additional 10 point award to households with at least one person who is employed in Knox County.

Other proposed changes involve our lease. They include: service of a 14-day lease termination notice when rent is not paid by the sixth day of the month, a provision making it clear that acceptance of rent from a tenant who has been given an eviction notice does not constitute a new lease with that tenant, discontinuing the use of ceiling rents, and instituting flat rents in keeping with HUD requirements. (Actually the new flat rents are currently the same amounts as the former ceiling rents.)

While our leases currently contain language stating that making threats of bodily harm to staff and/or tenants may be grounds for lease termination, our "Section 8" administrative plan currently does not make such activity grounds for termination from the "Section 8" program. This inclusion is proposed as is the addition of a provision to that plan making permanent loss of rental assistance a penalty of selling all controlled substances, including methamphetamines.

Generally, since we anticipate that more people will need housing assistance in the coming year, we believe that we should be less willing to accept or retain households who do not abide by necessary laws and rules.

After presenting the above material Mr. Tomlin discussed the completion of the Drug Elimination Grant. After this statement, Capital Funding came into discussion and suggestions were made. First, Mr. Burns mentioned that outlets on the outside of the Family units would be helpful for many Tenants. Mr. Burns also added that storage sheds should be placed on the Family sites for storage purposes. Second, Ms. Bain stated that security cameras on all floors would support the current security system in Moon Towers. Third, Mrs. Lawson stated that the Blue Bell parking lot (on the north end) needs more lighting. Mr. Day at this time replied that tree trimming would solve this problem. Also at Blue Bell an extra fin tube at the end units would help with warm air flow. Fourth, Mr. Cutts stated the clean water intake grater on B Site needs attention daily due to litter and water problems. Last, Mr. Cutts mentioned that the living rooms in the Family sites do not have a switch for lighting- only outlets for lamps. Could some type of switch be placed in the living room area for easy access lighting?

The items suggested by residents will be taken into consideration in the final preparation of the Annual Plan.

Meeting adjourned at 1:45 p.m.

Respectfully submitted,

Kelsey M. Cole
Administrative Assistant

Annual Statement /Performance and Evaluation Report

U. S. Department of Housing
and Urban Development

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

Comprehensive Grant Program (CGP)

Part I: Summary

Office of Public and Indian Housing

HA Name Knox County Housing Authority	Comprehensive Grant Number IL06-P085-50100	FFY of Grant Approval 2000
---	--	--------------------------------------

- Original Annual Statement Reserve for Disaster/Emergencies Revised Annual Statement/Revision Number__1__ Performance and Evaluation Report for Program Year Ending 2002
 Final Performance and Evaluation Report

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost (2)	
		Original	Revised (1)	Obligated	Expended
1	Total Non-CGP Funds				
2	1406 Operations (may not exceed 10% of 19)	\$0.00		\$0.00	\$0.00
3	1408 Management Improvements	\$91,000.00	\$99,500.00	\$77,500.00	\$48,803.00
4	1410 Administration	\$82,719.00	\$83,300.00	\$73,000.00	\$52,479.00
5	1411 Audit	\$0.00		\$0.00	\$0.00
6	1415 Liquidated Damages	\$0.00		\$0.00	\$0.00
7	1430 Fees and Costs	\$41,000.00	\$43,000.00	\$41,000.00	\$35,055.00
8	1440 Site Acquisition	\$0.00		\$0.00	\$0.00
9	1450 Site Improvement	\$71,000.00	\$10,398.00	\$0.00	\$0.00
10	1460 Dwelling Structures	\$443,867.00	\$671,460.00	\$671,460.00	\$508,740.00
11	1465.1 Dwelling Equipment-Nonexpendable	\$77,600.00	\$7,828.00	\$7,828.00	\$7,828.00
12	1470 Nondwelling Structures	\$151,550.00	\$26,250.00	\$7,579.00	\$7,579.00
13	1475 Nondwelling Equipment	\$51,000.00	\$68,000.00	\$21,984.00	\$21,984.00
14	1485 Demolition	\$0.00		\$0.00	\$0.00
15	1495.1 Relocation Cost	\$0.00		\$0.00	\$0.00
16	1490 Replacement Reserve	\$0.00		\$0.00	\$0.00
17	1498 Mod Used for Development	\$0.00		\$0.00	\$0.00
18	1502 Contingency (may not exceed 8% of 19)	\$0.00		\$0.00	\$0.00
19	Amount of Annual Grant (Sum of lines 2-19)	\$1,009,736.00	\$1,009,736.00	\$900,351.00	\$682,468.00
20	Amount of line 19 Related to LBP Activities	\$0.00		\$0.00	\$0.00
21	Amount of line 19 Related to Section 504 Compliance	\$0.00		\$0.00	\$0.00
22	Amount of line 19 Related to Security	\$0.00		\$0.00	\$0.00
23	Amount of line 19 Related to Energy Conservation	\$0.00		\$0.00	\$0.00

