

U.S.DepartmentofHousingandUrbanDevelopment  
OfficeofPublicandIndianHousing

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# PHAPlans

5YearPlanforFiscalYears2003 -2007  
AnnualPlanforFiscalYear2003

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

**PHA Plan  
Agency Identification**

**PHAName:** TownofWestWarwickHousingAuthority

**PHANumber:** RI015

**PHAFiscalYearBeginning:** 01 -2003

**Public Access to Information**

**Information regarding any activities outlined in this plan can be obtained by contacting: (select all that apply)**

- Main administrative office of the PHA
- PHA development management offices
- PHA local offices

**Display Locations for PHA Plans and Supporting Documents**

The PHA Plans (including attachments) are available for public inspection at: (select all that apply)

- Main administrative office of the PHA
- PHA development management offices
- PHA local offices
- Main administrative office of the local government
- Main administrative office of the County government
- Main administrative office of the State government
- Public library
- PHA website
- Other (list below)

PHA Plan Supporting Documents are available for inspection at: (select all that apply)

- Main business office of the PHA
- PHA development management offices
- Other (list below)



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

**A.Mission**

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

- The mission of the PHA is the same as that of the Department of Housing and Urban Development: To promote adequate and affordable housing, economic opportunity and a suitable living environment free from discrimination.
- X The PHA's mission is: (state mission here) To provide decent, safe, and sanitary housing for lower income elderly families in our Housing Projects, housing for families in the private rental market through rental assistance programs, to take leadership role in maintenance of existing units and provision of new housing in the future, in a non-discriminatory manner.

**B.Goals**

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

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

- X PHA Goal: Expand the supply of assisted housing
  - Objectives:
    - X Apply for additional rental vouchers:
    - X Reduce public housing vacancies:
    - Leverage private or other public funds to create additional housing opportunities:
    - Acquire or build units or developments
    - X Other (list below)
      - Investigate alternative uses of existing housing units, such as, assisted living and HOME programs

- X PHAGoal:Improvethqualityofassistedhousing  
Objectives:
  - X Improvepublichousingmanagement:(PHASscore)
  - X Improvevouchermanagement:(SEMAPscore)
  - X Increasecustomersatisfaction:
  - X Concentrateoneffortstoimprovespecificmanagementfunctions:  
(list;e.g.,publichousingfinance;voucherunitinspections)  
CompleteAutomationupgradesandtrainpersonnelinuse  
ConductMaintenancePlanRevision
  - X Renovateormodernizepublichousingunits:
    - Demolishordisposeofobsoletepublichousing:
    - Providereplacementpublichousing:
    - Providereplacementvouchers:
    - Other:(listbelow)

- X PHAGoal:Increaseassistedhousingchoices  
Objectives:
  - X Providevoucher mobilitycounseling:
  - X Conductoutreacheffortstopotentialvoucherlandlords
  - X Increasevoucherpaymentstandards
  - Implementvoucherhomeownershipprogram:
  - Implementpublichousingorotherhomeownershipprograms:
  - Implementpublichousing site-basedwaitinglists:
  - Convertpublichousing tovouchers:
  - Other:(listbelow)

**HUDStrategicGoal:Improvecommunityqualityoflifeandeconomicvitality**

- X PHAGoal:Provideanimprovedlivingenvironment  
Objectives:
    - Implementmeasurestodeconcentratepovertybybringinghigher  
incomepublichousinghouseholdsin tolowerincomedevelopments:
    - Implementmeasurestopromoteincomemixinginpublichousingby  
assuringaccessforlowerincomefamiliesinto higherincome  
developments:
    - Implementpublichousingsecurityimprovements:
    - Designateddevelopmentsorbuildingsforparticularresidentgroups  
(elderly, personswithdisabilities)
    - X Other:(listbelow)  
ApplyforRentalVouchersinsupportofDesignatedElderlyHousing
- Plan  
ApplyforResidentServicesCoordinator

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

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

Objectives:

- X Increase the number and percentage of employed persons in assisted families: Adopt preference for working families
- X Provide or attract supportive services to improve assistance recipients' employability: Provide Participants with FSS information on available contracted services
- X Provide or attract supportive services to increase independence for the elderly or families with disabilities.
- Other: (list below)

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

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

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

**Collaboration with Town Officials, service providers and general public on housing needs and issues to develop plan to increase community stock of affordable housing**

**Conduct outreach to landlords to market Rental Assistance program and encourage landlords to list units, particularly accessible units.**

**AnnualPHAPlan**  
**PHAFiscalYear2003**  
[24CFRPart903.7]

**i. AnnualPlanType:**

SelectwhichtypeofAnnualPlanthePHAwillsubmit.

X      **StandardPlan**

**StreamlinedPlan:**

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

     **TroubledAgencyPlan**

**ii. ExecutiveSummaryoftheAnnualPHAPlan**

[24CFRPart903.79(r)]

ProvideabriefoverviewoftheinformationintheAnnualPlan,includinghighlightsofmajorinitiatives anddiscretionarypolicies,thePHAhasincludedintheAnnualPlan.

**Descriptionofcurrentstateofoperationsandneedstobe accomplishedduringyearsuchasmajorrenovationsproject buildingandpolicyrevisions neededtoimprovemaintenance,overall operations,andadministration**

**iii. AnnualPlanTableofContents**

[24CFRPart903.79(r)]

ProvideatableofcontentsfortheAnnualPlan,includingattachments,andalistofsupporting documentsavailableforpublic inspection.

**TableofContents**

Page#

**AnnualPlan**

- i. ExecutiveSummary
- ii. TableofContents
  - 1. HousingNeeds
  - 2. FinancialResources
  - 3. PoliciesonEligibility,SelectionandAdmissions
  - 4. RentDeterminationPolicies
  - 5. OperationsandManagementPolicies
  - 6. GrievanceProcedures
  - 7. CapitalImprovementNeeds
  - 8. DemolitionandDisposition
  - 9. DesignationofHousing

- 10. Conversions of Public Housing
- 11. Homeownership
- 12. Community Service Programs
- 13. Crime and Safety
- 14. Pets (Inactive for January 1 PHAs)
- 15. Civil Rights Certifications (included with PHA Plan Certifications)
- 16. Audit
- 17. Asset Management
- 18. Other Information

**Attachments**

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

**Required Attachments:**

- X Admissions Policy for Deconcentration ( **Attachment C** )
- X FY2002 Capital Fund Program Annual Statement ( **Attachment A** )  
Most recent board -approved operating budget (Required Attachment for PHAs that are troubled or at risk of being designated troubled ONLY)
- X Voluntary Conversion Initial Assessment ( **Attachment D** )

