PHA Plans

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

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

PHA Plan Agency Identification

PHA Name: Portsmouth (NH) Housing Authority
PHA Number: NH004
PHA Fiscal Year Beginning: (mm/yyyy) 01/2003
Public Access to Information
Information regarding any activities outlined in this plan can be obtained by contacting: (select all that apply) ☑Main administrative office of the PHA ☐PHA development management offices ☐PHA local offices
Display Locations for PHA Plans and Supporting Documents
The PHA Plans (including attachments) are available for public inspection at: (select all that apply) Main administrative office of the PHA PHA development management offices PHA local offices Main administrative office of the local government Main administrative office of the County government Main administrative office of the State government Public library PHA web site Other (list below)
PHA Plan Supporting Documents are available for inspection at: (select all that apply) Main business office of the PHA PHA development management offices Other (list below)

5-YEAR PLAN PHA FISCAL YEARS 2003 - 2007

[24 CFR Part 903.5]

☑PHA Goal: Increase assisted housing choices
HUD Strategic Goal: Improve community quality of life and economic vitality
 ☑PHA Goal: Provide an improved living environment Objectives: If found to meet the criteria for de-concentration, Portsmouth Housing Authority will implement measures to de-concentrate poverty by bringing higher income public housing households into lower income developments:
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: provide improved social services and educational opportunities for residents
HUD Strategic Goal: Ensure Equal Opportunity in Housing for all Americans
 ☑PHA Goal: Ensure equal opportunity and affirmatively further fair housing Objectives: X Undertake affirmative measures to ensure access to assisted housing regardless of race, color, religion national origin, sex, familial status, and disability:

- X 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:
- X Undertake affirmative measures to ensure accessible housing to persons with all varieties of disabilities regardless of unit size required:

Other:

Other PHA Goals and Objectives: (list below)

Annual PHA Plan PHA Fiscal Year 2003

[24 CFR Part 903.7]

1. Annual Plan Type:
Select which type of Annual Plan the PHA will submit.
Standard Plan
Streamlined Plan:
⊠High Performing PHA
Small Agency (<250 Public Housing Units)
Administering Section 8 Only
Troubled Agency Plan

ii. Executive Summary of the Annual PHA Plan

[24 CFR Part 903.7 9 (r)]

- I DI - - T

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

The Portsmouth Housing Authority prepared this Agency Plan in compliance with Section 511 of the Quality Housing and Work Responsibility Act of 1998 and the HUD requirements that put that legislation into effect. Our Annual Plan is based on the premise that if we accomplish our goals and objectives, we will be working toward the achievement of our mission, as stated in our Five-Year Plan..

The plans, statements, budget summary, policies and other information set forth in the Plan all contribute to the accomplishment of our Five-Year Plan goals and objectives. Taken as a whole, they constitute a comprehensive approach to the provision of affordable housing that is consistent with the Consolidated Plan of the City of Portsmouth.

A number of highlights of the Annual Plan are:

We recognize that the supply of housing within the reach of working people and people of limited income is extremely low in Portsmouth and that the affordable housing we provide is a precious commodity. We call upon the entire Seacoast area to join the effort to preserve and develop affordable housing.

We are proud of the high quality of our maintenance efforts and of the administrative services provided by our staff. Our ratings for the physical condition of our buildings and the efficiency of our administrative work again earned the designation of the Portsmouth Housing Authority as a high performer.

We work closely with the Portsmouth Police Department and employ an aggressive screening policy and strict lease enforcement to ensure that residents live in a wholesome environment and that children will grow in a healthy, safe neighborhood.

We have provided for incentives to employment and education.

In summary, we remain within the Portsmouth tradition of providing quality assisted housing.

Timothy J. Connors, Executive Director

iii. Annual Plan Table of Contents

[24 CFR Part 903.7 9 (r)]

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

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Attachments

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

Required Attachments:

- Brief Statement of Progress in Meeting 5 Year Plan Missions and Goals (nh004a01) page 40
- В Admissions Policy for Deconcentration (nh004b01) page 40
- C Voluntary Conversion Required Initial Assessment (nh004c01) page 41
- Pet Policy for elderly and family developments (nh004d01) page 41 D
- Membership of Resident Advisory Board (nh004e01) page43 E
- F Resident Advisory Board Recommendations (nh004f01) page 44
- Resident Membership in the Board of Commissioners (nh004g01) page 44 G
- Η Definition of substantial deviation and Significant Amendment (nh004h01) page 44
- Most recent board approved operating budget (nh004i01) page 45

Optional Attachments:

PHA Management Organizational Chart (nh004j01) page 49

K	FY 2003 Capital Fund Program Performance Reports and Annual Statements
(nh(004k02)-page 50 through 61
L	FY 2003 Capital Fund Program 5 Year Action Plan (nh004l02)-page 62 through 65
	Public Housing Drug Elimination Program (PHDEP) Plan
Oth	er

Supporting Documents Available for Review

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

List of Supporting Documents Available for Review							
Applicable & On Display	Supporting Document	Applicable Plan Component					
Yes	PHA Plan Certifications of Compliance with the PHA Plans and Related Regulations	5 Year and Annual Plans					
Yes	State/Local Government Certification of Consistency with the Consolidated Plan	5 Year and Annual Plans					
Yes	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					
Yes	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					
Yes	Most recent board-approved operating budget for the public housing program	Annual Plan: Financial Resources;					
Yes	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					
Yes	Section 8 Administrative Plan	Annual Plan: Eligibility, Selection, and Admissions Policies					
Yes	Public Housing Deconcentration and Income Mixing Documentation: 1. PHA board certifications of compliance with deconcentration requirements (section 16(a) of the US Housing Act of 1937, as implemented in the 2/18/99 Quality Housing and Work Responsibility Act Initial Guidance; Notice and any further HUD guidance) and 2. Documentation of the required deconcentration and income mixing analysis	Annual Plan: Eligibility, Selection, and Admissions Policies					
Yes	Public housing rent determination policies, including the Methodology for setting public housing flat rents check here if included in the public housing	Annual Plan: Rent Determination					

List of Supporting Documents Available for Review							
Applicable &	Supporting Document	Applicable Plan Component					
On Display							
**	A & O Policy						
Yes	Schedule of flat rents offered at each public housing development check here if included in the public housing	Annual Plan: Rent Determination					
**	A & O Policy						
Yes	Section 8 rent determination (payment standard) policies Check here if included in Section 8 Administrative Plan	Annual Plan: Rent Determination					
Yes	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					
Yes	Public housing grievance procedures check here if included in the public housing A & O Policy	Annual Plan: Grievance Procedures					
Yes	Section 8 informal review and hearing procedures check here if included in Section 8 Administrative Plan	Annual Plan: Grievance Procedures					
Yes	The HUD-approved Capital Fund/Comprehensive 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	N/A					
Yes	Most recent, approved 5 Year Action Plan for the Capital Fund, 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	N/A					
N/A	Approved or submitted applications for demolition and/or disposition of public housing	N/A					
N/A	Approved or submitted applications for designation of public housing (Designated Housing Plans)	N/A					
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	N/A					
N/A	Approved or submitted public housing homeownership programs/plans	N/A					
N/A	Policies governing any Section 8 Homeownership program check here if included in the Section 8 Administrative Plan	N/A					
No	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	N/A					
N/A	Most recent self-sufficiency (ED/SS, TOP or ROSS or other resident services grant) grant program reports	N/A					
N/A	The most recent Public Housing Drug Elimination Program (PHEDEP) semi-annual performance report for any open grant and most recently submitted PHDEP application (PHDEP Plan)	N/A					
Yes	The most recent fiscal year audit of the PHA conducted	Annual Plan: Annual Audit					

List of Supporting Documents Available for Review						
Applicable & On Display	Supporting Document	Applicable Plan Component				
	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					
N/A	Troubled PHAs: MOA/Recovery Plan	N/A				
Yes	Pet Policy	Annual Plan				
N/A	Implementation of Resident Community Service Requirements	N/A				

1. Statement of Housing Needs

[24 CFR Part 903.7 9 (a)]

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

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

Housing Needs of Families in the Jurisdiction							
by Family Type							
Family Type	Overall	Afford- ability	Supply	Quality	Access- ibility	Size	Loca- tion
Income <= 30% of AMI (1990)	832	5	5	5	5	5	5
Income >30% but <=50% of AMI (1990)	896	5	5	5	5	4	5
Income >50% but <80% of AMI(1990)	1526	5	5	5	5	4	5
Elderly (2000)	2308	5	5	5	5	5	5
Families with Disabilities (1990)	278	5	5	5	5	5	5
African American (2000 estimate)	184	5	5	5	5	5	5
Other Ethnic Groups (2000 estimate)	297	5	5	5	5	5	5

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: FY2000-2005 and 2002/3 Action Plan
American Housing Survey data
Indicate year:
Other housing market study
Indicate year:
Other sources: NH Housing Finance Authority, Residential Rental Cost
Surveys, 2001

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.

Housing Needs of Families on the Waiting List						
Waiting list type: (select one) ☐ Section 8 tenant-based assistance-NOTE: MIS best estimates ☐ Public Housing ☐ Combined Section 8 and Public Housing ☐ 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	277		30			
Extremely low income <=30% AMI	193	69.68%				
Very low income (>30% but <=50% AMI)	69	24.91%				
Low income (>50% but <80% AMI)	N/A	0.00%				
Families with children	166	59.93%				
Elderly families	44	15.89%				
Families with Disabilities	58	20.94%				
White	234	84.48%				
African American	26	9.39%				
Latino	19	6.86%				
Asian or Pacific	5	1.81%				
Native American	4	1.45%				
Characteristics by						

H	ousing Needs of Fan	nilies on the Waiting L	ist
Bedroom Size			
(Public Housing			
Only)			
1BR			
2 BR			
3 BR			
4 BR			
5 BR			
5+ BR			
_	sed (select one)? 🛛 1	No Yes	
If yes:			
_	it been closed (# of m	,	. □ . · □ . ·
		list in the PHA Plan yea	
	· <u>-</u> ·	ories of families onto the	e waiting list, even if
generally close	ed? No Yes		
Н	ousing Needs of Fan	nilies on the Waiting L	ist
Waiting list type: (sel	,		
Section 8 tenant-based assistance			
	Public Housing-NOTE: MIS best estimates		
	ion 8 and Public Hous	_	
Public Housing Site-Based or sub-jurisdictional waiting list (optional)			
If used, identif	If used, identify which development/subjurisdiction:		
	# of families	% of total families	Annual Turnover
Waiting list total	311		60
Extremely low	187	60.13%	
income <=30%			
AMI			
Very low income	69	22.19%	
(>30% but <=50%			
AMI)			
Low income	33	10.61%	
(>50% but <80%			
AMI)			
Families with 148 47.59%			
children			
Elderly families 104 33.44%			
Families with	68	21.87%	
Disabilities			
White	261	83.93%	
African American	28	9.01%	
Latino	15	4.83%	

	Н	ousing Needs of Fami	ilies on the Waiting	List	
Asian c	or Pacific	5	1.61%		
	American	3	.97%		
1 (441)	- Innormali		.5770		
Charact	teristics by				
Bedroo	•				
	Housing				
Only)	<i>S S</i>				
1BR		159	51.13%		
2 BR		108	34.73%		
3 BR		42	13.51%		
4 BR		2	.65%		
5 BR					
5+ BR					
Is the v	waiting list clos	sed (select one)? N	o Yes		
If yes:	C	, <u> </u>	_		
	How long has	it been closed (# of mo	onths)?		
	Does the PHA	expect to reopen the li	st in the PHA Plan ye	ar? No Yes	
	Does the PHA	permit specific catego	ries of families onto t	he waiting list, even if	
	generally close	ed? No 🗌 Yes			
Provide a IN THE (1) Str Need: Strateg	UPCOMING YI rategies Shortage of at	of the PHA's strategy for a EAR, and the Agency's reast fordable housing for	sons for choosing this stra		
by:					
Select al.	I that apply				
	Employ effection	ive maintenance and m	anagement policies to	minimize the number o	f public housing unit
X	Reduce turnov	er time for vacated pub	olic housing units		
X	Reduce time to	renovate public housi	ng units		
	Seek replacem	ent of public housing u	inits lost to the invent	ory through mixed finan	ce development
	Seek replacem	ent of public housing u	inits lost to the invent	ory through section 8 rep	placement housing
	resources				
		crease section 8 lease-ulies to rent throughout	-	g payment standards tha	t will increase the
	•		•	among families assisted	l by the PHA,
	regardless of u	nit size required			
		crease section 8 lease-us of minority and pove		the program to owners, J	particularly those
\boxtimes	Maintain or in			screening Section 8 app	licants to increase

