

U.S.DepartmentofHousingandUrbanDevelopment  
OfficeofPublicandIndianHousing

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# PHAPlans

5YearPlanforFiscalYears2000 -2004  
AnnualPlanforFiscalYear2003

**HALLCOUNTYHOUSINGAUTHORITY  
911BAUMANNDRIVE  
GRANDISLAND,NE68803**

**NOTE:THISPHAPLANSTEMPLATE(HUD50075)ISTOBECOMPLETEDIN  
ACCORDANCEWITHINSTRUCTIONSLOCATEDINAPPLICABLEPIHNOTICES**

**PHA Plan  
Agency Identification**

**PHAName:** HallCountyHousingAuthority

**PHANumber:** 003

**PHAFiscalYearBeginning:(mm/yyyy)** 07/2003

**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**  
**PHAF ISCAL YEARS 2000 –2004**  
 [24CFRPart903.5]

**1. Mission**

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

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

X The PHA's mission is: (state mission here)

Our aim is to ensure safe, decent, and affordable housing; create opportunities for residents' self-sufficiency and economic independence; and assure fiscal integrity by all program participants. In order to achieve this mission, we will:

1. Recognize the resident's as our ultimate customer
2. Improve PHA Management and service delivery efforts through oversight, assistance, and selective intervention by highly skilled, diagnostic, and result oriented field personnel
3. Seek problem -solving partnerships with PHA, resident, community, and government leadership
4. Act as an agent for change when performance is unacceptable and we judge that local leadership is not capable or committed to improvement
5. Efficiently apply limited HUD resources by using risk assessment techniques to focus our oversight efforts

**2. 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 target sets such as: numbers of families served or PHAS scores achieved.) PHAs should identify these measures in the space to the right of or below the stated objectives.

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

PHA Goal: Expand the supply of assisted housing  
 Objectives:

- Apply for additional rental vouchers:
  - Reduce public housing vacancies:
  - Leverage private or other public funds to create additional housing opportunities:
  - Acquire or build units or developments
  - Other (list below)
- PHA Goal: Improve the quality of assisted housing
- Objectives:
- Improve public housing management: (PHA Score)
  - Improve voucher management: (SEMAP score)
  - Increase customer satisfaction:
  - Concentrate on efforts to improve specific management functions: (list; e.g., public housing finance; voucher unit inspections)
  - Renovate or modernize public housing units:
  - Demolish or dispose of obsolete public housing:
  - Provide replacement public housing:
  - Provide replacement vouchers:
  - Other: (list below)
- PHA Goal: Increase assisted housing choices
- Objectives:
- Provide voucher mobility counseling:
  - Conduct outreach efforts to potential voucher landlords
  - Increase voucher payment standards
  - Implement voucher homeownership program:
  - Implement public housing or other homeownership programs:
  - Implement public housing site -based waiting lists:
  - Convert public housing to vouchers:
  - Other: (list below)

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

- PHA Goal: Provide an improved living environment
- Objectives:
- Implement measures to deconcentrate poverty by bringing higher income public housing households into lower income developments:
  - Implement measures to promote income mixing in public housing by assuring access for lower income families into higher income developments:
  - Implement public housing security improvements:

- Designate developments or buildings for particular resident groups (elderly, persons with disabilities)
- Other: (list below)

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

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

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

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

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

**The goals and objectives adopted by the Hall County Housing Authority are:**

**Goal One:** Manage the Hall County Housing Authority's existing public housing program in an efficient and effective manner thereby qualifying as at least a Standard performer.

**Objectives:**

1. HUD shall recognize the Hall County Housing Authority as a high Performer by June 30, 2004.
2. The Hall County Housing Authority shall achieve and sustain an occupancy rate of 97% by June 30, 2005.
3. The Hall County Housing Authority shall promote a motivating work environment with a capable and efficient team of employees to operate as a customer-friendly and fiscally prudent leader in the affordable housing industry.

**Goal Two:** Improve resident and community perception of safety and security in the Hall County Housing Authority's public housing developments.

**Objectives:**

1. The Hall County Housing Authority shall reduce crime in its Developments so that the crime rate is less than their surrounding neighborhood by December 31, 2004.
2. The Hall County Housing Authority will work closely with law Enforcement and other community organizations to increase response time and better serve our residents.
3. The Hall County Housing Authority shall reduce its evictions due to Violation of criminal laws by 10% by December 31, 2004, through aggressive screening procedures.

**Goal Three :** Enhance the marketability and customer satisfaction of the Hall County Housing Authority.

**Objectives:**

1. The Hall County Housing Authority shall become a more customer - Oriented organization.
2. The Hall County Housing Authority shall enhance its curb appeal for Public housing developments by maintaining its property in a responsible and appealing manner.
3. Improve or maintain all HCHA property in a good condition and Provide timely, high quality maintenance service to Hall County Housing Authority residents.

**AnnualPHAPlan**  
**PHAFiscalYear2000**  
 [24CFRPart903.7]

**i. AnnualPlanType:**

SelectwhichtypeofAnnualPlanthePHAwillsubmit.

**StandardPlan**

**StreamlinedPlan:**

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

**TroubledAgencyPlan**

**ii. ExecutiveSummaryoftheAnnualPHAPlan**

[24CFRPart903.79@]

ProvideabriefoverviewoftheinformationintheAnnualPlan,includinghighlightsofmajorinitiativesanddiscretionarypoliciessthePHAhasincludedintheAnnualPlan.

Thissectionisnotrequiredandwillnotbecompleted.

**iii. AnnualPlanTableofContents**

[24CFRPart903.79@]

ProvideatableofcontentsfortheAnnualPlan,includingattachments,andalistofsupportingdocumentsavailableforpublicinspection.

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**Attachments**

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

**Required Attachments:**

- X Admissions Policy for Deconcentration
- X FY2003 Capital Fund Program Annual Statement: (Attachment C)
- Most recent board -approved operating budget (Required Attachment for PHAs that are troubled or at risk of being designated troubled ONLY)

**Optional Attachments:**

- X PHA Management Organizational Chart (Attachment A)
- X FY2003 Capital Fund Program 5 Year Action Plan: (Attachment B)
- X Comments of Resident Advisory Board or Boards (must be attached if not included in PHA Plan text) –(In Text)
- X Other (List below, providing each attachment name)
  - P&E Report/Annual Statement –NE26P00350102 (Attachment D)
  - P&E Report/Annual Statement –NE26P00350101 (Attachment E)
  - P&E Report/Annual Statement –NE26P00350100 (Attachment F)
  - 2003 Resident Advisory Board (Attachment G)

**Supporting Documents Available for Review**

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

<b>List of Supporting Documents Available for Review</b>		
<b>Applicable &amp; On Display</b>	<b>Supporting Document</b>	<b>Applicable Plan Component</b>
X	PHA Plan Certifications of Compliance with the PHA Plans and Related Regulations	5 Year and Annual Plans
X	State/Local Government Certification of Consistency with the Consolidated Plan	5 Year and Annual Plans
X	Fair Housing Documentation: Records reflecting that the PHA has examined its programs or proposed programs, identified any impediments to fair housing choice in those programs, addressed or is addressing those impediments in a reasonable fashion in view of the resources available, and worked or is working with local jurisdictions to implement any of the jurisdictions' initiatives to affirmatively further fair housing that require the PHA's involvement.	5 Year and Annual Plans
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	Annual Plan:



<b>List of Supporting Documents Available for Review</b>		
<b>Applicable &amp; On Display</b>	<b>Supporting Document</b>	<b>Applicable Plan Component</b>
	housing program	Financial Resources;
X	Public Housing Admissions and (Continued) Occupancy Policy (A&O), which includes the Tenant Selection and Assignment Plan [TSAP]	Annual Plan: Eligibility, Selection, and Admissions Policies
X	Section 8 Administrative Plan	Annual Plan: Eligibility, Selection, and Admissions Policies
X	Public Housing Deconcentration and Income Mixing Documentation: 1. PHA board certifications of compliance with deconcentration requirements (section 16(a) of the US Housing Act of 1937, as implemented in the 2/18/99 <i>Quality Housing and Work Responsibility Act Initial Guidance; Notice</i> and any further HUD guidance) and 2. Documentation of the required deconcentration and income mixing analysis	Annual Plan: Eligibility, Selection, and Admissions Policies
X	Public housing rent determination policies, including the methodology for setting public housing flat rents X check here if included in the public housing A&O Policy	Annual Plan: Rent Determination
X	Schedule of flat rents offered at each public housing development X check here if included in the public housing A&O Policy	Annual Plan: Rent Determination
X	Section 8 rent determination (payment standard) policies X check here if included in Section 8 Administrative Plan	Annual Plan: Rent Determination
X	Public housing management and maintenance policy documents, including policies for the prevention or eradication of pest infestation (including cockroach infestation)	Annual Plan: Operations and Maintenance
X	Public housing grievance procedures X check here if included in the public housing A&O Policy	Annual Plan: Grievance Procedures
X	Section 8 informal review and hearing procedures X check here if included in Section 8 Administrative Plan	Annual Plan: Grievance Procedures
X	The HUD -approved Capital Fund/Comprehensive Grant Program Annual Statement (HUD 52837) for the active grant year	Annual Plan: Capital Needs
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	Annual Plan: Demolition

<b>List of Supporting Documents Available for Review</b>		
<b>Applicable &amp; On Display</b>	<b>Supporting Document</b>	<b>Applicable Plan Component</b>
	disposition of public housing	and Disposition
N/A	Approved or submitted applications for designation of public housing (Designated Housing Plans)	Annual Plan: Designation of Public Housing
N/A	Approved or submitted assessments of reasonable revitalization of public housing and approved or submitted conversion plans prepared pursuant to section 202 of the 1996 HUD Appropriations Act	Annual Plan: Conversion of Public Housing
X	Approved or submitted public housing home ownership programs/plans	Annual Plan: Homeownership
N/A	Policies governing any Section 8 Homeownership program <input type="checkbox"/> check here if included in the Section 8 Administrative Plan	Annual Plan: Homeownership
X	Any cooperative agreement between the PHA and the TANF agency	Annual Plan: Community Service & Self-Sufficiency
N/A	FSS Action Plan/s for public housing and/or Section 8	Annual Plan: Community Service & Self-Sufficiency
N/A	Most recent self-sufficiency (ED/SS, TOP or ROSS or other resident services grant) grant program reports	Annual Plan: Community Service & Self-Sufficiency
X	The most recent Public Housing Drug Elimination Program (PHDEP) semi-annual performance report for any open grant and most recently submitted PHDEP application (PHDEP Plan)	Annual Plan: Safety and Crime Prevention
X	The most recent fiscal year audit of the PHA conducted under section 5(h)(2) of the U.S. Housing Act of 1937 (42 U.S.C. 1437c(h)), the results of that audit and the PHA's response to any findings	Annual Plan: Annual Audit
N/A	Troubled PHAs: MOA/Recovery Plan	Troubled PHAs
X	Other supporting documents (optional) (list individually; use as many lines as necessary): Pest Control Policy, Transfer Policy, Natural Disaster Policy, Maintenance Policy, Funds Transfer Policy, Investment Policy, Community Center Policy, Blood-Borne Disease Policy, Public Housing Grievance Procedure, Tenant Based Informal Review Procedure, Procurement Policy, Public Housing Lease, Travel Policy, Capitalization Policy, Check Signing Policy, Criminal Records Management Policy, Disposition Policy, Drug-Free Policy, Equal Housing Opportunity Policy, Ethics Policy, One Strike You're Out Policy, Ban & Bar Policy.	Organizational Policies

## **1. Statement of Housing Needs**

[24 CFR Part 903.79(a)]

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

Based upon the information contained in the Consolidated Plan/s applicable to the jurisdiction, and/or other data available to the PHA, provide a statement of the housing needs in the jurisdiction by completing the following table. In the "Overall" Needs column, provide the estimated number of renter families that have housing needs. For the remaining characteristics, rate the impact of that factor on the housing needs for

each family type, from 1 to 5, with 1 being “no impact” and 5 being “severe impact.” Use N/A to indicate that no information is available upon which the PHA can make this assessment.

<b>Housing Needs of Families in the Jurisdiction by Family Type</b>							
Family Type	Overall	Affordability	Supply	Quality	Accessibility	Size	Location
Income ≤ 30% of AMI	967	4	3	4	4	4	3
Income > 30% but ≤ 50% of AMI	1024	4	3	4	4	4	3
Income > 50% but < 80% of AMI	440	3	2	2	4	2	3
Elderly	481	2	1	2	3	1	1
Families with Disabilities	554	4	4	3	4	3	2
Race/Ethnicity	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Race/Ethnicity							
Race/Ethnicity							
Race/Ethnicity							

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

- Consolidated Plan of the Jurisdiction/s  
Indicate year: 2000 - 2005
- U.S. Census data: 2000
- American Housing Survey data  
Indicate year:
- Other housing market study  
Indicate year:
- Other sources: (list and indicate year of information) -  
Knowledge of current housing conditions from day-to-day operations was used in ranking affordability, supply, etc.

