

# PHAPlans

5-YearPlanforFiscalYears2000 -2004  
AnnualPlanforFiscalYear2003

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

**PHA Plan  
Agency Identification**

**PHAName: Granger Housing Authority**

**PHANumber: TX281**

**PHAFiscalYearBeginning: January 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

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

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

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

**5-YEAR PLAN**  
**PHAF ISCAL YEARS 2000 -2004**  
[24CFRPart903.5]

**A.Mission**

- X** 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.

**B.Goals**

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

- X** PHA Goal: Expand the supply of assisted housing  
Objectives:  
\_\_\_ 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  
\_\_\_ Other (list below)
- X** PHA Goal: Improve the quality of assisted housing  
Objectives:  
**X** \_\_\_ Improve public housing management: (PHAS score) high performer  
\_\_\_ Improve voucher management: (SEMAP score)  
**X** \_\_\_ Increase customer satisfaction:  
\_\_\_ Concentrate one effort to improve specific management functions:  
(list; e.g., public housing finance; voucher unit inspections)  
**X** \_\_\_ Renovate or modernize public housing units:  
\_\_\_ Demolish or dispose of obsolete public housing:  
\_\_\_ Provide replacement public housing:  
\_\_\_ Provide replacement vouchers:  
\_\_\_ Other: (list below)

\_\_\_ PHAGoal:Increase assistedhousingchoices

Objectives:

- \_\_\_ Providevoucher mobilitycounseling:
- \_\_\_ Conductoutreacheffortstopotentialvoucherlandlords
- \_\_\_ Increasevoucherpaymentstandards
- \_\_\_ Implementvoucherhomeownershipprogram:
- \_\_\_ Implementpublic housingorotherhomeownershipprograms:
- \_\_\_ Implementpublichousing site -basedwaitinglists:
- \_\_\_ Convertpublichousingtovouchers:
- \_\_\_ Other:(listbelow)

### **HUDStrategicGoal:Improvecommunityqualityoflifeandeconomicvitality**

\_\_\_ PHAGoal:Providean improvedlivingenvironment

Objectives:

- Implementmeasurestode -concentratepovertybybringinghigherincome publichousinghouseholdstolowerincomedevelopments:
- Implementmeasurestopromoteincomemixinginpublic housingby assuringaccessforlowerincomefamiliesinto higherincome developments:
- \_\_\_ Implementpublichousingsecurityimprovements:
- \_\_\_ Designateddevelopmentsorbuildingsforparticularresidentgroups (elderly, personswithdisabilities)
- \_\_\_ Other:(listbelow)

### **HUDStrategicGoal:Promoteself -sufficiencyandassetdevelopmentoffamilies andindividuals**

PHAGoal:Promoteself -sufficiencyandassetdevelopmentofassisted households

Objectives:

- \_\_\_ Increasethenumberand percentageofemployedpersonsinassisted families:
- \_\_\_ Provideorattractsupportiveservicestoimproveassistancerecipients' employability:
- Provideorattractsupportiveservicestoincreaseindependenceforthe elderlyorfamilieswithdis abilities.
- \_\_\_ Other:(listbelow)

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

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

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

The Granger Housing Authority's first objective is to provide decent, safe and affordable housing for all families, including the elderly and disabled. We intend to improve the overall appearance of the development, and encourage equal opportunities for all residents.

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

**AnnualPlanType:**

**StandardPlan**

**StreamlinedPlan:**

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

**TroubledAgencyPlan**

**ExecutiveSummaryoftheAnnualPHAPlan**

AnnualPlan  
Tableof  
Contents

All Housing Authority Policies have been adopted by the Board, and are being implemented.

**TableofContents**

**AnnualPlan**

ExecutiveSummary

i. TableofContents

HousingNeeds

1. FinancialResources
2. PoliciesonEligibility,SelectionandAdmissions
3. RentDeterminationPolicies
4. OperationsandManagementPolicies
5. GrievanceProcedures
6. CapitalImprovementNeeds
7. DemolitionandDisposition
8. DesignationofHousing
9. ConversionsofPublicHousing

10. Homeownership

11. CommunityServicePrograms
12. CrimeandSafety
13. Pets(InactiveforJanuary1PHAs)
14. CivilRi ghtsCertifications(includedwithPHAPlanCertifications)
15. Audit
16. AssetManagement
17. OtherInformation

**Attachments**

Required Attachments:

- Admissions Policy for Deconcentration
- FY2003 Capital Fund Program Annual Statement
- FY2002 & 2001 Capital Fund Program Progress Reports
- Most recent board -approved operating budget (Required Attachment for PHA that are troubled or at risk of being designated troubled ONLY)

Optional Attachments:

- PHA Management Organizational Chart
  - FY2000 Capital Fund Program 5 Year Action Plan
  - Public Housing Drug Elimination Program (PHDEP) Plan
  - Comments of Resident Advisory Board or Boards (must be attached if not included in PHA Plan text)
  - Other (List below, providing each attachment name)
- See list included in Plan, page 44 (Attachments mailed to Memphis)

**Supporting Documents Available for Review**

**List of Supporting Documents Available for Review**

Applicable & On Display	Supporting Document	Applicable Plan Component
X	PHA Plan Certifications of Compliance with the PHA Plans and Related Regulations	5 Year and Annual Plans
X	State/Local Government Certification of Consistency with the Consolidated Plan	5 Year and Annual Plans
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
	Consolidated Plan for the jurisdiction/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

**List of Supporting Documents Available for Review**

Applicable & On Display	Supporting Document	Applicable Plan Component
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 [TS AP]	Annual Plan: Eligibility, Selection, and Admissions Policies
	Section 8 Administrative Plan	Annual Plan: Eligibility, Selection, and Admissions Policies
X	Public Housing Deconcentration and Income Mixing Documentation: 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</i> ; Notice and any further HUD guidance) and 18. 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 check here if included in the public housing A&O Policy	Annual Plan: Rent Determination
X	Schedule of flat rents offered each public housing development check here if included in the public housing A&O Policy	Annual Plan: Rent Determination
	Section 8 rent determination (payment standard) policies check here if included in Section 8 Administrative Plan	Annual Plan: Rent Determination
X	Public housing management and maintenance policy documents, including policies for the prevention or eradication of pest infestation (including cockroach infestation)	Annual Plan: Operations and Maintenance
X	Public housing grievance procedures check here if included in the public housing A&O Policy	Annual Plan: Grievance Procedures
	Section 8 informal review and hearing procedures check here if included in Section 8 Administrative Plan	Annual Plan: Grievance Procedures
X	The HUD -approved Capital Fund/Comprehensive Grant Program Annual Statement (HUD 52837) for the active grant year	Annual Plan: Capital Needs
X	Most recent CFP Budget/Progress Report (HUD 52825) for any active CFP grant	Annual Plan: Capital Needs
X	Most recent, approved 5 Year Action Plan for the Capital Fund/Comprehensive Grant Program, if not included as an attachment (provided at PHA option)	Annual Plan: Capital Needs



**List of Supporting Documents Available for Review**

Applicable & On Display	Supporting Document	Applicable Plan Component
	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
	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 home ownership programs/plans	Annual Plan: Homeownership
	Policies governing any Section 8 Homeownership program 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
X	Troubled PHAs: MOA/Recovery Plan	Troubled PHAs
	Other supporting documents (optional) (list individually; use as many lines as necessary)	(specify as needed)

**1.StatementofHousingNeeds**

[24CFRPar t903.79(a)]

**A.HousingNeedsofFamiliesintheJurisdiction/sServedbythePHA**

<b>HousingNeedsofFamiliesintheJurisdiction byFamilyType</b>							
<b>FamilyType</b>	<b>Overall</b>	<b>Afford- ability</b>	<b>Supply</b>	<b>Quality</b>	<b>Access- ibility</b>	<b>2. Size</b>	<b>Loca-tion</b>
<b>Income&lt;=30% ofAMI</b>	N/A						
<b>Income&gt;30%but &lt;=50%ofAMI</b>	N/A						
<b>Income&gt;50%but &lt;80%ofAMI</b>	N/A						
<b>Elderly</b>	N/A						
<b>Familieswith Disabilities</b>	N/A						
<b>Race/Ethnicity</b>	N/A						
<b>Race/Ethnicity</b>	N/A						
<b>Race/Ethnicity</b>	N/A						
<b>Race/Ethnicity</b>	N/A						

WhatsourcesofinformationdidthePHAusetoconductthisanalysis?(Checkallthatapply;allmaterials must be made available for public inspection.)