	Participate in the Consolidated Plan development process to ensure coordination with broader community strategies
X	Other: Note: The Portsmouth Housing Authority is working with HUD and the owners of the Ledgewood Apartments to preserve that development as a source of affordable housing. The PHA is seeking to develop an additional 20 units of elderly housing using a variety of resources.
	gy 2: Increase the number of affordable housing units by:
	oly 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, when economically feasible. er: (list below)
Need:	Specific Family Types: Families at or below 30% of median
	gy 1: Target available assistance to families at or below 30 % of AMI
Select a	п шат арргу
X X	Exceed HUD federal targeting requirements for families at or below 30% of AMI in public housing Exceed HUD federal targeting requirements for families at or below 30% of AMI in tenant-based section 8 assistance
\square \boxtimes \square Oth	Employ admissions preferences aimed at families with economic hardships Adopt rent policies to support and encourage work er: (list below)
Need:	Specific Family Types: Families at or below 50% of median
Strate	gy 1: Target available assistance to families at or below 50% of AMI
Select a	Il that apply
Add	ploy admissions preferences aimed at families who are working opt rent policies to support and encourage work er: (list below)
Need:	Specific Family Types: The Elderly
	gy 1: Target available assistance to the elderly:
\square Oth	Seek designation of public housing for the elderly Apply for special-purpose vouchers targeted to the elderly, should they become available er: (list below)
Need:	Specific Family Types: Families with Disabilities
Strate	gy 1: Target available assistance to Families with Disabilities:

Select all	that apply
X	Seek designation of public housing for families with disabilities Carry out the modifications needed in public housing based on the section 504 Needs Assessment for Public Housing Apply for special-purpose vouchers targeted to families with disabilities, should they become available Affirmatively market to local non-profit agencies that assist families with disabilities Other: (list below)
Need:	Specific Family Types: Races or ethnicities with disproportionate housing needs
	y 1: Increase awareness of PHA resources among families of races and ethnicities with disproportionate needs:
Select if a	applicable
	Affirmatively market to races/ethnicities shown to have disproportionate housing needs er: (list below)
	y 2: Conduct activities to affirmatively further fair housing
Select all	that apply
<u>X</u>	Counsel section 8 tenants as to location of units outside of areas of poverty or minority concentration and assist them to locate those units Market the section 8 program to owners outside of areas of poverty /minority concentrations er: (list below)
	Housing Needs & Strategies: (list needs and strategies below)
	factors listed below, select all that influenced the PHA's selection of the strategies it will pursue:
Staff SLimi X X X XComn XResul XResul	ling constraints fing constraints fited availability of sites for assisted housing Extent to which particular housing needs are met by other organizations in the community Evidence of housing needs as demonstrated in the Consolidated Plan and other information available to the PHA Influence of the housing market on PHA programs nunity priorities regarding housing assistance ts of consultation with local or state government Results of consultation with residents and the Resident Advisory Board ts of consultation with advocacy groups er: (list below)

2. Statement of Financial Resources [24 CFR Part 903.7 9 (b)]

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

Financial Resources:			
Planned S	Sources and Uses		
Sources	Planned \$	Planned Uses	
1. Federal Grants (FY 2003 grants)			
a) Public Housing Operating Fund	\$691,939		
b) Public Housing Capital Fund	\$656,366		
c) HOPE VI Revitalization			
d) HOPE VI Demolition			
e) Annual Contributions for Section 8 Tenant-Based Assistance	\$2,335,052		
f) Public Housing Drug Elimination			
Program (including any Technical Assistance funds)			
g) Resident Opportunity and Self- Sufficiency Grants			
h) Community Development Block Grant			
i) HOME			
Other Federal Grants (list below)			
2. Prior Year Federal Grants (unobligated funds only) (list below)			
3. Public Housing Dwelling Rental Income			
	\$1,268,700	Public Housing	
		Operations	
4. Other income (list below)			
Investment Income	\$16,500	Public Housing	
Excess utilities	\$20,000	Operations	
Laundry Commissions	\$12,000		
4. Non-federal sources (list below)			
Total resources	\$5,000,557		

Financial Resources:			
Planned	Sources and Uses	T	
Sources	Planned \$	Planned Uses	
			_
3. PHA Policies Governing Elig	gibility, Selection, and	d Admissions	
[24 CFR Part 903.7 9 (c)]			
A. Public Housing			
Exemptions: PHAs that do not administer public	lic housing are not required to o	complete subcomponent 3A.	
(1) Eligibility			
a. When does the PHA verify eligibility X When families are within a certain time. When families are within a certain time. Other:	ain number of being offer	ed a unit: predicated on pr	ojected vacancies
 b. Which non-income (screening) facto housing (select all that apply)? Criminal or Drug-related activity Rental history Housekeeping XOther: landlord references 	rs does the PHA use to es	tablish eligibility for admi	ssion to public
c. Yes No: Does the PHA requ	est criminal records from	local law enforcement ag	encies for screening
purposes? d. ☑ Yes ☐ No: Does the PHA requestion purposes?	uest criminal records from	State law enforcement ag	encies for screening
e. Yes No: Does the PHA acc directly or throu		from the FBI for screening ource) Note, the NCIC pro	
(2)Waiting List Organization			
a. Which methods does the PHA plan to XCommunity-wide list Sub-jurisdictional lists Site-based waiting lists Other (describe):	o use to organize its public	c housing waiting list (sele	ect all that apply)

b. Where may interested persons apply for admission to public housing?
PHA main administrative office
PHA development site management office
Other (list below)

c. If the PHA plans to operate one or more site-based waiting lists in the coming year, answer each of the following questions; if not, skip to subsection (3) Assignment	
1. How many site-based waiting lists will the PHA operate in the coming year?	
2. Yes No: Are any or all of the PHA's site-based waiting lists new for the upcoming year (that is, they are not part of a previously-HUD-approved site based waiting list plan)? If yes, how many lists?	
3. Yes No: May families be on more than one list simultaneously If yes, how many lists? All as qualified.	
 4. Where can interested persons obtain more information about and sign up to be on the site-based waiting lists (select all that apply)? PHA main administrative office All PHA development management offices Management offices at developments with site-based waiting lists At the development to which they would like to apply Other (list below):)
(3) Assignment	
 a. How many vacant unit choices are applicants ordinarily given before they fall to the bottom of or are removed from the waiting list? (select one) One Two, without cause Three or More 	
b. ✓ Yes No: Is this policy consistent across all waiting list types?	
c. If answer to b is no, list variations for any other than the primary public housing waiting list/s for the PHA	:
(4) Admissions Preferences	
a. Income targeting:X Yes No: Does the PHA plan to exceed the federal targeting requirements by targeting more than 40% of a new admissions to public housing to families at or below 30% of median area income?	all
b. Transfer policies:	
In what circumstances will transfers take precedence over new admissions? (list below) Emergencies	
Overhoused	
Underhoused Medical justification	
Administrative reasons determined by the PHA (e.g., to permit modernization work)	
Medical justification Administrative reasons determined by the PHA (e.g., to permit modernization work) Resident choice: (state circumstances below) Other: (list below)	
Other: (list below)	

	Preferences 1. Yes No: Has the PHA established preferences for admission to public housing (other than date and time of application)? (If "no" is selected, skip to subsection (5) Occupancy)
2.	Which of the following admission preferences does the PHA plan to employ in the coming year? (select all that apply from either former Federal preferences or other preferences)
	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)
Oth	Working families and those unable to work because of age or disability Veterans and veterans' families Residents who live and/or work in the jurisdiction Those enrolled currently in educational, training, or upward mobility programs Households that contribute to meeting income goals (broad range of incomes) Households that contribute to meeting income requirements (targeting) Those previously enrolled in educational, training, or upward mobility programs Victims of reprisals or hate crimes Other preference(s) (list below): Applicant who is an elderly parent of a resident of Portsmouth. Applicant who is a child of an elderly resident of Portsmouth.
you one	If the PHA will employ admissions preferences, please prioritize by placing a "1" in the space that represents ar first priority, a "2" in the box representing your second priority, and so on. If you give equal weight to e or more of these choices (either through an absolute hierarchy or through a point system), place the same mber next to each. That means you can use "1" more than once, "2" more than once, etc.
1 I	Date and Time
Foi	Involuntary Displacement (Disaster, Government Action, Action of Housing Owner, Inaccessibility, Property Disposition) Victims of domestic violence Substandard housing Homelessness High rent burden
Oth	working families and those unable to work because of age or disability Veterans and veterans' families Residents who live and/or work in the jurisdiction Those enrolled currently in educational, training, or upward mobility programs Households that contribute to meeting income goals (broad range of incomes)

 1	Households that contribute to meeting income requirements, if necessary (targeting) to meet federal requirements. Those previously enrolled in educational, training, or upward mobility programs Victims of reprisals or hate crimes Other preference(s) (list below): Applicant who is an elderly parent of a resident of Portsmouth. Applicant who is a child of an elderly resident of Portsmouth.
4. Rel X	ationship of preferences to income targeting requirements: The PHA will apply preferences within income tiers, if necessary to meet deconcentration requirements Not applicable:
(5) Oc	<u>cupancy</u>
of p ⊠The ⊠The <u>⊠</u> PH	at reference materials can applicants and residents use to obtain information about the rules of occupancy tublic housing (select all that apply) PHA resident lease PHA's Admissions and (Continued) Occupancy policy A briefing seminars or written materials er source: Postings of rules in developments and buildings
b. How \times At a	often must residents notify the PHA of changes in family composition? (select all that apply) an annual reexamination and lease renewal Any time family composition changes At family request for revision Other (list):
(6) De	concentration and Income Mixing
a. 🗌	Yes No: Did the PHA's analysis of its family (general occupancy) developments to determine concentrations of poverty indicate the need for measures to promote deconcentration of poverty or income mixing?
b. 🗌	Yes No: Did the PHA adopt any changes to its admissions policies based on the results of the required analysis of the need to promote deconcentration of poverty or to assure income mixing?
c. If the	e answer to b was yes, what changes were adopted? (select all that apply) Adoption of site based waiting lists If selected, list targeted developments below:
	Employing waiting list "skipping" to achieve deconcentration of poverty or income mixing goals at targeted developments If selected, list targeted developments below:
	Employing new admission preferences at targeted developments

If selected, list targeted developments below:
Other (list policies and developments targeted below)
d. Yes No: Did the PHA adopt any changes to other policies based on the results of the required analysis of the need for deconcentration of poverty and income mixing?
e. If the answer to d was yes, how would you describe these changes? (select all that apply)
Additional affirmative marketing Actions to improve the marketability of certain developments Adoption or adjustment of ceiling rents for certain developments Adoption of rent incentives to encourage deconcentration of poverty and income-mixing Other (list below)
f. Based on the results of the required analysis, in which developments will the PHA make special efforts to attract or retain higher-income families? (select all that apply) Not applicable: results of analysis did not indicate a need for such efforts List (any applicable) developments below:
g. Based on the results of the required analysis, in which developments will the PHA make special efforts to assure access for lower-income families? (select all that apply) Not applicable: results of analysis did not indicate a need for such efforts List (any applicable) developments below:
B. Section 8
Exemptions: PHAs that do not administer section 8 are not required to complete sub-component 3B. Unless otherwise specified, all questions in this section apply only to the tenant-based section 8 assistance program (vouchers and until completely merged into the voucher program, certificates).
(1) Eligibility
 a. What is the extent of screening conducted by the PHA? (select all that apply) Criminal or drug-related activity only to the extent required by law or regulation Criminal and drug-related activity, more extensively than required by law or regulation More general screening than criminal and drug-related activity (list factors below) Other (list below)
b. Yes No: Does the PHA request criminal records from local law enforcement agencies for screening purposes?
c. 🛛 Yes 🗌 No: Does the PHA request criminal records from State law enforcement agencies for screening purposes?
d. Yes No: Does the PHA access FBI criminal records from the FBI for screening purposes? (either directly or through an NCIC-authorized source) Note, the NCIC process is so cumbersome that it is impractical to use.