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

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

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

<b>Housing Needs of Families on the Waiting List</b>			
Waiting list type: (select one)			
<input type="checkbox"/> Section 8 tenant -based assistance			
<input checked="" type="checkbox"/> Public Housing			
<input type="checkbox"/> Combined Section 8 and Public Housing			
<input type="checkbox"/> Public Housing Site -Based or sub -jurisdictional waiting list (optional)			
If used, identify which development/subjurisdiction:			
	# of families	% of total families	Annual Turnover
Waiting list total*	90		375
Extremely low income <= 30% AMI	68	76%	
Very low income (> 30% but <= 50% AMI)	17	19%	
Low income (> 50% but < 80% AMI)	5	5%	
Families with children	70	78%	
Elderly families	4	4%	
Families with Disabilities	6	7%	
White/Non-Hisp.	67	74%	
White/Hispanic	17	19%	
Black/Non-Hisp.	5	6%	
Black/Hisp.	0	0%	
American Ind./Non	1	1%	
Amer. Ind./Hisp.	0	0%	
Asian/Pacif./Hisp.	0	0%	
Characteristics by Bedroom Size (Public Housing Only)			
1BR	20	22%	
2BR	36	40%	
3BR	34	38%	
4BR			
5BR			
5+BR			

<b>Housing Needs of Families on the Waiting List</b>	
Is the waiting list closed (select one)? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes If yes: How long has it been closed (# of months)? Does the PHA expect to reopen the list in the PHA Plan year? <input type="checkbox"/> No <input type="checkbox"/> Yes Does the PHA permit specific categories of families onto the waiting list, even if generally closed? <input type="checkbox"/> No <input type="checkbox"/> Yes	
*Most of the HCHA applicants are currently being worked on, have been processed and the applications are awaiting grievance expiration or are in the process of being helped. Thus, there is little to now wait for an applicant (except for three bedroom).	

<b>Housing Needs of Families on the Waiting List</b>			
Waiting list type: (select one) <input checked="" type="checkbox"/> Section 8 tenant - based assistance <input type="checkbox"/> Public Housing <input type="checkbox"/> Combined Section 8 and Public Housing <input type="checkbox"/> Public Housing Site - Based or sub - jurisdictional waiting list (optional) If used, identify which development/subjurisdiction:			
	# of families	% of total families	Annual Turnover
Waiting list total	358		391
Extremely low income <= 30% AMI	258	72%	
Very low income (> 30% but <= 50% AMI)	100	28%	
Low income (> 50% but < 80% AMI)	0	0%	
Families with children	113		
Elderly families	13		
Families with Disabilities	24		
White/Non-Hisp.	280		
White/Hisp.	39		
Black/Non-Hisp.	33		
Black/Hisp.	0		
Amer. Ind./Non -H	4		
Amer. Ind./Hisp.	2		
Asian Pac. Isl./Non	0		

Housing Needs of Families on the Waiting List			
Asian Pac. Isl./His.	0		
Characteristics by Bedroom Size (Public Housing Only)			
1BR	N/A		
2BR	N/A		
3BR	N/A		
4BR	N/A		
5BR	N/A		
5+BR	N/A		
Is the waiting list closed (select one)? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes If yes: How long has it been closed (# of months)? Does the PHA expect to reopen the list in the PHA Plan year? <input type="checkbox"/> No <input type="checkbox"/> Yes Does the PHA permit specific categories of families onto the waiting list, even if generally closed? <input type="checkbox"/> No <input type="checkbox"/> Yes			

### C. Strategy for Addressing Needs

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

#### (1) Strategies

**Need: Shortage of affordable housing for all eligible populations**

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

Select all that apply

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

- X Maintain or increase section 8 lease -updates by effectively screening Section 8 applicants to increase owner acceptance of program
- X 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

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

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

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

Select all that apply

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

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

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

Select all that apply

- Seek designation of public housing for the elderly

- Apply for special -purpose voucher targeted to the elderly, should they become available
- X Other: (list below)  
Advertise to the elderly through ads and organizations that work with this population.

**Need: Specific Family Types: Families with Disabilities**

**Strategy 1: Target available assistance to Families with Disabilities:**

Select all that apply

- Seek designation of public housing for families with disabilities
- Carry out the modifications needed in public housing based on the section 504 Needs Assessment for Public Housing
- Apply for special -purpose voucher targeted to families with disabilities, should they become available
- Affirmatively market to local non -profit agencies that assist families with disabilities
- X Other: (list below)  
Convert four efficiency apartments in Pletcher Terrace into two accessible apartments within the next five years. Advertise through agencies that work with the disabled.

**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

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

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

Select all that apply

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

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

**(2) Reasons for Selecting Strategies**

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



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

## **2. Statement of Financial Resources**

[24CFR Part 903.79(b)]

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

<b>Financial Resources: Planned Sources and Uses</b>		
<b>Sources</b>	<b>Planned \$</b>	<b>Planned Uses</b>
<b>1. Federal Grants (FY 2003 grants)</b>		
a) Public Housing Operating Fund	\$256,828	
b) Public Housing Capital Fund	\$551,988	
c) HOPEVI Revitalization	N/A	
d) HOPEVI Demolition	N/A	
e) Annual Contributions for Section 8 Tenant -Based Assistance	\$1,122,062	
f) Public Housing Drug Elimination Program (including any Technical Assistance funds)	N/A	
g) Resident Opportunity and Self - Sufficiency Grants	N/A	
h) Community Development Block Grant	N/A	
i) HOME	N/A	
Other Federal Grants (list below)		

<b>Financial Resources: Planned Sources and Uses</b>		
<b>Sources</b>	<b>Planned \$</b>	<b>Planned Uses</b>
<b>2. Prior Year Federal Grants (unobligated funds only) (list below)</b>		
NE26P00350101	\$174,000	
NE26P00350102	\$453,790	
<b>3. Public Housing Dwelling Rental Income</b>	\$755,292	PH Operations & Supportive Services
<b>4. Other income (list below)</b>		
Excess Utilities	\$10,815	
<b>5. Non -federal sources (list below)</b>		
Interest	\$68,782	
Other Income	\$65,866	
<b>Total resources</b>	\$3,459,432	

### **3. PHA Policies Governing Eligibility, Selection, and Admissions**

[24CFR Part 903.79(c)]

#### **A. Public Housing**

Exemptions: PHA 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)
- X When families are within a certain time of being offered a unit: (3 Months)
- X Other: (describe) Our elderly/disabled units do not currently have a waiting list. Thus, eligibility is verified immediately after an appointment can be set up following their application. Family units try to calculate openings for the next three months.

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

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

- X Housekeeping
  - X Other (describe) Applicants for apartments that pay for their own utilities must be able to place services in their name. We also check whether applicants or whether housing authorities, have been evicted from a federally assisted program, had their assistance terminated from the Housing Choice Voucher program or have committed fraud.
- c. X Yes  No: Does the PHA request criminal records from local law enforcement agencies for screening purposes?
- d. X Yes  No: Does the PHA request criminal records from State law enforcement agencies for screening purposes? Sex Offender Registry Only.
- e.  Yes X No: Does the PHA access FBI criminal records from the FBI for screening purposes? (either directly or through an NCIC -authorized source)

**(2) Waiting List Organization**

- a. Which methods does the PHA plan to use to organize its public housing waiting list (select all that apply)
- X Community-wide list
  - Sub-jurisdictional lists
  - Site-based waiting lists
  - Other (describe)
- b. Where may interested persons apply for admission to public housing?
- X PHA main administrative office
  - PHA development site management office
  - Other (list below)
- c. If the PHA plan to operate one or more site-based waiting lists in the coming year, answer each of the following questions; if not, skip to subsection **(3) Assignment**
1. How many site-based waiting lists will the PHA operate in the coming year?
  2.  Yes  No: Are any or all of the PHA's site-based waiting lists new for the upcoming year (that is, they are not part of a previously HUD-approved site-based waiting list plan)? If yes, how many lists?
  3.  Yes  No: May families be on more than one list simultaneously? If yes, how many lists?
  4. Where can interested persons obtain more information about and sign up to be on the site-based waiting lists (select all that apply)?
    - PHA main administrative office
    - All PHA development management offices

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

**(3) Assignment**

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

- One
- X Two
- Three or More

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

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

**(4) Admissions Preferences**

a. Income targeting:

- Yes X 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 transfer take precedence over new admissions? (list below)

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

c. Preferences

1. X 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 the 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
- Household that contribute to meeting income goals (broad range of incomes)
- Household that contribute to meeting income requirements (targeting)
- Those previously enrolled in educational, training, or upward mobility programs
- Victims of reprisals or hate crimes
- X Other preference(s) (list below) – Elderly/disabled, displaced by government action, and families with children. Nearelderly applicants receive a preference over singles but below other listed above.

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

### 3 Date and Time

Former Federal preferences:

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

Other preferences (select all that apply)

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

2 NearElderlyFamilies

4.Relationshipofpreferencetoincometargetingrequirements:

- ThePHAappliespreferenceswithinincometiars
- X Notapplicable:thepoolofapplicantfamiliesensuresthatthePHAwillmeet incometargetingrequirements

**(5)Occupancy**

a.Whatreferencematerialscanapplicantsandresidentsusetooobtaininformationabout therulesofoccupancyofpublichousing(selectallthatapply)

- X ThePHA -residentlease
- X ThePHA’sAdmissionsand(Continued)Occupancypolicy
- X PHAbriefingseminarsorwrittenmaterials
- Othersource(list)

b.HowoftenmustresidentsnotifythePHAofchangesinfamilycomposition? (select allthatapply)

- X Atanannualreexaminationandleaserene wal
- X Anytimefamilycompositionchanges
- X Atfamilyrequestforrevision
- X Other(list) -Whenthereisanincomeincreaseof\$400.00ormore(annually).

**(6)DeconcentrationandIncomeMixing**

a.XYes No:DoesthePHAhaveanygeneraloccupancy(family)publichousing developmentscoveredbythedeconcentrationrule?Ifno,this sectioniscomplete.Ifyes,continuetotheneftquestion.

b.XYes No:Doanyofthesecovereddevelopmentshaveaverageincomes aboveor below85%to115%oftheaverageincomesofallsuch developments?Ifno,thissectioniscomplete.

Ifyes,listthesedevelopmentsasfollows:

<b><u>DeconcentrationPolicyforCoveredDevelopments</u></b>			
<b>DevelopmentName:</b>	<b>Number OfUnits</b>	<b>Explanation(Ifany)[seeStep4at §903.2(c)(1)(iv)]</b>	<b>DeconcentrationPolicy(ifno explanation)[seestep5at §903.2(c)(1)(v)]</b>
005	69*	Nearlyall2Bd.Units –WithinRange	MeetsPolicyGuidelines
006	14*	3bdm.Units –WithinRange	MeetsPolicyGuidelines
007	15*	3bdm.Units ->115%	3Bd.Dev.Over115%

Only Development 007 is over the range and just barely. There appears to be one need to further deconcentrate as the other 3 bedroom units (Development 006) are very near the 115% range as well.

**B. Section 8**

Exemptions: PHA that do not administer section 8 are not required to complete sub -component 3B.  
**Unless otherwise specified, all questions in this section apply only to the tenant -based section 8 assistance program (vouchers, and until completely merged into the voucher program, certificates).**

**(1) Eligibility**

- a. What is the extent of screening conducted by the PHA? (select all that apply)
- X Criminal or drug -related activity only to the extent required by law or regulation
  - Criminal and drug -related activity, more extensively than required by law or regulation
  - X More general screening than criminal and drug -related activity (list factors below)
    1. Verify applicant has not been evicted from a federally assisted housing program within the last 5 years.
    2. Verify applicant has not had assistance terminated under the Certificate or Voucher Program within the last 3 years.
  - X Other (list below)  
 Verify that applicants do not owe other housing agencies money including HCHA
- b. X Yes  No: Does the PHA request criminal records from local law enforcement agencies for screening purposes?
- c. X Yes  No: Does the PHA request criminal records from State law enforcement agencies for screening purposes? Sex Offender Registry only
- d.  Yes X No: Does the PHA access FBI criminal records from the FBI for screening purposes? (either directly or through an NCIC -authorized source)
- e. Indicate what kinds of information you share with prospective landlords? (select all that apply)
- Criminal or drug -related activity
  - X Other (describe below) At the request of the landlord, we will share any factual or third party written information relevant to the history of, or ability to, comply with the lease.

**(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)
- X 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)

- X PHA main administrative office
- Other (list below)

**(3) Search Time**

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

If yes, state circumstances below:

30 day extensions are granted if requested. A second thirty days (60 day) extension may be granted for appropriate reasons such as a disability or medical hardship.

**(4) Admissions Preferences**

a. Income targeting

Yes X 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. X 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
- X Other preference(s) (list below)  
Elderly/Disabled, displaced by government action, near elderly and families with children.

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

2 Date and Time

Former Federal preferences

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

Other preferences (select all that apply)

- Working families and those unable to work because of age or disability
- Veterans and veterans’ families
- Residents who live and/or work in your jurisdiction
- Those enrolled currently in educational, training, or upward mobility programs
- Households that contribute to meeting income goals (broad range of incomes)
- Households that contribute to meeting income requirements (targeting)
- Those previously enrolled in educational, training, or upward mobility programs
- Victims of reprisals or hate crimes
- 1 Other preference(s) (list below) –Elderly/Disabled, displaced by government action, near elderly and families with children.