- Consolidated Plan of the Jur isdiction/s  
Indicate year: 2000
- U.S.Census data: the Comprehensive Housing Affordability Strategy (“CHAS”) dataset
- American Housing Survey data  
Indicate year: \_\_\_\_\_
- Other housing market study  
Indicate year: \_\_\_\_\_
- Other sources: (list and indicate year of information)

**A. HousingNeedsofFamiliesonthePublicHousingandSection8Tenant -Based**

## Assistance Waiting Lists

### Housing Needs of Families on the Waiting List

Waiting list type: (select one)

Section 8 tenant -based assistance

Public Housing

Combined Section 8 and Public Housing

Public Housing Site -Based or sub -jurisdictional waiting list (optional)

If used, identify which development/subjurisdiction:

	# of families	% of total families	Annual Turnover
Waiting list total	8		3
Extremely low income <= 30% AMI	3	37.5	
Very low income (> 30% but <= 50% AMI)	2	25%	
Low income (> 50% but < 80% AMI)	2	25	
Families with children	6	75	
Elderly families	1	12.5	
Families with Disabilities			
Race/ethnicity			
Race/ethnicity			
Race/ethnicity			
Race/ethnicity			
Characteristics by Bedroom Size (Public Housing Only)			
1BR			
2BR			
3BR			
4BR			
5BR			
5+BR			

**Housing Needs of Families on the Waiting List**

Is the waiting list closed (select one)? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes If yes: <b>B.</b> How long has it been closed (# of months)? Does the PHA expect to re-open the list in the PHA Plan year? No Yes Does the PHA permit specific categories of families onto the waitin glist, even if generally closed? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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**C. Strategy for Addressing Needs**

**(1) Strategies**

**Need: Shortage of affordable housing for alleligible populations**

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

- Employ effective maintenance and management policies to minimize the number of public housing units off-line
- Reduce turnover time for vacated public housing units
- Reduce time to renovate public housing units
- Seek replacement of public housing units lost to the inventory through mixed finance development
- Seek replacement of public housing units lost to the inventory through section 8 replacement housing resources
- Maintain or increase section 8 lease -uprates by establishing payment standards that will enable families to rent throughout the jurisdiction
- Undertake measures to ensure access to affordable housing among families assisted by the PHA, regardless of unit size required
- Maintain or increase section 8 lease -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:**

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

\_\_\_ Other:(listbelow)

**Need:SpecificFamilyTypes:Familiesatorbelow30%ofmedian**

**Strategy1:Targetavailableassistancetofamiliesatorbelow30%ofAMI**

- ExceedHUDfederaltargetingrequirementsforfamiliesatorbelow30%ofAMIinpublichousing
- \_\_\_ ExceedHUDfederaltargetingrequirementsforfamiliesatorbelow30%ofAMIintenant-basedsection 8assistance
- \_\_\_ Employadmissionspreferenc esaimedatfamilieswitheconomic hardships
- Adoptrentpoliciestosupportandencouragework
- \_\_\_ Other:(listbelow)

**Need:SpecificFamilyTypes:Familiesatorbelow50%ofmedian**

**Strategy1:Targetavailableassistancetofamiliesatorbelow50%ofAMI**

- Employadmissionspreferenc esaimedatfamilieswhoareworking
- Adoptrentpoliciestosupportandencouragework
- \_\_\_ Other:(listbelow)

**B. Need:SpecificFamilyTypes:TheElderly**

**Strategy1:Targetavailableassistancetotheelderly:**

- \_\_\_ Seekdesignationofpublichousingfortheelderly
- \_\_\_ Applyforspecial -purposevoucherstargetedtotheelderly,shouldtheybecomeavailable
- \_\_\_ Other:(listbelow)

**Need:SpecificFamilyTypes:FamilieswithDisabilities**

**Strategy1:TargetavailableassistancetoFamilieswithDisabilities:**

- \_\_\_ Seekdesignationofpublichousingforfamilieswithdisabilities
- Carryoutthomodificationsneededinpublichousingbasedonthesection504NeedsAssessmentfor PublicHousing
- \_\_\_ Applyforspecial -purposevoucherstargetedtofamilieswithdisabilities,shouldtheybecomeavailable
- Affirmativelymarketlocalnon -profitagenciesthatassistfamilieswithdisabilities
- \_\_\_ Other:(listbelow)

**Need:SpecificFamilyTypes:Racesorethnicitieswithdisproportionatehousingneeds**

**Strategy1:IncreaseawarenessofPHAresourcesamongfamiliesofracesandethnicitieswith disproportionateneeds:**

- \_\_\_ Affirmativelymarketto races/ethnicities showntohavedisproportionatehousingneeds

\_\_\_ Other:(listbelow)

**Strategy2:Conductactivitiesaffirmativelyfurtherfairhousing**

\_\_\_ Counselsection8tenantsastolocationofunitsoutsideofareasofpovertyorminorityconcentration  
andassistthemtolocatethoseunits

\_\_\_ Marketthesection8programtoownersoutsideofareasofpoverty/minorityconcentrations

\_\_\_ Other:(listbelow)

**OtherHousingNeeds&Strategies:(listneedsandstrategiesbelow)**

**(2) ReasonsforSelectingStrategies**

Ofthefactorslistedbelow,selectallthatinfluencedthePHA'sselectionofthestrategiesitwillpursue:

\_\_\_ Fundingconstraints

\_\_\_ Staffingconstraints

\_\_\_ Limitedavailabilityofsitesforassistedhousing

\_\_\_ Extenttowhichparticularhousingneedsaremetbyotherorganizationsinthecommunity

\_\_\_ EvidenceofhousingneedsasdemonstratedintheConsolidatedPlanandotherinformationavailableto  
thePHA

\_\_\_ InfluenceofthehousingmarketonPHAprograms

\_\_\_ Communityprioritiesregardinghousingassistance

\_\_\_ Resultsofconsultationwithlocalorstategovernment

\_\_\_ ResultsofconsultationwithresidentsandtheResidentAdvisoryBoard

\_\_\_ Resultsofconsultationwithadvocacygroups

\_\_\_ Other:( listbelow)

**Statement of Financial Resources**

[24CFR Part 903.79(b)]

<b>Financial Resources: Planned Sources and Uses</b>		
<b>Sources</b>	<b>Planned \$</b>	<b>Planned Uses</b>
<b>1. Federal Grants (FY 2000 grants)</b>		
a) Public Housing Operating Fund	\$13,917	
b) Public Housing Capital Fund	\$31,898	
c) HOPEVI Revitalization		
d) HOPEVI Demolition		
e) Annual Contributions for Section 8 Tenant -Based Assistance		
f) Public Housing Drug Elimination Program (including any Technical Assistance funds)		
g) Resident Opportunity and Self - Sufficiency Grants		
h) Community Development Block Grant		
i) HOME		
Other Federal Grants (list below)		
<b>2. Prior Year Federal Grants (unobligated funds only) (list below)</b>		
<b>3. Public Housing Dwelling Rental Income</b>	\$40,902	
<b>4. Other income (list below)</b>		
<b>4. Non -federal sources (list below)</b>		
<b>Total resources</b>	\$86,717	

### **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)

When families are within **120 days** of being offered a unit: (state number)

When families are within a certain time of being offered a unit: (state time)

Other: (describe)

**When the GHA is preparing to house the applicant.**

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

Criminal or Drug-related activity

Rental history

Housekeeping

Other (describe)

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

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

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

##### **(2) Waiting List Organization**

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

Community-wide list

Sub-jurisdictional lists

Site-based waiting lists

Other (describe)

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

PHA main administrative office

PHA development site management office

Other (list below)

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)

- Emergencies
- Overhoused

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

a. Preferences

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

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

Former Federal preferences:

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

Other preferences: (select below)

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

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

Other preferences (select all that apply)

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

4. Relationship of preference to income targeting requirements:

- The PHA applies preferences within income tiers

**Not applicable: The pool of applicants on the Waiting List ensures that the PHA will meet income-targeting requirements.**

**(5) Occupancy**

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

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

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

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

**(6) Deconcentration and Income Mixing**

a.  Yes  No: Did the PHA's analysis of its family (general occupancy) development to determine concentrations of poverty indicate the need for measures to promote de-concentration of poverty or income

mixing?

b. \_\_\_ Yes  No: Did the PHA adopt any changes to its **admissions policies** based on the results of the required analysis of the need to promote de -concentration 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 de -concentration of poverty or income mixing goals at targeted developments  
If selected, list targeted developments below:

\_\_\_ Employing new admission preferences at targeted developments  
If selected, list targeted developments below:

\_\_\_ Other (list policies and developments targeted below)

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

e. If the answer to d were 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 de -concentration of poverty and income -mixing  
\_\_\_ Other (list below)

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

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

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

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

## B. Section 8

### (1) Eligibility

- a. What is the extent of screening conducted by the PHA? (select all that apply)
- Criminal or drug -related activity only to the extent required by law or regulation
  - Criminal and drug -related activity, more extensively than required by law or regulation
  - More general screening than criminal and drug -related activity (list factors below)
  - Other (list below)
- b.  Yes  No: Does the PHA request criminal records from local law enforcement agencies for screening purposes?
- c.  Yes  No: Does the PHA request criminal records from State law enforcement agencies for screening purposes?
- d.  Yes  No: Does the PHA access FBI criminal records from the FBI for screening purposes? (either directly or through an NCIC -authorized source)
- e. Indicate what kind of information you share with prospective landlords? (select all that apply)
- Criminal or drug -related activity
  - Other (describe below)

**(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?

**(4) Admissions Preferences**

- a. Income targeting

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

b. Preferences

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

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

Former Federal preferences

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

Other preferences (select all that apply)

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

3. If the PHA will employ admissions preferences, please prioritize by placing a "1" in the space that represents your first priority, a "2" in the box representing your second priority, and so on. If you give equal weight to one or more of these choices (either through an absolute hierarchy or through a 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 your jurisdiction
- Those enrolled currently in educational, training, or upward mobility programs
- Households that contribute to meeting income goals (broad range of incomes)
- Households that contribute to meeting income requirements (targeting)
- Those previously enrolled in educational, training, or upward mobility programs
- Victims of reprisals or hate crimes
- Other preference(s) (list below)

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

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

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

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

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

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

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

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

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

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

- Through published notices
- Other (list below)

**4. PHA Rent Determination Policies**

[24CFR Part 903.79(d)]

**A. Public Housing**

**(1) Income Based Rent Policies**

a. Use of discretionary policies: (select one)

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

---or---

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

b. Minimum Rent

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

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

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

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

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

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

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

For the earned income of a previously unemployed household member

For increases in earned income

Fixed amount (other than general rent -setting policy)

If yes, state amount/s and circumstances below:

Fixed percentage (other than general rent -setting policy)

If yes, state percentage/s and circumstances below:

For household heads

For other family members



- \_\_\_\_\_ For transportation expenses
- \_\_\_\_\_ For the non-reimbursed medical expenses of non-disabled or non-elderly families
- \_\_\_\_\_ Other (describe below)

e. Ceiling rents

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

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

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

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

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

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

f. Rent determination:

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

- Never
- At family option
- Anytime the family experiences an income increase
- Anytime a family experiences an income increase above a threshold amount or percentage: (if selected, specify threshold) **Above \$200 per month.**
- Other (list below)

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

**(2) Flat Rents**

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

- This section 8 rent reasonableness study of comparable housing
- Survey of rents listed in local newspaper
- Survey of similar unassisted units in the neighborhood
- Other (list/describe below)

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

**(1) Payment Standards**

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

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

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

- FMRs are adequate to ensure success among assisted families in the PHA's segment of the FMR area
- The PHA has chosen to serve additional families by lowering the payment standard
- Reflect market or sub-market
- 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
- Reflect market or sub-market
- To increase housing options for families
- Other (list below)

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

- Annually
- Other (list below)

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

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

**(2) Minimum Rent**

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

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

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

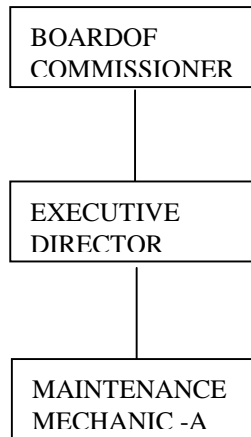
**5. Operations and Management**

[24CFR Part 903.79(e)]

**A. PHA Management Structure**

(select one)

- An organization chart showing the PHA's management structure and organization is attached (see below).
- A brief description of the management structure and organization of the PHA follows: The PHA operates on a part-time basis, and is open 5 days a week. The PHA accepts applications on Wednesdays when the Waiting List is open. Rent is during the first five days of the month and subsequently during office hours if rent is not paid during the designated time period. The maintenance of the units and systems are handled on a daily basis.



**B. HUD Programs Under PHA Management**

<b>Program Name</b>	<b>Units or Families Served at Year Beginning</b>	<b>Expected Turnover</b>
Public Housing	26	1
Section 8 Vouchers	N/A	
Section 8 Certificates	N/A	
Section 8 Mod Rehab	N/A	
Special Purpose Section 8 Certificates/Vouchers (list individually)	N/A	
Public Housing Drug Elimination Program (PHDEP)	N/A	
Other Federal Programs (list individually)	N/A	

**C. Management and Maintenance Policies**

**D.**

- (1) Public Housing Maintenance and Management: (list below) The GHA has a part-time maintenance person, who receives work orders as they are recalled into the Office. The Executive Director then tracks the work orders.
- (2) The listed policies have been adopted and are in place: The Personnel Policy, The Admission and Occupancy Policy, The Procurement Policy, A Maintenance Plan, Grievance Policy, Travel Policy, The Disposition; etc.

(2) Section 8 Management: (list below)

**6. PHA Grievance Procedures**

[24 CFR Part 903.79(f)]

**A. Public Housing**

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

If yes, list additions to federal requirements below:

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

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

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

1.  Yes  No: Has the PHA established informal review procedures for applicants to the Section 8 tenant-based assistance program and informal hearing procedures for families assisted by the Section 8 tenant -based assistance program in addition to federal requirements found at 24CFR982?

If yes, list additions to federal requirements below:

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

- PHA main administrative office
- Other (list below)

**7. Capital Improvement Needs**

[24CFR Part 903.79(g)]

**A. Capital Fund Activities**

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

Select one:

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

-or-

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

**(2)Optional5 -YearActionPlan**

a.  Yes  No: IsthePHAprovidinganoptional5 -YearAc tionPlanfortheCapitalFund?(ifno,skipto sub-component7B)

b.Ifestoquestiona,selectone:

TheCapitalFundProgram5 -YearActionPlanisprovidedasanattachmenttothePHAPlanat Attachment(statename

-or-

TheCapital FundProgram5 -YearActionPlanisprovidedbelow:(ifselected,copytheCFPOptional5 YearActionPlanfromtheTableLibraryandinsertthere)

**B.HOPEVIandPublicHousingDevelopmentandReplacementActivities(Non -Capital Fund)**

Yes  No:a)HasthePHAreceivedaHOPEVIrevitalizationgrant?(ifno,skiptoquestionc;ifyes, provideresponsestoquestionbforeachgrant,copyingandcompletingasmanytimesas necessary)

b)StatusofHOPEVIrevitalizationgrant(completeone setofquestionsforeachgrant)

1.Developmentname:

2.Development(project)number:

3.Statusofgrant:(selectthestatementthatbestdescribesthecurrentstatus)

RevitalizationPlanunderdevelopment

RevitalizationPlansu bmitted,pendingapproval

RevitalizationPlanapproved

ActivitiespursuanttoanapprovedRevitalizationPlanunderway

Yes  No:c)DoesthePHAplantoapplyforaHOPEVIRevitalizationgrantinthePlanyear? Ifyes, listdevelopmentname/sbelow:

Yes  No:d)WillthePHAbeengaginginanymixed -financedevelopmentactivitiesforpublic housinginthePlanyear? Ifyes,listdevelopmentsoractivitiesbelow:

Yes  No:e)WillthePH Abeconductinganyotherpublichousingdevelopmentorreplacement activitiesnotdiscussedintheCapitalFundProgramAnnualStatement? Ifyes,listdevelopmentsoractivitiesbelow:

**8. Demolition and Disposition**

[24CFR Part 903.79(h)]

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

**2. Activity Description**

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

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

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

2. Activity Description

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

<b>Designation of Public Housing Activity Description</b>
1a. Development name: _____
1b. Development (project) number: _____
2. Designation type: _____ <input 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 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: (DD/MM/YY) _____
5. If approved, will this designation constitute a (select one) _____ <input type="checkbox"/> New Designation Plan _____ <input type="checkbox"/> Revision of a previously approved Designation Plan? _____
1. Number of units affected: _____
7. Coverage of action (select one) _____ <input type="checkbox"/> Part of the development _____ <input type="checkbox"/> Total development _____

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

[24CFR Part 903.79(j)]