 e. Indicate what kinds of information you share with prospective landlords? (select all that apply) Criminal or drug-related activity Other (describe below) As requested by a landlord and authorized by the voucher holder.
(2) Waiting List Organization
 a. With which of the following program waiting lists is the section 8 tenant-based assistance waiting list merged? (select all that apply) None Federal public housing Federal moderate rehabilitation Federal project-based certificate program Other federal or local program (list below)
 b. Where may interested persons apply for admission to section 8 tenant-based assistance? (select all that apply) PHA main administrative office Other:
(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: PHA allows two 30 day extensions upon request.
(4) Admissions Preferences
a. Income targeting X Yes No: Does the PHA plan to exceed the federal targeting requirements by targeting more than 75% of all new admissions to the section 8 program to families at or below 30% of median area income?
b. Preferences 1. Yes No: Has the PHA established preferences for admission to section 8 tenant-based assistance? (other than date and time of application) (if no, skip to subcomponent (5) Special purpose section 8 assistance programs)
2. Which of the following admission preferences does the PHA plan to employ in the coming year? (select all that apply from either former Federal preferences or other preferences)
Former Federal preferences Involuntary Displacement (Disaster, Government Action, Action of Housing Owner, Inaccessibility, Property Disposition) Victims of domestic violence Substandard housing

Homelessness High rent burden (rent is > 50 percent of income)
Other preferences (select all that apply) Working families and those unable to work because of age or disability Veterans and veterans' families X 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, if necessary (targeting) to meet federal requirements. Those previously enrolled in educational, training, or upward mobility programs Victims of reprisals or hate crimes X Other preference(s) (list below): Applicant who is an elderly parent of a resident of Portsmouth. Applicant who is a child of an elderly resident of Portsmouth.
3. If the PHA will employ admissions preferences, please prioritize by placing a "1" in the space that represents your first priority, a "2" in the box representing your second priority, and so on. If you give equal weight to one or more of these choices (either through an absolute hierarchy or through a point system), place the same number next to each. That means you can use "1" more than once, "2" more than once, etc.
1 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, if necessary (targeting) Those previously enrolled in educational, training, or upward mobility programs Victims of reprisals or hate crimes Other preference(s) (list below): Applicant who is an elderly parent of a resident of Portsmouth. Applicant who is a child of an elderly resident of Portsmouth.
 4. Among applicants on the waiting list with equal preference status, how are applicants selected? (select one) Date and time of application Drawing (lottery) or other random choice technique

5. If th	he 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. Rel X	lationship of preferences to income targeting requirements: (select one) The PHA applies preferences within income tiers Not applicable:
(5) S	pecial Purpose Section 8 Assistance Programs
	which documents or other reference materials are the policies governing eligibility, selection, and missions to any special-purpose section 8 program administered by the PHA contained? (select all that ly) The Section 8 Administrative Plan Briefing sessions and written materials Other (list below) Not applicable
b. Ho X	ow does the PHA announce the availability of any special-purpose section 8 programs to the public? Through published notices Other (list below) Does not apply
	HA Rent Determination Policies R Part 903.7 9 (d)]
	ublic Housing ions: PHAs that do not administer public housing are not required to complete sub-component 4A.
_	come Based Rent Policies
Describ	the the PHA's income based rent setting policy/ies for public housing using, including discretionary (that is, not required by or regulation) income disregards and exclusions, in the appropriate spaces below.
a. Use	e of discretionary policies: (select one) The PHA will not employ any discretionary rent-setting policies for income based rent in public housing. Income-based rents are set at the higher of 30% of adjusted monthly income, 10% of unadjusted monthly income, the welfare rent, or minimum rent (less HUD mandatory deductions and exclusions). (If selected, skip to sub-component (2))
or	-
\boxtimes	The PHA employs discretionary policies for determining income based rent (If selected, continue to question b.)
	nimum Rent at amount best reflects the PHA's minimum rent? (select one) \$25

\$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: Exemption allowed when: 1. A family has lost its eligibility for or is waiting for an eligibility determination for Federal, State or local assistance. 2. A family would be evicted as a result of the imposition of the minimum rent requirement. 3. A family's income decreases due to changed circumstances, including loss of employment. 4. A family's expenses increase due to changed circumstances, including medical costs, childcare, transportation education or similar items. 5. A death has occurred in the family.
c. Rents set at less than 30% than adjusted income 1. X Yes No: Does the PHA plan to charge rents at a fixed amount or percentage less than 30% of adjusted income?
2. If yes to above, list the amounts or percentages charged and the circumstances under which these will be used below:
Which of the discretionary (optional) deductions and/or exclusions policies does the PHA plan to employ (select all that apply)d 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: 1. Excess employment and education commuting expense-Upon expending a \$500 deductible amount, a family may exclude up to \$1,000 of income for such commuting expenses. 2. Up to \$1,000 may be excluded from income for one family member employed full time for 12 consecutive months. 3. Up to \$ 2,500 may be excluded from income for a family member enrolled in a full course of study.
Fixed percentage (other than general rent-setting policy) If yes, state percentage/s and circumstances below:
For household heads For other family members For transportation expenses For the non-reimbursed medical expenses of non-disabled or non-elderly families Other (describe below): e. Ceiling rents 1. Do you have ceiling rents? (rents set at a level lower than 30% of adjusted income) (select one) Yes for all developments Yes but only for some developments No

2. For which kinds of developments are ceiling rents in place? Does not 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) Does not apply.
Market comparability study Fair market rents (FMR) 95 th percentile rents 75 percent of operating costs 100 percent of operating costs for general occupancy (family) developments Operating costs plus debt service The "rental value" of the unit Other (list below)
f. Rent re-determinations:
 Between income reexaminations, how often must tenants report changes in income or family composition to the PHA such that the changes result in an adjustment to rent? (select all that apply) Never At family option Any time the family experiences an income increase Any time a family experiences an income increase above a threshold amount or percentage: (if selected, specify threshold) Other: Families are required to report changes in family composition prior to their occurrence. Changes in income which would result in a decrease in rent can be reported at any time. Changes in income which would result in an increase in rent must be reported at yearly recertification.
g. Yes No: Does the PHA plan to implement individual savings accounts for residents (ISAs) as an alternative to the required 12 month disallowance of earned income and phasing in of rent increases in the next year?
(2) Flat Rents
 In setting the market-based flat rents, what sources of information did the PHA use to establish comparability? (select all that apply.) The section 8 rent reasonableness study of comparable housing Survey of rents listed in local newspaper Survey of similar unassisted units in the neighborhood Other: Survey of similar unassisted units in the City and consideration of HUD FMR's.

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 below100% 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:
 d. How often are payment standards reevaluated for adequacy? (select one) Annually Other (list below): An analysis of voucher holder success rates are reviewed monthly throughout the year.
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. X Yes No: Has the PHA adopted any discretionary minimum rent hardship exemption policies? (if yes, list below) Exemption allowed when:

- 1. A family has lost its eligibility for or is waiting for an eligibility determination for Federal, State or local assistance.
- 2. A family would be evicted as a result of the imposition of the minimum rent requirement.
- 3. A family's income decreases due to changed circumstances, including loss of employment.
- 4. A family's expenses increase due to changed circumstances, including medical costs, childcare, transportation education or similar items.
- 5. A death has occurred in the family.

5. Operations and Management

[24 CFR Part 903.7 9 (e)]

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

A. PHA Management Structure

Describe the PHA's management structure and organization.

(select one)

X An organization chart showing the PHA's management structure and organization is attached see (nh004j01).

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.) As of August 31, 2001.

Program Name	Units or Families Served at Year	Expected Turnover
	Beginning	
Public Housing	421	60
Section 8 Vouchers	286	30
Section 8 Certificates		
Section 8 Mod Rehab		
Special Purpose Section		
8 Certificates/Vouchers		
(list individually)		
Public Housing Drug		
Elimination Program		
(PHDEP)		
Other Federal		
Programs(list		
individually)		

C. Management and Maintenance Policies

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

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

Admissions and Continued Occupancy Policy

Affirmative Action Plan

Annual Audit

Capitalization Policy

Civil Rights Certification

Disposition Policy

Drug-Free Workplace Policy

Fair Housing Policy

Investment Policy

Lease

Maintenance Plan

Personnel Policy

Pest Control Policy

Pet Policy

Posted Rules

Procurement Policy

Public Housing Grievance Procedure

Rent Collection Policy

Statement of Approach to Asset Management

Five-Year Plan

Annual Plan

(2) Section 8 Management:

Affirmative Action Plan

Annual Audit

Civil Rights Certification

Disposition Policy

Drug-Free Workplace Policy

Fair Housing Policy

Investment Policy

Personnel Policy

Procurement Policy

Section Eight Administrative Plan

Section Eight Informal Review Procedure

6. PHA Grievance Procedures [24 CFR Part 903.7 9 (f)]

Exemptions from component 6: High performing PHAs are not required to complete component 6. Section 8-Only PHAs are exempt from sub-component 6A.
A. Public Housing
1. Yes No: Has the PHA established any written grievance procedures in addition to federal
requirements found at 24 CFR Part 966, Subpart B, for residents of public housing?
If yes, list additions to federal requirements below:
if yes, list additions to redefin requirements below.
2. Which PHA office should residents or applicants to public housing contact to initiate the PHA grievance
process? (select all that apply)
PHA main administrative office
PHA development management offices
Other (list below)
B. Section 8 Tenant-Based Assistance
1. Yes No: Has the PHA established informal review procedures for applicants to the Section 8 tenant-
based assistance program and informal hearing procedures for families assisted by the
Section 8 tenant-based assistance program in addition to federal requirements found at 24
CFR 982?
If yes, list additions to federal requirements below:
2. Which PHA office should applicants or assisted families contact to initiate the informal review and informal
* *
hearing processes? (select all that apply)
Other (list below)
7. Capital Improvement Needs
[24 CFR Part 903.7 9 (g)]
Exemptions from Component 7: Section 8 only PHAs are not required to complete this component and may skip to Component 8.
A. Capital Fund Activities
Exemptions from sub-component 7A: PHAs that will not participate in the Capital Fund Program may skip to component 7B. All
other PHAs must complete 7A as instructed.
(1) Capital Fund Program Annual Statement
Using parts I, II, and III of the Annual Statement for the Capital Fund Program (CFP), identify capital activities the PHA is proposing
for the upcoming year to ensure long-term physical and social viability of its public housing developments. This statement can be
completed by using the CFP Annual Statement tables provided in the table library at the end of the PHA Plan template OR , at the
PHA's option, by completing and attaching a properly updated HUD-52837.
1 , J F O
Colort and
Select one:
X The Capital Fund Program Annual Statement is provided as an attachment to the PHA Plan at
Attachment nh004k01 pages 47 through 55
-Or-
TY 2002 4 1 D1