Signature of Executive Director and Date

Signature of Public Housing Director or Office of Native American Programs Administrator & Date:

- 1 To be completed for the Performance & Evaluation Report or a Revised Annual Statement
- 2 To be completed for the Performance & Evaluation Report

Development Number/ Name HA-Wide Activities	General Description of Major Work Categories	Development Account Number	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work (2)
				Original	Revised (1)	Funds Obligated (2)	Funds Expended (2)	
HA-Wide	Staff Training	1408		\$2,000.00	\$8,000.00	\$0.00	\$0.00	
	Mgmt. Resident Initiatives Coordinator	1408		\$44,000.00	\$46,000.00	\$47,500.00	\$32,945.00	
	Improvmts Resident Programs	1408		\$45,000.00	\$45,000.00	\$30,000.00	\$15,858.00	
			Total 1408	\$91,000.00	\$99,000.00	\$77,500.00	\$48,803.00	
Admin	Mod. Coord, Ex. Dir. & Clerical	1410		\$82,000.00	\$82,000.00	\$72,000.00	\$51,479.00	
	Sundry	1410		\$719.00	\$1,300.00	\$1,000.00	\$1,000.00	
			Total 1410	\$82,719.00	\$83,300.00	\$73,000.00	\$52,479.00	
Fees and Costs	A & E Services	1430		\$39,000.00	\$41,000.00	\$41,000.00	\$35,055.00	
	Consultant	1430		\$2,000.00	\$2,000.00	\$0.00	\$0.00	
			Total 1430	\$41,000.00	\$43,000.00	\$41,000.00	\$35,055.00	
	Upgrade telephone system	1475	1	\$14,500.00	\$14,500.00	\$0.00	\$0.00	
	Computer Upgrade	1475		\$36,500.00	\$36,500.00	\$8,030.00	\$8,030.00	
	Mtce. Program	1475		\$0.00	\$17,000.00	\$13,954.00	\$13,954.00	
				\$51,000.00	\$68,000.00	\$21,984.00	\$21,984.00	

Signature of Executive Director and Date

Signature of Public Housing Director or Office of Native American Programs Administrator and Date

X

X

Development Number/ Name HA-Wide Activities	General Description of Major Work Categories	Developer Account Number	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work (2)
				Original	Revised (1)	Funds Obligated (2)	Funds Expended (2)	
85-1								
Moon	Recorate Interior Corridors	1460	4	\$36,350.00	\$313,363.00	\$313,363.00	\$272,550.00	98%
Towers	Install ceiling fans in each unit	1460	190	\$58,000.00	\$150,780.00	\$150,780.00	\$28,873.00	98%
	Install Roll-In Showers in Hcp. Units	1460	5	\$27,500.00	\$0.00	\$0.00	\$0.00	completed in earlier grant
				\$121,850.00	\$464,143.00	\$464,143.00	\$301,423.00	
	Upgrade Heating System	1470		\$46,100.00	\$0.00	\$0.00	\$0.00	moved to another grant
	Replace Fire Alarm System	1470		\$82,000.00	\$0.00	\$0.00	\$0.00	moved to another grant
				\$128,100.00	\$0.00	\$0.00	\$0.00	
Total,	Total Project			\$249,950.00	\$464,143.00	\$464,143.00	\$301,423.00	

Signature of Executive Director and Date

Signature of Public Housing Director or Office of Native American Programs Administrator and Date

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(1) To be completed for the Performance and Evaluation Report or a Revised Annual Statement
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form HUD-52837 (10/96)
ref Handbook 7485.3

Comprehensive Grant Program (CGP)