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

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

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

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

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

### **A. Public Housing**

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

### 2. Activity Description

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

**Public Housing Homeownership Activity Description  
(Complete one for each development affected)**

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

**B. Section 8 Tenant Based Assistance**

1.  Yes  No: Does the PHA plan to administer a Section 8 Homeownership program pursuant to Section 8(y) of the U.S.H.A. of 1937, as implemented by 24CFR 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)]

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

1. Cooperative agreements:

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

\_\_\_\_\_ If yes, what was the date that agreement was signed? 12/15/99

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

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

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

**(1) General**

a. Self-Sufficiency Policies

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

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



Section 8		
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b. \_\_\_ Yes **X** No:  
N/A

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)

- X** Adopting appropriate changes to the PHA's public housing rent determination policies and train staff to carry out those policies
- X** Informing residents of new policy on admission and reexamination
- X** Actively notifying residents of new policy at times in addition to admission and reexamination.
- X** 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)

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

[24 CFR Part 903.79(m)]

**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 level of violent and/or drug -related crime
  - X** Other (describe below)

**This strategy is not applicable to the Granger Housing Authority. The GHA has not experienced high incidence of crime in its housing developments.**

**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)

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

**The GHA has only one development, which has not been affected by incidences of crime.**

**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)

**Will seek crime prevention activities through our local Police Department and County Sheriff Department.**

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

**The Granger Housing**

**Authority manages one housing development. If this development is affected by high incidence of crime and violence, the GHA will include all of its housing units in any crime prevention plans.**

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

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

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



- Policeregularlytest ifyinandotherwisesupportevictioncases
- PoliceregularlymeetwiththePHAmangementandresidents
- AgreementbetweenPHAandlocallawenforcementagencyforprovisionofabove -baselinelaw  
enforcementservices
- Otheractivities(listbelow)

2. Whichdevelopmentsaremostaffected?(listbelow)  
**Notapplicableatthistime.**

**D.AdditionalinformationasrequiredbyPHDEP/PHDEPPlan**

- Yes  No: IsthePHAeligibletoparticipateinthePHDEPinthefiscalyearcovered bythisPHA  
Plan?
- Yes  No: HasthePHAincludedthePHDEPPlanforFY2001inthisPHAPlan?
- Yes  No: ThisPHDEPPlanisanAttachment.

[24CFRPart903.79  
(n)]

**14.RESERVEDFORPETPOLICY**

**The PetPolicyisanattachment,whichhasbeenmailedtoMemphiswiththeHard CopyofthePHAPlan.**

**15.CivilRightsCertifications**

[24CFRPart903.79(o)]

CivilrightscertificationsareincludedinthePHAPlanCertificationsofCompliancewiththeP HAPlansand  
RelatedRegulations. (MailedtoMemphiswiththeHardCopyofthePHAPlan)

**16.FiscalAudit**

[24CFRPart903.79(p)]

- 1.  Yes  No: IsthePHArequiredtohaveanauditconductedundersection  
5(h)(2)oftheU.S.HousingAct of1937(42US.C.1437c(h))?  
skiptocomponent17.) (Ifno,
- 2.  Yes  No: WasthemostrecentfiscalauditsubmittedtoHUD?
- 3.  Yes  No: Werethereanyfindingsastheresultofthataudit?
- 4.  Yes  No: Iftherewereanyfindi ngs,doanyremainunresolved?  
Ifyes,howmanyunresolvedfindingsremain?\_\_\_\_\_
- 5.  Yes  No: HaveresponsestoanyunresolvedfindingsbeensubmittedtoHUD?  
Ifnot,whenaretheydue(statebelow)?

**17.PHAAssetManagement**

[24CFRPart903 .79(q)]

1. \_\_\_ Yes **X** No: Is the PHA engaging in any activities that will contribute to the long-term asset management of its public housing stock, including how the Agency will plan for long-term operating, capital investment, rehabilitation, modernization, disposition, and other needs that have **not** been addressed elsewhere in this PHA Plan?

2. What types of asset management activities will the PHA undertake? (select all that apply)

- X** Not applicable
- \_\_\_ Private management
- \_\_\_ Development-based accounting
- \_\_\_ Comprehensive stock assessment
- \_\_\_ Other: (list below)

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

## **18. Other Information**

[24CFR Part 903.79(r)]

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

1. \_\_\_ Yes **X** 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 as Attachment (Filename)
- \_\_\_ Provided below:

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

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

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

1. \_\_\_ Yes **X** No: Does the PHA meet the exemption criteria provided section 2(b) (2) of the U.S. Housing Act of 1937? (If no, continue to question 2; if yes, skip to sub-component C.)

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

3. Description of Resident Election Process

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

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

b. Eligible candidates: (select one)

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

c. Eligible voters: (select all that apply)

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

**RAB Members:** (Resident Membership on the Governing Body)

**Mary Yannis**

**Irene Santiago**

**Normal Mays**

**Johnnie Warner** (Ms. Warner has been selected to the Board of Commissioners)

**Eleanor Lopez**

**Joyce Palla**

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

1. Consolidated Plan jurisdiction: **State of Texas**

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 based its statement of needs of families in the jurisdiction on the needs expressed in the Consolidated Plan/s.
- \_\_\_ The PHA has participated in any consultation process organized and offered by the Consolidated Plan agency in the development of the Consolidated Plan.
- \_\_\_ The PHA has consulted with the Consolidated Plan agency during the development of this PHA Plan.

\_\_\_\_\_ Activities to be undertaken by the PHA in the coming year are consistent with the initiatives contained in the Consolidated Plan. (list below)

\_\_\_\_\_ Other: (list below)

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

**Sarah D. Anderson Certifying Official for the State of Texas**

#### **D. Other Information Required by HUD**

##### **Attachments**

1. 2003 Capital Fund Program Annual Statement (Parts I, II & III)
  2. 5-Year Action Plan for the Capital Fund Program (2000 - 2004)
  3. 2002 Capital Fund Progress & Evaluation Report (Parts I, II & III)
  4. 2001 Capital Fund Progress & Evaluation Report (Parts I, II & III)
  5. Statement of Progress in Meeting 5 - Year Plan Mission and Goals
  6. Voluntary Conversion Certification
  7. Board Resolution Certification
  8. Drug-Free Certification
  9. Consolidated Plan Certification
  10. Payment to Influence Certification
  11. PHA Compliance/Plans & Regulations Certification
  12. Disclosure of Lobby Activities Certification
- (Note 1: Original copies of PHA Plan certifications on file in the Memphis TARCO Office)  
(Note 2: Copy of Pet Policy on file in Memphis TARC)

**Attachment1.(2003AnnualStatement)**

**2003CapitalFundProgramAnnualStatementPartsI,II,andIII**

**AnnualStatement  
2003CapitalFundProgram(CFP)PartI:Summary**

LineNo.	SummarybyDevelopmentAccount	TotalEstimated Cost
1	TotalNon -CGPFunds	
2	1406Operations(20%max)	\$6 380
3	1408ManagementImprovements( 20%max)	\$6 380
4	1410Administration(10%max)	\$3 190
5	1411Audit	
6	1415LiquidatedDamages	
7	1430FeesandCosts	
8	1440SiteAcquisition	
9	1450SiteImprovement	\$1 000
10	1460DwellingStructures	\$11 146
11	1465 1DwellingEquipment -Nonexpendable	
12	1470NondwellingStructures	
13	1475NondwellingEquipment	\$1 250
14	1485Demolition	
15	1490RenlacementReserve	
16	1492MovinotoWorkDemonstration	
17	1495 1RelocationCosts	
18	1498 ModUsedforDevelopment	
19	1502Contingency(8%max)	\$2 552
20	<b>AmountofAnnualGrant(Sumoflines2 -19)</b>	<b>(est )\$31 898</b>
21	Amountofline20RelatedtoIRPActivities	
22	Amountofline20RelatedtoSection504Compliance	
23	Amountofline20RelatedtoSecurity	
24	Amountofline20RelatedtoEnergyConservation	