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

(2) O	ptional	5-Year	Action	Plan
-------	---------	--------	--------	------

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

a. X Yes No: Is the PHA providing an optional 5-Year Action Plan for the Capital Fund? (if no, skip to sub-component 7B) b. If yes to question a, select one: X The Capital Fund Program 5-Year Action Plan is provided as an attachment to the PHA Plan at Attachment nh004l01 pages 56 through 60 or- The Capital Fund Program 5-Year Action Plan is provided below: (if selected, copy the CFP optional 5 Year Action Plan from the Table Library and insert here) B. HOPE VI and Public Housing Development and Replacement Activities (Non-Capital Fund) Applicability of sub-component 7B: All PHAs administering public housing. Identify any approved HOPE VI and/or public housing development or replacement activities not described in the Capital Fund Program Annual Statement. Yes No: a) Has the PHA received a HOPE VI revitalization grant? (if no, skip to question c; if yes, provide responses to question b for each grant, copying and completing as many times as necessary) b) Status of HOPE VI revitalization grant (complete one set of questions for each grant) 1. Development name: 2. Development (project) number: 3. Status of grant: (select the statement that best describes the current status) Revitalization Plan submitted, pending approval Revitalization Plan approved Activities pursuant to an approved Revitalization grant in the Plan year? If yes, list development name/s below: Yes No: d) Will the PHA be engaging in any mixed-finance development activities for public housing in the Plan year? If yes, list developments or activities below:		
The Capital Fund Program 5-Year Action Plan is provided as an attachment to the PHA Plan at Attachment nh004l01 pages 56 through 60 or- The Capital Fund Program 5-Year Action Plan is provided below: (if selected, copy the CFP optional 5 Year Action Plan from the Table Library and insert here) B. HOPE VI and Public Housing Development and Replacement Activities (Non-Capital Fund) Applicability of sub-component 7B: All PHAs administering public housing. Identify any approved HOPE VI and/or public housing development or replacement activities not described in the Capital Fund Program Annual Statement. Yes No: a) Has the PHA received a HOPE VI revitalization grant? (if no, skip to question c; if yes, provide responses to question b for each grant, copying and completing as many times as necessary) b) Status of HOPE VI revitalization grant (complete one set of questions for each grant) 1. Development name: 2. Development (project) number: 3. Status of grant: (select the statement that best describes the current status) Revitalization Plan under development Revitalization Plan submitted, pending approval Revitalization Plan approved Activities pursuant to an approved Revitalization grant in the Plan year? If yes, list development name/s below: Yes No: d) Will the PHA be engaging in any mixed-finance development activities for public housing in the Plan year?	a. X Yes	
B. HOPE VI and Public Housing Development and Replacement Activities (Non-Capital Fund) Applicability of sub-component 7B: All PHAs administering public housing. Identify any approved HOPE VI and/or public housing development or replacement activities not described in the Capital Fund Program Annual Statement. Yes ☒ No: a) Has the PHA received a HOPE VI revitalization grant? (if no, skip to question c; if yes, provide responses to question b for each grant, copying and completing as many times as necessary) b) Status of HOPE VI revitalization grant (complete one set of questions for each grant) 1. Development name: 2. Development (project) number: 3. Status of grant: (select the statement that best describes the current status) ☐ Revitalization Plan under development ☐ Revitalization Plan submitted, pending approval ☐ Revitalization Plan approved ☐ Activities pursuant to an approved Revitalization Plan underway Yes ☒ No: c) Does the PHA plan to apply for a HOPE VI Revitalization grant in the Plan year? If yes, list development name/s below: Yes ☒ No: d) Will the PHA be engaging in any mixed-finance development activities for public housing in the Plan year?	X T	he Capital Fund Program 5-Year Action Plan is provided as an attachment to the PHA Plan at
Fund) Applicability of sub-component 7B: All PHAs administering public housing. Identify any approved HOPE VI and/or public housing development or replacement activities not described in the Capital Fund Program Annual Statement. □ Yes □ No: a) Has the PHA received a HOPE VI revitalization grant? (if no, skip to question c; if yes, provide responses to question b for each grant, copying and completing as many times as necessary) b) Status of HOPE VI revitalization grant (complete one set of questions for each grant) 1. Development name: 2. Development (project) number: 3. Status of grant: (select the statement that best describes the current status) □ Revitalization Plan under development □ Revitalization Plan submitted, pending approval □ Revitalization Plan approved □ Activities pursuant to an approved Revitalization Plan underway □ Yes □ No: c) Does the PHA plan to apply for a HOPE VI Revitalization grant in the Plan year? If yes, list development name/s below: □ Yes □ No: d) Will the PHA be engaging in any mixed-finance development activities for public housing in the Plan year?		
 Yes ⋈ No: a) Has the PHA received a HOPE VI revitalization grant? (if no, skip to question c; if yes, provide responses to question b for each grant, copying and completing as many times as necessary) b) Status of HOPE VI revitalization grant (complete one set of questions for each grant) 1. Development name: 2. Development (project) number: 3. Status of grant: (select the statement that best describes the current status) □ Revitalization Plan under development □ Revitalization Plan submitted, pending approval □ Revitalization Plan approved □ Activities pursuant to an approved Revitalization Plan underway □ Yes ⋈ No: c) Does the PHA plan to apply for a HOPE VI Revitalization grant in the Plan year? □ Yes ⋈ No: d) Will the PHA be engaging in any mixed-finance development activities for public housing in the Plan year? 		PE VI and Public Housing Development and Replacement Activities (Non-Capital
provide responses to question b for each grant, copying and completing as many times as necessary) b) Status of HOPE VI revitalization grant (complete one set of questions for each grant) 1. Development name: 2. Development (project) number: 3. Status of grant: (select the statement that best describes the current status) Revitalization Plan under development Revitalization Plan submitted, pending approval Revitalization Plan approved Activities pursuant to an approved Revitalization Plan underway Yes No: c) Does the PHA plan to apply for a HOPE VI Revitalization grant in the Plan year? If yes, list development name/s below: Yes No: d) Will the PHA be engaging in any mixed-finance development activities for public housing in the Plan year?		
If yes, list development name/s below: ☐ Yes ☒ No: d) Will the PHA be engaging in any mixed-finance development activities for public housing in the Plan year?	☐ Yes	provide responses to question b for each grant, copying and completing as many times as necessary) b) Status of HOPE VI revitalization grant (complete one set of questions for each grant) 1. Development name: 2. Development (project) number: 3. Status of grant: (select the statement that best describes the current status) Revitalization Plan under development Revitalization Plan submitted, pending approval Revitalization Plan approved
housing in the Plan year?	☐ Yes	
	☐ Yes	housing in the Plan year?

Yes No: e) Will the PHA be conducting any other public housing development or replacement activities not discussed in the Capital Fund Program Annual Statement? If yes, list developments or activities below:			
8. Demolition an			
[24 CFR Part 903.7 9 (h)] Applicability of compone	nt 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	on		
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.) Does not apply.		
	Demolition/Disposition Activity Description		
1a. Development nan			
1b. Development (pro			
2. Activity type: Den			
Dispos			
3. Application status	(select one)		
Approved	nding approval		
Planned appli			
	oproved, submitted, or planned for submission: (DD/MM/YY)		
5. Number of units af			
6. Coverage of action	n (select one)		
Part of the develo	ppment		
Total developmen			
7. Timeline for activity:			
a. Actual or projected start date of activity:			
b. Projected end date of activity:			
	Fublic Housing for Occupancy by Elderly Families or Families with Elderly Families and Families with Disabilities		
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 the optional Public Housing Asset Management Table? If "yes", skip If "No", complete the Activity Description table below. Does not app	p to component 10.	
Dog	innetion of Bublic Housing Astinity Description	1	
	ignation of Public Housing Activity Description	1	
1a. Development nam1b. Development (pro		l	
2. Designation type:	gect) number.	l	
0 1	only the elderly		
1 2 2	families with disabilities		
	only elderly families and families with disabilities	l	
3. Application status		l	
	luded in the PHA's Designation Plan	l	
	nding approval		
Planned applie	C 11 —		
11	on approved, submitted, or planned for submission: (DD/MM/YY)		
	nis designation constitute a (select one)		
New Designation	` ,		
I =	viously-approved Designation Plan?	l	
6. Number of units a	, 11		
7. Coverage of action	n (select one)		
Part of the develo			
Total developmen	<u> </u>		
[24 CFR Part 903.7 9 (j)]	Public Housing to Tenant-Based Assistance		
Exemptions from Compor	nent 10; Section 8 only PHAs are not required to complete this section.		
A. Assessments of Reasonable Revitalization Pursuant to section 202 of the HUD FY 1996 HUD Appropriations Act			
1. ☐ Yes ⊠ No:	Have any of the PHA's developments or portions of developments to HUD or the PHA as covered under section 202 of the HUD FY 1996 Appropriations Act? (If "No", skip to component 11; if "yes", component description for each identified development, unless eligible to component submission. PHAs completing streamlined submissions may skip to	6 HUD lete one activity lete a streamlined	
2. Activity Description	on		

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. Does not apply.
Conversion of Public Housing Activity Description
1a. Development name:
1b. Development (project) number:
2. What is the status of the required assessment?
Assessment underway
Assessment results submitted to HUD
Assessment results approved by HUD (if marked, proceed to next
question)
Other (explain below)
3. Yes No: Is a Conversion Plan required? (If yes, go to block 4; if no, go to
block 5.)
4. Status of Conversion Plan (select the statement that best describes the current
status)
Conversion Plan in development
Conversion Plan submitted to HUD on: (DD/MM/YYYY)
Conversion Plan approved by HUD on: (DD/MM/YYYY)
Activities pursuant to HUD-approved Conversion Plan underway
5. Description of how requirements of Section 202 are being satisfied by means other
than conversion (select one)
Units addressed in a pending or approved demolition application (date
submitted or approved:
Units addressed in a pending or approved HOPE VI demolition application
(date submitted or approved:)
Units addressed in a pending or approved HOPE VI Revitalization Plan
(date submitted or approved:
Requirements no longer applicable: vacancy rates are less than 10 percent
Requirements no longer applicable: site now has less than 300 units
Other: (describe below)
B. Reserved for Conversions pursuant to Section 22 of the U.S. Housing Act of 1937
C. Reserved for Conversions pursuant to Section 33 of the U.S. Housing Act of 1937
11. Homeownership Programs Administered by the PHA
[24 CFR Part 903.7 9 (k)]
A Dublic Housing
A. Public Housing Exemptions from Component 11A: Section 8 only PHAs are not required to complete 11A.
Exemptions from Component 11A. Section 6 only 111As are not required to complete 11A.

1. ☐ Yes ⊠ No:	Does the PHA administer any homeownership programs administered an approved section 5(h) homeownership program (42 U.S.C. 1437cd HOPE I program (42 U.S.C. 1437aaa) or has the PHA applied or plan administer any homeownership programs under section 5(h), the HO section 32 of the U.S. Housing Act of 1937 (42 U.S.C. 1437z-4). (I component 11B; if "yes", complete one activity description for each a program/plan, unless eligible to complete a streamlined submission of high performing PHA status. PHAs completing streamlined submission component 11B.) Does not apply.	(h)), or an approved to apply to PE I program, or If "No", skip to applicable lue to small PHA or
2. Activity Description Yes No:	Has the PHA provided all required activity description information for the optional Public Housing Asset Management Table? (If "yes", ski If "No", complete the Activity Description table below.)	-
Pub	lic Housing Homeownership Activity Description	
	Complete one for each development affected)	
1a. Development nan		
1b. Development (pro		
2. Federal Program at HOPE I 5(h) Turnkey I Section 33		
3. Application status:	(select one)	
Submitted	; included in the PHA's Homeownership Plan/Program l, pending approval	
	pplication	
(DD/MM/YYYY)	hip Plan/Program approved, submitted, or planned for submission:	
5. Number of units a	affected.	
6. Coverage of actio		
Part of the develo	,	
Total developmen	±	
B. Section 8 Tena	ant Based Assistance	
1. ☐ Yes ⊠ No:	Does the PHA plan to administer a Section 8 Homeownership prograted Section 8(y) of the U.S.H.A. of 1937, as implemented by 24 CFR particles to component 12; if "yes", describe each program using the table complete questions for each program identified), unless the PHA is estreamlined submission due to high performer status. High perform skip to component 12.)	t 982 ? (If "No", e below (copy and ligible to complete a
2. Program Descripti	on: Does not apply.	

 a. Size of Program Yes No: Will the PHA limit the number of families participating in the section 8 option? 	homeownership
If the answer to the question above was yes, which statement best describes the numbe (select one) 25 or fewer participants 26 - 50 participants 51 to 100 participants more than 100 participants	r of participants?
 b. PHA established eligibility criteria Yes No: Will the PHA's program have eligibility criteria for participation in its Section Homeownership Option program in addition to HUD criteria? If yes, list criteria below: 	on 8
12. PHA Community Service and Self-sufficiency Programs	
[24 CFR Part 903.7 9 (l)] Exemptions from Component 12: High performing and small PHAs are not required to complete this component PHAs are not required to complete sub-component C.	Section 8-Only
A. PHA Coordination with the Welfare (TANF) Agency	
 Cooperative agreements: Yes ⋈ No: Has the PHA has entered into a cooperative agreement with the TANF Agence information and/or target supportive services (as contemplated by section Housing Act of 1937)? 	
If yes, what was the date that agreement was signed? DD/MM/YY The PHA has just created a cooperative agreement and will seek to implement a coordination efforts between the PHA and TANF agency (select all that apply) X Client referrals Information sharing regarding mutual clients (for rent determinations and otherwise) Coordinate the provision of specific social and self-sufficiency services and programs 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 to social self-sufficiency of assisted families in the following areas? (select all that apply) Public housing rent determination policies 	