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

- X 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

X Not applicable: the policy of applicant families ensures that the PHA will meet income targeting requirements

#### **(5) Special Purpose Section 8 Assistance Programs**

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

The Section 8 Administrative Plan

Briefing sessions and written materials

Other (list below)

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

Through published notices

Other (list below)

#### **4. PHA Rent Determination Policies**

[24CFR Part 903.79(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)

X 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
- X  \$26-\$50

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

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

1. The family has lost eligibility for or is awaiting an eligibility determination for a Federal, State, or local assistance program, including a family that includes a member who is an alien lawfully admitted for permanent residence under the Immigration and Nationality Act who would be entitled to public benefits but for the title IV of the Personal Responsibility and Work Opportunity Reconciliation Act of 1996.
2. The family would be evicted as a result of the imposition of the minimum rent
3. The income of the family has decreased because of changed circumstances, including loss of employment
4. A death in the family has occurred

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

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

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

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

- For the earned income of a previously unemployed household member
- For increases in earned income
- Fixed amount (other than general rent -setting policy)  
If yes, state amount/s and circumstances below:
- Fixed percentage (other than general rent -setting policy)  
If yes, state percentage/s and circumstances below:
- For household heads
- For other family members
- For transportation expenses
- For the non-reimbursed medical expenses of non-disabled or non-elderly families
- Other (describe below)

e. Ceiling rents

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

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

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

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

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

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

f. Rent determination:

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
- X At family option
- Anytime the family experiences an income increase
- X Anytime a family experiences an income increase above a threshold amount or percentage: (if selected, specify threshold) - \$400.00 annually
- Other (list below)

g.  Yes X 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.)

- Thesection 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) – HCHA used a list of comparable unassisted apartments in the community. Amenities and size were considered in setting the flat rent. Flat rent rates currently are:

Efficiency unit:	\$200.00
One Bedroom (including Golden Towers):	\$300.00
One Bedroom (Rainbow Terrace):	\$350.00
Two Bedroom (Pletcher Terrace):	\$350.00
Two Bedroom:	\$400.00
Three Bedroom:	\$500.00

## **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)

1. The family has lost eligibility for or is awaiting an eligibility determination for a Federal, State, or local assistance program, including a family that includes a member who is an alien lawfully admitted for temporary or permanent residence under the Immigration and Nationality Act who would be entitled to public benefits but for the title IV of the Personal Responsibility and Work Opportunity Reconciliation Act of 1996.
2. The family would be evicted as a result of the imposition of the minimum rent
3. The income of the family has decreased because of changed circumstances, including loss of employment
4. A death in the family has occurred

## **5. Operations and Management**

[24 CFR Part 903.79(e)]

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

**A. PHA Management Structure**

Describe the PHA’s management structure and organization.

(select one)

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

**B. HUD Programs Under PHA Management**

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

<b>Program Name</b>	<b>Units or Families Served at Year Beginning</b>	<b>Expected Turnover</b>
Public Housing	392 (Total Units)	120 (est. M.I. fiscal yr.)
Section 8 Vouchers	350 (Families Served)	59
Section 8 Certificates	NA	NA
Section 8 Mod Rehab	NA	NA
Special Purpose Section 8 Certificates/Vouchers (list individually)	NA	NA
Public Housing Drug Elimination Program (PHDEP)	NA	NA
Other Federal Programs (list individually)	N/A	N/A

**C. Management and Maintenance Policies**

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

- 3. Public Housing Maintenance and Management: (list below)
  - 4. Admissions and Occupancy Policy
  - 5. Maintenance Policy
  - 6. Public Housing Grievance Policy
  - 7. Natural Disaster Policy

8. PestControlPolicy
9. InvestmentPolicy
10. TransferPolicy
11. CommunityCenterPolicy
12. ProcurementPolicy
13. PublicHousingLease
14. CapitalizationPolicy
15. CriminalRecordsManagementPolicy
16. DispositionPolicy
17. BloodBorneDiseasePolicy
18. EqualHousingOpportunityPolicy(both programs)
19. EthicsPolicy(both programs)
20. "OneStrike&You'reOut"Policy(both programs)
21. Ban&BarPolicy

(2)Section8Management:(listbelow)

1. Section8AdministrativePlan
2. Tenant-BasedInformalGrievancePolicy

## **6. PHAGrievanceProcedures**

[24CFRPart903.79(f)]

Exemptionsfromcomponent6:HighperformingPHAsarenotrequiredtocompletecomponent6.Section 8-OnlyPHAsareexemptfromsub -component6A.

### **A. PublicHousing**

1.  Yes  No: Has the PHA established any written grievance procedures in addition to federal requirements found at 24CFRPart966, Subpart B, for residents of public housing?

If yes, list addition to federal requirements below:

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

PHA main administrative office

Other (list below)

## **7. Capital Improvement Needs**

[24 CFR Part 903.79(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) Attachment H

-or-

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

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

1. Development name:

2. Development (project) number:

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

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

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

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

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

**8. Demolition and Disposition**

[24CFR Part 903.79(h)]

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

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

2. Activity Description

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

<b>Demolition/Disposition Activity Description</b>	
1a. Development name:	
1b. Development (project) number:	
2. Activity type: Demolition <input type="checkbox"/>	
Disposition <input type="checkbox"/>	
3. Application status (select one)	
Approved <input type="checkbox"/>	
Submitted, pending approval <input type="checkbox"/>	
Planned application <input type="checkbox"/>	
4. Date application approved, submitted, or planned for submission: <span style="float: right;">(DD/MM/YY)</span>	
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**

[24CFR Part 903.79(i)]

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

1.  Yes  No: Has the PHA designated or applied for approval to designate or does the PHA plan to apply to designate any public housing for occupancy only by the elderly families or only by families with disabilities, or by elderly families and families with disabilities or

will apply for designation for occupancy by only elderly families or only families with disabilities, or by elderly families and families with disabilities as provided by section 7 of the U.S. Housing Act of 1937 (42 U.S.C. 1437e) in the upcoming fiscal year? (If "No", skip to component 10. If "yes", complete one activity description for each development, unless the PHA is eligible to complete a streamlined submission; PHAs completing streamlined submissions may skip to component 10.)

**2. Activity Description**

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

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

**10. Conversion of Public Housing to Tenant -Based Assistance**

[24 CFR Part 903.79(j)]

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

**A. Assessment of Reasonable Revitalization Pursuant to section 202 of the HUD 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. PHA completing streamlined submissions may skip to component 11.)

2. Activity Description

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

<b>Conversion of Public Housing Activity Description</b>	
1a. Development name:	
1b. Development (project) number:	
2. What is the status of the required assessment?	
<input type="checkbox"/> Assessment underway <input type="checkbox"/> Assessment results submitted to HUD <input type="checkbox"/> Assessment results approved by HUD (if marked, proceed to next question) <input type="checkbox"/> Other (explain below)	
3. <input type="checkbox"/> Yes <input type="checkbox"/> No: Is a Conversion Plan required? (If yes, go to block 4; if no, go to block 5.)	
4. Status of Conversion Plan (select the statement that best describes the current status)	
<input type="checkbox"/> Conversion Plan in development <input type="checkbox"/> Conversion Plan submitted to HUD on: (DD/MM/YYYY) <input type="checkbox"/> Conversion Plan approved by HUD on: (DD/MM/YYYY) <input type="checkbox"/> Activities pursuant to HUD - approved Conversion Plan underway	
5. Description of how requirements of Section 202 are being satisfied by means other than conversion (select one)	
<input type="checkbox"/> Units addressed in a pending or approved demolition application (date submitted or approved: _____) <input type="checkbox"/> Units addressed in a pending or approved HOPE VI demolition application (date submitted or approved: _____) <input type="checkbox"/> Units addressed in a pending or approved HOPE VI Revitalization Plan (date submitted or approved: _____) <input type="checkbox"/> Requirements no longer applicable: vacancy rates are less than 10 percent <input type="checkbox"/> Requirements no longer applicable: site now has less than 300 units <input type="checkbox"/> Other: (describe below)	

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

See conversion study in the 2002 Agency Plan

**11.HomeownershipProgramsAdministeredbythePHA**

[24CFRPart903.79(k)]

**A.PublicHousing**

ExemptionsfromComponent11A:Section8onlyPHAsarenotrequiredtocomplete11A.

1.XYes No: DoesthePHAadministeranyhomeownershipprograms administeredbythePHAunderanapprovedsection5(h) homeownershipprogram(42U.S.C.1437c(h)),oranapproved HOPE Iprogram(42U.S.C.1437aaa)orhasthePHAa ppliedor plantoapplytoadministeranyhomeownershipprogramsunder section5(h),theHOPEIprogram,orsection32oftheU.S. HousingActof1937(42U.S.C.1437z -4).(If“No”,skipto component11B;if“yes”,completeoneactivitydescriptionfor eachapplicableprogram/plan,unleseligibletocompletea streamlinedsubmissiondueto **smallPHA** or **highperforming PHA**status.PHAscompletingstreamlinedsubmissionsmayskip tocomponent11B.)

2.ActivityDescription

YesXNo: HasthePHAprovidedallrequiredactivitydescriptioninformation forthiscomponentinthe **optional**PublicHousingAsset ManagementTable?(If“yes”,skiptocomponent12.If“No”, completetheActivityDescriptiontablebelow.)

<b>PublicHousingHomeownershipActivityDescription (Completeoneforeachdevelopmentaffected)</b>
1a.Developmentname: 1b.Development(project)number:
2.FederalProgramauthority: <input type="checkbox"/> HOPEI X5(h) <input type="checkbox"/> TurnkeyIII <input type="checkbox"/> Sectin32oftheUSHAof1937(effective10/1/99)
3.Applicationstatus:(selectone) XApproved;includedinthePHA’sHomeownershipPlan/Program <input type="checkbox"/> Submitted,pendingapproval <input type="checkbox"/> Plannedapplication
4.DateHomeownershipPlan/Programapproved,submitted,orplannedforsubmission: (10/July/1986)
5. Numberofunitsaffected:19 6.Coverageofaction:(selectone) <input type="checkbox"/> Partofthedevelopment XTotaldevelopment

## B. Section 8 Tenant Based Assistance

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

### 2. Program Description:

#### a. Size of Program

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

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

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

#### b. PHA established eligibility criteria

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

## 12. PHA Community Service and Self-Sufficiency Programs

[24 CFR Part 903.79(l)]

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

### A. PHA Coordination with the Welfare (TANF) Agency

#### 1. Cooperative agreements:

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

If yes, what was the date that agreement was signed? 27 / March/2000

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 sponsored 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

XYes 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	Access (development office/ PHA main office/	Eligibility (public housing or section 8



		list/random selection/specific criteria/other)	otherprovidername)	participantsor both)
ResidentInitiativesCounsel includeseducation,computerlab, bettermentactivities,management training,etc.	72	InterestedParties	Throughresident developmentofficeor AdministrationOffice	PublicHousing Residents

**(2)FamilySelfSufficiencyprogram/s**

a.ParticipationDescription

FamilySelfSufficiency(FSS)Participation		
Program	RequiredNumberofParticipants (startofFY2000Estimate)	ActualNumberofParticipants (Asof:DD/MM/YY)
PublicHousing	0	0
Section8	0	0

- b.  Yes  No: IfthePHAisnotmaintainingtheminimumprogramsizerequired byHUD,doesthemostrecentFSSActionPlanaddressthesteps thePHAplantaketoachieveatleasttheminimumprogram size? Ifno,liststepsthePHAwilltakebelow:

**C.WelfareBenefitReductions**

1.ThePHAiscomplyingwiththestatutoryrequirementssection12(d)oftheU.S. HousingActof1937(relatingtothetreatmentofincomechangesresultingfrom welfareprogramrequirements)by:(selectallthatapply)

- AdoptingappropriatechangestothePHA’spublichousingrentdetermination policiesandtrainstafftocarryoutthosepolicies
- Informingresidentsofnewpolicyonadmissionandreeexamination
- Activelynotifyingresidentsofnewpolicyattimesinadditiontoadmissionand reexamination.
- EstablishingorpursuingacooperativeagreementwithallappropriateTANF agenciesregardingtheexchangeofinformationandcoordinationofservices
- EstablishingaprotocolforexchangeofinformationwithallappropriateTANF agencies
- Other:(listbelow)

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

**13. PHA Safety and Crime Prevention Measures**

[24CFR Part 903.79(m)]

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

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

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

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

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

- X 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
- X Resident reports
- X PHA employee reports
- X Police reports
- Demonstrable, quantifiable success with previous or ongoing anti-crime/anti-drug programs
- X Other (describe below)  
Speaking with residents about changes needed and safety concerns.

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

All developments are equally affected in different ways

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

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

- X Contracting with outside and/or resident organizations for the provision of crime and/or drug -prevention activities
- X Crime Prevention Through Environmental Design
- X Activities targeted to at -risky youth, adults, or seniors
- Volunteer Resident Patrol/Block Watchers Program
- X Other (describe below)  
Designated a family apartment to a Police Officer occupied unit and other physical improvements. There have also been improvements made on existing security systems.