**2003CapitalFundProgram(CFP)PartII:SupportingPage(s)**

Development Number/Name HA-Wide Activities	GeneralDescriptionofMajorWork Categories	Development Account Number	Total Estimated Cost
TEX-281-001	ReimburseoperatingaccounttomaximizePHA flexibilityinutilizingCFPfundng.	1406	\$6,380
TEX-281-001	ImproveoverallmanagementofthePHAby attendingseminars,trainings,NAHRO activities, etc.	1408	\$6,380
TEX-281-001	AdvertisingandMisc.expensesforCFP ExpenseofadditionalparttimedutiesofED AndmaintenancesupforCFPadministrationduring designandconstructionofmod	1410	\$3,190
TEX-281-001	SITEIMPROVEMENTS Updatesiteaccessibility bymakingimprovementsstosidewalks,handrails,& parkingareas,etc.(RequiredtomeetHUDmin. HealthandBuildingstandards)	1450	\$1,000
TEX-281-001	DWELLINGSTRUCTURES Replaceclosetdoors anddoorframesat1and3bedroom units – existing8’0”highbi -passslidingdoorsdonot functionandareAsafetyhazard(requireto meetHUDmin.Safetyandbuildingstandards.) Installstormdoorsat26units(requiredtoMeet HUDsafetyandBuildingstandards)	1460	\$11,146
TEX-281-001	NONDWELLINGEQUIPMENTVarious maintenaceequipmenttomaintainminimumsafety standards	1475	\$1,250
TEX-281-001	CONTINGENCYPossiblechangestocontracts,etc.	1502	\$2,552

**2003CapitalFundProgram(CFP)PartIII:Implementation Schedule**

Development Number/Name HA-WideActivities	AllFundsObligated (QuarterEndingDate)	AllFundsExpended (QuarterEndingDate)
TX281001	30June2004	31June2006

**Attachment 2.(5 -Year Action Plan for CFP)**

**Optional Table for 5 -Year Action Plan for Capital Fund (2000 –2004)**

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 five PHA fiscal years. Copy this table as many times as necessary. Note: PHAs need not include information from Year One of the 5 -Year cycle, because this information is included in the Capital Fund Program Annual Statement.

<b>Optional 5 -Year Action Plan Tables</b>				
<b>Development Number</b>	<b>Development Name (or indicate PHA wide)</b>	<b>Number Vacant Units</b>	<b>% Vacancies in Development</b>	
TEX281-001	Granger Housing Authority	0	0	
<b>Description of Needed Physical Improvements or Management Improvements</b>			<b>Estimated Cost</b>	<b>Planned Start Date (HA Fiscal Year)</b>
Replaced deteriorated plumbing at 20 kitchen sinks and faucet hardware (required to meet HUD minimum health and building standards)			\$25,000	2000
Replaced deteriorated and damaged kitchen cabinets and countertops at 20 units (existing cabinets and countertop are 32+ years old and seriously deteriorated) (required to meet HUD min. safety and building standards)			\$32,500	2000
Replaced deteriorated drangehoods with new units at 22 kitchens (Required to meet HUD min. building and safety standards)			\$3,080	2000
Remove (abate) vinyl asbestos floor tile & mastic and install new 12"x12" vinyl floor tile at 17 units (required to meet HUD minimum health and building standards)			\$85,000	2001-2002
Replaced deteriorated bathtubs/showers and repair/replaced deteriorated plumbing pipes, install new showerhead, faucet & valve at 7 units. (Required to meet HUD minimum health, safety & building standards)			\$14,406	2003
Page 1				
Replaced damaged and deteriorating bathroom lavatories, (porcelain lavatory basins are cracked and broken) replace plumbing hardware and under sink plumbing with new fixtures and fittings at 21 units (Required to meet HUD minimum health and building standards)			\$12,150	2003
Repair damaged ceiling and wall board and paint interior walls, ceilings and trim at 2 units due to termite damage (Required to meet HUD minimum building standards)			\$4,000	2003
Replaced deteriorating wood screen doors with new units at reentrance of 26 units (Required to meet HUD minimum building standards and for energy conservation)			\$7,000	2003

Install energy conservation measures		
Install additional R -1 attic insulation at 26 units		
Install caulking, sealant, and weatherstripping at 26 units (Units have not had any additional insulation for 32+ years)	\$6,807	2004
Replace washing machine valve and drain boxes at 20 units	\$3,250	2003
Alter and expand existing Maintenance and Storage building (Required to accommodate minimum maintenance operations and provide needed storage capacity)	\$3,500	2004
Replace missing and damaged window blinds with new blinds at 17 units and office	\$8,100	2004
Install central air conditioning at 12 elderly and disabled unit (Required for safety of elderly tenants due to extreme summer heat)	\$8,250	
Repair damaged and dislocated sidewalks (Required to maintain HUD standards)		
Construct housing authority sign - 2 sided with brick metal letters	\$9,550	
Purchase refrigerator to replace 8 new units	\$5,880.	
Purchase range to replace 10 ranges at 10 units	\$2,300	
Cost to cover consulting and asbestos removal, monitoring of asbestos	\$4,000	
Tenant moving expenses during asbestos abatement and floor tile replacement	\$5,000	
	\$14,000	
	\$9,500	
<b>Total estimated cost over next 5 years</b>	<b>\$199,743</b>	



**Attachment3.(2002CFPP&Ereport)**

**CapitalFundProgramProgress&EvaluationReportPartsI,II,andIII(Component11)**

<b>AnnualStatement/PerformanceandEvaluationReport</b>		<b>(Rev</b>		
<b>CapitalFundProgramandCapitalFundProgramReplacementHousingFactor(CFP/CFPRHF)PartI</b>		<b>)</b>		
PHAName: <b>GRANGERHOUSINGAUTHORITY</b>		GrantTypeandNumber CapitalFundProgramGrantNo: <b>TX59P281501-02</b> ReplacementHousingFactorGrantNo:		
<input type="checkbox"/> OriginalAnnualStatement <input type="checkbox"/> ReserveforDisasters/Emergencies <input checked="" type="checkbox"/> RevisedAnnualStatement(revisionno: <u>    </u> ) <input checked="" type="checkbox"/> PerformanceandEvaluationReportforPeriodEnding: <b>06/30/2002</b> <input type="checkbox"/> FinalPerformanceandEvaluationReport				
Line No.	SummarybyDevelopmentAccount	TotalEstimatedCost		Obligated
		Original	Revised	
1	Totalnon -CFPFunds			
2	1406Operations(nottoexceed20%)	\$6,380		
3	1408ManagementImprovements(nottoexceed20%)	\$6,380		
4	1410Administration(nottoexceed10%)	\$3,190		
5	1411Audit			
6	1415LiquidatedDamages			
7	1430Feesand Costs			
8	1440SiteAcquisition			
9	1450SiteImprovement	\$1,000		
10	1460DwellingStructures	\$11,147		
11	1465.1DwellingEquipment ---Nonexpendable			
12	1470Non -dwellingStructures			
13	1475Non -dwellingEquipment ---Expendable	\$1,250		
14	1485Demolition			
15	1490ReplacementReserve			
16	1492MovingtoWorkDemonstration			
17	1495.1RelocationCosts			
18	1499DevelopmentActivities			
19	1501CollateralizationorDebtService			
20	1502Contingency(n ottoexceed8%)	\$2,551		
21	AmountofAnnualGrant:(sumoflines2 -20)	\$31,898		
22	Amountofline21RelatedtoLBPActivities			
23	Amountofline21RelatedtoSection504compliance			
24	Amountofline21RelatedtoSecurity -So ftCosts			
25	AmountofLine21RelatedtoSecurity - HardCosts			
26	Amountofline21RelatedtoEnergyConservationMeasures			
		HUDCertification:Inapprovingthisbudgetandprovidingasstancetoaspecificho notbemorethanisnecessarytomaketheassistedactivityfeasibleaftertakingintoaccounta 12.50).		
SignatureofExec utiveDirectorandDate <b>X Arthur Lopez, Granger Housing Authority      11/26/2002</b>		SignatureofFieldOfficeManager(orRegionalPublicHousingDirectorinco -locat <b>X</b>		

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

PHAName : GRANGERHO USINGAUTHORITY		GrantTypeandNumber CapitalFundProgramGrantNo: <b>TX59P281501-02</b> ReplacementHousingFactorGrantNo:			FederalFYofGrant	
Development Number Name/HA-Wide Activities	GeneralDescriptionofMajorWork Categories	Dev.Acct No.	Quantity	TotalEstimatedCost		TotalActua
				Original	Revised	
HA-WIDE	OPERATIONS(LRPH)	1406		\$6,380		
HA-WIDE	VARIOUSMGMTIMPROVEMENTS (Computersoftware,attendtrainings)	1408		\$6,380		
HA-WIDE	ADMINISTRATION (Pro-ratedsalaryforcontract coordinator)	1410		\$3,190		
HA-WIDE	AUDIT	1411				
	FEES&COSTS	1430				
TX281-1	SITEIMPROVEMENTS (Repairclotheslines,trimtrees,flag pole)	1450	26-units	\$1,000		
TX281-1	DWELLINGSTRUCTURES (Replaceclosetdoors@3 -bedroom units;installstormdoors@allunits, rehabbathsasneeded)	1460	26-units	\$11,147		
TX281-1	DWELLINGEQUIPMENT – NONEXPENDABLE (Ranges&Refrigerators)	1465.1		\$0		
TX281-1	NON-DWELLINGEQUIPMENT – EXPENDABLE (Officecabinet,supplies&equipment, lawnmower)	1475		\$1,250		
HA-WIDE	CONTINGENCIES	1502		\$2,551		