\boxtimes	Public housing admissions policies
	Section 8 admissions policies
	Preference in admission to section 8 for certain public housing families
	Preferences for families working or engaging in training or education programs for non-housing
	programs operated or coordinated by the PHA
	Preference/eligibility for public housing homeownership option participation
	Preference/eligibility for section 8 homeownership option participation
	Other policies (list below)
b. Ecc	onomic and Social self-sufficiency programs
X Yes	No: Does the PHA coordinate, promote or provide any programs to enhance the
	as a marrie and as sigl sufficiently of negitients 2 (If "year"), somethate the following

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

Services and Programs							
Program Name & Description (including location, if appropriate)	Estimated Size	Allocation Method (waiting list/random selection/specific criteria/other)	Access (development office / PHA main office / other provider name)	Eligibility (public housing or section 8 participants or both)			
Reduced rent through income Deductions for full time employment and full time students See pg. 20 Sec. 4 pAb3	As needed	See pg. 20 for criteria	PHA main office	Both			

(2) Family Self Sufficiency program/s

a. Participation Description

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

b. 🗌	Yes No:	If the PHA is not maintaining the minimum program size required by HUD, does the most recent FSS Action Plan address the steps the PHA plans to take to achieve at least the minimum program size? If no, list steps the PHA will take below:
C. W	Velfare Benefit	Reductions
(re	elating to the treaply) Adopting app carry out thos Informing res Actively notification in Establishing of exchange of its properties.	idents of new policy on admission and reexamination Gying residents of new policy at times in addition to admission and reexamination. For pursuing a cooperative agreement with all appropriate TANF agencies regarding the information and coordination of services a protocol for exchange of information with all appropriate TANF agencies
D. R 1937	eserved for Co	mmunity Service Requirement pursuant to section 12(c) of the U.S. Housing Act of
[24 CF Exempto com Plan m	FR Part 903.7 9 (m) options from Compo apponent 15. High F hay skip to sub-com	nent 13: High performing and small PHAs not participating in PHDEP and Section 8 Only PHAs may skip Performing and small PHAs that are participating in PHDEP and are submitting a PHDEP Plan with this PHA
1. De	High incidence High incidence developments Residents feat Observed low People on wa	rful for their safety and/or the safety of their children ver-level crime, vandalism and/or graffiti iting list unwilling to move into one or more developments due to perceived and/or actual ent and/or drug-related crime
	that information esidents (select a	or data did the PHA used to determine the need for PHA actions to improve safety of all that apply).
	Analysis of co	

Police reports Demonstrable, quantifiable success with previous or ongoing anticrime/anti drug programs Other (describe below)	
3. Which developments are most affected? (list below) Gosling Meadows	
B. Crime and Drug Prevention activities the PHA has undertaken or plans to undertake in the next fiscal year	PHA
 List the crime prevention activities the PHA has undertaken or plans to undertake: (select all that apply Contracting with outside and/or resident organizations for the provision of crime- and/or drug-prevention activities Crime Prevention Through Environmental Design Activities targeted to at-risk youth, adults, or seniors Volunteer Resident Patrol/Block Watchers Program Other (describe below): PHA receives regular reports from the Portsmouth Police Department, con on a regular basis with members of the Police Department, supports efforts to organize Neighborhow Watch programs, screens all applicants for criminal histories and pursues evictions for criminal act and consults regularly with the police. 	sults
2. Which developments are most affected? (list below) NH004-1 Gosling MeadowsC. 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 ☑ Police provide crime data to housing authority staff for analysis and action ☑ Police have established a physical presence on housing authority property (e.g., community policin office, officer in residence) ☑ Police regularly testify in and otherwise support eviction cases (when necessary) X Police regularly meet with the PHA management and residents ☑ Agreement between PHA and local law enforcement agency for provision of above-baseline law enforcement services ☑ Other activities (list below) 	-
2. Which developments are most affected? (list below) NH0 0 - 1 Gosling Meadows	
D. Additional information as required by PHDEP/PHDEP Plan PHAs eligible for FY 2000 PHDEP funds must provide a PHDEP Plan meeting specified requirements prior to receipt of PHDE funds.	EΡ
Yes No: Is the PHA eligible to participate in the PHDEP in the fiscal year covered by this PHA Pl Yes No: Has the PHA included the PHDEP Plan for FY 2003 in this PHA Plan? Yes No: This PHDEP Plan is an Attachment. (Attachment Filename:)	an?

14. RESERVED FOR PET POLICY

[24 CFR Part 903.7 9 (n)]

See Attachment nh004d01 pages 40 through 42

[24 CFR Part 903.7 9 (o)]

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

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

1. X Y	es 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) X Attached at Attachment (nh004f01)							
B. Des	scription of Elec	ction process for Residents on the PHA Board						
1.	Yes No:	Does the PHA meet the exemption criteria provided section 2(b)(2) of the U.S. Housing Act of 1937? (If no, continue to question 2; if yes, skip to sub-component C.)						
2.	Yes No:	Was the resident who serves on the PHA Board elected by the residents? (If yes, continue to question 3; if no, skip to sub-component C.)						
3. Des	cription of Resid	lent Election Process						
	Candidates were Candidates coul Self-nomination	dates for place on the ballot: (select all that apply) e nominated by resident and assisted family organizations d be nominated by any adult recipient of PHA assistance a: Candidates registered with the PHA and requested a place on ballot residents and participants were notified of the opportunity to volunteer to serve on the						
☐Any ☐Any ☐Any ☐Any ☐Any	adult recipient of							
☐ ☐Rep	All adult recipie	ect all that apply) ents of PHA assistance (public housing and section 8 tenant-based assistance) Il PHA resident and assisted family organizations						
		istency with the Consolidated Plan dated Plan, make the following statement (copy questions as many times as necessary).						
		urisdiction: Portsmouth, N.H.						
		the following steps to ensure consistency of this PHA Plan with the Consolidated Plan (select all that apply)						
	Consolidated Pl The PHA has pa	ased its statement of needs of families in the jurisdiction on the needs expressed in the an/s. In Part. articipated in any consultation process organized and offered by the Consolidated Plan evelopment 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)
□Oth	ner: (list below)
4. D. O t	The Consolidated Plan of the jurisdiction supports the PHA Plan with the following actions and commitments: (describe below) The City of Portsmouth remains open to opportunities to work together with PHA. At this time the City of Portsmouth and the PHA are seeking to develop affordable housing in a City owned building using a variety of resources. The Information Required by HUD
Use this	s section to provide any additional information requested by HUD.

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

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

See Attachment nh004l01

Optional Public Housing Asset Management Table

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

ient tion	Activity Description								
mber and be of units	Capital Fund Program Parts II and III Component 7a	Development Activities Component 7b	Demolition / Disposition Component 8	Designated housing Component 9	Component 10	Home- ownership Component 11a	Other (desc		

Attachment nh004a01

Statement of Progress in Meeting Five-Year Plan Mission and Goals

Portsmouth Housing Authority is proud to state that it has achieved high-performer status under the PHAS program. We look forward to continued and future scoring as high performers for both PHAS and SEMAP.

Our staff attended an increased number of professional development seminars, all of which contributed to their knowledge of fair housing issues.

We at Portsmouth Housing Authority continue to provide quality affordable housing, economic opportunity and a suitable living environment free from discrimination. We aggressively serve in a leadership role in the effort to make quality affordable housing available for low and moderate income members of our community.

Attachment nh004b01 Admissions Policy for Deconcentration

The Portsmouth Housing Auhtority has one family development of more than 100 dwelling units. The PHA is not required to perform a deconcentration assessment.

Attachment nh004c01

Voluntary Conversion Required Initial Assessment

Only one development, NH 4-1 Gosling Meadows, is subject to the required initial assessment. Conversion of the development would be inappropriate because removal of the development would not meet the necessary conditions for voluntary conversion.

Attachment nh004d01

Pet Policy

14.1EXCLUSIONS

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

14.2PETS IN SENIOR BUILDINGS

Residents living in developments or buildings designated for use by elderly and disabled families and in any development or building for which elderly or disabled families are given preference may, with prior Housing Authority approval, keep birds, fish, cats or dogs in their units.

14.3PETS IN FAMILY DEVELOPMENTS

Residents of family developments may not keep dogs in their units. Other than dogs, the same rules apply to family developments as for developments for use by the elderly and disabled.

14.4APPROVAL

- A. Residents must register the pet and have the prior approval of the Housing Authority before moving a pet into their unit. Residents must request approval and furnish all information and documentation required by this Section before the Housing Authority will approve the request. For dogs and cats, at the first registration, a licensed veterinarian's certification must be filed, certifying that the pet has been spayed or neutered.
- B. All pets must be registered with the Housing Authority before bringing them onto the development premises. Initial registration will not be allowed unless the family is in good standing with the Housing Authority. For these purposes, this means that for the previous eighteen months, the family must have been in compliance with their lease, current in all payments to the Authority and must have passed all housekeeping inspections. Thereafter, the registration must be fully updated each year at the resident's annual reexamination. For residents who do not need to be reexamined each year, the registration must be fully updated on or before January 31.
 - C. Full registration requires the following:
 - 1.An original certification from a licensed veterinarian that the pet, if required, is fully inoculated according to State and local law;
 - 2. An original license of any pet required to be licensed under local or state law;
 - 3.A signed agreement exempting and holding harmless, the Portsmouth Housing Authority.
 - 4. For dogs and cats, proof of insurance against personal injury caused by the animal.
- D. The Housing Authority, in its discretion, will refuse registration of any animal deemed to be potentially harmful to the health or safety of others.

14.5TYPES AND NUMBER OF PETS

The Housing Authority will allow only domesticated dogs, cats, birds, and fish in units. Dogs are not allowed in family developments.

- A. Dogs and cats are limited to one per unit, with a maximum weight of twenty pounds. Species trained as attack animals or known to have aggressive temperaments will not be allowed.
- B. Birds are limited one cage per unit or in the case of small species that can live in health in the same cage, to two per unit.
- C. Fish are limited to one tank per unit. The maximum capacity of the tank cannot exceed five gallons.

14.6PET DEPOSIT

- A. A deposit of \$100.00 is required at the initial registration of any animal. The pet deposit, if used in full or in part, to pay the cost of fines described in these rules, must be renewed to the \$100.00 level. The pet deposit does not limit the resident's liability for the cost of repairs, replacement, cleaning, deodorizing, insect extermination or personal injury caused by the pet.
- B. The pet deposit is separate from and in addition to the security deposit held on behalf of the resident by the Housing Authority. The deposit will be refunded within thirty days of the day the pet is removed from the unit or within thirty days of the day the resident vacates the unit, less any amounts owed due to expenditures for the items listed in paragraph A, above. Any amounts withheld will be detailed in writing within thirty days.

14.7FINANCIAL OBLIGATION OF RESIDENTS

Any resident who owns or keeps a pet in their dwelling unit will be required to pay for any repairs or replacement and cleaning for damages caused by the pet. The treatment of any pet-related insect infestation or odors in the pet owner's unit will be the financial responsibility of the pet owner.

14.8NUISANCE OR THREAT TO HEALTH OR SAFETY

- A. 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, building and development grounds. Toilets may not be used for waste disposal.
- B. Pet owners may not allow their pet to urinate or defecate anywhere on Housing Authority grounds and property. They must curb their pet away from the development site. Should the pet have an accident and defecate or urinate on Housing Authority grounds and property, owners must clean and remove all urine or fecal matter. If a resident fails to clean up after their animal, they will be assessed a waste removal charge of \$25.00 for each occurrence.
 - C. Repeated offenses will result in eviction or removal of the pet.
 - D. Pets must not be allowed to make noise or otherwise disturb the quiet enjoyment of other residents.
- E. Residents of the Woodbury Manor, State Street and Pleasant Street developments must place all waste in resident-supplied rubbish containers with a tight, secure cover. At all other developments, pet waste, feces, urine, litter box contents, bird cage contents, aquarium waste, etc., must be disposed of in dumpsters, only. It may not be left for rubbish collection in rubbish containers or bags. It may not be left in rubbish closets or put down rubbish chutes. Violation of this rule will be grounds for eviction or removal of the pet.
- F. Aggressive behavior of any kind by pets will not be tolerated. Upon the first instance of aggressive behavior, the pet must be removed.