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

All developments affected. Family apartments will see most of the electronic equipment.

### C. Coordination between PHA and the police

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

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

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

All developments affected.

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

PHA eligible for FY2000 PHDEP funds must provide a PHDEP Plan meeting specified requirements prior to receipt of PHDEP funds.

PHDEP HAS BEEN ELIMINATED, THIS SECTION WILL NOT BE COMPLETED

Yes  No: Is the PHA eligible to participate in the PHDEP in the fiscal year covered by this PHA Plan?

Yes  No: Has the PHA included the PHDEP Plan for FY2000 in this PHA Plan?

Yes  No: This PHDEP Plan is an Attachment. (Attachment Filename: \_\_\_\_)

## **14. RESERVED FOR PET POLICY**

[24CFR Part 903.79(n)]

### **20.0 Pet Policy**

#### **20.1 Exclusions**

This policy does not apply to animals that are used to assist persons with disabilities. Assistive animals are allowed in all public housing facilities with no restrictions other than those imposed on all tenants to maintain their units and associated facilities in a decent, safe, and sanitary manner and to refrain from disturbing their neighbors.

#### **20.2 Pets In Public Housing Buildings**

The Hall County Housing Authority will allow indoor dogs, no more than 12 inches high (as projected to adult size – listing compiled by HCHA) in the following projects: Pletcher Terrace, Rainbow Terrace, Scattered Site Homes, Shady Bend, Stolley Park Duplexes, 718 Building of Orleans Apartments, 3021 Building of Western Apartments. Indoor cats will also be allowed in these designated projects.

Cats and Dogs are not allowed in the buildings not mentioned (see 24CFR 5.318 and 24CFR 960.707 for authorization)

Birds and Fish will be allowed in all projects.

Dogs who have been trained to exhibit aggressive behavior will not be allowed.

Residents are responsible for any damage caused by their pets, including the cost of fumigating or cleaning their units. In exchange for the right to own a pet, residents assume full responsibility and liability for their pet and agree to hold the Hall County Housing Authority harmless from any claims caused by an action or inaction of a pet. Residents who are tenants at Western or Orleans Apartments as of 7/1/01 will be “grandfathered” and may have pets in their existing buildings provided all other rules and regulations are followed.

#### **20.3 Approval**

Residents must have the prior approval of the Housing Authority before moving a pet into their unit. Residents must request approval from HCHA by filling out a Pet Ownership form prior to pet ownership or move-in. Further, a picture of the pet must be given to HCHA so the pet can be identified in the event it is running loose.

#### **20.4 Types and Number of Pets**

The Hall County Housing Authority will allow only domesticated dogs, cats, birds, and fish in aquariums in units (see Section 20.2). All dogs and cats must be spayed or neutered before they become six months old. A licensed veterinarian must verify this fact.

Only one (1) cat or dog (where authorized) per unit allowed.

Two birds are allowed per unit provided they are in a cage.

Fish are limited to a 10-gallon tank.

Any animal deemed to be potentially harmful to the health or safety of others, including attack or fight-trained dogs, will not be allowed.

Birds cannot exceed 6 inches in height.

Fish cannot be carnivorous.

No animal may exceed twenty (20) pounds in weight projected to full adult size.

## 20.5 Inoculations

In order to be registered, pets must be appropriately inoculated against rabies and other conditions prescribed by local ordinances. HCHA will give an owner 14 days to register their pet upon ownership. Residents must responsibly own their pets in accordance with all applicable state and local public health, animal control, and animal anti-cruelty laws and regulations including any licensing requirements. A certification signed by a veterinarian or state or local official shall be annually filed with the Hall County Housing Authority to attest to the inoculations.

## 20.6 Pet Deposit

A pet deposit of \$300.00 is required for all cat and dog owners at the time of registering the pet. Owners of birds and fish must pay a \$50.00 pet deposit at time of registration. The deposit is refundable when the pet or the family vacate the unit, less any amounts owed due to damage beyond normal wear and tear.

Pet Deposits must be paid in full upon move-in. Payment arrangements may be made with the administrative office if good cause is presented. HCHA will determine good cause on a case-by-case basis. A pet deposit payment plan will never exceed three months and will not be made if there is outstanding debt currently owed to HCHA.

## 20.7 Financial Obligation of Residents

Any resident who owns or keeps a pet in their dwelling unit will be required to pay for any damages caused by the pet. Also, any pet-related insect infestation in

the pet owner's unit will be the financial responsibility of the pet owner and the Hall County Housing Authority reserves the right to exterminate and charge the resident.

## 20.8 Nuisance or Threat to Health or Safety

The pet and its living quarters must be maintained in a manner to prevent odors and any other unsanitary conditions in the owner's unit and surrounding areas.

Repeated substantiated complaints by neighbors or Hall County Housing Authority personnel regarding pets disturbing the peace of neighbors through noise, odor, animal waste, or other nuisance will result in the owner having to remove the pet or move him/herself.

Pets whomake noise continuously and/or incessantly for a period of 10 minutes or intermittently for one half hour or more to the disturbance of any person at any time of day or night shall be considered a nuisance.

## 20.9 Designation of Pet Areas

Pets must be kept in the owner's apartment or on a leash at all times when outside (no outdoor cages may be constructed). Pet owners must clean up after their pets and are responsible for disposing of pet waste.

With the exception of assistive animals no pets shall be allowed in the community room, laundry room, public bathroom, hallway or office other than designated areas.

## 20.10 Miscellaneous Rules

Pets may not be left unattended in a dwelling unit for over 48 hours. If the pet is left unattended and no arrangements have been made for its care, the HA will have the right to enter the premises and take the uncared-for pet to be boarded at a local animal care facility at the total expense of the resident.

Pet bedding shall not be washed in any common laundry facilities.

Residents must take appropriate action to protect their pets from fleas and ticks.

All pets must wear a tag bearing the resident's name and phone number and the date of the latest rabies inoculation.

Pets cannot be kept, bred or used for any commercial purpose.

Residents owning cats shall maintain waterproof litter boxes for cat waste. Refuse from litter boxes shall not accumulate or become unsightly or unsanitary. Litter shall be disposed of in an appropriate manner.

A pet owner shall physically control or confine his/her pet during the times when Housing Authority employees, agents of the Housing Authority or others must enter the pet owner's apartment to conduct business, provide services, enforce lease terms, etc.

If a pet causes harm to any person, the pet's owner shall be required to permanently remove the pet from the Housing Authority's property within 24 hours of written notice from the Housing Authority. The pet owner may also be subject to termination of his/her dwelling lease.

### 20.11 Visiting Pets

Pets that meet the size and type criteria outlined above may visit the projects/buildings where pets are allowed for 8 hours per day but no more than 40 hours in a 12 month period. Visiting pets may not stay overnight without written approval from the Hall County Housing Authority. Tenants who have visiting pets must abide by the conditions of this policy regarding health, sanitation, nuisances, and peaceful enjoyment of others. If visiting pets violate this policy or cause the tenant to violate the lease, the tenant will be required to remove the visiting pet.

### 20.12 Removal of Pets

The Hall County Housing Authority, or an appropriate community authority, shall require the removal of any pet from a project if the pet's conduct or condition is determined to be a nuisance or threat to the health or safety of other occupants of the project or of other persons in the community where the project is located.

In the event of illness or death of pet owner, or in the case of an emergency which would prevent the pet owner from properly caring for the pet, the Hall County Housing Authority has permission to call the emergency caregiver designated by the resident or the local Pet Law Enforcement Agency to take the pet and care for it until family or friends would claim the pet and assume responsibility for it. Any expenses incurred will be the responsibility of the pet owner.

## **15. Civil Rights Certifications**

[24CFR Part 903.79(o)]

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

## **16. Fiscal Audit**

[24CFRPart903.79(p)]

1. X Yes  No: Is the PHA required to have an audit conducted under section 5(h)(2) of the U.S. Housing Act of 1937 (42 U.S.C. 1437c(h))? (If no, skip to component 17.)
2. X Yes  No: Was the most recent fiscal audit submitted to HUD?
3.  Yes X 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**

[24CFRPart903.79(q)]

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

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

## **18. Other Information**

[24CFRPart903.79(r)]

### **A. Resident Advisory Board Recommendations**

1. X Yes  No: Did the PHA receive any comments on the PHA Plan from the Resident Advisory Board/s?
2. If yes, the comments are: (if comments were received, the PHA **MUST** select one)  
 Attached at Attachment (Filename)



X Provided below:

### **Resident Advisory Board Suggestions & Comments**

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

X Considered comments, but determined that no changes to the PHA Plan were necessary.

The PHA changed portions of the PHA Plan in response to comments  
List changes below:

X Other: (list below)

### **RAB COMMENTS**

Comment: HCHA should consider fake surveillance cameras at Pletcher Terrace. There are cameras with flashing red lights and a sign could be put up stating "Smile, you're being recorded".

Response: It would not be long before it was discovered the cameras were fake and therefore eliminating any advantage this would bring.

Comment: What is the Housing Authority doing about the vandalism problem and who is doing it?

Response: HCHA has done several things to rectify the specific vandalism problem that has occurred in the one specific area that it has re-occurred. A police presence has been increased in the area, an informational letter was sent to area residents in an effort to increase awareness and lighting was slightly upgraded. We are unsure of who is/was causing the vandalism.

Comment: Two RAB members discussed the possibility of organizing a resident organization that would cover the entire PH program. Representatives in each building could be chosen and meet with the Executive Director or HCHA personnel regularly. This organization could also help "police" or "enforce" certain policy by reporting incidents to HCHA staff.

Response: This is a very good idea and will be looked at in the future. Currently, HCHA is unable to spend the necessary time organizing and "training" such a body. However, as issues within the organization clear up, time can be allocated to this issue to determine whether it is feasible.

Comment: Could single or more able bodied people be given an incentive or prize for parking further away from the building?

Response: I'm not sure of any "prize" or incentive that could be sustained. Further, enforcement of such a policy would be incredibly complex.

Comment: Will HCHA help residents wash windows since they have to be taken out to wash?

Response: Yes

**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 there a resident who serves on the PHA Board elected by the residents? (If yes, continue to question 3; if no, skip to sub component C.)

3. Description of Resident Election Process

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

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

X Other: (describe) – Residents were asked to bring in resumes if they were interested in becoming a board member. These resumes were given to the HCHA Board of Commissioners whom made a recommendation to the Hall County Board who subsequently selected the resident board member. This is similar to our current process of choosing a board member.

b. Eligible candidates: (select one)

- Any recipient of PHA assistance
- Any head of household receiving PHA assistance
- X 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

X Other (list) - Since HCHA Public Housing units are relocated in various areas of the city, and Section 8 participants may live anywhere in Hall County, it did not seem feasible to hold an election. We did not feel it was a fair method of choosing a board member, since many candidates would not have the time or money to “campaign” and would not have the resources to visit each of the complexes and the Section 8 units. Thus, all participants in HCHA programs were notified of the opening and asked to provide resumes if they were interested in the position. These resumes were given to the HCHA Board of Commissioners whom made a recommendation to the Hall County Board who subsequently selected the resident board member. This is similar to our current process of choosing a board member.

### 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: State of Nebraska

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.
- X 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)

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

N/A

### D. Other Information Required by HUD

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

#### Resident Board Member

Karen Duff, 915 Baumann Drive #14, Grand Island, NE 68803

Appointed to the Board on July 1, 2000 – June 30, 2005

**Definition** – Substantial deviations or significant amendments or modifications are defined as discretionary changes in the plans or policies of the housing authority that fundamentally change the mission, goals objectives, or plans of the agency and which require formal approval of the Board of Commissioners.

**Thirty nine people attended the Hall County Housing Authority Agency Plan Public Meeting held Wednesday, March 26, 2003 at 7:00 p.m.**

#### Comments made by Residents:

##### Water Issues

There were three comments and some brief discussion about water issues at Centennial Towers. The comments were:

“This water is nasty”!

“How about buying water purifiers to be put on every one’s faucet that wants it”?  
“We tested our water and it don’t even meet government standards”!

During the discussion the following statements were made:

“A new water purification system would only cost approximately \$40.00 in each apartment”.

“Installed a reverse osmosis system on my faucet and the contaminate level is now down to .01. It takes everything out”.

#### **HCHA Response:**

**HCHA will test a small sample of apartments for water contaminants to see if there are indeed any problems. However, the water is currently on the city line thus it should meet code (it is not well water).**

#### **Clotheslines**

There were two comments made about clotheslines:

“We need our clothesline put back up. (Pletcher Terrace) It sure makes the sheets smell good”.

“Why can’t Golden & Centennial have clotheslines”?

#### **HCHA Response:**

**The clothesline at Pletcher was taken down to do emergency plumbing work on a main line. That work has now been completed and the line will be put back up. Clotheslines at Centennial and Golden are not practical based upon limited space and the amount of people in each building.**

#### **Lighting Issues**

There were three comments regarding exterior lighting issues:

“The light out by the fire hydrant only works when it wants to. The new one by the trees at Golden Towers”.