**Optional Attachments:**

- PHA Management Organizational Chart
- X FY2000 Capital Fund Program 5 Year Action Plan ( **Attachment B** )
- Public Housing Drug Elimination Program (PHDEP) Plan
- Comments of Resident Advisory Board or Boards (must be attached if not included in PHA Plan text)
- X Other (List below, providing each attachment name)  
Attachment 1: Implementation of Community Service Requirements  
Attachment 2: Pet Ownership  
Attachment 3: Progress in meeting mission and goals  
Attachment 4: Resident Membership of the PHA Governing Board  
Attachment 5: Membership of the Resident Advisory Board  
**Attachment E** .Final Performance and Evaluation Report for RI43P015 -501-

01

**Supporting Documents Available for Review**

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

<b>List of Supporting Documents Available for Review</b>		
<b>Applicable &amp; On Display</b>	<b>Supporting Document</b>	<b>Applicable Plan Component</b>
X	PHA Plan Certifications of Compliance with the PHA Plans and Related Regulations	5 Year and Annual Plans



<b>List of Supporting Documents Available for Review</b>		
<b>Applicable &amp; On Display</b>	<b>Supporting Document</b>	<b>Applicable Plan Component</b>
X	State/Local Government Certification of Consistency with the Consolidated Plan	5 Year and Annual Plans
X	Fair Housing Documentation: Records reflecting that the PHA has examined its programs or proposed programs, identified any impediments to fair housing choice in those programs, addressed or is addressing those impediments in a reasonable fashion in view of the resources available, and worked or is working with local jurisdiction to implement any of the jurisdictions' initiatives to affirmatively further fair housing that require the PHA's involvement.	5 Year and Annual Plans
X	Consolidated Plan for the jurisdiction/s in which the PHA is located (which includes the Analysis of Impediments to Fair Housing Choice (AI)) and any additional backup data to support statement of housing needs in the jurisdiction	Annual Plan: Housing Needs
X	Most recent board -approved operating budget for the public housing program	Annual Plan: Financial Resources;
X	Public Housing Admissions and (Continued) Occupancy Policy (A&O), which includes the Tenant Selection and Assignment Plan [TSAP]	Annual Plan: Eligibility, Selection, and Admissions Policies
X	Section 8 Administrative Plan	Annual Plan: Eligibility, Selection, and Admissions Policies
X	Public Housing Deconcentration and Income Mixing Documentation: 1. PHA board certifications of compliance with deconcentration requirements (section 16(a) of the US Housing Act of 1937, as implemented in the 2/18/99 <i>Quality Housing and Work Responsibility Act Initial Guidance; Notice</i> and any further HUD guidance) and 2. Documentation of the required deconcentration and income mixing analysis	Annual Plan: Eligibility, Selection, and Admissions Policies
X	Public housing rent determination policies, including the methodology for setting public housing flat rents X check here if included in the public housing A&O Policy	Annual Plan: Rent Determination
X	Schedule of flat rents offered at each public housing development X check here if included in the public housing A&O Policy	Annual Plan: Rent Determination
X	Section 8 rent determination (payment standard) policies X check here if included in Section 8 Administrative Plan	Annual Plan: Rent Determination
X	Public housing management and maintenance policy documents, including policies for the prevention or eradication of pest infestation (including cockroach infestation)	Annual Plan: Operations and Maintenance

<b>List of Supporting Documents Available for Review</b>		
<b>Applicable &amp; On Display</b>	<b>Supporting Document</b>	<b>Applicable Plan Component</b>
X	Public housing grievance procedures X check here if included in the public housing A&O Policy	Annual Plan: Grievance Procedures
X	Section 8 informal review and hearing procedures X check here if included in Section 8 Administrative Plan	Annual Plan: Grievance Procedures
X	The HUD - approved Capital Fund/Comprehensive Grant Program Annual Statement (HUD 52837) for the active grant year	Annual Plan : Capital Needs
	Most recent CIAP Budget/Progress Report (HUD 52825) for any active CIAP grant	Annual Plan: Capital Needs
	Most recent, approved 5 Year Action Plan for the Capital Fund/Comprehensive Grant Program, if not included as an attachment (provided at PHA option)	Annual Plan: Capital Needs
	Approved HOPEVI applications or, if more recent, approved or submitted HOPEVI Revitalization Plans or any other approved proposal for development of public housing	Annual Plan: Capital Needs
	Approved or submitted applications for demolition and/or disposition of public housing	Annual Plan: Demolition and Disposition
X	Approved or submitted applications for designation of public housing (Designated Housing Plans)	Annual Plan: Designation of Public Housing
	Approved or submitted assessments of reasonable revitalization of public housing and approved or submitted conversion plans prepared pursuant to section 202 of the 1996 HUD Appropriations Act	Annual Plan: Conversion of Public Housing
	Approved or submitted public housing homeownership programs/plans	Annual Plan: Homeownership
	Policies governing any Section 8 Homeownership program <input type="checkbox"/> check here if included in the Section 8 Administrative Plan	Annual Plan: Homeownership
	Any cooperative agreement between the PHA and the TANF agency	Annual Plan: Community Service & Self - Sufficiency
	FSS Action Plan/s for public housing and/or Section 8	Annual Plan: Community Service & Self - Sufficiency
	Most recent self - sufficiency (ED/SS , TOP or ROSS or other resident services grant) grant program reports	Annual Plan: Community Service & Self - Sufficiency
	The most recent Public Housing Drug Elimination Program (PHDEP) semi - annual performance report for any open grant and most recently submitted PHDEP application (PHDEP Plan)	Annual Plan: Safety and Crime Prevention
X	The most recent fiscal year audit of the PHA conducted under section 5(h)(2) of the U.S. Housing Act of 1937 (42 U.S.C. 1437c(h)), the results of that audit and the PHA's response to any findings	Annual Plan: Annual Audit
	Troubled PHAs: MOA/Recovery Plan	Troubled PHAs
	Other supporting documents (optional) (list individually; use as many lines as necessary)	(specify as needed)

# **1.StatementofHousingNeeds**

[24CFRPart903.79(a)]

## **A.HousingNeedsofFamiliesintheJurisdiction/sServedbythePHA**

BasedupontheinformationcontainedintheConsolidatedPlan/sapplicabletothejurisdiction,and/or otherdataavailabletothePHA,provideastatementofthehousingneedsinthejurisdictionby completingthefollowingtable.Inthe“Overall”Needscolumn,providetheestimatednumberofrenter familiesthathavehousingneeds.Fortheremainingcharacteristics,ratetheimpactofthatfactoronthe housingneedsforeachfamilytype,from1to5,with1being“noimpact”and5being“severeimpact.” UseN/AtoindicatethatnoinformationisavailableuponwhichthePHAcannmakethisassessment.

