

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

Small PHA Plan Update
Annual Plan for Fiscal Year: 2003

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

PHA Plan Agency Identification

PHA Name: JASPER HOUSING AUTHORITY

PHA Number: TX492

PHA Fiscal Year Beginning: 01/2003

PHA Plan Contact Information:

Name: BETTY GIPSON

Phone: 409-384-4430

TDD: 409-489-9622

Email (if available): jasper@jas.net

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, county or 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)

PHA Programs Administered:

- Public Housing and Section 8 Section 8 Only Public Housing Only

**Annual PHA Plan
Fiscal Year 2003**

[24 CFR Part 903.7]

i. Table of Contents

Provide a table of contents for the Plan, including attachments, and a list of supporting documents available for public inspection. For Attachments, indicate which attachments are provided by selecting all that apply. Provide the attachment's name (A, B, etc.) in the space to the left of the name of the attachment. If the attachment is provided as a **SEPARATE** file submission from the PHA Plans file, provide the file name in parentheses in the space to the right of the title.

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Attachments

- Attachment A : Supporting Documents Available for Review
- Attachment B: Capital Fund Program Annual Statement
- Attachment C: Capital Fund Program 5 Year Action Plan
- Attachment __: Capital Fund Program Replacement Housing Factor Annual Statement
- Attachment __: Public Housing Drug Elimination Program (PHDEP) Plan
- Attachment D: Resident Membership on PHA Board or Governing Body
- Attachment E: Membership of Resident Advisory Board or Boards
- Attachment F: Comments of Resident Advisory Board or Boards & Explanation of PHA Response (must be attached if not included in PHA Plan text)
- Other (List below, providing each attachment name)

**IMPLEMENTATION PLAN FOR RESIDENT ASSESSMENT COMPONENT -
COMMUNICATION**

ii. Executive Summary

[24 CFR Part 903.7 9 (r)]

At PHA option, provide a brief overview of the information in the Annual Plan

1. Summary of Policy or Program Changes for the Upcoming Year

In this section, briefly describe changes in policies or programs discussed in last year's PHA Plan that are not covered in other sections of this Update.

THE PHA HAS PROPERLY PRESENTED AND ADOPTED A SIGNIFICANT CHANGE TO ITS ANNUAL PLAN – CAPITAL FUND BUDGET FOR FY 2002, DUE TO LESS THAN ESTIMATED FUNDING FOR THAT YEAR AND CHANGES IN NEEDS FOR UNIT REHAB. THE PHA WILL NOT UNDERTAKE TO BUILD THE FAMILY DEVELOPMENT CENTER AS PLANNED. INSTEAD, NON-DWELLING STORAGE STRUCTURES WILL BE PURCHASED AND/OR UPGRADED AND BETWEEN DWELLING UNIT AND NON-DWELLING EQUIPMENT COSTS WILL BE INCREASED ACCORDINGLY. SPECIFICS ARE INCLUDED IN TABLES.

2. Capital Improvement Needs

[24 CFR Part 903.7 9 (g)]

Exemptions: Section 8 only PHAs are not required to complete this component.

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

B. What is the amount of the PHA's estimated or actual (if known) Capital Fund Program grant for the upcoming year? \$ 118,161.00

C. Yes No Does the PHA plan to participate in the Capital Fund Program in the upcoming year? If yes, complete the rest of Component 7. If no, skip to next component.

D. Capital Fund Program Grant Submissions

(1) Capital Fund Program 5-Year Action Plan

The Capital Fund Program 5-Year Action Plan is provided as Attachment

(2) Capital Fund Program Annual Statement

The Capital Fund Program Annual Statement is provided as Attachment

3. Demolition and Disposition

[24 CFR Part 903.7 9 (h)]

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

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

2. Activity Description

Demolition/Disposition Activity Description (Not including Activities Associated with HOPE VI or Conversion Activities)
1a. Development name: 1b. Development (project) number:
2. Activity type: Demolition <input type="checkbox"/> Disposition <input type="checkbox"/>
3. Application status (select one) Approved <input type="checkbox"/> Submitted, pending approval <input type="checkbox"/> Planned application <input type="checkbox"/>
4. Date application approved, submitted, or planned for submission: <u>(DD/MM/YY)</u>
5. Number of units affected: 6. Coverage of action (select one) <input type="checkbox"/> Part of the development <input type="checkbox"/> Total development
7. Relocation resources (select all that apply) <input type="checkbox"/> Section 8 for units <input type="checkbox"/> Public housing for units <input type="checkbox"/> Preference for admission to other public housing or section 8 <input type="checkbox"/> Other housing for units (describe below)
8. Timeline for activity: a. Actual or projected start date of activity: b. Actual or projected start date of relocation activities: c. Projected end date of activity:

4. Voucher Homeownership Program

[24 CFR Part 903.7 9 (k)]

A. Yes No: Does the PHA plan to administer a Section 8 Homeownership program pursuant to Section 8(y) of the U.S.H.A. of 1937, as implemented by 24 CFR part 982 ? (If “No”, skip to next component; if “yes”, describe each program using the table below (copy and complete questions for each program identified.)