14.9CONTROL OF PETS OUTSIDE THE UNIT

Pet owners must appropriately and effectively restrain a dog or cat, by leash or cage, when the animal is outside the unit on Portsmouth Housing Authority premises. The pet owner or other responsible person must accompany a dog or cat whenever the animal is outside the unit. Pets will not be allowed to roam outside the unit. Pets cannot be tied to trees, poles, fences or other objects outside the unit.

14.10Control OF Pets INSIDE THE UNIT

A. Residents must board their pets away from the development when they leave their unit for a day or more. Pets may not be left unattended for longer than twelve hours. If the Authority reasonably believes that an emergency exists concerning an unattended pet, it will enter the unit. The presence of an unattended pet for longer than twelve hours is considered an emergency, giving the Housing Authority the right to enter the unit.

All Housing Authority staff have the right to refuse to enter a unit where there is an unrestrained or nuisance animal. A refusal to restrain an animal that prevents Housing Authority staff from performing work is grounds for eviction.

14.11REMOVAL OF PETS

The Portsmouth 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. The Housing Authority has the right to remove a pet to a humane location, when necessary.

14.12OTHER REGULATIONS

- A. Visitors with pets are not allowed without Housing Authority permission.
- B. Residents may exercise their rights under the Grievance Procedure if they dispute a Housing Authority action. The Housing Authority reserves the right to require that a pet be kept off the premises during the Grievance process.

Attachment nh004e01

Membership of Resident Advisory Board

Mr. Albert Charest 410A Islington Street

Roger Armstrong

Portsmouth NH 03801

245 Middle Street Portsmout NH 03801

James Young 245 Middle Street Portsmouth NH03801

Doris Miller 140 Court Street Portsmouth Nh 0801

Priscilla Luneau 43 8 D Pleasant Street Portsmouth NH 03801

Constance Reardon 18 Weald Road Portsmouth NH 03801 Paul Staples

82 Blue Heron Drive Portsmouth NH 03801

Shawn Rogers

159 Blue Heron Drive Portsmouth NH 03801

Alan Jasper

91 Blue Heron Drive Portsmouth NH 03801

Melissa Reed PO Box 4032

Portsmouth NH 03801

Attachment nh004f01

Resident Advisory Board Recommendations

The Resident Advisory Board (RAB) met on Thursday, September 5, 2002 to review the PHA Plan. The meeting was held at the main office at 5 o'clock and seven members attended with George Robinson and Rhonda Shwartz.

The Plan was reviewed in depth with the more informational content being discussed at length. The RAB questioned the basis of the information and the sources used to substantiate the responses. Questions evolved around the reasons for the actions proposed in addition to the results that might be expected.

Many questions involving the Capital Fund were discussed. The RAB's interest was primarily focused in how the Annual and Five Year work items were created and requested future input in the process. Some issues were brought up regarding past work items and how the RAB felt that they may have desired different items be accomplished prior to those that were completed. It was explained that mechanical items and building envelope items need to be addressed before cosmetic improvements because physical plant needs to in good shape to ensure that the cosmetic improvements will last.

The fiscal issues of funding and at what levels were discussed. The cost of programs was reviewed with a comparison highlighted between the public housing and HCVP. The public housing budget was reviewed along with the Capital Fund budget. All attendees indicated that the meeting was enlightening and that they were looking forward to future meetings.

Attachment nh004g01

Resident Membership on the Board of Commissioners and the Board of Commissioners

Mrs. Ruth Griffin, Chairperson Mr. John F. Leith 479 Richards Avenue 83 Woodbury Avenue Portsmouth NH 03801 Portsmouth NH N03801

Mrs. Anita N. Freedman Father Angelo Pappas 195 Hillside Drive 36 Sheffield Road Portsmouth NH 03801 Portsmouth NH 03801

Mr. Albert Charest Mr. Saverino Giambalvo 33 Cliff Road 410 A Islington Street Portsmouth NH 03801 Portsmouth NH 03801 Mr. Albert Charest was appointed as a Resident Commissioner for a five-year term by

Portsmouth Mayor Evelyn Sirrell in 2001.

Attachment nh004h01

Definition of Substantial Deviation and Significant Ammendment

In the 5 year plan the PHA has indicated that we will seek to build units or developments.(pg. 1)

The PHA has selected additional improvement areas to improve the quality of assisted housing. One is continue the high performer status under PHAS and to reach high performer status under SEMAP by 12/02.

On page 2 the PHA has removed the site based waiting list criteria because it was an error and redefined that site based waiting lists will not be used.

The Annual Plan has redefined a number of areas to correct inaccuracies or to clarify past responses.

On page 2 the attachments were reentered and identified.

On page 4 at the list of supporting documents the cooperative agreement with TANF is included. It has not been agreed to at this time but we will seek to do so through negotiations with the local office.

On page 5 the housing needs in the jurisdiction by family type we reevaluated the impact factors resulting in new scoring.

On page 12 Section 3,paragraph A, 2a Waiting List Organization, we corrected the sit based waiting list selection.

On page 13 Section 3, paragraph A, 4a Income Targeting, we corrected the selection to indicate that we will exceed the Federal targeting to insure meeting the HUD requirement.

On page 16 Section 3, paragraph B, 4a Income Targeting, we corrected the selection to indicate that we will exceed the Federal targeting to insure meeting the HUD requirements.

On page 26 the Annual Statements, Performance and Evaluation Reports and Five Year Plans are included as attachments.

nh004i01

PH Operating Budget FYE 12-31-02

Operating Budget

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

OMB Approval No. 2577-0026 (exp. 6/30/2001)

See page four for Instructions and the Public reporting burden statement

в. Тур	of Submission	b	Fiscal Year Ending c.	No. of months (check one)	d Type	of HUD assisted pro	ject(s)	
X	Original	Revision No.:]	2/31/02	K 12 mo.	Other (specify)	01 x	PHA/IHA-Owned1	Rental H	nusire
e. Nam	e of Public Housing	Agency / Indian Housing Aut	hority (PHA/IHA)	1/1	7-1-2000	02	IHA Owned Mutua		
F	ORTSMOUTH	HOUSING AUTHOR	TTY			103	PHA/IHA Leased F		
	ess (city, State, zip					7777	PHA/IHA Owned 1		
P	ORTSMOUTH	NH 03801-519	6			05	PHA/IHA Leased F	łomeowi	ership
g. ADC	Number		h. PAS / LOCGS Projec	I No.		I. HUD	Field Office		
N	Y420		NH0040010	12D		100	STON MA		
No. o	Dwelling Units	k. No. of Unit Months	m. No. of Projects	, and		Di	SION MA		
4	21	Available 5052	4						
				Actuals	Estimates		Requested Br	udger Es	hmates
No. 1				Last Fisca Yr.		PHA	/IHA Estimates	-	Modifications
Line /				19 01	Current Budget Yr. 19_01		Amount		Amount
No.	No.	Description		PUM	POM	PUM	(foinearest \$10)	PUM	(to nearest \$10
Homel	ouyers Monthly I	(1) Payments for		(2)	(3)	(4)	(5)	(6)	(7)
	710 Operating E								
71000	712 Earned Hor			+					
		Maintenance Reserve		-	-				
		Amount (sum of lines 010	222 cm/2201	-					
		deficit) in Break-Even	. vzv., and uzv.)			-			
		8 Monthly Payments - Con		-		-		_	
	ing Receipts	a montally Payments - Con	,ia						
		ntel		0/4 20	7 040 000	200000	5453255555		
			246,10	1,243,283	251.13	1,268,700			
080 3120 Excess Utilities 090 3190 Nondwelling Rental			3,95	19,960	3.96	20,000			
		The second secon	nd 5001	250 05		200.00			
(100,010,000)			250.05	1,263,243	255.09	1,288,700			
110 3810 Interest on General Fund Investments 120 3890 Other Income			6.08	30,740	3.27	16,500			
		come (sum of lines 100, 11	() and (20)	2,30	11,635	2.38	12,000	_	
		- Administration	U, and 12U)	238,44	1,305,618	260,73	1,317,200		
	10 Administration			1200000	72250376		TOTAL CONTRA		
	30 Legal Expen			73.98	373,727	77.43	391,190		
	40 Staff Training			1,24	6,260	1.51	7,620		
-	50 Travel					100000			
	70 Accounting F			1.73	8,747	1.42	7,180		
190 41									
		istrative Expenses		.99	5,000	1.09	5,500		
		e Expense (sum of line 14	2.45 5 2.0001	20,39	103,003	19,92	100,660		
	Services	e expense (sum drime 14	u iniu line 200)	98,32	496,737	101.38	512,150		
100	10 Salaries			5.99	20.20	2.00			
-		Publications and Other Ser	ulaar .	1	30,267	6,23	31,480		_
		sts, Training and Other	VICES	3,19	16,133	5.83	29,450	-	
			220 220	0.10	12.200				_
/tilities	ver a constitue control	ces Expense (sum of lines	440, 430, 680 (440)	9.18	46,400	12.06	60,930		
250	10 Water			18.18	91,865	10.00	07.500		
	0 Electricity			59.69	and the second s	19.25	97,260		
80 433	of social control of the second			14.07	301,548 71,097	53.53	270,430		
90 434				21.66	109,427	21.87	59,780		
00 435	Committee Commit			15.51	78,343	16.20	110,500	- 0	
10 439		evocaca		15.51	70,343	10,20	81,850		
-		expense rise (sum of the 260 thrull	no 945)	129,11	652 200	100.00	C10 mm		-
av 10	air oundes Expe	use families sue son tuth il	iia o (v)	127111	652,280	122.69	619.820		

Previous editions are obsolete

Page 1 of 4

form HUD-52564 (3/95) ref. Handbook 7475,1

Man	S CI PE	KA (IHA		Fiscal Year Ending							
P	ORTS	MOUTH HOUSING AUTHORITY		12/31/2002							
	T		Actuals	Estimates		Requested Budget Estimates					
			Last Fiscal Yr	X or Actual	PHA	Modifications					
Line No.	Acct No.	Description	19 01 PUM (2)	Current Budge Yr 19 01 PUM (3)	PUM (4)	Amount (to nearest \$10) (5)	PUM (6)	Amount (to nearest S1)			
Ord	inary!	Maintenance and Operation	1	13	1 100	197	(10)				
330) (Labor	46.52	235,030	48,60	245,540					
340	4420	Materiala	22,92	115,804	21.77	110,000					
350	4430	Contract Costs	17.82	90,032		93,000					
360	Tota	Ordinary Maintenance & Operation Expense (lines 330 to 350)	87,27	440,866	88.78	448,540					
Prot	ective	Services	2 25024-0		10000000						
370	4460	Labor						B			
380	4470	Materials									
390	4480	Contract costs									
400	Tota	Protective Services Expense (sum of lines 370 to 390)			1						
Gen	eral Ex	pense		1				1112			
410	4510	Insurance	14,87	75,111	21.38	108,000					
420	4520	Payments in Lieu of Taxes	12.09	61,096	13,25	66,930					
430	4530	Terminal Leave Payments	101000			***************************************					
440	4540	Employee Benefit Contributions	48.54	245,209	53.73	271,460					
450	4570	Collection Losses	.57	2,861	.99	5,000					
460	4590	Other General Expense	0	(4)							
470	Total	General Expense (sum of lines 410 to 460)	76.06	384,273	89.35	451,390					
180	Total	Routine Expense (sum of lines 210, 250, 320, 360, 400, and 470)	399,95	2,020,556	414.26	2,092,830					
490 500	4710 Total	Rents to Owners of Leased Dwellings Operating Expense (sum of lines 480 and 490)									
	1	Expenditures Extraordinary Maintenance	10000	130 2050	1.00						
510			3.12 5.22	15,738	4,37	22,100					
530	_	Replacement of Nonexpendable Equipment Properly Betterments and Additions	3.22	26,382	15,55	80,730	-				
_		Nonroutine Expenditures (sum of lines 510, 520, and 530)	8,34	42,120	20,35	102,830					
		Operating Expenditures (sum of lines 500 and 540)	408,29	2,062,676	434.61	2,195,660					
		Adjustments	400,27	2,002,070	4.34.01	2,193,660					
560		Prior Year Adjustments Affecting Residuel Receipts	(1.39)	(7,004)	.08	400					
		enditures:	(41,117)	37 4 300 17	700	100					
70		Deficiency in Residual Receipts at End of Preceding Fiscal Yr.									
80	Total	Operating Expenditures, including prior year adjustments and									
		other expenditures (line 550 plus or minus line 560 plus line 570)	406.90	2,055,672	434,69	2,196,060					
90		Residual Receipts (or Deficit) before HUD Contributions and provision for operating reserve (line 130 minus line 580)	(148.47)	(750,054)	(173.96)	(878,860)					
5000		butions Basic Annual Contribution Earned - Leased Projects Current Year									
10	8011	Prior Year Adjustments - (Debit) Credit									
20	Total	Basic Annual Contribution (line 600 plus or minus line 610)									
30	8020	Contributions Earned - Op. Sub - Cur. Yr. (before year-end adj)									
40		Mandatory PFS Adjustments (net)				5					
50		Other (specify)									
60		Other (specify)				77.77					
70		Total Year-end Adjustments/Other (plus or minus lines 640 thru 650)									
80	8020	Total Operating Subsidy-current year (line 630 plus or minus line 670)	145.33	734,220	142,92	722,050					
90	Total	HUD Contributions (sum of lines 620 and 680)									
00		Residual Receipts (or Deficit) (sum of line 590 plus line 690) Enter here and on line 810	(3.13)	(15,834)	(31,04)	(156,810)					