“Put a security camera up instead of that light, it doesn’t work half the time anyway, so those people who vandalize our cars, get caught (Pletcher Terrace). Another lady got her car keyed again recently”

“There are outside lights over at Centennial Towers that are burned out.”

#### **HCHA Response:**

**HCHA periodically walks the grounds in the evenings to keep track of any lighting that is not working. Resident calls are extremely helpful. The aforementioned lights will be looked at and fixed if necessary.**

**A camera at Pletcher Terrace would be very costly and would have limited effect. The camera itself is not that costly but the wiring/trenching needed to place the camera would be very expensive not to mention the need for recording equipment. Wireless is optional but is more expensive and can have problems (weather, frequency, etc.). Finally, a fixed mount camera would only be able to view a small area on a very large area of grounds. Moving cameras are optional but would not be very effective due to landscaping barriers. Thus, this option is deemed not effective or efficient.**

## **Benches**

One comment was received regarding benches:

“Is the Housing Authority going to install benches in front of Centennial Towers. Menard’s has got those free benches where they’ll just let you put out for advertising.”

### **HCHA Response:**

**The accuracy of this statement comes into question. If it is accurate, the quality of the benches would need to be reviewed. HCHA will look into this and is obviously more than happy to save money if that is possible.**

## **New Gutters**

HCHA received one comment on gutters:

“When the gutters are replaced, I suggest that you paint the soffits; replace what needs to be replaced and then paint it or it will never get painted.”

### **HCHA Response:**

**HCHA will review this need and if it is needed, it will be added to the gutter contract specifications.**

## **504 Issues**

HCHA received seven comments about accessibility issues:

“When you do the concrete work, it sure would be appreciated if we could get handicap ramps both out by the fire hydrant and out there on the east side entrance.”

“Ramp has no sign posted, therefore people park in front of the ramp.”

“Can they have another ramp made?”

“Golden Towers needs more Reserved Handicap parking spots, at least a few more”.

“Would it be feasible to put another handicap placet to come from the street up there on the southeast corner of the street?” (PT)

“Could we get a bigger red button that you push for the Handicap door?”

“The Handicap doors at GT don’t always work.”

### **HCHA Response:**

**Handicap ramps are very important and if we are not meeting the needs of those who have a disability we are certainly willing to try. Ramps are now located in the necessary areas but HCHA will review the above comments and if feasible and helpful, will make additional ramps when concrete work is done this summer. Regarding handicap reserved parking, HCHA is currently very short of parking spaces. Additional handicap parking would decrease the total spaces available and would make a bad situation worse. Thus, this suggestion will not be acted upon. It is not feasible to put a handicap parking space on a public street. HCHA would have to petition the City Council and is not willing to do so at this time. The handicap door mechanisms (including buttons) will be looked at and fixed if necessary.**

## **Parking Issues**

HCHA received five comments regarding parking issues:

“Why not put parking where the evergreen trees are across from Golden Towers?”

“May I use the spot by the dumpster at Golden Towers. This would free up a parking space.”

“There are several cars sitting outside of Centennial Towers (presumably in violation of our parking policy).”

“There are cars in the lot with flat tires (for a couple of months) and expired license plates.”

“Do you have a log of registered vehicles? What about assigned parking?”

**HCHA Response:**

**Additional parking in the spots suggested would take away from the park setting and leisure feel of the area. It would also yield limited parking and the parking that would be gained would not be close to any specific complex (thus would probably not be used). There is currently an overflow lot, which is not being used to capacity. The space near the dumpster needs to remain open for trash pickup.**

**There may be vehicles in violation of the parking policy as these rules have not been enforced for a few months. This is mainly due to changes in the office and a spike in workload. These rules will be enforced again in the near future.**

**We do have a log of registered vehicles, which is what allows us to monitor the lots.**

**Assigned parking is not feasible as we have more units than parking spaces.**

**People propping doors so others can get in without a card.**

HCHA received two complaints regarding this issue.

“A tenant stated that when they come home late at night, the Community Room door does not latch”.

“One tenant stated that the Community Room door does not latch tight. Would the key cards change that?”

**HCHA Response:**

**This is primarily a maintenance issue which will be addressed.**

## **Statement of Progress in Meeting 5 - Year Mission & Goals**

Goal One: Manage the Hall County Housing Authority's existing public housing program in an efficient and effective manner thereby qualifying as at least a Standard performer.

Objectives:

1. HUD shall recognize the Hall County Housing Authority as a high Performer by July 31, 2004.
2. The Hall County Housing Authority shall achieve and sustain an occupancy rate of 97% by July 31, 2005.
3. The Hall County Housing Authority shall promote a motivating work environment with a capable and efficient team of employees to operate as

a customer-friendly and fiscally prudent leader in the affordable housing industry.

Goal Two: Improve resident and community perception of safety and security in the Hall County Housing Authority's public housing developments.

Objectives:

1. The Hall County Housing Authority shall reduce crime in its Developments so that the crime rate is less than the surrounding neighborhood by December 31, 2004.
2. The Hall County Housing Authority will work closely with Law Enforcement and other community organizations to increase response time and better serve our residents.
3. The Hall County Housing Authority shall reduce its evictions due to Violations of criminal laws by 10% by December 31, 2004, through aggressive screening procedures.

Goal Three: Enhance the marketability and customer satisfaction of the Hall County Housing Authority.

Objectives:

1. The Hall County Housing Authority shall become a more customer-oriented organization.
2. The Hall County Housing Authority shall enhance its curb appeal for Public Housing developments by maintaining its property in a responsible and appealing manner.
3. Improve or maintain all HCHA property in a good condition and provide timely, high quality maintenance services to Hall County Housing Authority residents.

The Hall County Housing Authority set three goals and three objectives within each goal two years ago, when developing the year 2005 - Year Plan. Objective One, number one has been modified this year moving the date of becoming a high performer back one year. It seems very unlikely that HCHA will reach high performer status earlier than that date though our effort has certainly been focused on that goal. HCHA has also had a Mission Statement that has been followed for some time.

The Hall County Housing Authority has made quite remarkable progress in a very short period of time on our first goal (Goal One). Five years ago, HCHA was considered to be in troubled status by the Department of Housing & Urban Development with a very low PHMAP score of under 60%. Though our current PAS score is under appeal (0 points were given for (FASS ) because HCHA's fee accountant was unable to submit approved unaudited numbers by the deadline), HCHA believes they will win the appeal and a near high-performer score will result. The prior year PHAS score for fiscal year ending

6/30/01 was 86%. That score was well above what is needed to be a standard performer. However, continued progress in this area will require a longer period of time than originally submitted, making it necessary to modify the timing on this objective in our current plan. Objective two concerns our occupancy rate and will be very difficult to attain due to competition in the area. Every effort has and will continue to be put forth in order to reach this objective. Objective three is more of a theoretical goal, which is being met, but requires continual training and education in order to sustain and maintain our objective.

It is our opinion that goal two is probably the area that has seen the most improvement. Primarily this is due to the PHDEP grant received by the Hall County Housing Authority in 1999, 2000 and 2001. Though Resident Survey results show only slight increases, we are quite certain that the perception of safety and security has greatly increased with the implementation of the PHDEP grant. Objective three may not be completed by the said date primarily due to the fact that HCHA's police officer has been aggressive in implementing "One Strike You're Out." Criminal activity has been carefully investigated and many crimes that previously may have gone unsolved are now being resolved. On several occasions the perpetrator has been a resident and has subsequently faced eviction. Thus, our evictions may have gone up in the short term but will surely go down in the long.

Objective One cannot be measured until crime rates are obtained for HCHA properties only. However, there may actually be a slight increase when the numbers are available largely due to the accessibility of our officer to HCHA residents. Objective two is currently being accomplished as HCHA now employs a police officer and works closely with the local police department.

Goal three is also taking time to achieve. Administration, office and maintenance staff have attended educational meetings, trainings, and seminars in an effort to be a more customer oriented organization as addressed in objective one. We have and will continue to keep staff informed of new regulations and reporting requirements. To achieve objective two, we have set aside funds for items to improve curb appeal and will continue to maintain our property in a responsible and appealing manner. To attain objective three, HCHA property will be improved and maintained through continued modernization with the funds received from the Capital Fund. As evidenced in our last Resident Survey report, maintenance service to HCHA residents has been highly improved and we will continue to provide high quality service.

### **MISSION STATEMENT**

Our aim is to ensure safe, decent, and affordable housing; create opportunities for residents' self-sufficiency and economic independence; and assure fiscal integrity by all program participants. In order to achieve this mission, we will:

1. Recognize the resident's as our ultimate customer
2. Improve PHA Management and service delivery efforts through oversight, assistance, and selective intervention by highly skilled, diagnostic, and result oriented field personnel



3. Seek problem-solving partnerships with PHA, resident, community, and government leadership
4. Act as an agent for change when performance is unacceptable and we judge that local leadership is not capable or committed to improvement
5. Efficiently apply limited HUD resources by using risk assessment techniques to focus on oversight efforts

Our mission statement has remained the same for a long period of time. We believe that we have done our best to adhere to this mission and strive to do ever better in fulfilling its intent.

## **Attachments**

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

Attachment A – Organizational Chart

Attachment B – 5- Year Action Plan

Attachment C – CFPNE25P00350103 Original Annual Statement

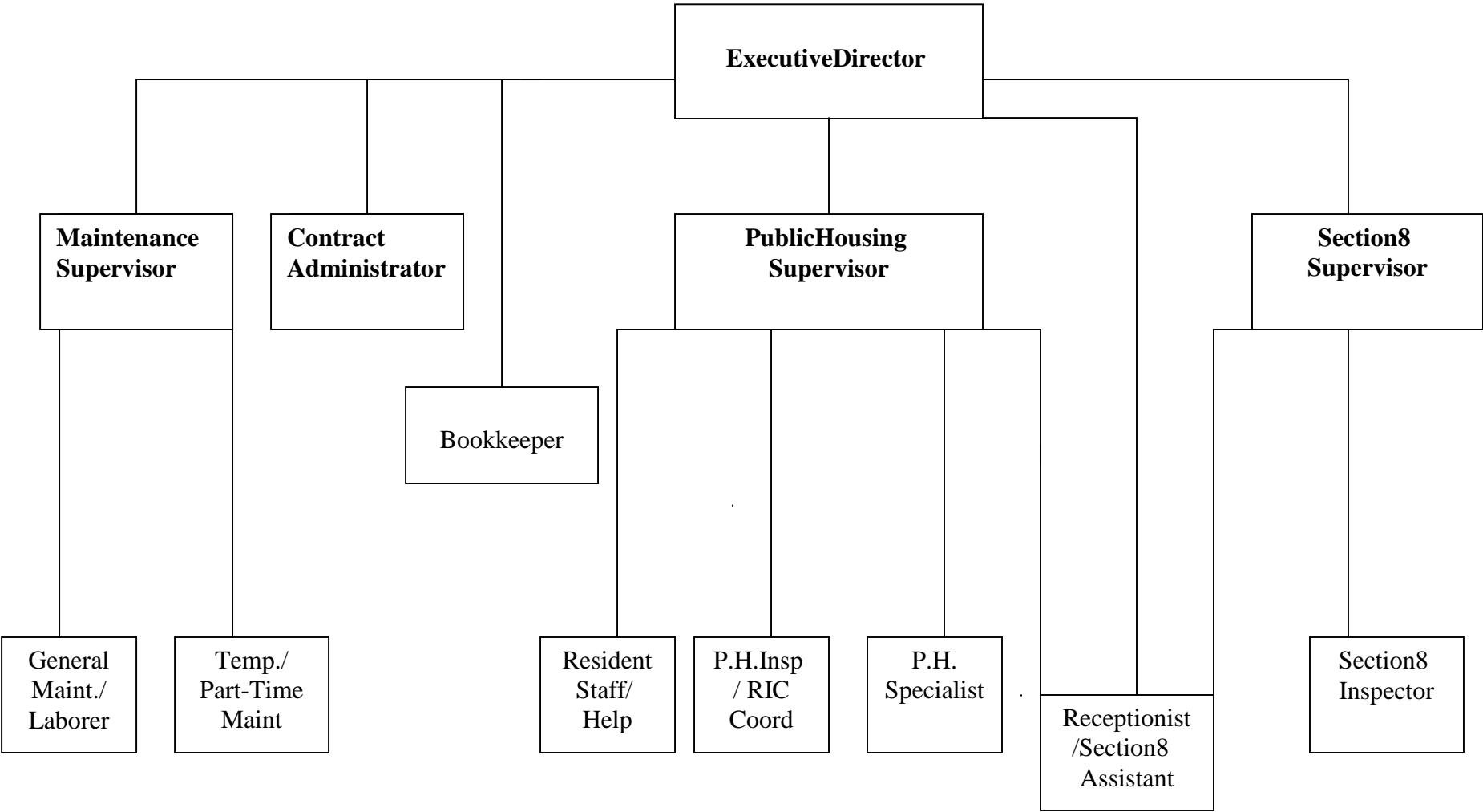
Attachment D – CFPNE25P00350102 Revised Annual Statement, Performance & Evaluation Report ending 12/31/02