<b>HousingNeedsofFamiliesintheJurisdiction byFamilyType</b>							
FamilyType	Overall	Afford- ability	Supply	Quality	Access- ibility	Size	Loca- tion
Income<=30% ofAMI	3757	5	4	3	3	5	3
Income>30%but <=50%ofAMI	4061	5	4	3	3	5	3
Income>50%but <80%ofAMI	2566	4	4	3	3	5	3
Elderly	4776	4	4	2	2	3	4
Familieswith Disabilities	5589	4	4	3	3	3	3
Race/Ethnicity	27,740	White					
Race/Ethnicity	328	Black					
Race/Ethnicity	105	AmInd					
Race/Ethnicity	420	Asian					
	918	Hisp.					
	432	Other					

WhatsourcesofinformationdidthePHAusetoconductthisanalysis?(Checkallthat apply;allmaterials mustbemadeavailableforpublicinspection.)

- X ConsolidatedPlanoftheJurisdiction/s  
Indicateyear:1995,1995 -1998,2000
- X U.S.Censusdata:theComprehensiveHousingAffordabilityStrategy  
 (“CHAS”)dataset2000
- AmericanHousingSurveydata  
Indicateyear:
- X Otherhousingmarketstudy

Indicate year: 1996 Housing Data Base Update – RIDept of Administration

X Others sources: (list and indicate year of information)  
2000 RIDepartment of Economic Development Research Division

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

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

Housing Needs of Families on the Waiting List			
Waiting list type: (select one)			
<input type="checkbox"/> Section 8 tenant-based assistance			
<input type="checkbox"/> Public Housing			
X Combined Section 8 and Public Housing			
<input type="checkbox"/> Public Housing Site-Based or sub-jurisdictional waiting list (optional)			
If used, identify which development/subjurisdiction:			
	# of families	% of total families	Annual Turnover
Waiting list total	197	100%	75%
Extremely low income <= 30% AMI	150	76%	
Very low income (> 30% but <= 50% AMI)	39	20%	
Low income (> 50% but < 80% AMI)	8	4%	
Families with children	128	65%	
Elderly families	17	9%	
Families with Disabilities	52	26%	
Race/ethnicity	182	White	
Race/ethnicity	3	Black	

Housing Needs of Families on the Waiting List			
Race/ethnicity	12	Hispanic	
Race/ethnicity			
Characteristics by Bedroom Size (Public Housing Only)			
1BR	39		
2BR	3		
3BR			
4BR			
5BR			
5+BR			
Is the waiting list closed (select one)? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
If yes:			
How long has it been closed (# of months)?			
Does the PHA expect to open the list in the PHA Plan year? <input type="checkbox"/> No <input type="checkbox"/> Yes			
Does the PHA permit specific categories of families onto the waiting list, even if generally closed? <input type="checkbox"/> No <input type="checkbox"/> Yes			

### C. Strategy for Addressing Needs

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

#### (1) Strategies

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

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

Select all that apply

- Employ effective maintenance and management policies to minimize the number of public housing units off-line
- Reduce turnover time for vacated public housing units
- Reduce time to renovate public housing units
- Seek replacement of public housing units lost to the inventory through mixed financed development
- Seek replacement of public housing units lost to the inventory through section 8 replacement housing resources

- X Maintain or increase section 8 lease -uprates by establishing payment standards that will enable families to rent throughout the jurisdiction
- X Undertake measures to ensure access to affordable housing among families assisted by the PHA, regardless of unit size required
- X Maintain or increase section 8 lease -uprates by marketing the program to owners, particularly those outside of areas of minority and poverty concentration
- Maintain or increase section 8 lease -uprates by effectively screening Section 8 applicants to increase owner acceptance of program
- Participate in the Consolidated Plan development process to ensure coordination with broader community strategies
- Other (list below)

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

Select all that apply

- X Apply for additional section 8 units should they become available
- Leverage affordable housing resources in the community through the creation of mixed -finance housing
- X Pursue housing resources other than public housing or Section 8 tenant -based assistance.
- X Other: (list below)  
Collaborate with local officials and lending institutions to determine feasibility of increasing home ownership opportunities through HOME Program

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

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

Select all that apply

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

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

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

Select all that apply

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

Other:(listbelow)

**Need:SpecificFamilyTypes:TheElderly**

**Strategy1: Targetavailableassistancetotheelderly:**

Selectallthatapply

- Seekdesignat ionofpublichousingfortheelderly
- X Applyforspecial -purposevoucherstargetedtotheelderly,shouldtheybecome available
- X Other:(listbelow)  
RespondtoNOFAforvouchersinsupportofElderlyHousing DesignationPlan

**Need:SpecificFamilyTypes :FamilieswithDisabilities**

**Strategy1: TargetavailableassistancetoFamilieswithDisabilities:**

Selectallthatapply

- Seekdesignationofpublichousingforfamilieswithdisabilities
- Carryoutthemodifications neededinpublichousingbasedonthesection504 NeedsAssessmentforPublicHousing
- X Applyforspecial -purposevoucherstargetedtofamilieswithdisabilities, shouldtheybecomeavailable
- X Affirmativelymarketlocalnon -profitagenciesthatassist familieswith disabilities
- Other:(listbelow)

**Need:SpecificFamilyTypes:Racesorethnicitieswithdisproportionatehousing needs**

**Strategy1:IncreaseawarenessofPHAresourcesamongfamiliesofracesand ethnicitieswithdispro portionateneeds:**

Selectifapplicable

- X Affirmativelymarkettoraces/ethnicitiesshowntohavedisproportionate housingneeds
- Other:(listbelow)

**Strategy2:Conductactivitiestoaffirmativelyfurtherfairhousing**

Selectallthatap ply

- X Counselection8tenantsastolocationofunitsoutsideofareasofpovertyor minorityconcentrationandassistthemtolocatethoseunits

- Market the section 8 program to owners outside of areas of poverty/minority concentrations
- Other: (list below)

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

**(2) Reasons for Selecting Strategies**

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

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

**2. Statement of Financial Resources**

[24 CFR Part 903.79(b)]

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

<b>Financial Resources: Planned Sources and Uses</b>		
<b>Sources</b>	<b>Planned \$</b>	<b>Planned Uses</b>
<b>1. Federal Grants (FY 2003 grants)</b>		
a) Public Housing Operating Fund	381,436	
b) Public Housing Capital Fund	307,864	
c) HOPE VI Revitalization		
d) HOPE VI Demolition		