B. Capacity of the PHA to Administer a Section 8 Homeownership Program

The PHA has demonstrated its capacity to administer the program by (select all that apply):

- Establishing a minimum homeowner downpayment requirement of at least 3 percent and requiring that at least 1 percent of the downpayment comes from the family’s resources
- Requiring that financing for purchase of a home under its section 8 homeownership will be provided, insured or guaranteed by the state or Federal government; comply with secondary mortgage market underwriting requirements; or comply with generally accepted private sector underwriting standards

- Demonstrating that it has or will acquire other relevant experience (list PHA experience, or any other organization to be involved and its experience, below):

5. Safety and Crime Prevention: PHDEP Plan

[24 CFR Part 903.7 (m)]

Exemptions Section 8 Only PHAs may skip to the next component PHAs eligible for PHDEP funds must provide a PHDEP Plan meeting specified requirements prior to receipt of PHDEP funds.

- A. Yes No: Is the PHA eligible to participate in the PHDEP in the fiscal year covered by this PHA Plan?
- B. What is the amount of the PHA's estimated or actual (if known) PHDEP grant for the upcoming year? \$ _____
- C. Yes No Does the PHA plan to participate in the PHDEP in the upcoming year? If yes, answer question D. If no, skip to next component.
- D. Yes No: The PHDEP Plan is attached at Attachment _____

6. Other Information

[24 CFR Part 903.7 9 (r)]

A. Resident Advisory Board (RAB) Recommendations and PHA Response

1. Yes No: Did the PHA receive any comments on the PHA Plan from the Resident Advisory Board/s?
2. If yes, the comments are Attached at Attachment F
3. In what manner did the PHA address those comments? (select all that apply)
- The PHA changed portions of the PHA Plan in response to comments
A list of these changes is included
 Yes No: below or
 Yes No: at the end of the RAB Comments in Attachment _____.
- Considered comments, but determined that no changes to the PHA Plan were necessary. An explanation of the PHA's consideration is included at the at the end of the RAB Comments in Attachment _____.
- Other: (list below)

B. Statement of Consistency with the Consolidated Plan

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

1. Consolidated Plan jurisdiction: STATE OF 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)

- 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 specific initiatives contained in the Consolidated Plan. (list such initiatives below)
- Other: (list below)

3. PHA Requests for support from the Consolidated Plan Agency

- Yes No: Does the PHA request financial or other support from the State or local government agency in order to meet the needs of its public housing residents or inventory? If yes, please list the 5 most important requests below:

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

C. Criteria for Substantial Deviation and Significant Amendments

1. Amendment and Deviation Definitions

24 CFR Part 903.7(r)

PHAs are required to define and adopt their own standards of substantial deviation from the 5-year Plan and Significant Amendment to the Annual Plan. The definition of significant amendment is important because it defines when the PHA will subject a change to the policies or activities described in the Annual Plan to full public hearing and HUD review before implementation.

A. Substantial Deviation from the 5-year Plan: Any single deviation from the 5-year Plan that exceeds 20% of the current 5-year Plan total will be considered to be a substantial deviation from the plan.

B. Significant Amendment or Modification to the Annual Plan: Any change planned and executed within a covered annual-plan—other than annual addition to the initial 5-year Plan for the Housing Authority—that exceeds 35% of annual capital fund award that year will be considered as Significant Deviation from the 5-year Plan.

Attachment A
Supporting Documents Available for Review

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

List of Supporting Documents Available for Review		
Applicable & On Display	Supporting Document	Related Plan Component
X	PHA Plan Certifications of Compliance with the PHA Plans and Related Regulations	5 Year and Annual Plans
	State/Local Government Certification of Consistency with the Consolidated Plan (not required for this update)	5 Year and Annual Plans
X	Fair Housing Documentation Supporting Fair Housing Certifications: Records reflecting that the PHA has examined its programs or proposed programs, identified any impediments to fair housing choice in those programs, addressed or is addressing those impediments in a reasonable fashion in view of the resources available, and worked or is working with local jurisdictions to implement any of the jurisdictions’ initiatives to affirmatively further fair housing that require the PHA’s involvement.	5 Year and Annual Plans
X	Housing Needs Statement of the Consolidated Plan for the jurisdiction/s in which the PHA is located and any additional backup data to support statement of housing needs in the jurisdiction	Annual Plan: Housing Needs
X	Most recent board-approved operating budget for the public housing program	Annual Plan: Financial Resources
X	Public Housing Admissions and (Continued) Occupancy Policy (A&O/ACOP), which includes the Tenant Selection and Assignment Plan [TSAP]	Annual Plan: Eligibility, Selection, and Admissions Policies

List of Supporting Documents Available for Review		
Applicable & On Display	Supporting Document	Related Plan Component
	Any policy governing occupancy of Police Officers in Public Housing <input type="checkbox"/> check here if included in the public housing A&O Policy	Annual Plan: Eligibility, Selection, and Admissions Policies
	Section 8 Administrative Plan	Annual Plan: Eligibility, Selection, and Admissions Policies
X	Public housing rent determination policies, including the method for setting public housing flat rents <input checked="" type="checkbox"/> check here if included in the public housing A & O Policy	Annual Plan: Rent Determination
X	Schedule of flat rents offered at each public housing development <input checked="" type="checkbox"/> check here if included in the public housing A & O Policy	Annual Plan: Rent Determination
	Section 8 rent determination (payment standard) policies <input type="checkbox"/> check here if included in Section 8 Administrative Plan	Annual Plan: Rent Determination
X	Public housing management and maintenance policy documents, including policies for the prevention or eradication of pest infestation (including cockroach infestation)	Annual Plan: Operations and Maintenance
X	Results of latest binding Public Housing Assessment System (PHAS) Assessment	Annual Plan: Management and Operations
X	Follow-up Plan to Results of the PHAS Resident Satisfaction Survey (if necessary)	Annual Plan: Operations and Maintenance and Community Service & Self-Sufficiency