Attachment E – CFPNE25P00350101 Revised Annual Statement, Performance & Evaluation Report ending 12/31/02

Attachment F – CFPNE25P00350100 Revised Annual Statement, Performance & Evaluation Report ending 12/31/02

Attachment G – Resident Advisory Board List

**ATTACHMENT A**  
**HALL COUNTY HOUSING AUTHORITY ORGANIZATIONAL CHART**



**ATTACHMENTB**

**CapitalFundProgramFive -YearActionPlan  
PartI:Summary**

PHAName:HallCounty HousingAuthority		<input checked="" type="checkbox"/> Original5 -YearPlan <input type="checkbox"/> RevisionNo:			
Development Number/Name/H A-Wide	Year1	WorkStatementforYear2 FFYGrant:2004 PHAFY:2004	WorkStatementforYear3 FFYGrant:2005 PHAFY:2005	WorkStatementfor Year4 FFYGrant:2006 PHAFY:2006	WorkStatementfor Year5 FFYGrant:2007 PHA FY:2007
NE26P003	Annual Stateme nt				
001 –Pletcher		16,000	14,000	60,000	60,000
002 –Golden		92,000	45,000	94,000	162,000
003 –Centennial		55,789	19,000	87,000	187,000
005 –Family/Elderly		73,000	97,392	37,000	15,000
006 –Scat eredSites		50,000	50,000	51,000	41,000
007–5hReplacement		25,000	12,000	6,000	6,000
HAWide		166,000	255,397	154,000	29,000
CFPFundsListed for5 -year planning					
		477,789	492,789	489,000	500,000
Replacement HousingFactor Funds					

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

Activities for Year 1	Activities for Year: <u>  2  </u>			Activities for Year: <u>  3  </u>		
	Development Name/Number	Major Work Categories	Estimated Cost	Development Name/Number	Major Work Categories	Estimated Cost
See	001-Pletcher	Roofing	5,000	001-Pletcher	Carpet/Tile	5,000
Annual		Tile	2,000		Faucets/Plumbing/Tile	4,000
Statement		Faucets/Plumbing/Tile	4,000		Plumbing	5,000
		Plumbing	5,000	<i>Subtotal</i>		<i>15,000</i>
	<i>Subtotal</i>		<i>16,000</i>	002–Golden Towers	Carpet/Tile	5,000
	002–Golden Towers	Shower Tile	30,000		Carpet/Tile(ext.)	6,000
		Building Exterior Maint.	30,000		Faucet/Plumbing	12,000
		Faucet/Plumbing	12,000		Sink/Countertop	12,000
		Sink/Countertop	12,000		Boiler	2,500
		Boiler	2,500		Elevator	2,500
		Elevator	2,500	<i>Subtotal</i>		<i>40,000</i>
		Stove/Refrigerator	3,000	003–Centennial Towers	Carpet/Tile	10,000
	<i>Subtotal</i>		<i>92,000</i>		Faucet/Plumbing	4,000
	003–Centennial Towers	Building Exterior Maint.	30,000		Elevator	2,500
		Tile	3,000		Boiler	2,500
		Faucet/Plumbing	4,000	<i>Subtotal</i>		<i>19,000</i>

		Elevator	2,500	005-Family/Elderly	Carpet/Tile	15,000
		Boiler	2,500		Furnace/Air	15,000
		Exterior Benches	10,000		Carpet/Tile/Flooring	14,000
		Stove/Refrigerator	3,789		Camera Equipment	15,000
	<i>Subtotal</i>		55,789		Stove/Refrigerator	12,000
	005-Family/Elderly	Carpet/Tile	6,000		Roof Improvements	20,000
		Furnace/Air	15,000		Faucet/Plumbing	6,392
		Carpet/Tile/Flooring	10,000	<i>Subtotal</i>		97,392
		Camera Equipment	15,000	006	Carpet/Tile	10,000
		Stove/Refrigerator	12,000		Furnace/Air	15,000
		Playground Equipment	15,000		Exterior Modernization	25,000
	<i>Subtotal</i>		73,000	<i>Subtotal</i>		50,000
	006	Carpet /Tile	10,000	007	Carpet/Tile	10,000
		Furnace/Air	15,000		Exterior Modernization	2,000
		Roofing	10,000	<i>Subtotal</i>		12,000
		Remodel Apartments	10,000	HA Wide	20% Fungible to Op. Fund	110,397
		Stove/Refrigerator	5,000		Fees & Costs	15,000
	<i>Subtotal</i>		50,000		Maintenance Vehicles	40,000
	007	Carpet/Tile	10,000		Landscaping	20,000
		Playground Equipment	15,000		Software Upgrade	5,000
	<i>Subtotal</i>		25,000		Training	5,000
	HA Wide	Roofing	15,000		Parking Lot Maint.	20,000
		Fees & Costs	35,000		Audit	4,000
		Parking Lot Maint.	20,000		GIPD Officer	40,000
		Landscaping	15,000	<i>Subtotal</i>		259,397



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

Activities for Year: <u>  4  </u> FFY Grant: PHAFY:			Activities for Year: <u>  5  </u> FFY Grant: PHAFY:		
<b>Development Name/Number</b>	<b>Major Work Categories</b>	<b>Estimated Cost</b>	<b>Development Name/Number</b>	<b>Major Work Categories</b>	<b>Estimated Cost</b>
001	Apartment Renovation	20,000	001	Apartment Renovation	20,000
	Roofing	20,000		Roofing	20,000
	Exterior Renovation	15,000		Exterior Renovation	15,000
	Concrete	5,000		Concrete	5,000
<i>Subtotal</i>		<i>60,000</i>	<i>Subtotal</i>		<i>60,000</i>
002	Apartment Renovation	10,000	002	Apartment Renovation	10,000
	Exterior Benches	20,000		Air Conditioning to Building	100,000
	Elevator/Boiler	10,000		Elevator/Boiler	10,000
	Hallway Improvements	30,000		Hallway Improvements	30,000
	Stove/Refrigerators	12,000		Stove/Refrigerators	12,000
	Countertop/Sink	12,000	<i>Subtotal</i>		<i>162,000</i>
<i>Subtotal</i>		<i>94,000</i>	003	Apartment Renovation	10,000
003	Apartment Renovation	10,000		Stove/Refrigerator	12,000

	PatioArea	25,000		AirConditioning Unit	125,000
	Hallway Improvements	30,000		Hallway Improvements	30,000
	Elevator/Boiler	10,000		Elevator/Boiler	10,000
	Stove/Refrigerator	12,000	<i>Subtotal</i>		<i>187,000</i>
<i>Subtotal</i>		<i>87,000</i>	005	Apartment Renovation	15,000
005	CarpetReplacement	7,000	<i>Subtotal</i>		<i>15,000</i>
	Apartment Renovation	15,000	006	Interior Modernization	10,000
	CameraEquipment	10,000		Furnace/Air	6,000
	Stove/Refrigerator	5,000		Roofing	25,000
<i>Subtotal</i>		<i>37,000</i>	<i>Subtotal</i>		<i>41,000</i>
006	Interior Modernization	10,000	007	Interior Modernization	3,000
	Furnace/Air	6,000		Exterior Modernization	3,000
	Roofing	25,000	<i>Subtotal</i>		<i>6,000</i>
	Exterior Modernization	10,000	HAWide	Audit	4,000
<i>Subtotal</i>		<i>51,000</i>		Fees&Costs	25,000
007	Interior Modernization	3,000	<i>Subtotal</i>		<i>29,000</i>
	Exterior Modernization	3,000			
<i>Subtotal</i>		<i>6,000</i>			
HAWide	20%Fungibleto Operating	100,000			
	Audit	4,000			



	GIPD Officer	40,000		
	Fees & Costs	10,000		
<i>Subtotal</i>		<i>154,000</i>		
	<b>Total CFPEstimatedCost</b>	\$489,000		\$500,000

**ATTACHMENT C**  
**CAPITAL FUND PROGRAM TABLES START HERE**

<b>Annual Statement/Performance and Evaluation Report</b>					
<b>Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I: Summary</b>					
PHAName: Hall County Housing Authority		Grant Type and Number Capital Fund Program Grant No: NE26P00350103 Replacement Housing Factor Grant No:		Federal FY of Grant: 2003	
<input checked="" type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:    ) <input type="checkbox"/> Performance and Evaluation Report for Period Ending: <input type="checkbox"/> Final Performance and Evaluation Report					
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total Non - CFP Funds				
2	1406 Operations				
3	1408 Management Improvements	70,000			
4	1410 Administration	55,199			
5	1411 Audit	3,000			
6	1415 Liquidated Damages				
7	1430 Fees and Costs	15,000			
8	1440 Site Acquisition				
9	1450 Site Improvement	45,000			
10	1460 Dwelling Structures	177,392			
11	1465.1 Dwelling Equipment — Nonexpendable	30,000			
12	1470 Nondwelling Structures	90,000			
13	1475 Nondwelling Equipment	66,397			
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1499 Development Activities				

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

PHAName: Hall County Housing Authority	Grant Type and Number Capital Fund Program Grant No: NE26P00350103 Replacement Housing Factor Grant No:	Federal FY of Grant: 2003
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Original Annual Statement     Reserve for Disasters/Emergencies     Revised Annual Statement (revision no:    )  
 Performance and Evaluation Report for Period Ending:     Final Performance and Evaluation Report

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
19	1501 Collateralization or Debt Service				
20	1502 Contingency				
21	Amount of Annual Grant: (sum of lines 2 – 20)	551,988			
22	Amount of line 21 Related to LBP Activities	10,000			
23	Amount of line 21 Related to Section 504 compliance	5,000			
24	Amount of line 21 Related to Security – Soft Costs	60,000			
25	Amount of Line 21 Related to Security – Hard Costs	15,000			
26	Amount of line 21 Related to Energy Conservation Measures	30,000			

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

PHAName: Hall County Housing Authority		Grant Type and Number Capital Fund Program Grant No: NE26P00350103 Replacement Housing Factor Grant No:			Federal FY of Grant: 2003			
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
HA Wide	Administration (E.D., Contract Administrator, Maintenance Staff)	1410		55,199				
	Maintenance Vehicles	1475	2	40,000				
	Parking Lot Maintenance	1450		20,000				
	Audit	1411		3,000				
	Fees & Costs	1430		15,000				
	Landscaping	1450		20,000				
	GIPD Officer (1 1/2 yrs.)	1408		60,000				
	Software Upgrade	1408		5,000				
	Training	1408		5,000				
	Benches, Tables, Concrete	1475		26,397				
001	Carpet	1460		3,000				
	Tile	1460		2,000				
	Faucets/Plumbing/Toilets	1460		4,000				
	Plumbing	1450		5,000				
002	Carpet	1460		7,000				
	Tile	1460		3,000				
	Faucet/Plumbing	1460		12,000				
	Sink/Countertops	1460		12,000				
	Tile/Carpet	1470		40,000				

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

PHAName: Hall County Housing Authority		Grant Type and Number Capital Fund Program Grant No: NE26P00350103 Replacement Housing Factor Grant No:			Federal FY of Grant: 2003			
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
002	Elevator	1460		2,500				
	Boiler	1460		2,500				
003	Carpet	1460		7,000				
	Tile	1460		3,000				
	Faucet/Plumbing	1460		4,000				
	Elevator	1460		2,500				
	Boiler	1460		2,500				
	Patio Overhang	1470		10,000				
005	Carpet	1460		10,000				
	Tile	1460		5,000				
	Furnace/Air	1460		24,000				
	Carpet/Tile/Flooring	1470		20,000				
	Camera Equipment	1470		15,000				
	Stove/Refrigerator	1465.1		30,000				
	Roof Improvements	1460		20,000				
	Patio Overhang	1470		5,000				
	Faucet/Plumbing	1460		6,392				
006	Carpet	1460		7,000				
	Tile	1460		3,000				
	Exterior Modernization (Paint/Siding)	1460		20,000				
	Furnace/Air	1460		6,000				

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

PHAName: Hall County Housing Authority		<b>Grant Type and Number</b> Capital Fund Program Grant No: NE26P00350103 Replacement Housing Factor Grant No:				<b>Federal FY of Grant: 2003</b>		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
007	Carpet	1460		5,000				
	Tile	1460		3,000				
	Exterior Modernization (Siding/Downspouts)	1460		1,000				

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

PHAName: Hall County Housing Authority		Grant Type and Number Capital Fund Program No: NE26P00350103 Replacement Housing Factor No:				Federal FY of Grant: 2003	
Development Number Name/HA-Wide Activities	All Fund Obligated (Quarter Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates
	Original	Revised	Actual	Original	Revised	Actual	
HA Wide	9/30/04			9/30/06			
001	9/30/04			9/30/06			
002	9/30/04			9/30/06			
003	9/30/04			9/30/06			
005	9/30/04			9/30/06			
006	9/30/04			9/30/06			
007	9/30/04			9/30/06			