<b>Financial Resources: Planned Sources and Uses</b>		
<b>Sources</b>	<b>Planned \$</b>	<b>Planned Uses</b>
e) Annual Contributions for Section 8 Tenant -Based Assistance	578,490	HAP Payments/Admin Expenses
f) Public Housing Drug Elimination Program (including any Technical Assistance funds)		
g) Resident Opportunity and Self - Sufficiency Grants		
h) Community Development Block Grant	20,000	
i) HOME		
Other Federal Grants (list below)		
<b>2. Prior Year Federal Grants (unobligated funds only) (list below)</b>		
RI43P015501-02	307,864	CFP
<b>3. Public Housing Dwelling Rental Income</b>	743,310	PH Operations
<b>4. Other income (list below)</b>	26,606	PH Operations S8
General Fund Investments -Interest	3,964	PH Operations, S8
Excess Utilities	4,380	PH Operations
<b>4. Non -federal sources (list below)</b>		
<b>Total resources</b>	<b>2,373,914</b>	

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

[24CFR Part 903.79(c)]

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

**(1) Eligibility**

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

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

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

- X Criminal or Drug-related activity
- X Rental history
- Housekeeping
- X Other (describe)  
Immigration and Naturalization Checks, Prior history in housing programs

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

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

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

**(2) Waiting List Organization**

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

- X Community-wide list
- Sub-jurisdictional lists
- Site-based waiting lists
- Other (describe)

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

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

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

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

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

3.  Yes  No: May families be on more than one list simultaneously? If yes, how many lists?

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

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

**(3) Assignment**

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

- One
- Two
- Three or More

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

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

**(4) Admissions Preferences**

a. Income targeting:

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

b. Transfer policies:

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

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

c. Preferences

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

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

Former Federal preferences:

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

Other preferences: (select below)

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

Service connected disabled veterans in accordance with RILaw

3. If the PHA will employ admissions preferences, please prioritize by placing a "1" in the space that represents your first priority, a "2" in the box representing your second priority, and so on. If you give equal weight to one or more of these choices (either

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

#### Date and Time

#### Former Federal preferences:

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

#### Other preferences (select all that apply)

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

#### 4. Relationship of preferences to income targeting requirements:

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

### **(5) Occupancy**

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

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

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

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

**(6) Dec oncentration and Income Mixing**

- a.  Yes  No: Did the PHA's analysis of its family (general occupancy) development to determine concentrations of poverty indicate the need for measures to promote deconcentration of poverty or income mixing?  
See Attachment C
- b.  Yes  No: Did the PHA adopt any changes to its **admissions policies** based on the results of the required analysis of the need to promote deconcentration of poverty or to assure income mixing?
- c. If the answer to b was yes, what changes were adopted? (select all that apply)
- Adoption of site -based waiting lists  
If selected, list targeted developments below:
  - Employing waiting list "skipping" to achieve deconcentration of poverty or income mixing goals at targeted developments  
If selected, list targeted developments below:  
RI-015-001, RI -015-003
  - Employing new admission preferences at targeted developments  
If selected, list targeted developments below:
  - Other (list policies and development targeted below)
- d.  Yes  No: Did the PHA adopt any changes to **other** policies based on the results of the required analysis of the need for deconcentration of poverty and income mixing?
- e. If the answer to d was yes, how would you describe these changes? (select all that apply)
- 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)

X 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)

X 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)

- X Criminal and 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)
- X Other (list below)  
Immigration and Naturalization Checks

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

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

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

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

- Criminal or drug-related activity  
 Other (describe below)  
Previous history if known to us

**(2) Waiting List Organization**

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

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

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

- PHA main administrative office  
 Other (list below)

**(3) Search Time**

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

If yes, state circumstances below:

Applicant effort to find housing

Applicant has medical reason or other reason beyond applicant's control

**(4) Admissions Preferences**

a. Income targeting

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

b. Preferences

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



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

Former Federal preferences

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

Other preferences (select all that apply)

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

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

Date and Time

Former Federal preferences

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

Other preferences (select all that apply)

- 1 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
- 1 Those enrolled currently in educational, training, or upward mobility programs
- Household that contribute to meeting income goals (broad range of incomes)
- 1 Household that contribute to meeting income requirements (targeting)
- Those previously enrolled in educational, training, or upward mobility programs
- Victims of reprisals or hate crimes
- Other preference(s) (list below)

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

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

5. If the PHA plan 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

No plan to employ resident preference.

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

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

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

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

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

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

- X Through published notices
- Other (list below)

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

[24CFR Part 903.79(d)]

### **A. Public Housing**

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

#### **(1) Income Based Rent Policies**

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

a. Use of discretionary policies: (select one)

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

---or---

X The PHA employs discretionary policies for determining income based rent (If selected, continue to question b.)  
Minimum Rent and Flat Rent

b. Minimum Rent

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

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

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

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

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

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

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

Flat Rent Schedule if by Tenant Choice

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

For the earned income of a previously unemployed household member

For increases in earned income

Fixed amount (other than general rent -setting policy)

If yes, state amount/s and circumstances below:

Tenant choice to pay Flat Rent

Minimum Rent Hardship Exceptions

Fixed percentage (other than general rent -setting policy)

If yes, state percentage/s and circumstances below:

For household heads

For other family members

For transportation expenses

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

Other (describe below)

e. Ceiling rents

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

Yes for all developments

Yes but only for some developments

No

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

For all developments

For all general occupancy developments (not elderly or disabled or elderly only)

For specified general occupancy developments

- For certain parts of developments; e.g., the high-rise portion
- For certain size units; e.g., larger bedroom sizes
- Other (list below)

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

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

f. Rent re-determinations:

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

- Never
- At family option
- X Anytime the family experiences an income increase
- Anytime a family experiences an income increase above a threshold amount or percentage: (if selected, specify threshold) \_\_\_\_\_
- X Other (list below)  
Changes required to be reported within 10 days of change

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

**(2) Flat Rents**

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

- X The section 8 rent reasonableness study of comparable housing
- X Survey of rents listed in local newspaper
- X Survey of similar unassisted units in the neighborhood

Other(list/describe below)

## **B. Section 8 Tenant -Based Assistance**

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

### **(1) Payment Standards**

Describe the voucher payment standards and policies .

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

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

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

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

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

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

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

- X Annually
- Other (list below)

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

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

CHAS information  
Market rents in area

## **(2) Minimum Rent**

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

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

b.  Yes  No: Has the PHA adopted any discretionary minimum rent hardship exemption policies? (if yes, list below)

## **5. Operations and Management**

[24CFR Part 903.79(e)]

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

### **A. PHA Management Structure**

Describe the PHA's management structure and organization.