Nam	POI	ATHA RTSMOUTH HOUSING AUTHORITY	12/31/2002				
40		Operating Reserve		PHA/IHA Estimates	HUD Modifications		
		Part I - Maximum Operating Reserve - End of Current Budget Year					
740	2821	PHA / IHA-Leased Housing - Section 23 or 10(c) 50% of Line 480, column 5, form HUD-52564					

	Part II - Provision for and Estimated or Actual Operating Reserve at Fiscal Year End		
780	Operating Reserve at End of Previous Fiscal Year - Actual for FYE (date)		
790	Provision for Operating Reserve - Current Budget Year (check one) Estimated for FYE Actual for FYE		
800	Operating Reserve at End of Current Budget Year (check one) Estimated for FYE X Actual for FYE 12/31/01	715,422	
810	Provision for Operating Reserve - Requested Budget Year Estimated for FYE Enter Amount from line 700	(156,810)	
920	Operating Reserve at End of Requested Budget Year Estimated for FYE (Sum of lines 800 and 810) 12/31/02	558,612	
830	Cash Reserve Requirement % of line 480		

Comments

PHA / IHA Approval	Name	TIMOTHY J. CONNORS EXECUTIVE DIRECTOR	
	Signature	En flin	000 4/10/02
Field Office Approval	Name		* <u>======</u>
	Tito		
	Signature		Date
Previous editions are obt	solete	Page 3 of 4	form HUD-52564 (3/95) ref. Handbook 7475.1

Attachment nh004j01 PHA Organizational Chart

		Commissioners		
		Executive Director		
		Director of Administration	Administrative Assistant	
Marketing & Leasing	Finance	Maintenance	Community Services	Retired
Manager	Comptroller	Director of Maintenance	Director	
Assistant Manager	Accountant	Foreman (0)	Program Director	Coordinato FT,1-PT)
Housing Inspector	Accounting Assistant	Mechanics (7)	Nurse	Administrat
Management Aides	Rent Collector	Mechanic Aide	Program Coordinator	Clerk Typis
Administrative Assistant		Laborer	Cook	
Receptionist		Janitor	Drivers (1-FT, 6-PT)	
Social Worker		Summer Help		

Board of

Attachment nh004k01 Capital Fund Annual Statement FY00 Performance and Evaluation Report

Ann	ual Statement/Performance and Evalua	tion Report						
Cap	ital Fund Program and Capital Fund P	rogram Repla	acement Ho	ousing Fact	tor			
_	P/CFPRHF) Part I: Summary	S 1		8				
PHA N	, ,	Grant Type and No Capital Fund Progr Replacement House	am Grant No: NH		Federal FY of Grant:			
	iginal Annual Statement Reserve for Disasters/ Emer							
Per	formance and Evaluation Report for Period Ending: Summary by Development Account	Total Estima	rmance and Eva		tual Cost			
No.	Summary by Development Account	Total Estilla	ateu Cost	Total A	ctual Cost			
1.10.		Original	Revised	Obligated	Expended			
1	Total non-CFP Funds	8		8	•			
2	1406 Operations							
3	1408 Management Improvements							
4	1410 Administration	4,000	3,531	3,531	3,53			
5	1411 Audit							
6	1415 Liquidated Damages							
7	1430 Fees and Costs	68,300	36,230	36,230	36,23			
8	1440 Site Acquisition							
9	1450 Site Improvement	122,319	122,319	122,319	122,31			
10	1460 Dwelling Structures	362,696	404,725	404,725	404,72			
11	1465.1 Dwelling Equipment—Nonexpendable							
12	1470 Nondwelling Structures	120,000	110,510	110,510	110,51			
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							
19	1501 Collaterization or Debt Service							
20	1502 Contingency							
21	Amount of Annual Grant: (sum of lines 2 – 20)	677,315	677,315	677,315	677,31			
22	Amount of line 21 Related to LBP Activities							
23	Amount of line 21 Related to Section 504 compliance							
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							

Part II: Supporting Pages

PHA Name	: Housing Authority	Grant T Capital	ype and N Fund Progr ment Hous	Federal FY of Grant: 2000				
Dev. Number Name/H A-Wide Activities	General Description of Major Work Categories	Dev. Qty To			Estimated Total Act		tual Cost	Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
NH 4-1	Perimeter fencing	1450	100%	47,648	47,648	47,648	47,648	
	Expand Maint. Facility	1470	100%	120,000	110,510	110,510	110,510	
	Replace siding, doors, windows	1460	100%	210,481	252,510	252,510	252,510	
	Subtotal	1400	10070	377,949	410,688	410,668	410,668	
NH 4-3	Paving	1450	100%	74,761	74,761	74,761	74,761	
	Subtotal			74,761	74,761	74,761	74,761	
NH 4-6	Replace windows	1460	100%	152,215	152,215	152,215	152,215	
	Subtotal			152,215	152,215	152,215	152,215	
Admin.	Advertising costs	1410	-	4,000	3,531	3,531	3,531	
	Subtotal			4,000	3,531	3,531	3,531	
Fees/Cost	A/E Services	1430	-	68,300	36,230	36,230	36,230	
	Subtotal			68,300	36,230	36,230	36,230	
								All work completed.

Part III: Implementation Schedule

Part III:	Impleme	ntation S					
PHA Name: Portsmouth H	ousing Author	rity	Grant Type a Capital Fund Replacement	nd Number Program No: Housing Fact	NH36P00450 or No:	Federal FY of Grant: 2000	
Dev. Number Name/HA- Wide Activities	All (Qua	Fund Obligater Ending	nted Date)	A (Q	ll Funds Exp uarter Endin	pended ng Date)	Reasons for Revised Target Dates
	Original	Revised	Actual	Original	Revised	Actual	
NH 4-1	9/01	12/01	12/01	3/03	3/02	3/02	
NH 4-3 NH 4-6	6/01 6/01		6/01 6/01	6/01 9/01		6/01 9/01	

PHA N Portsm	Name:	Grant Type and No Capital Fund Progr. Replacement Housi		Federal FY of Grant:	
	ginal Annual Statement Reserve for Disasters/ Emer formance and Evaluation Report for Period Ending: 6/				
Line No.	Summary by Development Account	Total Estima	ited Cost	Total Ac	etual Cost
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations				
3	1408 Management Improvements				
4	1410 Administration	1,000	1,809	1,809	1,809
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	25,000	3,370	3,370	3,370
8	1440 Site Acquisition				
9	1450 Site Improvement	40,000	59,900	59,900	59,900
10	1460 Dwelling Structures	575,126	579,565	579,565	579,565
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Nondwelling Structures				
13	1475 Nondwelling Equipment	50,000	46,482	46,482	(
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1499 Development Activities				
19	1501 Collaterization or Debt Service				
20	1502 Contingency				
21	Amount of Annual Grant: (sum of lines 2 – 20)	691,126	691,126	691,126	644,644
22	Amount of line 21 Related to LBP Activities				·
23	Amount of line 21 Related to Section 504 compliance				
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				

Part II: Supporting Pages

PHA Name: Portsmouth I	Housing Authority	Grant T Capital I Replace	ment Hous	ram Grant No ing Factor G	rant No:			Federal FY of Grant: 2001	
Dev. Number Name/HA- Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Qty	Total Es	stimated ost	Total Ac	tual Cost	Status of Work	
				Original	Revised	Funds Obligated	Funds Expended		
NH 4-1	Replace siding, doors, Windows	1460	100%	575,126	579,565	579,565	579,565	Completed	
	Playground	1475	100%	50,000	46,482	46,482	0	Awarded-in progress	
	Subtotal			625,126	626,047	626,047	579,565		
NH 4-6	Paving	1450	100%	40,000	59,900	59,900	59,900	Completed	
	Subtotal			40,000	59,900	59,900	59,900		
Admin.	Advertising	1410		1,000	1,809	1,809	1,809		
	Subtotal			1,000	1,809	1,809	1,809		
Fees/Costs	A/E Services	1430		0	3,370	3,370	3,370	T. 2002	
	Codify Plans/Specs	1430		25,000	2 270	2 270	2 270	To 2002	
	Subtotal			25,000	3,370	3,370	3,370		

Part III: Implementation Schedule

Part III: Implementation Schedule											
PHA Name: Portsmouth H	ousing Author		Replacement	Program No:1 Housing Fact	or No:		Federal FY of Grant: 2001				
Dev. Number Name/HA- Wide Activities	Number (Quarter Ending Name/HA-			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates				
	Original	Revised	Actual	Original	Revised	Actual					
NH 4-1	6/02		6/02	9/02							
NH 4-6	6/02	3/02	3/02	9/02	6/02	6/02	Completed				
	0,02	3,02		3102	3,02						
1						1					

PHA N	ame:	Grant Type and N Capital Fund Progr Replacement Hous		Federal FY of Grant: 2002	
	iginal Annual Statement Reserve for Disasters/ Emer): 2)
Line	rformance and Evaluation Report for Period Ending: 6 Summary by Development Account	Total Estima	rmance and Eva		tual Cost
No.	Summary by Development Account	Total Estinia	iteu Cost	Total 710	ctual Cost
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations				
3	1408 Management Improvements				
4	1410 Administration	27,200	24,000	0	0
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	12,000	47,366	28,700	0
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	549,000	560,000	337,793	244,925
11	1465.1 Dwelling Equipment—Nonexpendable	39,000	0	0	0
12	1470 Nondwelling Structures				
13	1475 Nondwelling Equipment	25,000	25,000	0	0
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1499 Development Activities				
19	1501 Collaterization or Debt Service				
20	1502 Contingency	4,166	0	0	0
21	Amount of Annual Grant: (sum of lines 2 – 20)	656,366	656,366	366,493	244,925
22	Amount of line 21 Related to LBP Activities				
23	Amount of line 21 Related to Section 504 compliance				
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				