**CapitalFundProgramFive -YearActionPlan**  
**PartI:Summary**

PHAName:HallCountyHousing Authority		<b>XOriginal5 -YearPlan</b> <input type="checkbox"/> RevisionNo:			
Development Number/Name/HA- Wide	Year1	WorkStatementforYear2 FFYGrant:2004 PHAFY:2004	WorkStatementforYear3 FFYGrant:2005 PHAFY:2005	WorkStatementforYear4 FFYGrant:2006 PHAFY:2006	WorkStatementforYear5 FFYGrant:2007 PHAFY:2007
NE26P003	Annual Statement				
001 –Pletcher		16,000	14,000	60,000	60,000
002 –Golden		92,000	45,000	94,000	162,000
003 –Centennial		55,789	19,000	87,000	187,000
005 –Family/Elderly		73,000	97,392	37,000	15,000
006 –ScatteredSites		50,000	50,000	51,000	41,000
007–5hReplacement		25,000	12,000	6,000	6,000
HAWide		166,000	255,397	154,000	29,000
CFPFundsListedfor 5-yearplanning					
		477,789	492,789	489,000	500,000
ReplacementHousing FactorFunds					



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

Activitiesfor Year1	ActivitiesforYear:_ 2_			ActivitiesforYear:_ 3_		
	Development Name/Number	MajorWork Categories	EstimatedCost	Development Name/Number	MajorWork Categories	EstimatedCost
See	001-Pletcher	Roofing	5,000	001-Pletcher	Carpet/Tile	5,000
Annual		Tile	2,000		Faucets/Plumbing/Tile	4,000
Statement		Faucets/Plumbing/Tile	4,000		Plumbing	5,000
		Plumbing	5,000	<i>Subtotal</i>		<i>15,000</i>
	<i>Subtotal</i>		<i>16,000</i>	002–GoldenTowers	Carpet/Tile	5,000
	002–GoldenTowers	ShowerTile	30,000		Carpet/Tile(ext.)	6,000
		BuildingExteriorMaint.	30,000		Faucet/Plumbing	12,000
		Windows	12,000		Sink/Countertop	12,000
		Sink/Countertop	12,000		Boiler	2,500
		Boiler	2,500		Elevator	2,500
		Elevator	2,500	<i>Subtotal</i>		<i>40,000</i>
		Stove/Refrigerator	3,000	003–CentennialTowers	Carpet/Tile	10,000
	<i>Subtotal</i>		<i>92,000</i>		Faucet/Plumbing	4,000
	003–CentennialTowers	BuildingExteriorMaint.	30,000		Elevator	2,500
		Tile	3,000		Boiler	2,500
		Faucet/Plumbing	4,000	<i>Subtotal</i>		<i>19,000</i>
		Elevator	2,500	005-Family/Elderly	Carpet/Tile	15,000
		Boiler	2,500		Furnace/Air	15,000
		ExteriorBenches	10,000		Carpet/Tile/Flooring	14,000
		Stove/Refrigerator	3,789		CameraEquipment	15,000
	<i>Subtotal</i>		<i>55,789</i>		Stove/Refrigerator	12,000
	005-Family/Elderly	Carpet/Tile	6,000		RoofImprovements	20,000
		Furnace/Air	15,000		Faucet/Plumbing	6,392
		Carpet/TileFlooring	10,000	<i>Subtotal</i>		<i>97,392</i>
		CameraEquipment	15,000	006	Carpet/Tile	10,000
		Stove/Refrigerator	12,000		Furnace/Air	15,000



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

Activities for Year: <u>4</u> FFY Grant: PHAFY:			Activities for Year: <u>5</u> FFY Grant: PHAFY:		
Development Name/Number	Major Work Categories	Estimated Cost	Development Name/Number	Major Work Categories	Estimated Cost
001	Apartment Renovation	20,000	001	Apartment Renovation	20,000
	Roofing	20,000		Roofing	20,000
	Exterior Renovation	15,000		Exterior Renovation	15,000
	Concrete	5,000		Concrete	5,000
<i>Subtotal</i>		<i>60,000</i>	<i>Subtotal</i>		<i>60,000</i>
002	Apartment Renovation	10,000	002	Apartment Renovation	10,000
	Exterior Benches	20,000		Air Conditioning to Building	100,000
	Elevator/Boiler	10,000		Elevator/Boiler	10,000
	Hallway Improvements	30,000		Hallway Improvements	30,000
	Stove/Refrigerators	12,000		Stove/Refrigerators	12,000
	Countertop/Sink	12,000	<i>Subtotal</i>		<i>162,000</i>
<i>Subtotal</i>		<i>94,000</i>	003	Apartment Renovation	10,000
003	Apartment Renovation	10,000		Stove/Refrigerator	12,000
	Patio Area	25,000		Air Conditioning Unit	125,000
	Hallway Improvements	30,000		Hallway Improvements	30,000
	Elevator/Boiler	10,000		Elevator/Boiler	10,000
	Stove/Refrigerator	12,000	<i>Subtotal</i>		<i>187,000</i>
<i>Subtotal</i>		<i>87,000</i>	005	Apartment Renovation	15,000
005	Carpet Replacement	7,000	<i>Subtotal</i>		<i>15,000</i>
	Apartment Renovation	15,000	006	Interior Modernization	10,000
	Camera Equipment	10,000		Furnace/Air	6,000
	Stove/Refrigerator	5,000		Roofing	25,000

<i>Subtotal</i>		<i>37,000</i>	<i>Subtotal</i>		<i>41,000</i>
006	InteriorModernization	10,000	007	InteriorModernization	3,000
	Furnace/Air	6,000		ExteriorModernization	3,000
	Roofing	25,000	<i>Subtotal</i>		<i>6,000</i>
	ExteriorModernization	10,000	HAWide	Audit	4,000
<i>Subtotal</i>		<i>51,000</i>		Fees&Costs	25,000
007	InteriorModernization	3,000	<i>Subtotal</i>		<i>29,000</i>
	ExteriorModernization	3,000			
<i>Subtotal</i>		<i>6,000</i>			
HAWide	20%Fungibleto Operating	100,000			
	Audit	4,000			
	GIPDOfficer	40,000			
	Fees&Costs	10,000			
<i>Subtotal</i>		<i>154,000</i>			
	<b>TotalCFPEstimatedCost</b>	\$489,000			\$500,000

**ATTACHMENT D**  
**CAPITAL FUND PROGRAM TABLES START HERE**

<b>Annual Statement/Performance and Evaluation Report</b>					
<b>Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I: Summary</b>					
PHAName: Hall County Housing Authority		Grant Type and Number Capital Fund Program Grant No: NE26P00350102 Replacement Housing Factor Grant No:			Federal FY of Grant: 2002
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies X Revised Annual Statement (revision no: 1 ) X Performance and Evaluation Report for Period Ending: 12/31/02 <input type="checkbox"/> Final Performance and Evaluation Report					
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total Non -CFP Funds				
2	1406 Operations				
3	1408 Management Improvements	40,000	31,000	31,000	
4	1410 Administration	55,199	55,199	55,199	0
5	1411 Audit	3,000	3,000	3,000	0
6	1415 Liquidated Damages				
7	1430 Fees and Costs	25,000	35,000	0	
8	1440 Site Acquisition				
9	1450 Site Improvement	120,000	55,000	0	
10	1460 Dwelling Structures	233,789	265,718	0	
11	1465.1 Dwelling Equipment — Nonexpendable	75,000	23,789	0	
12	1470 Nondwelling Structures		83,282	0	
13	1475 Nondwelling Equipment				
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1499 Development Activities				

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

PHAName: Hall County Housing Authority	Grant Type and Number Capital Fund Program Grant No: NE26P00350102 Replacement Housing Factor Grant No:	Federal FY of Grant: 2002
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Original Annual Statement     Reserve for Disasters/Emergencies X Revised Annual Statement (revision no: 1 )  
 X Performance and Evaluation Report for Period Ending: 12/31/02     Final Performance and Evaluation Report

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
19	1501 Collateralization or Debt Service				
20	1502 Contingency				
21	Amount of Annual Grant: (sum of lines 2 – 20)	551,988	551,988	59,199	0
22	Amount of line 21 Related to LBP Activities	0	0	0	
23	Amount of line 21 Related to Section 504 compliance	5,000	0	0	
24	Amount of line 21 Related to Security – Soft Costs	40,000	0	0	
25	Amount of Line 21 Related to Security – Hard Costs	20,000	15,000	15,000	
26	Amount of line 21 Related to Energy Conservation Measures	20,000	30,000	0	

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

PHAName: Hall County Housing Authority		Grant Type and Number Capital Fund Program Grant No: NE26P00350102 Replacement Housing Factor Grant No:				Federal FY of Grant: 2002		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
HA Wide	Roofing (Admin./Garage)	1470		0	15,000	0		
	Fees & Costs	1430		25,000	35,000	35,000		
	Parking Lot Maintenance	1450		0	20,000	0		
	Audit	1411		3,000	3,000	3,000	0	
	Management Improvements	1408		40,000	15,000	0		
	Landscaping	1450		10,000	10,000	0		
	Software Upgrade	1408		0	15,000	0		
	Training	1408		0	1,000	0		
	Parking Lot	1450		0	20,000	0		
	Paint Occupied Apartments	1460		0	20,718	20,718		
	Administration (E.D., Contract Administrator, Maintenance Staff)	1410		58,083	55,199	55,199	0	
	Concrete	1450		50,000	0			
	Security	1450		60,000	0			
001	Roofing	1460		0	5,000	0		
	Tile	1460		0	2,000	0		
	Faucets/Plumbing/Toilets	1460		0	4,000	0		
	Plumbing	1450		0	5,000	0		
	Remodel Apartments	1460		8,000	0			

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

PHAName: Hall County Housing Authority		Grant Type and Number Capital Fund Program Grant No: NE26P00350102 Replacement Housing Factor Grant No:				Federal FY of Grant: 2002		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
001	Exterior Repair	1460		10,000	0			
	Replace Gutters	1460		5,000	0			
	Paint Exterior	1460		0	5,000			
002	Shower Tile	1460		0	20,000	0		
	Building Exterior Maintenance	1460		0	25,000	0		
	Faucet/Plumbing	1460		0	12,000	0		
	Sink/Countertops	1460		0	12,000	0		
	Boiler	1460		0	2,500	0		
	Elevator	1460		0	2,500	0		
	Stove/Refrigerator	1465.1		25,000	3,000	0		
	Remodel Apartments	1460		20,000	0			
003	Building Exterior Maintenance	1460		0	25,000	0		
	Tile	1460		0	3,000	0		
	Faucet/Plumbing	1460		0	4,000	0		
	Elevator	1460		0	2,500	0		
	Boiler	1460		0	2,500	0		
	Exterior Benches	1470		0	10,000	0		
	Stove/Refrigerator	1465.1		25,000	3,789	0		
	Remodel Apartments	1460		20,000	0			



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

PHAName: Hall County Housing Authority		Grant Type and Number Capital Fund Program Grant No: NE26P00350102 Replacement Housing Factor Grant No:				Federal FY of Grant: 2002		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
	Fire Sprinkler Alarm	1460		45,000	0			
005	Carpet	1460		0	4,000	0		
	Tile	1460		0	2,000	0		
	Furnace/Air	1460		23,000	21,000	0		
	Carpet/Tile/Flooring	1470		0	10,000	0		
	Camera Equipment	1470		0	15,000	0		
	Stove/Refrigerator	1465.1		0	20,000	0		
	Playground Equipment	1470		0	15,000	0		
	Repair Gutters	1460		10,000	0			
	Remodel Apartments	1460		9,000	0			
	Siding Replacing Stucco	1460		0	50,000			
006	Carpet	1460		0	7,000	0		
	Tile	1460		0	3,000	0		
	Furnace/Air	1460		0	9,000	0		
	Roofing	1460		0	2,000	0		
	Remodel Apartments	1460		14,746	10,000	0		
	Stove/Refrigerator	1465.1		25,000	5,000	0		
	Exterior Repair	1460		15,000	0			
007	Carpet	1460		0	6,000			

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

PHAName: Hall County Housing Authority		<b>Grant Type and Number</b> Capital Fund Program Grant No: NE26P00350102 Replacement Housing Factor Grant No:				<b>Federal FY of Grant: 2002</b>		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
007	Tile	1460		0	4,000			
	Playground Equipment	1470		0	10,282			
	Exterior Repair	1460		15,000	0			
	Remodel Interior	1460		15,000	0			

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

PHAName: Hall County Housing Authority			<b>Grant Type and Number</b> Capital Fund Program No: NE26P00350102 Replacement Housing Factor No:				<b>Federal FY of Grant: 2002</b>
Development Number Name/HA-Wide Activities	All Fund Obligated (Quarter Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates
	Original	Revised	Actual	Original	Revised	Actual	
HA Wide	6/30/04			6/30/06			
001	6/30/04			6/30/06			
002	6/30/04			6/30/06			
003	6/30/04			6/30/06			
005	6/30/04			6/30/06			
006	6/30/04			6/30/06			
007	6/30/04			6/30/06			