(select one)

- An organization chart showing the PHA's management structure and organization is attached.
- X A brief description of the management structure and organization of the PHA follows: The PHA is governed by a 5 member Board of Commissioners who are appointed by the local governing body, the Town Council. Appointments are generally for a five year term; one term expires each year. Staffing consists of the Executive Director, an Assistant Director, a Senior Housing Specialist, two Housing Specialists, a Maintenance Working Foreman and two Maintenance Mechanic Aides. The PHA has owned and operates 250 units of Elderly Housing and administers a 97 unit Housing Voucher Program. Administrative offices are located within one project with a part time office at the second project.

### **B. HUD Programs Under PHA Management**

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

<b>Program Name</b>	<b>Units or Families Served at Year Beginning</b>	<b>Expected Turnover</b>
Public Housing	250	25%
Section 8 Vouchers	97	27%
Section 8 Certificates		
Section 8 Mod Rehab	N/A	N/A
Special Purpose Section 8 Certificates/Vouchers (list individually)	N/a	N/A
Public Housing Drug Elimination Program (PHDEP)	N/A	N/A
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 Occupancy Policy
- Dwelling Lease
- Pet Policy Addendum to Lease
- One Strike and You're Out Policy
- Fire Evacuation Plan
- Resident Handbook
- Maintenance Plan (includes pest control procedures which are provided by vendor contract)
- Grievance Policy
- RI Board of Tenants' Affairs



RILandlord/TenantLaw  
(2)Section8Management:(listbelow)  
Section8AdministrativePlan

**6. PHA Grievance Procedures**

[24CFRPart903.79(f)]

Exemptionsfromcomponent6:HighperformingPHAsarenotrequiredtocompletecomponent6.  
Section8 -OnlyPHAsareexemptfromsub -component6A.

**A. Public Housing**

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

If yes, list additions to federal requirements below:

Rhode Island includes a Board of Tenants' Affairs. Residents are provided the opportunity to apply for a hearing before this board prior to any legal action by the PHA

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

- X  PHA main administrative office  
 PHA development management offices  
X  Other (list below)  
Chairperson, Board of Tenants' Affairs  
West Warwick Town Hall

**B. Section 8 Tenant -Based Assistance**

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

If yes, list additions to federal requirements below:

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

- X  PHA main administrative office  
 Other (list below)

## **7. Capital Improvement Needs**

[24CFR Part 903.79(g)]

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

### **A. Capital Fund Activities**

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

#### **(1) Capital Fund Program Annual Statement**

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

Select one:

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

-or-

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

#### **(2) Optional 5 -Year Action Plan**

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

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

b. If yes to question a, select one:

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

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

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

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

1. Development name:

2. Development (project) number:

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

- Revitalization Plan under development  
 Revitalization 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 HOPEVI revitalization grant in the Plan year?  
If yes, list development name/s below:

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

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

## **8. Demolition and Disposition**

[24 CFR Part 903.79(h)]

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

1.  Yes  No: DoesthePHAplantoconductanydemolitionordisposition activities(pursuanttosection18oftheU.S.HousingActof 1937(42U .S.C.1437p))intheplanFiscalYear?(If“No”, skiptocomponent9;if“yes”,completeoneactivitydescription foreachdevelopment.)

2. Activity Description

Yes  No: HasthePHAprovidedtheactivitiesdescrip tioninformationin the **optional**PublicHousingAssetManagementTable?(If “yes”,skiptocomponent9.If“No”,completetheActivity Descriptiontablebelow.)

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

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

[24 CFR Part 903.79(i )]

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

1.  Yes  No: HasthePHA designated or applied for approval to designate or doesthePHAplantoapply to designate any public housing for occupancy only by the elderly families or only by families with disabilities, or by elderly families and families with disabilities or will apply for designation for occupancy by only elderly

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

**2. Activity Description**

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

<b>Designation of Public Housing Activity Description</b>	
1a. Development name:	West Warwick Manor and Clyde Tower
1b. Development (project) number:	RI -015-001 and RI -015-003
2. Designation type:	<input checked="" type="checkbox"/> Occupancy by only the elderly <input type="checkbox"/> Occupancy by families with disabilities <input type="checkbox"/> Occupancy by only elderly families and families with disabilities
3. Application status (select one)	<input checked="" type="checkbox"/> Approved; included in the PHA's Designation Plan <input type="checkbox"/> Submitted, pending approval <input type="checkbox"/> Planned application
4. Date this designation approved, submitted, or planned for submission:	(01/06/99)
5. If approved, will this designation constitute a (select one)	<input type="checkbox"/> New Designation Plan <input type="checkbox"/> Revision of a previously approved Designation Plan?
6. Number of units affected:	250
7. Coverage of action (select one)	<input type="checkbox"/> Part of the development <input checked="" type="checkbox"/> Total development

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

[24 CFR Part 903.79(j)]

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

**A. Assessments of Reasonable Revitalization Pursuant to section 202 of the HUD FY1996 HUD Appropriations Act**

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

2. Activity Description

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

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

Other: (describe below)

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

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

## **11. Homeownership Programs Administered by the PHA**

[24CFR Part 903.79(k)]

### **A. Public Housing**

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

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

### 2. Activity Description

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

<b>Public Housing Homeownership Activity Description (Complete one for each development affected)</b>
1a. Development name:
1b. Development (project) number:

<p>2. Federal Program authority:</p> <p><input type="checkbox"/> HOPEI</p> <p><input type="checkbox"/> 5(h )</p> <p><input type="checkbox"/> Turnkey III</p> <p><input type="checkbox"/> Section 32 of the USHA of 1937 (effective 10/1/99)</p>
<p>3. Application status: (select one)</p> <p><input type="checkbox"/> Approved; included in the PHA's Homeownership Plan/Program</p> <p><input type="checkbox"/> Submitted, pending approval</p> <p><input type="checkbox"/> Planned application</p>
<p>4. Date Homeownership Plan/Program approved, submitted, or planned for submission: (DD/MM/YYYY)</p>
<p>5. Number of units affected:</p> <p>6. Coverage of action: (select one)</p> <p><input type="checkbox"/> Part of the development</p> <p><input type="checkbox"/> Total development</p>

## B. Section 8 Tenant Based Assistance

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

### 2. Program Description:

#### a. Size of Program

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

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

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

#### b. PHA -established eligibility criteria



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

If yes, list criteria below:

## **12. PHA Community Service and Self -sufficiency Programs**

[24CFR Part 903.79(1)]

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

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

1. Cooperative agreements:

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

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

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

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

### **B. Services and programs offered to residents and participants**

#### **(1) General**

a. Self -Sufficiency Policies

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

- Public housing rent determination policies
- Public housing admissions policies
- Section 8 admissions policies
- Preference in admission to section 8 for certain public housing families