List of Supporting Documents Available for Review		
Applicable & On Display	Supporting Document	Related Plan Component
	Results of latest Section 8 Management Assessment System (SEMAP)	Annual Plan: Management and Operations
	Any required policies governing any Section 8 special housing types <input type="checkbox"/> check here if included in Section 8 Administrative Plan	Annual Plan: Operations and Maintenance
X	Public housing grievance procedures <input checked="" type="checkbox"/> check here if included in the public housing A & O Policy	Annual Plan: Grievance Procedures
	Section 8 informal review and hearing procedures <input type="checkbox"/> check here if included in Section 8 Administrative Plan	Annual Plan: Grievance Procedures
X	The HUD-approved Capital Fund/Comprehensive Grant Program Annual Statement (HUD 52837) for any active grant year	Annual Plan: Capital Needs
X	Most recent CIAP Budget/Progress Report (HUD 52825) for any active CIAP grants	Annual Plan: Capital Needs
	Approved HOPE VI applications or, if more recent, approved or submitted HOPE VI Revitalization Plans, or any other approved proposal for development of public housing	Annual Plan: Capital Needs
X	Self-evaluation, Needs Assessment and Transition Plan required by regulations implementing §504 of the Rehabilitation Act and the Americans with Disabilities Act. See, PIH 99-52 (HA).	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

List of Supporting Documents Available for Review		
Applicable & On Display	Supporting Document	Related Plan Component
	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, Section 22 of the US Housing Act of 1937, or Section 33 of the US Housing Act of 1937	Annual Plan: Conversion of Public Housing
	Approved or submitted public housing homeownership programs/plans	Annual Plan: Homeownership
	Policies governing any Section 8 Homeownership program (section _____ of the Section 8 Administrative Plan)	Annual Plan: Homeownership
	Cooperation agreement between the PHA and the TANF agency and between the PHA and local employment and training service agencies	Annual Plan: Community Service & Self-Sufficiency
	FSS Action Plan/s for public housing and/or Section 8	Annual Plan: Community Service & Self-Sufficiency
	Section 3 documentation required by 24 CFR Part 135, Subpart E	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 (PHEDEP) semi-annual performance report	Annual Plan: Safety and Crime Prevention

List of Supporting Documents Available for Review		
Applicable & On Display	Supporting Document	Related Plan Component
	<p>PHDEP-related documentation:</p> <ul style="list-style-type: none"> · Baseline law enforcement services for public housing developments assisted under the PHDEP plan; · Consortium agreement/s between the PHAs participating in the consortium and a copy of the payment agreement between the consortium and HUD (applicable only to PHAs participating in a consortium as specified under 24 CFR 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. 	Annual Plan: Safety and Crime Prevention
X	<p>Policy on Ownership of Pets in Public Housing Family Developments (as required by regulation at 24 CFR Part 960, Subpart G)</p> <p><input type="checkbox"/> check here if included in the public housing A & O Policy</p>	Pet Policy
	The results of the most recent fiscal year audit of the PHA conducted under section 5(h)(2) of the U.S. Housing Act of 1937 (42 U. S.C. 1437c(h)), the results of that audit and the PHA's response to any findings	Annual Plan: Annual Audit
	Troubled PHAs: MOA/Recovery Plan	Troubled PHAs
	Other supporting documents (optional) (list individually; use as many lines as necessary)	(specify as needed)

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary						
PHA Name: Jasper Housing Authority		Grant Type and Number Capital Fund Program: TX24P492***** Capital Fund Program Replacement Housing Factor Grant No:			Federal FY of Grant: 2001	
231 <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input checked="" type="checkbox"/> Revised Annual Statement (revision no: 1) <input type="checkbox"/> Performance and Evaluation Report for Period Ending: <input type="checkbox"/> Final Performance and Evaluation Report						
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost		
		Original	Revised	Obligated	Expended	
1	Total non-CFP Funds					
2	1406 Operations	12231	12231	12200	12200	
3	1408 Management Improvements	14000.00	23000.00	20483.57		
4	1410 Administration	12479	12479.00	5731.16	4131.70	
5	1411 Audit	2800.00	2800.00	2800.00		
6	1415 liquidated Damages					
7	1430 Fees and Costs	3000.00	0.00			
8	1440 Site Acquisition					
9	1450 Site Improvement	20000.00	16000.00	999.27	630.99	
10	1460 Dwelling Structures	35287.00	30287.00	10403.73		
11	1465.1 Dwelling Equipment—Nonexpendable	0.00	5000.00	2891.75		
12	1470 Nondwelling Structures	5000.00	3000.00			
13	1475 Nondwelling Equipment	20000.00	20000.00	17748.62	17748.62	
14	1485 Demolition					
15	1490 Replacement Reserve					
16	1492 Moving to Work Demonstration					
17	1495.1 Relocation Costs					
18	1498 Mod Used for Development					
19	1502 Contingency					
20	Amount of Annual Grant: (sum of lines 2-19)	124797.00	124797.00	73258.10	34711.31	
21	Amount of line 20 Related to LBP Activities					