**ATTACHMENT E**  
**CAPITAL FUND PROGRAM TABLES START HERE**

<b>Annual Statement/Performance and Evaluation Report</b>					
<b>Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I: Summary</b>					
<b>PHAName:</b> HALL COUNTY HOUSING AUTHORITY		<b>Grant Type and Number</b> Capital Fund Program Grant No: NE26P00350101 Replacement Housing Factor Grant No:			<b>Federal FY of Grant:</b> 2001
<input checked="" type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input checked="" type="checkbox"/> Revised Annual Statement (revision no: 1) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 12/31/02 <input type="checkbox"/> Final Performance and Evaluation Report					
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total Non -CFP Funds				
2	1406 Operations				
3	1408 Management Improvements	40,000	20,000	20,000	
4	1410 Administration	58,083	58,083	58,083	
5	1411 Audit	3,000	3,000	3,000	
6	1415 Liquidated Damages				
7	1430 Fees and Costs	25,000	17,317.20	17,317.20	
8	1440 Site Acquisition				
9	1450 Site Improvement	70,000	11,132	11,132	
10	1460 Dwelling Structures	384,746	441,767.80	441,767.80	48,883.50
11	1465.1 Dwelling Equipment — Nonexpendable				
12	1470 Non Dwelling Structures	0	29,529	29,529	
13	1475 Non Dwelling Equipment				
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1499 Development Activities				

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

<b>PHAName:</b> HALL COUNTY HOUSING AUTHORITY	<b>Grant Type and Number</b> Capital Fund Program Grant No: NE26P00350101 Replacement Housing Factor Grant No:	<b>Federal FY of Grant:</b> 2001
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X Original Annual Statement  Reserve for Disasters/Emergencies X Revised Annual Statement (revision no: 1)  
X Performance and Evaluation Report for Period Ending: 12/31/02  Final Performance and Evaluation Report

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
19	1501 Collateralization or Debt Service				
20	1502 Contingency				
21	Amount of Annual Grant: (sum of lines 2 – 20)	580,829	580,829	580,829	0
22	Amount of line 21 Related to LBP Activities				0
23	Amount of line 21 Related to Section 504 compliance	5,000	44,700	44,700	0
24	Amount of line 21 Related to Security – Soft Costs	0	20,000	20,000	0
25	Amount of Line 21 Related to Security – Hard Costs				
26	Amount of line 21 Related to Energy Conservation Measures	68,761	68,761	68,761	0

1408 – Management Improvements - \$20,000  
\$20,000 – Law Enforcement Contract  
Energy Conservation = furnace improvements

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

PHAName: HallCountyHousingAuthority		GrantTypeandNumber CapitalFundProgramGrantNo: NE26P00350101 ReplacementHousingFactor GrantNo:			FederalFYofGrant: 2001			
Development Number Name/HA-Wide Activities	GeneralDescriptionofMajorWork Categories	Dev.AcctNo.	Quantity	TotalEstimatedCost		TotalActualCost		Statusof Work
				Original	Revised	Funds Obligated	Funds Expended	
001	ApartmentConversion	1460		0	44,700	44,700		
	Replacewindows(CR)	1460		10,000	0			
	TileShowers	1460		10,000	0			
	RemodelLaundryRooms	1460		2,000	0			
002	ReplaceHallDoors /PanicBars	1470		0	29,529	29,529		InProgress
	RemodelBalconies	1460		20,000	0			
	RemodelLaundryRooms	1460		2,000	0			
	Boiler	1460		10,000	0			
	Elevator	1460		50,000	81,973	81,973		InProgress
	PaintStairwells	1460		15,000	0			
	FireAlarmUpgrade	1460		0	103,000	103,000		InProgress
003	RemodelEntry	1460		30,000	0			
	Elevator	1460		20,000	0			
	RemodelLaundryRoom	1460		3,000	0			
	Boiler	1460		10,000	0			
	PaintStairwells	1460		15,000	0			

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

PHAName: HallCountyHousingAuthority		<b>GrantTypeandNumber</b> CapitalFundProgramGrantNo: NE26P00350101 ReplacementHousingFactor GrantNo:				<b>FederalFYofGrant:</b> 2001		
Development Number Name/HA-Wide Activities	GeneralDescriptionofMajorWork Categories	Dev.AcctNo.	Quantity	TotalEstimatedCost		TotalActualCost		Statusof Work
				Original	Revised	Funds Obligated	Funds Expended	
005	ExteriorPatio	1450		5,000	0			
	Roof	1460		25,000	0			
	ReplaceGuttering	1460		0	16,785.80	16,785.80		
	Furnaces	1460		25,000	53,146	53,146		
	RemodelApartments	1460		15,000	0			
	SidingReplacingStucco	1460		0	0			
006	Remodel exterior&interior	1460		37,746	126,548.00	126,548.00		
	Furnaces/AC	1460		15,000	15,615	15,615		
007	RepairShowers	1460		10,000	0			
HAWide	Fees/Costs	1430		25,000	17,317.20	17,317.20	0	InProgress
	Landscaping	1450		20,000	0			
	CarpetandTile	1460		50,000	0			
	Repairgutters	1460		10,000	0			
	Concrete	1450		45,000	11,132	11,132		InProgress
	ManagementImprovements	1408		40,000	20,000	20,000	0	
	Audit	1411		3,000	3,000	3,000	0	
	Administration	1410		58,083	58,083	58,083	0	

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

PHAName: Hall County Housing Authority		<b>Grant Type and Number</b> Capital Fund Program No: NE26P00350101 Replacement Housing Factor No:				<b>Federal FY of Grant:</b> 2001	
Development Number Name/HA-Wide Activities	All Funds Obligated (Quarter Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates
	Original	Revised	Actual	Original	Revised	Actual	
001	6/30/03			6/30/05			
002	6/30/03			6/30/05			
003	6/30/03			6/30/05			
005	6/30/03			6/30/05			
006	6/30/03			6/30/05			
007	6/30/03			6/30/05			
HAWIDE	6/30/03			6/30/05			



**ATTACHMENT F**  
**CAPITAL FUND PROGRAM TABLES START HERE**

<b>Annual Statement/Performance and Evaluation Report</b>					
<b>Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I: Summary</b>					
<b>PHAName:</b> HALL COUNTY HOUSING AUTHORITY		<b>Grant Type and Number</b> Capital Fund Program Grant No: NE26P00350100 Replacement Housing Factor Grant No:			<b>Federal FY of Grant:</b> 2000
<input checked="" type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input checked="" type="checkbox"/> Revised Annual Statement (revision no: 2 ) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 12/31/02 <input type="checkbox"/> Final Performance and Evaluation Report					
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total Non -CFP Funds				
2	1406 Operations				
3	1408 Management Improvements	40,000	20,630.24	20,630.24	12,123.69
4	1410 Administration	61,246	61,246	61,246	41,055.46
5	1411 Audit	3,000	3,000	3,000	3,000
6	1415 Liquidated Damages				
7	1430 Fees and Costs	59,909	40,931.32	40,931.32	40,931.32
8	1440 Site Acquisition				
9	1450 Site Improvement	97,500	148,612.48	148,612.48	3,645
10	1460 Dwelling Structures	300,801	287,962.96	287,962.96	78,725
11	1465.1 Dwelling Equipment — Nonexpendable				
12	1470 Non Dwelling Structures	50,000	50,073	50,073	50,073
13	1475 Non Dwelling Equipment				
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1499 Development Activities				

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

<b>PHAName:</b> HALL COUNTY HOUSING AUTHORITY	<b>Grant Type and Number</b> Capital Fund Program Grant No: NE26P00350100 Replacement Housing Factor Grant No:	<b>Federal FY of Grant:</b> 2000
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Original Annual Statement  Reserve for Disasters/Emergencies  Revised Annual Statement (revision no: 2 )  
 Performance and Evaluation Report for Period Ending: 12/31/02  Final Performance and Evaluation Report

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
19	1501 Collateralization or Debt Service				
20	1502 Contingency				
21	Amount of Annual Grant: (sum of lines 2 – 20)	612,456	612,456	612,456	169,933.00
22	Amount of line 21 Related to LBP Activities	5,000	0	0	
23	Amount of line 21 Related to Section 504 compliance	3,000	0	0	
24	Amount of line 21 Related to Security – Soft Costs				
25	Amount of Line 21 Related to Security – Hard Costs				
26	Amount of line 21 Related to Energy Conservation Measures	6,000	16,222	16,222	

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

PHAName: HallCountyHousingAuthority		GrantTypeandNumber CapitalFundProgramGrantNo: NE26P00350100 ReplacementHousingFactorGrantNo:				FederalFYofGrant: 2000		
Development Number Name/HA-Wide Activities	GeneralDescriptionofMajorWork Categories	Dev.AcctNo.	Quantity	TotalEstimatedCost		TotalActualCost		Statusof Work
				Original	Revised	Funds Obligated	Funds Expended	
HA/WIDE	ManagementImprovements	1408		40,000	20,630.24	20,630.24	12,123.69	InProgress
	Administration	1410		61,246	61,246	61,246	41,055.46	InProgress
	Audit	1411		3,000	3,000	3,000	3,000	Completed
	Fees	1430		59,909	40,931.32	40,931.32	40,931.32	Completed
	Concrete	1450		87,500	148,612.48	148,612.48	3,645	InProgress
001	Carpet	1460		4,000	0			
	RemodelApartments	1460		17,500	341.39	341.39	341.39	
	Remodelnon -dwellingstructure*	1470		50,000	50,073	50,073	50,073	Completed
	ExteriorPlumbing	1460		10,000	0			
	GutterReplacement	1460		0	49,664	49,664	0	InProgress
	ScreenDoorReplacement	1460			26,652.09	26,652.09	13,290.09	InProgress
	EmergencySewerWork	1460		0	11,267.22	11,267.22		
002	RemodelApartments	1460	2	45,000	963.46	963.46	963.46	Completed
	ExteriorScreenDoors	1460		10,000	17,965.94	17,965.94	10,350.94	InProgress
	Elevators	1460		10,000	16,583	16,583	16,583	Completed
	Roof	1460		10,000	10,333	10,333	10,333	Completed
	RemodelLobbies	1460		10,000	0	0		
	TrashCompactor	1460		0	15,879.46	15,879.46		InProgress

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

PHAName: HallCountyHousingAuthority		GrantTypeandNumber CapitalFundProgramGrantNo: NE26P00350100 ReplacementHousingFactorGrantNo:			FederalFYofGrant: 2000			
Development Number Name/HA-Wide Activities	GeneralDescriptionofMajorWork Categories	Dev.AcctNo.	Quantity	TotalEstimatedCost		TotalActualCost		Statusof Work
				Original	Revised	Funds Obligated	Funds Expended	
003	RemodelApartments	1460		50,301	10,124.52	10,124.52	10,124.52	Completed
	BoilerRepair	1460		10,000	24,978.49	24,978.49	0	InProgress
	Elevator	1460		10,000	32,684	32,684	32,684	Completed
	ReplaceFireSprinkler/Alarm	1460		0	5,735	5,735	5,735	Completed
	Roof	1460		13,000	5,568	5,568	5568	InProgress
	RemodelLobbies	1460		10,000	5,479	5,479	5,479	Completed
	TrashCompactor	1460		0	15,251.46	15,251.46		InProgress
	EmergencyGlassRepair	1460		0	3112	3112	3112	Completed
005	Furnaces	1460		23,000	6420	6420	6420	Completed
	RemodelApartments	1460		17,000	10,060.90	10,060.9	9,925.90	InProgress
	RemodelLaundryRooms*	1460		10,000	788	788	788	Completed
006	Exterior	1460		23,000	2823.57	2823.57	2823.57	Completed
	Furnaces	1460		18,000	9802	9802.00	9802.00	Completed
	RemodelApartments	1460		0	5,026.15	5,026.15	4,441.15	InProgress
007	Landscaping	1450		5,000	0			
	Playground	1450		5,000	0			
	RemodelApartments	1460		0	460.31	460.31	460.31	Completed
	*Bothworkitemswereinrevison AnnualStatement(2000)							

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

PHAName: Hall County Housing Authority	<b>Grant Type and Number</b> Capital Fund Program No: NE26P00350100 Replacement Housing Factor No:	<b>Federal FY of Grant:</b> 2000
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Development Number Name/HA-Wide Activities	All Funds Obligated (Quarter Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates
	Original	Revised	Actual	Original	Revised	Actual	
001	9/30/02	6/30/03		9/30/04			
002	9/30/02	6/30/03		9/30/04			
003	9/30/02	6/30/03		9/30/04			
005	9/30/02	6/30/03		9/30/04			
006	9/30/02	6/30/03		9/30/04			
007	9/30/02	6/30/03		9/30/04			
HAWIDE	9/30/02	6/30/03		9/30/04			

**ATTACHMENTG**

**2003HALLCOUNTYHOUSINGAUTHORITY**

**RESIDENTADVISORYBOARD**

1. FranMarasco  
915BaumannDrive#15  
GrandIsland,NE68803
2. MichaelParmley  
910NorthBoggs#702  
Grandisland,NE68803
3. SheilaVernon  
314ShadyBendCircle  
GrandIslan d,NE68801
4. MonicaZimmerman  
139PletcherTerrace  
GrandIsland,NE68803
5. PamBrandt  
1003West5<sup>th</sup>  
GrandIsland,NE68801