- X Preferences for families working or engaging in training or education programs for non-housing programs operated or coordinated by the PHA
- Preference/eligibility for public housing home ownership option participation
- Preference/eligibility for section 8 home ownership option participation
- Other policies (list below)

b. Economic and Social self-sufficiency programs

Yes X No: Does the PHA coordinate, promote or provide any program 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)

**(2) Family Self Sufficiency program/s**

a. Participation Description

Family Self Sufficiency (FSS) Participation		
Program	Required Number of Participants (start of FY 2000 Estimate)	Actual Number of Participants (As of: DD/MM/YY)
Public Housing	0	0

Section 8	0	0

- 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 plan to take to achieve at least the minimum program size?  
If no, list steps the PHA will take below:

### C. Welfare Benefit Reductions

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

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

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

### 13. PHA Safety and Crime Prevention Measures

[24CFR Part 903.79(m)]

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

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

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

- High incidence of violent and/or drug -related crime in some or all of the PHA's developments
- High incidence of violent and/or drug -related crime in the area surrounding or adjacent to the PHA's developments
- Residents fearful for their safety and/or the safety of their children
- Observed lower -level crime, vandalism and/or graffiti
- People on waiting list unwilling to move into one or more developments due to perceived and/or actual levels of violent and/or drug -related crime
- Other (describe below)  
RI Law requires safety and security protocols in initial and ongoing resident education and information and certain physical and equipment requirements to safeguard the buildings. The law is governed by the State Department of Elderly Affairs to whom a report is filed annually.

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

- Safety and security survey of residents
- Analysis of crime statistics over time for crimes committed "in and around" public housing authority
- Analysis of cost trends over time for repair of vandalism and removal of graffiti
- Resident reports
- PHA employee reports
- Police reports
- Demonstrable, quantifiable success with previous or ongoing anti crime/anti drug programs
- Other (describe below)  
Educational programs with Police and Fire Departments and State Attorney General Consumer Education Division. Information handouts from AARP, AAA, and other sources.

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

Ongoing programs are required in Projects RI -015-001 and 003

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

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

- 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)  
Local police and fire departments, RI Attorney General Consumer Education

Division programs

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

RI-015-001 and RI -015-003

**C. Coordination between PHA and the police**

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

- Police involvement in development, implementation, and/or ongoing evaluation of drug -elimination plan
- X  Police provide crime data to housing authority staff for analysis and action
- Police have established a physical presence on housing authority property (e.g., community policing office, officer in residence)
- Police regularly testify in and otherwise support eviction cases
- 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)

RI-015-001 and RI -015-003

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

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

- Yes X  No: Is the PHA eligible to participate in the PHDEP in the fiscal year covered by this PHA Plan?
- Yes X  No: Has the PHA included the PHDEP Plan for FY2000 in this PHA Plan?
- Yes X  No: This PHDEP Plan is an Attachment. (Attachment Filename: \_\_\_\_\_)

**14. RESERVED FOR PET POLICY**

[24 CFR Part 903.79(n)]

**15. Civil Rights Certifications**

[24CFRPart903.79(o)]

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

## **16.Fiscal Audit**

[24CFRPart903.79(p)]

1.  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**

[24CFRPart903.79(q)]

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

1.  Yes  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 type 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**

[24CFR Part 903.79(r)]

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

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

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

Attached at Attachment (Filename)

X Provided below:

In agreement with plans as developed and presented at Public Hearing.

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

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

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

X Other: (list below) Agreed with plans as developed

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

1. X 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.)

A Resident is on the Board of Commissioners. She was appointed by the Town Council after submitting a letter of interest to the Town.

2.  Yes X  No: Was there a resident who serves on the PHA Board elected by the residents? (If yes, continue to question 3; if no, skip to sub-component C.)

3. Description of Resident Election Process

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

Candidates were nominated by resident and assisted family organizations

Candidates could be nominated by any adult recipient of PHA assistance

Self-nomination: Candidates registered with the PHA and requested a place on ballot

Other: (describe)

b. Eligible candidates: (select one)

Any recipient of PHA assistance

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

c. Eligible voters: (select all that apply)

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

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

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

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

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

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

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

The State of Rhode Island Consolidated Plan 2000 -2005 supports the PHA Plan through a dual commitment to expanding affordable rental housing opportunities for extremely low and low -income persons.

**D. Other Information Required by HUD**

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



## Attachments

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

### Attachment 1: IMPLEMENTATION OF COMMUNITY SERVICE REQUIREMENTS:

Public Housing units are occupied by Elderly, Handicapped, or Disabled Families. Therefore, the residents meet criteria for an exemption and are not required to participate in community service and/or economic self-sufficiency activities.

### Attachment 2: PET OWNERSHIP

The PHA units are occupied by Elderly, Handicapped, or Disabled Families. A Pet Policy was developed in 1987 and adopted by the Board of Commissioners after a 30-60 day comment period for the residents and are reviewed by the Board of Tenants' Affairs. The Policy has become an Addendum to the Dwelling Lease and is referenced in the Dwelling Lease. The Policy outlines the amount and kinds of pets allowed, licensing and vet requirements where applicable, spaying or neutering requirements, pet deposit requirements, provision for the name of a contact person to take responsibility of the pet in the event of incapacity or death of the owner, etc. There are also provisions to outline notice procedures of violations of the pet policy, review and hearing rights of the owner, and termination procedures that include removal of pet from property or termination of tenancy.

### Attachment 3: Progress in meeting mission and goals:

The PHA continues to manage units under its management with sound programs of fiscal management, preventive maintenance, and capital fund improvements.

There is an ongoing, perpetual need to review and update automated operations to keep pace with HUD industry and general computer industry upgrades and improvements. Extensive and intensive training has been implemented for the staff to ensure that each member is comfortable and providing satisfactory performance given individual capabilities and willingness to learn about the electronic age of information. System security measures have been put in place, i.e., anti-virus software on automode and firewall installation.

The preventive maintenance program, as described in the Maintenance Plan, is still under review and change. Additional services provided to the residents will be implemented as reviewed and adopted by the Board of Commissioners.

Initial discussions have taken place with local service agencies and the local government concerning the expansion of affordable housing opportunities in the community. Efforts will focus on working families. Local service agencies will be developers; PHA will manage units and residents. PHA will seek project based assistance funding.