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary				
PHA Name: Jasper Housing Authority		Grant Type and Number Capital Fund Program: TX24P492***** Capital Fund Program Replacement Housing Factor Grant No:		Federal FY of Grant: 2001
231 <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input checked="" type="checkbox"/> Revised Annual Statement (revision no: 1)				
<input type="checkbox"/> Performance and Evaluation Report for Period Ending: <input type="checkbox"/> Final Performance and Evaluation Report				
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost
22	Amount of line 20 Related to Section 504 Compliance			
23	Amount of line 20 Related to Security			
24	Amount of line 20 Related to Energy Conservation Measures			

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part II: Supporting Pages								
PHA Name: JASPER HOUSING AUTHORITY			Grant Type and Number Capital Fund Program #: TX24P49250101 Capital Fund Program Replacement Housing Factor #:			Federal FY of Grant: 2001		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work
				Original	Revised	Funds Obligated	Funds Expended	
TX492-001								
Myrtis Village	OPERATIONS	1406		12231.00	12231.00	12200.00	12200.00	
	MANAGEMENT IMPROVEMENT	1408		14000.00	23000.00	20483.57		
	Travel, training, software, resident participation activities, advertising							
	ADMINISTRATION	1410		12479.00	12479.00	5731.16	4131.70	
	Wages, sundry							
	AUDIT	1411		2800.00	2800.00	2800.00		
	FEES AND COSTS	1430		3000.00	0	0		
	SITE IMPROVEMENT	1450		20000.00	16000.00	999.27	630.99	
	Accessibility, fences, street							
	DWELLING STRUCTURES	1460		35287.00	30287.00	10403.73		
	Major rehab, painting, floors, etc.							
	DWELLING EQUIPMENT – NON EX	1465.1		0.00	5000.00	2891.75		
	NON-DWELLING STRUCTURES	1470		5000.00	3000.00	0.00		
	Storage upgrades							
	NON-DWELLING EQUIPMENT	1475		20000.00	20000.00	17748.62	17748.62	
	Lawn equipment, computers & peripherals, tools							

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part II: Supporting Pages								
PHA Name: JASPER HOUSING AUTHORITY		Grant Type and Number Capital Fund Program #: TX24P49250101 Capital Fund Program Replacement Housing Factor #:			Federal FY of Grant: 2001			
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work
				Original	Revised	Funds Obligated	Funds Expended	
	TOTAL			124797.00	124797.00	73178.00	34711.31	

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

PHA Name: JASPER HOUSING AUTHORITY		Grant Type and Number Capital Fund Program #: TX24P492***** Capital Fund Program Replacement Housing Factor #:					Federal FY of Grant: 2001
Development Number Name/HA-Wide Activities	All Fund Obligated (Quart Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates
	Original	Revised	Actual	Original	Revised	Actual	
	6-30-2003			6-30-2004			

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary					
PHA Name: JASPER HOUSING AUTHORITY		Grant Type and Number Capital Fund Program: TX24P492***** Capital Fund Program Replacement Housing Factor Grant No:		Federal FY of Grant: 2002	
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input checked="" type="checkbox"/> Revised Annual Statement (revision no: 1)					
<input type="checkbox"/> Performance and Evaluation Report for Period Ending: <input type="checkbox"/> Final Performance and Evaluation Report					
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations	12479.00	11815.00		
3	1408 Management Improvements	11318.00	11825.00		
4	1410 Administration	12479.00	11815.00		
5	1411 Audit				
6	1415 liquidated Damages				
7	1430 Fees and Costs	2000.00	2000.00		
8	1440 Site Acquisition				
9	1450 Site Improvement	5000.00	5000.00		
10	1460 Dwelling Structures	8000.00	50706.00		
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Nondwelling Structures	64000.00	5000.00		
13	1475 Nondwelling Equipment	9521.00	20000.00		
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1498 Mod Used for Development				
19	1502 Contingency				
20	Amount of Annual Grant: (sum of lines 2-19)	124797.00	118161.00		
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 Compliance				
23	Amount of line 20 Related to Security				

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary					
PHA Name: JASPER HOUSING AUTHORITY		Grant Type and Number Capital Fund Program: TX24P492***** Capital Fund Program Replacement Housing Factor Grant No:		Federal FY of Grant: 2002	
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input checked="" type="checkbox"/> Revised Annual Statement (revision no: 1 <input type="checkbox"/> Performance and Evaluation Report for Period Ending: <input type="checkbox"/> Final Performance and Evaluation Report					
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
24	Amount of line 20 Related to Energy Conservation Measures				

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part II: Supporting Pages								
PHA Name: JASPER HOUSING AUTHORITY			Grant Type and Number Capital Fund Program #: TX24P492***** Capital Fund Program Replacement Housing Factor #:			Federal FY of Grant: 2002		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work
				Original	Revised	Funds Obligated	Funds Expended	
TX492-001								
Myrtis Village	OPERATIONS	1406		12479.00	11815.00			
	MANAGEMENT IMPROVEMENT	1408		11318.00	11825.00			
	(training security upgrades)			(3500 5203 2615)	(3500 5700 2625)			
	ADMINISTRATION	1410		12479.00	11815.00			
	(wages sundry)			(9000 2479)	(9000 2815)			
	FEES AND COSTS	1415		2000.00	2000.00			
	Inspections, certifications							
	SITE IMPROVEMENT	1450		5000.00	5000.00			
	Playground bed and landscaping							
	DWELLING STRUCTURES	1460		8000.00	50706.00			
	(Painting fixtures/plumbing flooring visitability/504 mod screens repair)			(2500 2500 3000)	(4000 7500 12000 15000 6706)			
	NON-DWELLING STRUCTURES	1470		64000.00	5000.00			