Part II: Supporting Pages

Dev. Number Name/H A-Wide	Housing Authority General Description of				Grant Type and Number Capital Fund Program Grant No: NH36P00450102							
Number Name/H		T top into	Replacement Housing Factor Grant No:									
Activitie s	Major Work Categories	Dev. Acct No.	Qty			tual Cost	Status of Work					
				Original	Revised	Funds Obligated	Funds Expended					
NH 4-1	Kitchen Cabinets	1460	100%	142,000	0	0	0					
	Foundation Repairs	1460	100%	60,000	20,000	0	0					
	Stair railings	1460	100%	34,000	0	0	0					
	Back flow prevention	1460	100%	25,000	0	0	0					
	Siding, doors, windows	1460	100%	0	380,000	337,793	244,925					
	Subtotal	1100	100/0	261,000	400,000	337,793	244,925					
NH 4-2	Stairwell railings	1460	40%	12,000	0							
1111 T-2	Boilers	1460	100%	100,000	0							
	Stoves	1465.1	100%	15,000	0		+					
	Refrigerators	1465.1	100%	24,000	0							
	Subtotal			151,000	0							
NH 4-3	Back flow prevention	1460	100%	10,000	0							
	Subtotal			10,000	0							
NH 4-6	Roof	1460	100%	150,000	150,000							
	Stairwell railings	1460	100%	6,000	0							
	Masonry repairs	1460	100%	10,000	10,000							
	Subtotal			166,000	160,000							
	A.1	1.410		7.200	4.000							
Admin	Advertising	1410		7,200	4,000							
	Clerk of works Subtotal	1410		20,000 27,200	20,000 24,000							
Non-dwel.	Computer Equipment	1475		25,000	25,000							
Equip.	Subtotal Subtotal	14/3		23,000	43,000							
Fees/costs	A/E Services	1430		12,000	28,700	28,700						
	Codify plans/specs	1430		0	18,666	, -						
	Subtotal	1		12,000	47,366	28,700						

Part III: Implementation Schedule

PHA Name: Portsmuth Housing Authority			Replacement	Program No: Housing Fact	or No:		Federal FY of Grant: 2002	
Dev. Number Name/HA- Wide Activities	All (Qua	Fund Obliga rter Ending I	ted Date)	All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Date	
	Original	Revised	Actual	Original	Revised	Actual		
NH 4-1	9/03	9/03		9/04	9/04			
NH 4-2	9/03	N/A		9/04	N/A			
NH 4-3	9/03	N/A		9/04	N/A			
NH 4-6	9/03	9/03		9/04	9/04			
Admin	9/03	9/03		9/04	9/04			
Non dwel.	9/03	9/03		9/04	9/04			
Equip.	9/03	9/03		9/04	9/04			
Fees/costs	9/03	9/03		9/04	9/04			

PHA N	ame:	Grant Type and No Capital Fund Progr	36P00450103	Federal FY of Grant:					
Portsm	outh Housing Authority	Replacement House	Grant.						
X Original Annual Statement Reserve for Disasters/ Emergencies Revised Annual Statement (revision Performance and Evaluation Report for Period Ending: Final Performance and Evaluation Report									
Line	rformance and Evaluation Report for Period Ending: Summary by Development Account	Total Estima			tual Cost				
No.	Summary by Development Account	Total Estilla	iteu Cost	1 otal 1 te	tuai Cost				
		Original	Revised	Obligated	Expended				
1	Total non-CFP Funds			-	-				
2	1406 Operations								
3	1408 Management Improvements	12,366	12,366	0	0				
4	1410 Administration	24,000	24,000	0	0				
5	1411 Audit								
6	1415 Liquidated Damages								
7	1430 Fees and Costs	5,000	5,000	0	0				
8	1440 Site Acquisition								
9	1450 Site Improvement								
10	1460 Dwelling Structures	520,000	520,000	0	0				
11	1465.1 Dwelling Equipment—Nonexpendable	75,000	75,000	0	0				
12	1470 Nondwelling Structures								
13	1475 Nondwelling Equipment	20,000	20,000	0	0				
14	1485 Demolition								
15	1490 Replacement Reserve								
16	1492 Moving to Work Demonstration								
17	1495.1 Relocation Costs								
18	1499 Development Activities								
19	1501 Collaterization or Debt Service								
20	1502 Contingency								
21	Amount of Annual Grant: (sum of lines 2 – 20)	656,366	656,366	0	0				
22	Amount of line 21 Related to LBP Activities		,						
23	Amount of line 21 Related to Section 504 compliance								
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	75,000	75,000	0	0				

Part II: Supporting Pages

PHA Name	: Supporting Page		pe and N					Federal FY of
	e: 1 Housing Authority	Capital F	Grant: 2003					
ronsinouu	i Housing Authority	Replacer	Grant. 2005					
Dev.	General Description of	Dev.	Qty	Total Es		Total Ac	Status of Work	
Number	Major Work Categories	Acct	()	Cost				
Name/H		No.						
A-Wide								
Activitie								
S								
				Original	Revised	Funds	Funds	
						Obligated	Expended	
NH 4-1	Replace Kit. Cabinets	1460	100%	520,000	520,000	0	0	
	(cabinets, sinks,faucets,							
	lighting, and related							
	items)							
	Subtotal			520,000	520,000	0	0	
NH 4-2	N/A							
NH 4-3	Replace stoves/refers	1465.1	100%	75,000	75,000	0	0	
	Subtotal			75,000	75,000	0	0	
NH 4-6	N/A							
						_		
	Subtotal							
Mgmt. Imp.	Staff Training	1408		12,366	12,366	0	0	
	-							
Admin	Advertising	1410		4,000	4,000	0	0	
	Clerk of works	1410		20,000	20,000	0	0	
	Subtotal			24,000	24,000	0	0	
					•			
Non-dwel.	Computer Equipment	1475		20,000	20,000	0	0	
Equip.	Subtotal			20,000	20,000	0	0	
1 1				,	,			
Fees/costs	A/E Services	1430		5,000	5,000	0	0	
	Subtotal	1		5,000	5,000	0	0	
	2 22 20 441			- ,	- ,	9	-	

Part III: Implementation Schedule

PHA Name: Portsmouth Housing Authority			Replacement	Program No:1 Housing Fact	or No:	Federal FY of Grant: 2003		
Dev. Number Name/HA- Wide Activities	All (Qua	Fund Obligater Ending	ated Date)	All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates	
	Original	Revised	Actual	Original	Revised	Actual		
NH 4-1	9/04	9/04		9/05	9/05			
NH 4-2	N/A	N/A		N/A	N/A			
NH 4-3	9/04	9/04		9/05	9/05			
NH 4-6	N/A	N/A		N/A	N/A			
Admin	9/04	9/04		9/05	9/05			
Non dured	9/04	9/04		9/05	0/05			
Non dwel. Equip.	9/04	9/04		9/05	9/05			
Fees/costs	9/04	9/04		9/05	9/05			

Attachment nh004l01 Capital Fund 5 Year Action Plan

Capital Fund Program Five-Year Action Plan Part I: Summary

Part	I: Sun	ımary			
PHA Name				X Original 5-Year Plan ☐Revision No:	
Dev. Number/Na me/HA- Wide	Year 1	Work Statement for Year 2 FFY Grant: 2004 PHA FY: 1/04	Work Statement for Year 3 FFY Grant: 2005 PHA FY: 1/05	Work Statement for Year 4 FFY Grant: 2006 PHA FY: 1/06	Work Statement for Year 5 FFY Grant: 2007 PHA FY: 1/07
	A				
NH 4-1	N N		300,000		
NH 4-2	U A L	120,000		240,000	180,000
NH 4-3	S T A	210,000	300,000	360,000	410,000
NH 4-6	T E M E N T	270,000			10,000
CFP Funds Listed for 5- year planning					
Replacement Housing Factor Funds					

Capital Fund Program Five-Year Action Plan

Part II: Supporting Pages—Work Activities

Activ.		Activities for Year: 2			Activities for Year: 3	
for		FFY Grant: 2004			FFY Grant: 2005	
Year		PHA FY: 1/04			PHA FY: 1/05	
1			Ī			
	Dev. Name/Num	Major Work Categories	Estimated Cost	Dev. Name/Num.	Major Work Categories	Estimated Cost
	NH 4-1		Cost	NH 4-1	Replace/pave walkways	300,000
	Gosling			Gosling	1 teplace/pave walkways	000,000
				5559		
Α	Meadows			Meadows		
Ν						
N	NH 4-2			NH 4-2		
U				Woodbury		
Α	State	Replace boilers/DHW sys.	120,000	State		
L	Pleasant St			Pleasant St		
S	NUL 4 0			NII 1 0		
T	NH 4-3	Electrical consulation of a citation	40.000	NH 4-3	Davida all alastria	000 000
A T	Feaster	Electrical upgrade feasibility	10,000	Feaster Apt	Rewire all electric	300,000
E	Apts.	Deplace elevatore	200.000			
M		Replace elevators	200,000			
E						
N	NH 4-6					
T	Margeson	Replace DHW boilers	70,000			
•	Apts.	Tropidos Brivi Bellero	70,000			
	7 40 0	Replace elevators	200,000			
		·	,			
		Management Improvement	40,000		Management Improvements	40,000
		Administration	20,000		Administration	20,000
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		T-1-1-0ED E !!	#000 000		Table OFD F. II. 1 LG 1	#000 000
		Total CFP Estimated Cost	\$660,000		Total CFP Estimated Cost	\$660,000
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Capital Fund Program Five-Year Action Plan

Part II: Supporting Pages—Work Activities

Activ.		Activities for Year : 4			Activities for Year: 5	
for		FFY Grant: 2005			FFY Grant: 2006	
Year		PHA FY: 1/05			PHA FY: 1/06	
1						
,	Dev.	Major Work Categories	Estimated	Dev.	Major Work Categories	Estimated
	Name/Num		Cost	Name/Num.		Cost
	NH 4-1			NH 4-1		
	Gosling			Gosling		
	Meadows			Meadows		
Α						
N						
N						
U	NH 4-2			NH 4-2	Comm. Room Impr.	50,000
Α	Woodbury	Rewire all electric	240,000	Woodbury	Plumbing Impr.	30,000
L	State			State	Kitchen Impr.	100,000
	Pleasant St			Pleasant St		
S						
Т						
Α						
Т						
E	NH 4-3			NH 4-3	Replace Baths	380,000
M	Feaster Apts.	Rewire electric and Electric heat	360,000	Feaster Apts.	Masonry Repairs	30,000
E						
N						
Т	NH 4-6			NH 4-6	Masonry Repairs	10,000
	Margeson			Margeson		
	Apts.			Apts.		
		Management Improvement	40,000		Management Improvements	40,000
		Administration	20,000		Administration	20,000
		Total CFP Estimated Cost	\$660,000		Total CFP Estimated Cost	\$660,000
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Capital Fund Program Five-Year Action Plan
Part II: Supporting Pages—Work Activities

Activ.	Activities for Year: 5	Activities for Year: 5
for	FFY Grant: 2006	FFY Grant: 2006
Year	PHA FY: 1/06	PHA FY: 1/06
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	Dev. Name/Num	Major Work Categories	Estimated Cost	Dev. Name/Num.	Major Work Categories	Estimated Cost		
	NH 4-1	Community RM. Improve.	295,000	NH 4-3	Community room improvement	30,000		
	Gosling Meadows	Plumbing improvements	565,000	Feaster Apts.	Heating/DHW improvements	150,000		
Α		Heating improvements	275,000		Replace kitchens	400,000		
N		Interior doors	250,000		Replace baths	0		
N		504 Accessibility improvements	30,000		Interior doors	75,000		
U		Landscaping	60,000		Exterior doors	25,000		
Α		Sewer line replacement	310,000		504 Accessibility improvements	30,000		
L		Water line replacement	310,000		Masonry repairs	0		
		Playground equipment	60,000		Common area improvements	30,000		
S		Total	2,155,000		Landscaping	10,000		
Т	NH 4-2	Community room Improvements	0		Total	750,000		
Α	W,S,P Sts.	Plumbing improvements	0	NH 4-6	Community room improvements	30,000		
Т		Replace roofs	240,000	Margeson	Plumbing improvements	10,000		
Е		Kitchen improvements	0	Apts.	Replace bathrooms	550,000		
M		Closet doors	45,000		Closet doors	100,000		
E		Common area improvements	90,000		Exterior doors	30,000		
N		504 Accessibility improvements	30,000		Common area improvements	80,000		
Т		Landscaping	60,000		504 accessibility improvements	30,000		
		Water line replacement	45,000		Masonry repairs	0		
		Paving walkways	100,000		Landscaping	10,000		
		Total	610,000		Total	840,000		
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-	\$			\$				
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	Optional 5-Year Actio	n Plan Tables				
Development	Development Name	Number	% Vacancies			
Number	(or indicate PHA wide)	Vacant	in Development			
		Units				
NH 004	PHA wide	0	0%			
Description of Need	led Physical Improvements or N	Management	Estimated			
Improvements			Cost			
Replace MIS/compt	uter system		120,000			
Replace computer h	nardware					
Replace software						
Total estimated cost	t over next 5 years		120,000			