Part II: Supporting Pages

Office of Public and Indian Housing

Development Number/ Name HA-Wide Activities	General Description of Major Work Categories	Development Account Number	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work (2)
				Original	Revised (1)	Funds Obligated (2)	Funds Expended (2)	
85-2 Scattered Sites	Site work	1450		\$56,000.00	\$10,398.00	\$0.00	\$0.00	
				\$56,000.00	\$10,398.00	\$0.00	\$0.00	
	Replace interior & exterior light fixture	1460	970	\$104,700.00	\$127,136.00	\$127,136.00	\$127,136.00	complete
	Replace Exterior Water Spigots	1460	188	\$48,500.00	\$35,134.00	\$35,134.00	\$35,134.00	complete
	Install Porches & Patios	1460	194	\$185,000.00	\$0.00	\$0.00	\$0.00	moved to another grant
				\$338,200.00	\$162,270.00	\$162,270.00	\$162,270.00	
	Replace Hot Water Heaters	1465	194	\$77,600.00	\$0.00	\$0.00	\$0.00	completed in earlier grant
	Replace Appliances	1465	24	\$0.00	\$7,828.00	\$7,828.00	\$7,828.00	
				\$77,600.00	\$7,828.00	\$7,828.00	\$7,828.00	
	Replace Comm. Room Appliances	1470.4	3	\$9,200.00	\$12,000.00	\$7,579.00	\$7,579.00	
				\$0.00	\$0.00	\$0.00		
				\$9,200.00	\$12,000.00	\$7,579.00	\$7,579.00	
Total,	Project Total:			\$481,000.00	\$192,496.00	\$177,677.00	\$177,677.00	

Signature of Executive Director and Date

Signature of Public Housing Director or Office of Native American Programs Administrator and Date

X

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Development Number/ Name HA-Wide Activities	General Description of Major Work Categories	Development Account Number	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work (2)
				Original	Revised (1)	Funds Obligated (2)	Funds Expended (2)	
IL 85-6 Bluebell Tower	Site Work	1450		\$15,000.00 \$0.00	\$0.00 \$0.00	\$0.00 \$0.00	\$0.00 \$0.00	
				\$15,000.00	\$0.00	\$0.00	\$0.00	
	Install Sewer Cleanout Rekey building and units	1460 1460	1	\$14,000.00 \$42,000.00	\$0.00 \$45,047.00	\$0.00 \$45,047.00	\$0.00 \$45,047.00	moved to 5 yr. plan
				\$56,000.00	\$45,047.00	\$45,047.00	\$45,047.00	
	Replace Comm. Room Appliances Replace Entry to comply w/Sec. 504	1470 1470	5	\$2,250.00 \$12,000.00	\$2,250.00 \$12,000.00	\$0.00 \$0.00	\$0.00 \$0.00	
				\$14,250.00	\$14,250.00	\$0.00	\$0.00	
Total,			Project Total:	\$85,250.00	\$59,297.00	\$45,047.00	\$45,047.00	

Signature of Executive Director and Date

Signature of Public Housing Director or Office of Native American Programs Administrator and Date

X

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(1) To be completed for the Performance and Evaluation Report or a Revised Annual Statement
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Comprehensive Grant Program (CGP) **Part III: Implementation Schedule**

Office of Public and Indian Housing

Development Number/ Name HA-Wide Activities	All Funds Obligated (Quarter Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates (2)
	Original	Revised (1)	Actual (2)	Original	Revised (1)	Actual (2)	
Mgmt. Improvements							
Res. Initiatives Coordinator	09/30/01			09/30/02			
Res. Programs	09/30/01			09/30/02			
Administration	09/30/01			09/30/02			
HA Wide	09/30/01			09/30/02			
85-1 Moon Towers	09/30/01			09/30/02			
85-2 Scattered Sites	09/30/01			09/30/02			
85-6 Bluebell Tower	09/30/01			09/30/02			

Signature of Executive Director and Date

Signature of Public Housing Director or Office of Native American Programs Administrator and Date

X

X

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

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form HUD-52837 (10/96)
ref. Handbook 7485.3

Comprehensive Grant Program (CGP) **Part III: Implementation Schedule**

Office of Public and Indian Housing

Development Number/ Name HA-Wide Activities	All Funds Obligated (Quarter Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates (3)
	Original	Revised (1)	Actual (2)	Original	Revised (1)	Actual (2)	
#REF!		#REF!					
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Signature of Executive Director and Date

Signature of Public Housing Director or Office of Native American Programs Administrator and Date

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form HUD-52837 (10/96)
 ref. Handbook 7485.3