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part II: Supporting Pages								
PHA Name: JASPER HOUSING AUTHORITY			Grant Type and Number Capital Fund Program #: TX24P492***** Capital Fund Program Replacement Housing Factor #:			Federal FY of Grant: 2002		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work
				Original	Revised	Funds Obligated	Funds Expended	
	(family development ctr upgrade storage)			(640000 0)	(0 5000)			
	NON-DWELLING EQUIPMENT	1475		9521.00	20,000.00			
	(Computers office equipment lawn equipment)			(2521 5000 2000)	(5000 5500 9500)			

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

PHA Name:		Grant Type and Number Capital Fund Program #: Capital Fund Program Replacement Housing Factor #:				Federal FY of Grant: 2002	
Development Number Name/HA-Wide Activities	All Fund Obligated (Quart Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates
	Original	Revised	Actual	Original	Revised	Actual	
TX492-001 Myrtis Village	9-30-04			9-30-05			

CAPITAL FUND PROGRAM TABLES START HERE

Annual Statement/Performance and Evaluation Report					
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I: Summary					
PHA Name: JASPER HOUSING AUTHORITY		Grant Type and Number Capital Fund Program Grant No: TX24P492***** Replacement Housing Factor Grant No:			Federal FY of Grant: 2003
<input checked="" type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) <input type="checkbox"/> Performance and Evaluation Report for Period Ending: <input type="checkbox"/> Final Performance and Evaluation Report					
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations	11816.00			
3	1408 Management Improvements	14000.00			
4	1410 Administration	11816.00			
5	1411 Audit	2600.00			
6	1415 Liquidated Damages				
7	1430 Fees and Costs	9000.00			
8	1440 Site Acquisition				
9	1450 Site Improvement	13000.00			
10	1460 Dwelling Structures	39000.00			
11	1465.1 Dwelling Equipment—Nonexpendable	5500.00			
12	1470 Nondwelling Structures	2429.00			
13	1475 Nondwelling Equipment	9000.00			
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1499 Development Activities				
19	1501 Collateralization or Debt Service				

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I: Summary					
PHA Name: JASPER HOUSING AUTHORITY		Grant Type and Number Capital Fund Program Grant No: TX24P492***** Replacement Housing Factor Grant No:		Federal FY of Grant: 2003	
<input checked="" type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) <input type="checkbox"/> Performance and Evaluation Report for Period Ending: <input type="checkbox"/> Final Performance and Evaluation Report					
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
20	1502 Contingency				
21	Amount of Annual Grant: (sum of lines 2 – 20)	118161.00			
22	Amount of line 21 Related to LBP Activities				
23	Amount of line 21 Related to Section 504 compliance				
24	Amount of line 21 Related to Security – Soft Costs				
25	Amount of Line 21 Related to Security – Hard Costs				
26	Amount of line 21 Related to Energy Conservation Measures				

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part II: Supporting Pages								
PHA Name: JASPER HOUSING AUTHORITY			Grant Type and Number Capital Fund Program Grant No: TX24P492003 Replacement Housing Factor Grant No:			Federal FY of Grant: 2003		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
TX492-001	OPERATIONS	1406		11816.00				
	MANAGEMENT IMPROVEMENTS	1408		14000.00				
	Training, travel, security, follow-up plan activities							
	ADMINISTRATION	1410		11816.00				
	Wages, software							
	AUDIT	1411		2600.00				
	FEES AND COSTS	1430		9000.00				
	Inspection, certifications							
	SITE IMPROVEMENT	1450		13000.00				
	Landscaping/drainage							
	DWELLING STRUCTURES	1460		39000.00				
	Unit rehab: painting, plumbing, flooring, visitability							
	DWELLING EQUIPMENT	1465	1	5500.00				
	Heat/a-c replacement							
	NON-DWELLING STRUCTURES	1470		2429.00				
	Storage and Laundromat rehab							
	NON-DWELLING EQUIPMENT	1475		9000.00				

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part III: Implementation Schedule							
PHA Name: JASPER HOUSING AUTHORITY		Grant Type and Number Capital Fund Program No: TX24P492***** Replacement Housing Factor No:				Federal FY of Grant: 2003	
Development Number Name/HA-Wide Activities	All Fund Obligated (Quarter Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates
	Original	Revised	Actual	Original	Revised	Actual	
TX492-001 MYRTIS VILLAGE	12-31-2004			12-31-2005			

Capital Fund Program Five-Year Action Plan

Part I: Summary

PHA Name		<input checked="" type="checkbox"/> Original 5-Year Plan <input type="checkbox"/> Revision No:			
Development Number/Name/HA-Wide	Year 1	Work Statement for Year 2 FFY Grant: 2004 PHA FY: 01/01/04	Work Statement for Year 3 FFY Grant: 2005 PHA FY: 01/01/2005	Work Statement for Year 4 FFY Grant:2006 PHA FY: 01/01/06	Work Statement for Year 5 FFY Grant: 2007 PHA FY: 01/01/07
	Annual Statement				
TX492-001 MYRTIS VILLAGE		\$118,161.00	\$118,161.00	\$118,161.00	\$118,161.00
CFP Funds Listed for 5-year planning		\$118,161.00	\$118,161.00	\$118,161.00	\$118,161.00
Replacement Housing Factor Funds					