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

PHAName: <b>GRANGER HOUSING AUTHORITY</b>		Grant Type and Number Capital Fund Program No: <b>TX59P281501-02</b> Replacement Housing Factor No:					Federal FY of Grant:
Development Number Name/HA-Wide Activities	All Fund Obligated (Quarter Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons:
	Original	Revised	Actual	Original	Revised	Actual	
HA-WIDE	09/30/2004			09/30/2006			

**Attachment4.(2001CFPP&Ereport)**

**CapitalFundPro gramProgress&EvaluationReportPartsI,II,andIII(Component11)**

<b>AnnualStatement/PerformanceandEvaluationReport(Rev</b>				
<b>CapitalFundProgramandC apitalFundProgramReplacementHousingFactor(CFP/CFPRHF)Pa</b>				
PHAName: <b>GRANGERHOUSINGAUTHORITY</b>		GrantTypeandNumber CapitalFundProgramGrantNo: <b>TX59P281501-01</b> ReplacementHousingFactorGrantNo:		
<input checked="" type="checkbox"/> OriginalAnnualStatement <input type="checkbox"/> ReserveforDisasters/Emergencies <input type="checkbox"/> RevisedAnnualStatement(revisionno: __)				
<input checked="" type="checkbox"/> PerformanceandEvaluationReportforPeriodEnding: <b>06/30/2002</b> <input type="checkbox"/> FinalPerformanceandEvaluationReport				
Line No.	SummarybyDevelopmentAccount	TotalEstimatedCost		Obligated
		Original	Revised	
1	Totalnon -CFPFunds			
2	1406Operations(nottoexceed20%)	\$2,173		\$2,173
3	1408ManagementImprovements(nottoexceed20%)	\$1,500		\$1,500
4	1410Administration(nottoexceed10%)	\$4,837		\$3,145
5	1411Audit			
6	1415LiquidatedDamages			
7	1430FeesandCosts			
8	1440SiteAcquisition			
9	1450SiteImprovement	\$1,000		\$1,000
10	1460DwellingStructures	\$30,750		\$8,855
11	1465.1DwellingEquipment ---Nonexpendable			
12	1470Non -dwellingStructures			
13	1475Non -dwellingEquipment ---Expendable	\$1,250		\$1,250
14	1485Demolition			
15	1490ReplacementReserve			
16	1492MovingtoWorkDemonstration			
17	1495.1RelocationCosts			
18	1499DevelopmentActivities			
19	1501CollateralizationorDebtService			
20	1502Contingency(nottoexceed8%)	\$1,000		
21	AmountofAnnualGrant:(sumoflines2 --20)	\$42,510		\$17,923
22	Amountofline21RelatedtoLBPActivities			
23	Amountofline21RelatedtoSection504compliance			
24	Amountofline21RelatedtoSecurity --SoftCosts			
25	AmountofLine21RelatedtoSecurity -- HardCosts			
26	Amountofline21RelatedtoEnergyConservationMeasures			
SignatureofExecutiveDirectorandDate <b>X Arthur Lopez, 11/26/2002</b>			HUDCertification:Inapprovingthisbudgetandprovidingassistancetoaspecifichousing nothemorethanisnecessarytomaketheassistedactivityfeasibleaftertakingintoaccounta 12.50). SignatureofFieldOfficeManager(orRegionalPublicHousingDirectorinco -locat <b>X</b>	

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

<b>PHAName :</b> <b>GRANGERHOUSINGAUTHORITY</b>		<b>GrantTypeandNumber</b> CapitalFundProgramGrantNo: <b>TX59P281501-01</b> ReplacementHousingFactorGrantNo:			<b>FederalFYofGrant</b>	
Development Number Name/HA-Wide Activities	GeneralDescriptionofMajorWork Categories	Dev.Acct No.	Quantity	TotalEstimatedCost		TotalActual
				Original	Revised	Funds Obligated

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

PH Name : GRANGER HOUSING AUTHORITY		Grant Type and Number Capital Fund Program Grant No: <b>TX59P281501-01</b> Replacement Housing Factor Grant No:			Federal FY of Grant	
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual
				Original	Revised	
						Funds Obligated
<b>HA-WIDE</b>	<b>OPERATIONS (LRPH)</b> Reimburse operating account to maximize PHA flexibility in utilizing CFP funding.	1406		\$2,173		\$2,173
<b>HA-WIDE</b>	<b>MGMT IMPROVEMENTS</b> Improve overall management of the PHA by attending seminars, trainings, NAHRO activities, etc. Upgrading of computer software.	1408		\$1,500		\$1,500
<b>HA-WIDE</b>	<b>ADMINISTRATION</b> Advertising and Misc. expenses for CFPE expense of additional parttime duties of ED and maintenance support for CFP administration during design and construction of mod	1410		\$4,837		\$3,145
<b>TX281-1</b>	<b>SITE IMPROVEMENTS</b> Update site accessibility by making improvements to sidewalks, handrails, & parking areas, etc. (Required to meet HUD min. Health and Building standards)	1450	26-units	\$1,000		\$1,000
<b>TX281-1</b>	<b>DWELLING STRUCTURES</b> Replace closet doors and door frames at 1 and 3 bedroom units – existing 8'0" high bi-pass sliding doors do not function and are a safety hazard (require to meet HUD min. Safety and building standards.) Install storm doors at 26 units (required to meet HUD safety and Building standards)	1460	26-units	\$30,750		\$8,855

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

<b>PHAName :</b> GRANGER HOUSING AUTHORITY		<b>Grant Type and Number</b> Capital Fund Program Grant No: <b>TX59P281501-01</b> Replacement Housing Factor Grant No:			<b>Federal FY of Grant</b>	
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual
				Original	Revised	Funds Obligated
<b>TX281-1</b>	<b>NON-DWELLING EQUIPMENT – EXPENDABLE</b> (Various maintenance equipment to maintain minimum safety standards)	1475		\$1,250		\$1,250
<b>HA-WIDE</b>	<b>CONTINGENCIES</b>	1502		\$1,000		

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

<b>PHAName:</b> GRANGER HOUSING AUTHORITY		<b>Grant Type and Number</b> Capital Fund Program No: <b>TX59P281501-01</b> Replacement Housing Factor No:			<b>Federal FY of Grant:</b>		
Development Number Name/HA-Wide Activities	All Fund Obligated (Quarter Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons
	Original	Revised	Actual	Original	Revised	Actual	
<b>TX281-1</b>	09/30/2003			09/30/2005			

**Attachment5.(ProgressStatement)**

# **GrangerHousingAuthority**

500NorthCommerce  
512-859-0207(FAX)  
Granger,Texas76530

512-859-2797  
P.O.Box728  
[grangerha@thegateway.net](mailto:grangerha@thegateway.net)

## **GrangerHousingAuthorityPHAPlan TX281**

StatementofProgressinMeeting5 -YearPlanMissionandGoals  
**5-YearPlan**  
**(PHAFiscalYears2000 -2004)**

TheGrangerHousing(GHA)is scheduled in meeting its mission to promote adequate and affordable housing. The GHA's goals are being met. We have reduced the vacancy rates since April 2001, changed management in order to accomplish more effectively run housing agency, increased customer satisfaction and renovate one unit to accommodate a disabled family.

In an effort to promote the quality of life for our residents, we have accomplished an adequate number of higher income families, which now represents an income mix in the development.

Overall, the GHA is on schedule in its progress towards a higher performing PHA.

Arthur Lopez  
**Arthur Lopez**  
**Executive Director -Granger Housing Authority**  
11/26/2002



**Attachment6.(VoluntaryConversionCertification)**

# GrangerHousingAuthority

500NorthCommerce  
512-859-0207(FAX)  
Granger,Texas76530

512-859-2797  
P.O.Box728  
[grangerha@thegateway.net](mailto:grangerha@thegateway.net)

## GrangerHousingAuthority TX281 VoluntaryConversionInitialAssessment

A. HowmanyofthePHA'sdevelopmentaresubjecttotheRequiredInitial Assessment?

TheGHAhasoneddevelopment,whichissubjecttotheRequiredVoluntaryConversionInitialAssessment.