Annual Statement /Performance and Evaluation Report

U. S. Department of Housing
and Urban Development

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

Comprehensive Grant Program (CGP)

Part I: Summary

Office of Public and Indian Housing

HA Name Knox County Housing Authority	Comprehensive Grant Number IL06-P085-50101	FFY of Grant Approval 2001
---	--	--------------------------------------

- Original Annual Statement Reserve for Disaster/Emergencies Revised Annual Statement/Revision Number__1__ Performance and Evaluation Report for Program Year Ending 2002
- Final Performance and Evaluation Report

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost (2)	
		Original	Revised (1)	Obligated	Expended
1	Total Non-CGP Funds				
2	1406 Operations (may not exceed 10% of 19)	\$0.00		\$0.00	\$0.00
3	1408 Management Improvements	\$95,000.00		\$0.00	\$0.00
4	1410 Administration	\$84,200.00		\$0.00	\$0.00
5	1411 Audit	\$0.00		\$0.00	\$0.00
6	1415 Liquidated Damages	\$0.00		\$0.00	\$0.00
7	1430 Fees and Costs	\$46,500.00		\$0.00	\$0.00
8	1440 Site Acquisition	\$0.00		\$0.00	\$0.00
9	1450 Site Improvement	\$0.00		\$0.00	\$0.00
10	1460 Dwelling Structures	\$787,000.00		\$0.00	\$0.00
11	1465.1 Dwelling Equipment-Nonexpendable	\$0.00		\$0.00	\$0.00
12	1470 Nondwelling Structures	\$0.00		\$0.00	\$0.00
13	1475 Nondwelling Equipment	\$20,000.00		\$0.00	\$0.00
14	1485 Demolition	\$0.00		\$0.00	\$0.00
15	1495.1 Relocation Cost	\$0.00		\$0.00	\$0.00
16	1490 Replacement Reserve	\$0.00		\$0.00	\$0.00
17	1498 Mod Used for Development	\$0.00		\$0.00	\$0.00
18	1502 Contingency (may not exceed 8% of 19)	\$0.00		\$0.00	\$0.00
19	Amount of Annual Grant (Sum of lines 2-19)	\$1,032,700.00		\$0.00	\$0.00
20	Amount of line 19 Related to LBP Activities	\$0.00		\$0.00	\$0.00
21	Amount of line 19 Related to Section 504 Compliance	\$0.00		\$0.00	\$0.00
22	Amount of line 19 Related to Security	\$0.00		\$0.00	\$0.00
23	Amount of line 19 Related to Energy Conservation	\$0.00		\$0.00	\$0.00

Signature of Executive Director and Date

Signature of Public Housing Director or Office of Native American Programs Administrator & Date:

-
- 1 To be completed for the Performance & Evaluation Report or a Revised Annual Statement
 - 2 To be completed for the Performance & Evaluation Report

Development Number/ Name HA-Wide Activities	General Description of Major Work Categories	Development Account Number	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work (2)
				Original	Revised (1)	Funds Obligated (2)	Funds Expended (2)	
HA-Wide Mgmt. Improvmts	Staff Training	1408		\$8,000.00				
	Resident Initiatives Coordinator	1408		\$42,000.00				
	Resident Programs	1408		\$45,000.00				
	Safety Audit	1408		\$5,500.00				
			Total 1408	\$100,500.00		\$0.00	\$0.00	
Admin	Mod. Coord, Ex. Dir. & Clerical	1410		\$80,500.00				
	Sundry	1410		\$2,000.00				
			Total 1410	\$82,500.00		\$0.00	\$0.00	
Fees and Costs	A & E Services	1430		\$44,000.00				
	Consultant	1430		\$2,000.00				
			Total 1430	\$46,000.00		\$0.00	\$0.00	
	Mtce. Program	1475		\$12,000.00				
	Sewer Camera & Machine	1475		\$8,000.00				
				\$20,000.00		\$0.00	\$0.00	

Signature of Executive Director and Date

Signature of Public Housing Director or Office of Native American Programs Administrator and Date

X

X

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

Comprehensive Grant Program (CGP)

Part II: Supporting Pages

Development Number/ Name HA-Wide Activities	General Description of Major Work Categories	Developer Account Number	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work (2)
				Original	Revised (1)	Funds Obligated (2)	Funds Expended (2)	
85-1 Moon Towers								
Total,	Total Project			\$0.00	\$0.00	\$0.00	\$0.00	