Capital Fund Program Five-Year Action Plan

Part II: Supporting Pages—Work Activities

Activities for Year 1	Activities for Year :2____ FFY Grant: 2004 PHA FY: 01/01/2004			Activities for Year: __3_ FFY Grant: 2005 PHA FY: 01/01/2005		
	Development Name/Number	Major Work Categories	Estimated Cost	Development Name/Number	Major Work Categories	Estimated Cost
See	TX492-001 MYRTIS VILLAGE			TX492-001 MYRTIS VILLAGE		
Annual		Roofing	14,500.00		Roofing	14,368.00
Statement		Admin/management	23,632.00		Admin/management	23,632.00
		Other management			Other management	
		Street Rehab	13,568.00		Drainage/curb rehab	15,000.00
		Garden	3,500.00		Playground equip	3,000.00
		Flooring (10) units	28,661.00		Flooring (10) units	28,661.00
		Other unit rehab	11,300.00		Other unit rehab	14,500.00
		Maintenance equip	11,500.00		Dwelling equipment	6,500.00
		Other non-dwell. Equ.	11,500.00		Office equipment	6,500.00
					Storage	6,000.00

Total CFP Estimated Cost	\$118,161.00			\$118,161.00
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Capital Fund Program Five-Year Action Plan
Part II: Supporting Pages—Work Activities

Activities for Year :_4___ FFY Grant: 2006 PHA FY: 010106			Activities for Year: _5___ FFY Grant: 2007 PHA FY: 010107		
Development Name/Number	Major Work Categories	Estimated Cost	Development Name/Number	Major Work Categories	Estimated Cost
TX492-001 MYRTIS VILLAGE			TX492-001 MYRTIS VILLAGE		
	Roofing	11,368.00	Windows/storm doors	Windows/storm doors	21,868.00
	Admin/management	23,632.00	Administrative/manag	Administrative/manag	23,632.00
	Street closure	12,500.00	Computers	Computers	8,000.00
	Garden	3,000.00	Other unit rehab	Other unit rehab	50,000.00
	Flooring (10) units	28,661.00	Site improvement	Site improvement	4,500.00
	Other unit rehab	19,000.00	Equipment	Equipment	10,000.00
	Equipment/storage	2,500.00			
	Office equipment	3,000.00			
	Computers, etc.	8,000.00			
	Storage building	6,500.00			
Total CFP Estimated Cost		\$118,161.00			\$118,161.00

Capital Fund Program Five-Year Action Plan

Part I: Summary

S A M P L E

PHA Name <i>Anytown Housing Authority</i>		<input type="checkbox"/> Original 5-Year Plan <input type="checkbox"/> Revision No:			
Development Number/Name/HA-Wide	Year 1	Work Statement for Year 2 FFY Grant: 2002 PHA FY: 2002	Work Statement for Year 3 FFY Grant: 2003 PHA FY: 2003	Work Statement for Year 4 FFY Grant: 2004 PHA FY: 2004	Work Statement for Year 5 FFY Grant: 2005 PHA FY: 2005
	<i>Annual Statement</i>				
10-01/Main Street		\$80,000	\$36,000	\$65,000	\$55,000
<i>10-02/Broadway</i>		\$90,000	\$40,900	\$40,000	\$43,000
<i>HA-wide</i>		\$100,000	\$50,000	\$35,000	\$27,000
CFP Funds Listed for 5-year planning		\$270,000	\$162,900	\$140,000	125,000
Replacement Housing Factor Funds		\$40,000			

Capital Fund Program Five-Year Action Plan

Part II: Supporting Pages—Work Activities

S A M P L E

Activities for Year 1	Activities for Year : <u>2</u> FFY Grant: 2002 PHA FY: 2002			Activities for Year: <u>3</u> FFY Grant: 2003 PHA FY: 2003		
	Development Name/Number	Major Work Categories	Estimated Cost	Development Name/Number	Major Work Categories	Estimated Cost
See	10-01/Main Street	Porches	\$35,000	10-01/Main Street	Security Doors replaced	\$36,000
		Doors	\$45,000			
	<i>Subtotal</i>		\$80,000			
Annual	10-02/Broadway	Windows	\$55,000	10-02/Broadway	Kitchen Cabinets	\$40,900
		<i>Site Improvements</i>	\$35,000			
	<i>Subtotal</i>		\$90,000			
Statement	HA-wide	Office Equip/Computer System upgrade	\$100,000	HA-Wide	Security/Main Office and Common Hallways	\$50,000

	Total CFP Estimated Cost		\$270,000			\$162,900

Capital Fund Program Five-Year Action Plan

Part II: Supporting Pages—Work Activities

Activities for Year: 4

FFY Grant: 2004

PHA FY: 2004

Development Name/Number	Major Work Categories	Estimated Cost
<i>10-01/Main Street</i>	<i>Storage sheds and landscaping</i>	\$65,000
10-02/Broadway	<i>Tub/shower replacement</i>	\$40,000
<i>HA-wide</i>	<i>Lead-based paint abatement</i>	\$35,000
Total CFP Estimated Cost		\$140,000