TX281 -0125Units

B. HowmanyofthePHA'sdevelopmentarenotsubjecttotheRequiredInitial Assessmentbas edonexemptionsbeingtheyareelderlyordisabledandnot otherwiseexemptedoccupancyunits?

ThedevelopmentoftheGHAisnotexemptedfromtheRequiredVoluntaryConversionInitialAssessment.However, over50percentofthe housingunitsinthedevelopmentareoccupiedbyelderlyand/or disabledfamilies.Thegeneraloccupiedunitsareappropriatelyassigned.

C. InitialAssessment:

Test#1:

WouldconversionofanyofthedwellingunitsatthePHAadve rselyaffecttheavailabilityofaffordablehousinginthe community?

ThereisashortageofaffordablerentalhousingunitsintheGranger,Texas area,whichisevidentbythelengthywaitinglist.Convertingsubjectunits wouldadvers ely affectthehousingmarketinthiscommunity.

NoneofthePHA'sunitsareconsideredappropriateforconversionbasedupon thePHA'sRequiredInitialAssessment.

ArthurLopez

**Arthur Lopez**

**ExecutiveDirector -GrangerHousingAuthority**

11/26/2002

**Attachment 7. (Board Resolution Certification)**

Resolution Number \_\_\_\_\_

# The Granger Housing Authority

**Resolution**

**WHEREAS**, the Granger Housing Authority, (hereinafter called the Authority) through the Board of Commissioners has received and reviewed the Fiscal Year 2001 PHA Plan for adoption:

WHEREAS, the Authority of, through its Board of Commissioners, believe it is in the best interest of the Housing Authority that it adopts the Fiscal Year 2001 "PHA Plan", as attached hereto, and incorporated herein as referenced as the Granger Housing Authority FY 2001 PHA Plan

THEREFORE, BE IT RESOLVED, that the Granger Housing Authority, through its Board of Commissioners, hereby adopts the above Resolutions on the terms and conditions set forth herein.

The foregoing Resolutions having been submitted to a vote was adopted \_\_\_\_\_, 2002.

\_\_\_\_\_  
Signature Board Chairperson

\_\_\_\_\_  
Date

## Attachment 8. (Drug -Free Certification)

### Certification for a Drug -Free Workplace

U.S. Department of Housing  
and Urban Development

---

Applicant Name

---

Program/Activity Receiving Federal Grant Funding

---

Acting on behalf of the abovenamed Applicant as its Authorized Official, I, make the following certifications and agreements to the Department of Housing and Urban Development (HUD) regarding the sites listed below:

I certify that the abovenamed Applicant will or will continue to provide a drug -free workplace by:

a. Publishing a statement notifying employees that the unlawful manufacture, distribution, dispensing, possession, or use of a controlled substance is prohibited in the Applicant's workplace and specifying the actions that will be taken against employees for violation of such prohibition.

b. Establishing an ongoing drug -free awareness program to inform employees ---

- (1) The dangers of drug abuse in the workplace;
- (2) The Applicant's policy of maintaining a drug -free workplace;
- (3) Any available drug counseling, rehabilitation, and employee assistance programs; and
- (4) The penalties that may be imposed upon employees for drug abuse violations occurring in the workplace.

c. Making it a requirement that each employee to be engaged in the performance of the grant be given a copy of the statement required by paragraph a.;

d. Notifying the employee in the statement required by paragraph a. that, as a condition of employment under the grant, the employee will ---

- (1) Abide by the terms of the statement; and
- (2) Notify the employer in writing of his or her conviction for a violation of a criminal drug statute occurring in the workplace no later than five calendar days after such conviction;

e. Notifying the agency in writing, within ten calendar days after receiving notice under subparagraph d. (2) from an employee or otherwise receiving actual notice of such conviction. Employers of convicted employees must provide notice, including position title, to every grant officer or other designee on whose grant activity the convicted employee was working, unless the Federal agency has designated a central point for the receipt of such notices. Notices shall include the identification number(s) of each affected grant;

f. Taking one of the following actions, within 30 calendar days of receiving notice under subparagraph d. (2), with respect to any employee who is so convicted ---

- (1) Taking appropriate personnel action against such an employee, up to and including termination, consistent with the requirement of the Rehabilitation Act of 1973, as amended; or

- (2) Requiring such employee to participate satisfactorily in a drug abuse assistance or rehabilitation program approved for such purposes by a Federal, State, or local health, law enforcement, or other appropriate agency;

g. Making a good faith effort to continue to maintain a drug free workplace through implementation of paragraph a. thru f.

---

**2. Sites for Work Performance.** The Applicant shall list (on separate pages) the site(s) for the performance of work done in connection with the HUD funding of the program/activity shown above: Place of Performance shall include the street address, city, county, State, and zip code.  
Identify each sheet with the Applicant name and address and the program/activity receiving grant funding.)

Check here  if there are work places on file that are not identified on the attached sheets.

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I hereby certify that all the information stated herein, as well as any information provided in the accompanying therewith, is true and accurate.

**Warning:** HUD will prosecute false claims and statements. Conviction may result in criminal and/or civil penalties. (18 U.S.C. 1001, 1010, 1012; 31 U.S.C. 3729, 3802)

Name of Authorized Official	Title
Signature	Date
X	

**Attachment9.(ConsolidatedPlanCertification)**

U.S.DepartmentofHousingandUrbanDevelopment  
OfficeofPublicandIndianHousing

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**CertificationbyStateorLocalOfficialofPHAPlansConsistencywith  
theConsolidatedPlan**

I, \_\_\_\_\_ the \_\_\_\_\_ certify  
*(EnterOfficial'sName)* *(EnterOfficial'sTitle)*  
thattheFiveYearandAnnualPHAPlanofthe \_\_\_\_\_ is  
*(EnterHANam e)*  
consistentwiththeConsolidatedPlanof \_\_\_\_\_ prepared  
*(EnterJurisdictionName)*  
pursuantto24CFRPart91.

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Signed/DatedbyAppropriateState orLocalOfficial

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CertificationbyStateandLocalOfficialofPHAPlansConsistencywiththeConsolidatedPlantoAccompanytheHUD50075  
OMBApprovalNo.257 7-0226  
Expires03/31/2002  
(7/99)

## Attachment 10. (Payment to Influence Certification)

### Certification of Payments to Influence Federal Transactions

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

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Applicant Name

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Program/Activity Receiving Federal Grant Funding

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The undersigned certifies, to the best of his or her knowledge and belief, that:

(1) No Federal appropriated funds have been paid or will be paid, by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of an agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the awarding of any Federal contract, the making of any Federal grant, the making of any Federal loan, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any Federal contract, grant, loan, or cooperative agreement.

(2) If any funds other than Federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of an agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this Federal contract, grant, loan, or cooperative agreement, the undersigned shall complete and submit Standard Form-LLL, Disclosure Form to Report Lobbying, in accordance with its instructions.

(3) The undersigned shall require that the language of this certification be included in the award documents for all subawards at all tiers (including subcontracts, subgrants, and contracts under grants, loans, and cooperative agreements) and that all subrecipients shall certify and disclose accordingly.

This certification is a material representation of fact upon which reliance was placed when this transaction was made or entered into. Submission of this certification is a prerequisite for making or entering into this transaction imposed by Section 1352, Title 31, U.S. Code. Any person who fails to file the required certification shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

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I hereby certify that all the information stated herein, as well as any information provided in the accompaniment therewith, is true and accurate:

**Warning:** HUD will prosecute false claims and statements. Conviction may result in criminal and/or civil penalties. (18 U.S.C. 1001, 1010, 1012; 31 U.S.C. 3729, 3802)

Name of Authorized Official	Title
Signature	Date (mm/dd/yyyy)

form HUD 50071 (3/98)  
Previous edition is obsolete

ref. Handbooks 7417.1, 7475.13, 7485.1, & 7485.3

## Attachment 11. (PHA Compliance w/ Plans & Regulations Certification)

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

### PHA Certification of Compliance with the PHA Plans and Related Regulations Board Resolution to Accompany the PHA Plan

Acting on behalf of the Board of Commissioners of the Public Housing Agency (PHA) listed below, as its Chairman or other authorized PHA official if there is no Board of Commissioners, I approve the submission of the 5-Year Plan and Annual Plan for PHA fiscal year beginning \_\_\_\_\_, hereinafter referred to as the Plan of which this document is a part and make the following certifications and agreements with the Department of Housing Development (HUD) in connection with the submission of the Plan and implementation thereof:

1. The Plan is consistent with the applicable comprehensive housing affordability strategy (or any plan incorporating such strategy) for the jurisdiction in which the PHA is located.
2. The Plan contains a certification by the appropriate State or local official that the Plan is consistent with the applicable Consolidated Plan, which includes a certification that requires the preparation of an Analysis of Impediments to Fair Housing Choice, for the PHA's jurisdiction and a description of the manner in which the PHA Plan is consistent with the applicable Consolidated Plan.
3. The PHA has established a Resident Advisory Board or Boards, the membership of which represents the residents assisted by the PHA, consulted with this Board or Boards in developing the Plan, and considered the recommendations of the Board or Boards (24 CFR 903.13). The PHA has included in the Plan submission a copy of the recommendations made by the Resident Advisory Board or Boards and a description of the manner in which the Plan addresses these recommendations.
4. The PHA made the proposed Plan and all information relevant to the public hearing available for public inspection at least 45 days before the hearing, published a notice that a hearing would be held and conducted a hearing to discuss the Plan and invited public comment.
5. The PHA will carry out the Plan in conformity with Title VI of the Civil Rights Act of 1964, the Fair Housing Act, section 504 of the Rehabilitation Act of 1973, and title II of the Americans with Disabilities Act of 1990.
6. The PHA will affirmatively further fair housing by examining their programs or proposed programs, identify any impediments to fair housing choice within those programs, address those impediments in a reasonable fashion in view of the resources available and work with local jurisdiction to implement any of the jurisdiction's initiative to affirmatively further fair housing that require the PHA's involvement and maintain records reflecting these analyses and actions.
7. For PHA Plan that includes a policy for site based waiting lists:
  - The PHA regularly submits required data to HUD's MTCS in an accurate, complete and timely manner (as specified in PIH Notice 99-2);
  - The system of site based waiting lists provides for full disclosure to each applicant in the selection of the development in which to reside, including basic information about available sites; and an estimate of the period of time the applicant would likely have to wait to be admitted to units of different sizes and types at each site;
  - Adoption of site based waiting list would not violate any court order or settlement agreement or be inconsistent with a pending complaint brought by HUD;
  - The PHA shall take reasonable measures to assure that such waiting list is consistent with affirmatively furthering fair housing;

- The PHA provides for review of its site -based waiting list policy to determine if it is consistent with civil rights laws and certifications, as specified in 24CFR part 903.7(c)(1).
8. The PHA will comply with the prohibitions against discrimination on the basis of age pursuant to the Age Discrimination Act of 1975.
  9. The PHA will comply with the Architectural Barriers Act of 1968 and 24CFR Part 41, Policies and Procedures for the Enforcement of Standards and Requirements for Accessibility by the Physically Handicapped.
  10. The PHA will comply with the requirements of section 3 of the Housing and Urban Development Act of 1968, Employment Opportunities for Low -or Very -Low Income Persons, and with implementing regulation at 24CFR Part 135.
  11. The PHA has submitted with the Plan certification with regard to a drug free work place required by 24CFR Part 24, Subpart F.
  12. The PHA has submitted with the Plan certification with regard to compliance with restrictions on lobbying required by 24CFR Part 87, together with disclosure forms if required by this Part, and with restrictions on payment to influence Federal Transactions, in accordance with the Byrd Amendment and implementing regulations at 49CFR Part 24.
  13. For PHA Plan that includes a PHDEP Plan as specified in 24CFR 761.21: The PHDEP Plan is consistent with and conform to the "Plan Requirements" and "Grantee Performance Requirements" as specified in 24CFR 761.21 and 761.23 respectively and the PHA will maintain and have available for review/inspection (at all times), records or documentation of the following :
    - Baseline law enforcement services for public housing developments assisted under the PHDEP plan;
    - Consortium agreement/s between the PHA participating in the consortium and a copy of the payment agreement between the consortium and HUD (applicable only to PHA participating in a consortium as specified under 24CFR 761.15);
    - Partnership agreements (indicating specific leveraged support) with agencies/organizations providing funding, services or other in-kind resources for PHDEP -funded activities;
    - Coordination with other law enforcement efforts;
    - Written agreement(s) with local law enforcement agencies (receiving any PHDEP funds); and
    - All crime statistics and other relevant data (including Part I and specified Part II crimes) that establish need for the public housing sites assisted under the PHDEP Plan.
  14. The PHA will comply with acquisition and relocation requirements of the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970 and implementing regulations at 49CFR Part 24 as applicable.
  15. The PHA will take appropriate affirmative action to award contracts to minority and women's business enterprises under 24CFR 5.105(a).
  16. The PHA will provide HUD or the responsible entity any documentation that the Department needs to carry out its review under the National Environmental Policy Act and other related authorities in accordance with 24CFR Part 58.
  17. With respect to public housing the PHA will comply with Davis -Bacon or HUD determined wage rate requirements under section 12 of the United States Housing Act of 1937 and the Contract Work Hours and Safety Standards Act.
  18. The PHA will keep records in accordance with 24CFR 85.20 and facilitate an effective audit to determine compliance with program requirements.
  19. The PHA will comply with the Lead -Based Paint Poisoning Prevention Act and 24CFR Part 35 .
  20. The PHA will comply with the policies, guidelines, and requirements of OMB Circular No. A -87 (Cost Principles for State, Local and Indian Tribal Governments) and 24CFR Part 85 (Administrative Requirements for Grants and Cooperative Ag reements to State, Local and Federally Recognized Indian Tribal Governments.).



21. The PHA will undertake only activities and programs covered by the Plan in a manner consistent with its Plan and will utilize covered grant funds only for activities that are approvable under the regulations and included in its Plan.

22. All attachments to the Plan have been and will continue to be available at all times and all locations that the PHA Plan is available for public inspection. All required supporting documents have been made available for public inspection along with the Plan and attachments at the primary business office of the PHA and at all other times and locations identified by the PHA in its PHA Plan and will continue to be made available at least at the primary business office of the PHA.

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PHA Name PHA Number

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Signed/Dated by PHA Board Chair or other authorized PHA official

## Attachment 12. (Disclosure of Lobby Activities Certification)

### DISCLOSURE OF LOBBYING ACTIVITIES

Approved by OMB 0348 -0046

Complete this form to disclose lobbying activities pursuant to  
(See reverse for public burden disclosure.)

31 U.S.C. 1352

<b>1. Type of Federal Action:</b> <input type="checkbox"/> a. contract <input type="checkbox"/> b. grant <input type="checkbox"/> c. cooperative agreement <input type="checkbox"/> d. loan <input type="checkbox"/> e. loan guarantee <input type="checkbox"/> f. loan insurance <small>(Check applicable box)</small>	<b>2. Status of Federal Action:</b> <input type="checkbox"/> a. bid/offer/application <input type="checkbox"/> b. initial award <input type="checkbox"/> c. post-award	<b>3. Report Type:</b> <input type="checkbox"/> a. initial filing <input type="checkbox"/> b. material change  <b>For Material Change Only:</b> year _____ quarter _____ date of last report _____
<b>4. Name and Address of Reporting Entity:</b> <input type="checkbox"/> Prime <input type="checkbox"/> Subawardee Tier _____, if known: _____  Congressional District, if known: _____	<b>5. If Reporting Entity in No. 4 is a Subawardee, Enter Name and Address of Prime:</b>     Congressional District, if known: _____	
<b>6. Federal Department/Agency:</b>	<b>7. Federal Program Name/Description:</b>  CFDA Number, if applicable: _____	
<b>8. Federal Action Number, if known:</b>	<b>9. Award Amount, if known:</b> \$ _____	
<b>10.a. Name and Address of Lobbying Registrant</b> <i>(if individual, lastname, firstname, MI):</i>	<b>b. Individuals Performing Services</b> <i>(including address if different from No. 10a )</i> <i>(lastname, firstname, MI ):</i>	
<b>11.</b> Information requested through this form is authorized by title 31 U.S.C. section 1352. This disclosure of lobbying activities is a material representation of fact upon which reliance was placed by the tier above when this transaction was made or entered into. This disclosure is required pursuant to 31 U.S.C.	Signature: _____  Print Name: _____	

<p>1352. This information will be reported to the Congress semi-annually and will be available for public inspection. Any person who fails to file the required disclosure shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.</p>	<p>Title: _____</p> <p>Telephone No.: _____ Date: _____</p>
<p><b>Federal Use Only:</b></p>	<p>Authorized for Local Reproduction Standard Form LLL (Rev. 7-97)</p>