Signature of Executive Director and Date

Signature of Public Housing Director or Office of Native American Programs Administrator and Date

X

X

(1) To be completed for the Performance and Evaluation Report or a Revised Annual Statement
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form HUD-52837 (10/96)
ref Handbook 7485.3

Comprehensive Grant Program (CGP) **Part II: Supporting Pages**

Development Number/ Name HA-Wide Activities	General Description of Major Work Categories	Development Account Number	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work (2)
				Original	Revised (1)	Funds Obligated (2)	Funds Expended (2)	
85-2 Scattered Sites	Repair Masonry Work @ each building Install Central A/C in each unit	1460	95	\$401,000.00		\$0.00	\$0.00	
			190	\$386,000.00		\$0.00	\$0.00	
				\$787,000.00		\$0.00	\$0.00	
			1					
Total,	Project Total:			\$787,000.00	\$0.00	\$0.00	\$0.00	

Signature of Executive Director and Date

X

Signature of Public Housing Director or Office of Native American Programs Administrator and Date

X

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

Comprehensive Grant Program (CGP)

Part II: Supporting Pages

Development Number/ Name HA-Wide Activities	General Description of Major Work Categories	Development Account Number	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work (2)
				Original	Revised (1)	Funds Obligated (2)	Funds Expended (2)	
IL 85-6 Bluebell Tower								
Total,			Project Total:	\$0.00	\$0.00	\$0.00	\$0.00	

Signature of Executive Director and Date

Signature of Public Housing Director or Office of Native American Programs Administrator and Date

X

X

(1) To be completed for the Performance and Evaluation Report or a Revised Annual Statement
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Comprehensive Grant Program (CGP) **Part III: Implementation Schedule**

Office of Public and Indian Housing

Development Number/ Name HA-Wide Activities	All Funds Obligated (Quarter Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates (2)
	Original	Revised (1)	Actual (2)	Original	Revised (1)	Actual (2)	
Mgmt. Improvements							
Res. Initiatives Coordinator	09/30/03			09/30/04			
Res. Programs	09/30/03			09/30/04			
Administration	09/30/03			09/30/04			
HA Wide	09/30/03			09/30/04			
85-2 Scattered Sites	09/30/03			09/30/04			

Signature of Executive Director and Date

Signature of Public Housing Director or Office of Native American Programs Administrator and Date

X

X

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

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

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ref. Handbook 7485.3

Annual Statement /Performance and Evaluation Report

U. S. Department of Housing
and Urban Development

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

Comprehensive Grant Program (CGP) **Part I: Summary**

Office of Public and Indian Housing

HA Name Knox County Housing Authority	Comprehensive Grant Number IL06-P085-50102	FFY of Grant Approval 2002
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Original Annual Statement Reserve for Disaster/Emergencies Revised Annual Statement/Revision Number__1__ Performance and Evaluation Report for Program Year E **09/30/02**
 Final Performance and Evaluation Report

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost (2)	
		Original	Revised (1)	Obligated	Expended
1	Total Non-CGP Funds				
2	1406 Operations (may not exceed 10% of 19)	\$0.00		\$0.00	\$0.00
3	1408 Management Improvements	\$95,000.00		\$0.00	\$0.00
4	1410 Administration	\$84,200.00		\$0.00	\$0.00
5	1411 Audit	\$0.00		\$0.00	\$0.00
6	1415 Liquidated Damages	\$0.00		\$0.00	\$0.00
7	1430 Fees and Costs	\$46,500.00		\$0.00	\$0.00
8	1440 Site Acquisition	\$0.00		\$0.00	\$0.00
9	1450 Site Improvement	\$0.00		\$0.00	\$0.00
10	1460 Dwelling Structures	\$744,990.00		\$0.00	\$0.00
11	1465.1 Dwelling Equipment-Nonexpendable	\$0.00		\$0.00	\$0.00
12	1470 Nondwelling Structures	\$0.00		\$0.00	\$0.00
13	1475 Nondwelling Equipment	\$20,000.00		\$0.00	\$0.00
14	1485 Demolition	\$0.00		\$0.00	\$0.00
15	1495.1 Relocation Cost	\$0.00		\$0.00	\$0.00
16	1490 Replacement Reserve	\$0.00		\$0.00	\$0.00
17	1498 Mod Used for Development	\$0.00		\$0.00	\$0.00
18	1502 Contingency (may not exceed 8% of 19)	\$0.00		\$0.00	\$0.00
19	Amount of Annual Grant (Sum of lines 2-19)	\$990,690.00			\$0.00
20	Amount of line 19 Related to LBP Activities	\$0.00		\$0.00	\$0.00
21	Amount of line 19 Related to Section 504 Compliance	\$0.00		\$0.00	\$0.00
22	Amount of line 19 Related to Security	\$0.00		\$0.00	\$0.00
23	Amount of line 19 Related to Energy Conservation	\$0.00		\$0.00	\$0.00