SAMPLE (continued)

Activities for Year: 5

FFY Grant: 2005

PHA FY: 2005

Development Name/Number	Major Work Categories	Estimated Cost
<i>10-01/Main Street</i>	<i>Replace bathroom tile</i>	\$55,000
10-02/Broadway	<i>New gutters and interior doors</i>	\$43,000
<i>HA-wide</i>	<i>Office Furniture</i>	\$27,000
		\$125,000

Capital Fund Program 5-Year Action Plan

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

CFP 5-Year Action Plan		
<input type="checkbox"/> Original statement <input type="checkbox"/> Revised statement		
Development Number	Development Name (or indicate PHA wide)	
Description of Needed Physical Improvements or Management Improvements	Estimated Cost	Planned Start Date (HA Fiscal Year)
Total estimated cost over next 5 years		

PHA Public Housing Drug Elimination Program Plan

Note: THIS PHDEP Plan template (HUD 50075-PHDEP Plan) is to be completed in accordance with Instructions located in applicable PIH Notices.

Section 1: General Information/History

A. Amount of PHDEP Grant \$ _____

B. Eligibility type (Indicate with an "x") **N1**_____ **N2**_____ **R**_____

C. FFY in which funding is requested _____

D. Executive Summary of Annual PHDEP Plan

In the space below, provide a brief overview of the PHDEP Plan, including highlights of major initiatives or activities undertaken. It may include a description of the expected outcomes. The summary must not be more than five (5) sentences long

E. Target Areas

Complete the following table by indicating each PHDEP Target Area (development or site where activities will be conducted), the total number of units in each PHDEP Target Area, and the total number of individuals expected to participate in PHDEP sponsored activities in each Target Area. Unit count information should be consistent with that available in PIC.

PHDEP Target Areas (Name of development(s) or site)	Total # of Units within the PHDEP Target Area(s)	Total Population to be Served within the PHDEP Target Area(s)

F. Duration of Program

Indicate the duration (number of months funds will be required) of the PHDEP Program proposed under this Plan (place an "x" to indicate the length of program by # of months. For "Other", identify the # of months).

12 Months _____ **18 Months** _____ **24 Months** _____

G. PHDEP Program History

Indicate each FY that funding has been received under the PHDEP Program (place an “x” by each applicable Year) and provide amount of funding received. If previously funded programs have not been closed out at the time of this submission, indicate the fund balance and anticipated completion date. The Fund Balances should reflect the balance as of Date of Submission of the PHDEP Plan. The Grant Term End Date should include any HUD-approved extensions or waivers. For grant extensions received, place “GE” in column or “W” for waivers.

Fiscal Year of Funding	PHDEP Funding Received	Grant #	Fund Balance as of Date of this Submission	Grant Extensions or Waivers	Grant Start Date	Grant Term End Date
FY 1995						
FY 1996						
FY 1997						
FY1998						
FY 1999						

Section 2: PHDEP Plan Goals and Budget

A. PHDEP Plan Summary

In the space below, summarize the PHDEP strategy to address the needs of the target population/target area(s). Your summary should briefly identify: the broad goals and objectives, the role of plan partners, and your system or process for monitoring and evaluating PHDEP-funded activities. This summary should not exceed 5-10 sentences.

B. PHDEP Budget Summary

Enter the total amount of PHDEP funding allocated to each line item.

FFY _____ PHDEP Budget Summary	
Original statement	
Revised statement dated:	
Budget Line Item	Total Funding
9110 – Reimbursement of Law Enforcement	
9115 - Special Initiative	
9116 - Gun Buyback TA Match	
9120 - Security Personnel	
9130 - Employment of Investigators	
9140 - Voluntary Tenant Patrol	
9150 - Physical Improvements	
9160 - Drug Prevention	
9170 - Drug Intervention	
9180 - Drug Treatment	
9190 - Other Program Costs	
TOTAL PHDEP FUNDING	

C. PHDEP Plan Goals and Activities

In the tables below, provide information on the PHDEP strategy summarized above by budget line item. Each goal and objective should be numbered sequentially for each budget line item (where applicable). Use as many rows as necessary to list proposed activities (additional rows may be inserted in the tables). PHAs are not required to provide information in shaded boxes. Information provided must be concise—not to exceed two sentences in any column. Tables for line items in which the PHA has no planned goals or activities may be deleted.

9110 – Reimbursement of Law Enforcement	Total PHDEP Funding: \$
Goal(s)	
Objectives	

Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHEDE P Funding	Other Funding (Amount/ Source)	Performance Indicators
1.							
2.							
3.							

9115 - Special Initiative					Total PHDEP Funding: \$		
Goal(s)							
Objectives							
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	Other Funding (Amount/ Source)	Performance Indicators
1.							
2.							
3.							

9116 - Gun Buyback TA Match					Total PHDEP Funding: \$		
Goal(s)							
Objectives							
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	Other Funding (Amount /Source)	Performance Indicators
1.							
2.							
3.							

9120 - Security Personnel					Total PHDEP Funding: \$		
Goal(s)							
Objectives							
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	Other Funding (Amount /Source)	Performance Indicators
1.							
2.							
3.							