### **Attachment 4: Resident Membership of the PHA Governing Board**

**A Public Housing Resident was appointed by the West Warwick Town Council in November, 2000 to serve a 5 year term on the Board**

**of Commissioners. All residents were notified of the opening on the Board of Commissioners and encouraged to submit a letter of interest to local government that they or she would like to be appointed to the Board of Commissioners. The appointee is Mrs. Helen Mitchell who resides in the West Warwick Manor, Project RI -015-001,62 Robert St., West Warwick, RI.**

**Attachment 5: Membership of the Resident Advisory Board**

**The Resident Advisory Board consists of five members. There are three public housing residents (Rita Pollitt, Leo Joyal, and Emma da Corte) and two Section 8 program participants (Sharon Murdock and (additional volunteer)). These members volunteered to serve on the Board after the PHA sought membership involvement by direct mailing or notification to each resident or program participant.**

**PHA Plan  
Table Library**

**ATTACHMENT A**

**Component 7**

**Capital Fund Program Annual Statement  
Parts I, II, and III**

**Annual Statement**

**Capital Fund Program (CFP) Part I: Summary**

Capital Fund Grant Number RI43P01550103

FFY of Grant Approval: (09/2002)

X Original Annual Statement

Line No.	Summary by Development Account	Total Estimated Cost
1	Total Non - CGP Funds	
2	1406 Operations	
3	1408 Management Improvements	
4	1410 Administration	
5	1411 Audit	
6	1415 Liquidated Damages	
7	1430 Fees and Costs	75,000
8	1440 Site Acquisition	
9	1450 Site Improvement	

10	1460 Dwelling Structures	232,864
11	1465.1 Dwelling Equipment -Nonexpendable	
12	1470 Nondwelling Structures	
13	1475 Nondwelling Equipment	
14	1485 Demolition	
15	1490 Replacement Reserve	
16	1492 Moving to Work Demonstration	
17	1495.1 Relocation Costs	
18	1498 Mod Used for Development	
19	1502 Contingency	
20	<b>Amount of Annual Grant (Sum of lines 2 -19)</b>	307,864
21	Amount of line 20 Related to LBP Activities	
22	Amount of line 20 Related to Section 504 Compliance	
23	Amount of line 20 Related to Security	
24	Amount of line 20 Related to Energy Conservation Measures	

**AnnualStatement**  
**CapitalFundProgram(CFP)PartII:SupportingTable**

Development Number/Name HA-WideActivities	GeneralDescriptionofMajorWork Categories	Development Account Number	Total Estimated Cost
HAWide	Architect/Engineer	1430	75,000
RI-015-001	SprinklerSystem	1460	225,000
<i>RI-105-003</i>	Sprinkler System	1460	7,864

**AnnualStatement  
CapitalFundProgram(CFP)PartIII:ImplementationSchedule**

Development Number/Name HA-WideActivities	AllFundsObligated (QuarterEndingDate)	AllFundsExpended (QuarterEndingDate)
HA Wide	12-31-2004	06-30-2005
RI-015-001	12-31-2004	06-30-2005
RI-015-003	12-31-2004	06-30-2005

## ATTACHMENT B

### 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 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.

Optional 5 -Year Action Plan Tables				
Development Number	Development Name (or indicate PHA wide)	Number Vacant Units	% Vacancies in Development	
RI-015-001	West Warwick Manor	2	2%	
Description of Needed Physical Improvements or Management Improvements			Estimated Cost	Planned Start Date (HA Fiscal Year)
Install Sprinkler System			225,000	2003
Replace Heating System			256,000	2004
Exterior Brick Replacement			150,000	2005
Exterior Brick Replacement			150,000	2006
Exterior Brick Replacement			150,000	2007
Total estimated cost over next 5 years			931,000	

### 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.

Optional 5 - Year Action Plan Tables				
Development Number	Development Name (or indicate PHA wide)	Number Vacant Units	% Vacancies in Development	
RI-015-003	Clyde Tower	6	5%	
Description of Needed Physical Improvements or Management Improvements			Estimated Cost	Planned Start Date (HA Fiscal Year)
Installation of Sprinkler System			7,864	2003
Installation of Sprinkler System			51,864	2004
Installation of Sprinkler System/Replace Low -Rise Windows			157,864	2005
Second Entrance/Expanded Parking and Site Lighting/New Lighting in Kitchens and Baths			157,864	2006
Replace Patio Door Assemblies/Low Rise			157,864	2007
<b>Total estimated cost over next 5 years</b>			<b>533,320</b>	



## 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.

Optional 5 - Year Action Plan Tables				
Development Number	Development Name (or indicate PHA wide)	Number Vacant Units	% Vacancies in Development	
RI-015	HA Wide			
Description of Needed Physical Improvements or Management Improvements			Estimated Cost	Planned Start Date (HA Fiscal Year)
Architect/Engineer			75,000	2003
<b>Total estimated cost over next 5 years</b>			<b>75,000</b>	

**PHAPlan**  
**TableLibrary**  
**ATTACHMENTA**  
**Component7**  
**CapitalFundProgramAnnualStatement**  
**PartsI,II,andII**

AnnualStatement/PerformanceandEvaluationReport					
CapitalFundProgramandCapitalFundProgramReplacementHousingFactor(CFP/CFPRHF)PartI:Su mmary					
PHAName: WestWarwickHousingAuthority		GrantTypeandNumber CapitalFundProgramGrantNo: RI43P015 -50103 ReplacementHousingFactorGrantNo:		FederalFYofGrant: 2003	
<input checked="" type="checkbox"/> OriginalAnnualStatement <input type="checkbox"/> ReserveforDisasters/Emergencies <input type="checkbox"/> RevisedAnnualStatement(revisionno:    )					
<input type="checkbox"/> PerformanceandEvaluationReportforPeriodEnding: <input type="checkbox"/> FinalPerformanceandEvalua tionReport					
Line No.	SummarybyDevelopmentAccount	TotalEstimatedCost		TotalActualCost	
		Original	Revised	Obligated	Expended
1	Totalnon -CFPFunds				
2	1406Operations	0			
3	1408ManagementImprovements	0			
4	1410Administration	0			
5	1411Audit	0			
6	1415LiquidatedDamages	0			
7	1430FeesandCosts	75,000			
8	1440SiteAcquisition	0			
9	1450SiteImprovement	0			
10	1460DwellingStructures	232,864			
11	1465.1DwellingEquipment —Nonexpendable	0			
12	1470NondwellingStruct ures				
13	1475NondwellingEquipment	0			
14	1485Demolition	0			
15	1490ReplacementReserve	0			
16	1492MovingtoWorkDemonstration	0			
17	1495.1RelocationCosts	0			
18	1499DevelopmentActivities	0			
19	1501CollaterizationorDebtService	0			
20	1502Contingency	0			
21	AmountofAnnualGrant:(sumoflines2 –20)	307,864			
22	Amountoffline21RelatedtoLBPActivities	0			
23	Amountoffline21RelatedtoSection504compliance	0			
24	Amountoffline21RelatedtoSecurity –SoftCosts	0			
25	AmountofLine21RelatedtoSecurity –HardCosts	0			
26	Amountoffline21RelatedtoEnergyConservation	0			