Signature of Executive Director and Date

Signature of Public Housing Director or Office of Native American Programs Administrator & Date:

- 1 To be completed for the Performance & Evaluation Report or a Revised Annual Statement
- 2 To be completed for the Performance & Evaluation Report

Development Number/ Name HA-Wide Activities	General Description of Major Work Categories	Development Account Number	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work (2)
				Original	Revised (1)	Funds Obligated (2)	Funds Expended (2)	
HA-Wide	Resident Initiatives Coordinator	1408		\$42,000.00		\$0.00	\$0.00	
	Resident Programs	1408		\$45,000.00		\$0.00	\$0.00	
	Mgmt. Staff Training	1408		\$8,000.00		\$0.00	\$0.00	
	Improvmts Safety Audit	1408		\$5,500.00		\$0.00	\$0.00	
				Total 1408	\$100,500.00		\$0.00	\$0.00
Admin	Mod. Coord, Ex. Dir. & Clerical	1410		\$80,500.00		\$0.00	\$0.00	
	Sundry	1410		\$2,000.00		\$0.00	\$0.00	
			Total 1410	\$82,500.00		\$0.00	\$0.00	
Fees and Costs	A & E Services Consultant	1430		\$44,000.00		\$0.00	\$0.00	
		1430		\$2,500.00		\$0.00	\$0.00	
			Total 1430	\$46,500.00		\$0.00	\$0.00	
	Lawn Equipment	1475		\$12,000.00		\$0.00	\$0.00	
	Sewer Camera	1475		\$8,000.00		\$0.00	\$0.00	
				\$20,000.00		\$0.00	\$0.00	

Signature of Executive Director and Date

Signature of Public Housing Director or Office of Native American Programs Administrator and Date

X

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Comprehensive Grant Program (CGP)

Part II: Supporting Pages

Development Number/ Name HA-Wide Activities	General Description of Major Work Categories	Development Account Number	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work (2)
				Original	Revised (1)	Funds Obligated (2)	Funds Expended (2)	
85-1								
Moon Towers	Recorate Interior Corridors	1460	4	\$36,350.00		\$0.00	\$0.00	
	Install ceiling fans in each unit	1460	190	\$58,000.00		\$0.00	\$0.00	
	Install Roll-In Showers in Hcp. Units	1460	5	\$27,500.00		\$0.00	\$0.00	
				\$121,850.00				
	Upgrade Heating System	1470		\$46,100.00		\$0.00	\$0.00	
	Replace Fire Alarm System	1470		\$82,000.00		\$0.00	\$0.00	
				\$128,100.00		\$0.00	\$0.00	
85-2								
Scattered Sites	Masonry Work @ ea. Bldg.	1460		\$358,990.00		\$0.00	\$0.00	
	Install Central Air @ ea. Unit	1460		\$388,000.00		\$0.00	\$0.00	
				\$746,990.00		\$0.00	\$0.00	
Total,	Total Project			\$996,940.00	#REF!	#REF!	#REF!	

Signature of Executive Director and Date

Signature of Public Housing Director or Office of Native American Programs Administrator and Date

X

X

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Comprehensive Grant Program (CGP) **Part III: Implementation Schedule**

Office of Public and Indian Housing

Development Number/ Name HA-Wide Activities	All Funds Obligated (Quarter Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates (2)
	Original	Revised (1)	Actual (2)	Original	Revised (1)	Actual (2)	
Mgmt. Improvements	09/30/04			09/30/04			
Res. Initiatives Coordinator	09/30/04			09/30/04			
Res. Programs	09/30/04			09/30/04			
Administration	09/30/04			09/30/04			
HA Wide	09/30/04			09/30/04			
85-2 Scattered Sites	09/30/04			09/30/04			

Signature of Executive Director and Date

Signature of Public Housing Director or Office of Native American Programs Administrator and Date

X

X

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