9130 – Employment of Investigators					Total PHDEP Funding: \$		
Goal(s)							
Objectives							
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	Other Funding (Amount /Source)	Performance Indicators
1.							
2.							
3.							

9140 – Voluntary Tenant Patrol					Total PHDEP Funding: \$		
Goal(s)							
Objectives							
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	Other Funding (Amount /Source)	Performance Indicators
1.							
2.							
3.							

9150 - Physical Improvements					Total PHDEP Funding: \$		
Goal(s)							
Objectives							
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	Other Funding (Amount /Source)	Performance Indicators
1.							
2.							
3.							

9160 - Drug Prevention					Total PHDEP Funding: \$		
Goal(s)							
Objectives							
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	Other Funding (Amount /Source)	Performance Indicators

1.							
2.							
3.							

9170 - Drug Intervention					Total PHDEP Funding: \$		
Goal(s)							
Objectives							
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHDEP Funding	Other Funding (Amount /Source)	Performance Indicators
1.							
2.							
3.							

9180 - Drug Treatment					Total PHDEP Funding: \$		
Goal(s)							
Objectives							
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHDEP Funding	Other Funding (Amount /Source)	Performance Indicators
1.							
2.							
3.							

9190 - Other Program Costs					Total PHDEP Funds: \$		
Goal(s)							
Objectives							
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHDEP Funding	Other Funding (Amount /Source)	Performance Indicators
1.							
2.							
3.							

Required Attachment __D__: Resident Member on the PHA Governing Board

1. Yes No: Does the PHA governing board include at least one member who is directly assisted by the PHA this year? (if no, skip to #2)

A. Name of resident member(s) on the governing board:

MARY STOTT

B. How was the resident board member selected: (select one)?

- Elected
 Appointed

C. The term of appointment is (include the date term expires): 4-19-2002 TO 4-19-2004

2. A. If the PHA governing board does not have at least one member who is directly assisted by the PHA, why not?

- the PHA is located in a State that requires the members of a governing board to be salaried and serve on a full time basis
 the PHA has less than 300 public housing units, has provided reasonable notice to the resident advisory board of the opportunity to serve on the governing board, and has not been notified by any resident of their interest to participate in the Board.
 Other (explain):

B. Date of next term expiration of a governing board member: AUGUST 2003

C. Name and title of appointing official(s) for governing board (indicate appointing official for the next position):

MAYOR R.C. HORN, CITY OF JASPER, TEXAS

Required Attachment ___E___: Membership of the Resident Advisory Board or Boards

List members of the Resident Advisory Board or Boards: (If the list would be unreasonably long, list organizations represented or otherwise provide a description sufficient to identify how members are chosen.)

MARY STOTT
BERTHA HAMILTON
MAMIE MORRIS

ATTACHMENT: F COMMENTS OF RESIDENT ADVISORY BOARD AND PHA RESPONSE

There were no corporate comments submitted to PHA by Resident Advisory Board. An individual RAB member made one comment privately to the executive director, but wished not to be identified. That comment was a statement that HUD should include money for excess water usage in Capital funds so that residents could use water to wash cars, fill wading pools, water plants and conduct other outdoor water activities as often as they wished. This comment was presented to the Board of Commissioners. The Board did not make any changes to the plan to accommodate this comment, but agreed to explore the possibility of individual meters within the coming year.

ATTACHMENT: G FOLLOW UP PLAN TO RESIDENT ASSESSMENT SURVEY

The Authority determined that the Resident Assessment Survey for FY 2001 yielded information that suggested that some of its residents did not perceive that the Authority provided enough information about their leases and that some of its residents perceived that Authority staff were rude/unprofessional in the conduct of Authority business. In its history, certainly since January of 1996, the Authority has sincerely and actively endeavored to provide extensive information to all of its customers regarding its rules, regulations, procedures, documents, policies, activities, finances, programs, and so on. We have used a wide variety of means and methods to ensure delivery/dissemination of this information. The Authority is and always has been diligent in training its personnel regarding interaction with its customers. The staff has always been small and thus easily monitored. Rude/unprofessional conduct has never been tolerated. It has neither been observed by management nor reported to management or to the Board of Commissioners. In addition, the Authority has actively pursued input from its residents and participation by its residents in all phases of its planning and policy development activities.

Thus, it is the Authority's position that it cannot adequately identify any failures in these areas of concern on the basis of the information available. It is equally apparent that it would be unrealistic to alter policies, procedures, methods, etc. to counter these negative perceptions without eliciting more input from its resident population. To obtain this information, the Authority will engage an independent researcher to make individual visits to resident homes. The results of that research will be presented in the form of a report to the management. The report will be devised in such a manner as to protect the anonymity of individual residents. Subsequent to this activity, the Authority will conduct a resident meeting in which the report will be presented and public comment will be invited and collected, and the Executive Director will conduct individual visits with as many residents as indicate a desire for such a visit. The Authority will use the results of these activities to determine if changes in its methods are necessitated, and if necessitated, to determine what those changes will be. As has always been the case, the Authority will endeavor to engage residents in the planning and development of any changes indicated by this process. It is also the Authority's intent to use Capital Funds for FY 2003, Line Item 1408, Management Improvements, to conduct these activities.

**REQUIRED ATTACHMENT: F : COMMENTS OF RESIDENT ADVISORY
BOARD AND EXPLANATION OF PHA RESPONSE**

There were no comments