<b>Annual Statement/Performance and Evaluation Report</b>					
<b>Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I: Summary</b>					
PHAName: West Warwick Housing Authority		Grant Type and Number Capital Fund Program Grant No: RI43P015 -50103 Replacement Housing Factor Grant No:		Federal FY of Grant: <b>2003</b>	
<input checked="" type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:    )					
<input type="checkbox"/> Performance and Evaluation Report for Period Ending: <input type="checkbox"/> Final Performance and Evaluation Report					
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
	Measures				





**PHAPlan  
TableLibrary  
ATTACHMENTB  
Component7**

**CapitalFundProgramFive -YearActionPlan**

PartI:Summary

PHAName		WestWarwickHousingAuthority		<input checked="" type="checkbox"/> Original5 -YearPlan <input type="checkbox"/> RevisionNo:	
Development Number/Name/H A-Wide	Year1 2003	WorkStatementforYear2 FFYGrant:2004 PHAFY:2004	WorkStatementforYear3 FFYGrant:2005 PHAFY:2005	WorkStatementfor Year4 FFYGrant:2006 PHAFY:2006	WorkStatementfor Year5 FFYGrant:2007 PHAFY:2007
	Annual Stateme nt				
RI-015-001		256,000	150,000	150,000	150,000
RI-015-003		51,864	157,864	157,864	157,864
CFPFundsListed for5 -year planning		307,864	307,864	307,864	307,864
Replacement HousingFactor Funds					

CapitalFundProgramFive -YearActionPlan

**PartII:SupportingPages —WorkActivities**

Activities for Year1	ActivitiesforYear:_2_ _ FFYGrant:2003 PHAFY:2003			ActivitiesforYear:_3_ _ FFYGrant:2004 PHAFY:2004		
	<b>Development Name/Number</b>	<b>MajorWork Categories</b>	<b>EstimatedCost</b>	<b>Development Name/Number</b>	<b>MajorWork Categories</b>	<b>EstimatedCost</b>
See Annual Statement	RI-015-001	ReplaceHeatingSystem	256,000	RI-015-001	ExteriorBrick Replacement	150,000
	RI-015-003	InstallationofSprinkler System	51,864	RI-015-003	InstallationofSprinkler System/ReplaceLow RiseWindows	157,864
TotalCFPEstimatedCost			\$307,864			\$307,864

CapitalFundProgramFive -YearActionPlan

**PartII: SupportingPages —WorkActivities**

Activities for Year1	ActivitiesforYear:_4_ __ FFYGrant:2005 PHAFY:2005			ActivitiesforYear:_5__ FFYGrant:2006 PHAFY:2006		
	<b>Development Name/Number</b>	<b>MajorWork Categories</b>	<b>EstimatedCost</b>	<b>Development Name/Number</b>	<b>MajorWork Categories</b>	<b>EstimatedCost</b>
See						
	RI-015-001	ExteriorBrick Replacement	150,000	RI-015-001	ExteriorBrick Replacement	150,000
Statement						
	RI-015-003	Second Entrance/Expanded ParkingandSite Lighting/NewL ighting inKitchensandBaths	157,864	RI-015-003	ReplacePatioDoor AssembliesatLowRise	157,864
	<b>TotalCFPEstimatedCost</b>		\$307,864			\$307,864



**ATTACHMENT C**

**Component 3,(6) Deconcentration and Income Mixing**

- a.  Yes  No: Does the PHA have any general occupancy (family) public housing developments covered by the deconcentration rule? If no, this section is complete. If yes, continue to the next question.
- b.  Yes  No: Do any of these covered developments have average incomes above or below 85% to 115% of the average incomes of all such developments? If no, this section is complete.

If yes, list these developments as follows:

<b>Deconcentration Policy for Covered Developments</b>			
<b>Development Name :</b>	<b>Number of Units</b>	<b>Explanation (if any) [see step 4 at §903.2(c)(1)(iv)]</b>	<b>Deconcentration policy (if no explanation) [see step 5 at §903.2(c)(1)(v)]</b>

**ATTACHMENT D**

**Component 10(B) Voluntary Conversion Initial Assessments**

- a. How many of the PHA's developments are subject to the Required Initial Assessments? None
- b. How many of the PHA's developments are not subject to the Required Initial Assessments based on exemptions (e.g., elderly and/or disabled developments not general occupancy projects)? Two – Projects RI -015-001, West Warwick Manor and RI-015-003, Clyde Tower
- c. How many Assessments were conducted for the PHA's covered developments?

d. Identify PHA developments that may be appropriate for conversion based on the Required Initial Assessments:

<b>Development Name</b>	<b>Number of Units</b>

- a. If the PHA has not completed the Required Initial Assessments, describe the status of these assessments:

Both of four projects are exempt, e.g., elderly and/or disabled developments not general occupancy developments

**ATTACHMENTE**

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

PHAName: West Warwick Housing Authority	Grant Type and Number Capital Fund Program Grant No: RI43P015-50101 Replacement Housing Factor Grant No:	Federal FY of Grant: 2001
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Original Annual Statement    Reserve for Disasters/Emergencies    Revised Annual Statement (revision no:      )  
Performance and Evaluation Report for Period Ending: X Final Performance and Evaluation Report

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total Non -CFP Funds	0		0	0
2	1406 Operations	0		0	0
3	1408 Management Improvements	0		0	0
4	1410 Administration	0		0	0
5	1411 Audit	0		0	0
6	1415 Liquidated Damages	0		0	0
7	1430 Fees and Costs	0		0	0
8	1440 Site Acquisition	0		0	0
9	1450 Site Improvement	0		0	0
10	1460 Dwelling Structures	323,569		323,569	323,569
11	1465.1 Dwelling Equipment — Nonexpendable	0		0	0
12	1470 Nondwelling Structures	0		0	0
13	1475 Nondwelling Equipment	0		0	0
14	1485 Demolition	0		0	0
15	1490 Replacement Reserve	0		0	0
16	1492 Moving to Work Demonstration	0		0	0
17	1495.1 Relocation Costs	0		0	0
18	1499 Development Activities	0		0	0
19	1501 Collateralization or Debt Service	0		0	0
20	1502 Contingency	0		0	0
21	Amount of Annual Grant: (sum of lines 2 – 20)	323,569		323,569	323,569
22	Amount of line 21 Related to LBP Activities	0		0	0
23	Amount of line 21 Related to Section 504 compliance	0		0	0
24	Amount of line 21 Related to Security — Soft Costs	0		0	0
25	Amount of Line 21 Related to Security — Hard Costs	0		0	0
26	Amount of line 21 Related to Energy Conservation Measures	0		0	0



