

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

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Small PHA Plan Update  
Annual Plan for Fiscal Year: **2004**

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

**PHA Plan  
Agency Identification**

**PHA Name: Melvindale Housing Commission**

**PHA Number: MI048**

**PHA Fiscal Year Beginning: 01/2004**

**PHA Plan Contact Information:**

Name: **SANDRA L. LAW**

Phone: **313-429-1095**

TDD:

Email (if available): **housing@melvindale.org**

**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 20

[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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<input checked="" type="checkbox"/> Attachment B: Capital Fund Program Annual Statement	
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<input checked="" type="checkbox"/> Attachment 1: Resident Membership on PHA Board or Governing Body	
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<input checked="" type="checkbox"/> Other (List below, providing each attachment name)	
ATTACHMENT – 3 – STATEMENT OF PROGRESS	
ATTACHMENT – 5 – WAITING LIST INFORMATION FOR PUBLIC HOUSING	
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## **ii. Executive Summary**

[24 CFR Part 903.7 9 (r)]

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

In 19 years of service the Melvindale Housing Commission continues to remain faithful in providing affordable and decent housing to our residents as an equal opportunity housing facility.

We strive to continue our position for affordable independent living in a safe and secure environment with the newest addition of security cameras inside the building to cover areas that were not covered prior. As well as the continuing of the updating renovations needed for competitive safe housing.

Having a quality preventive maintenance service helps retain a high standard of the property, which contributes to the safe and secure environment necessary for the vulnerable population we serve and will continue to attract.

The personnel of the Melvindale Housing Commission work hard to insure that the residents feel this is their home. That they are as safe here as they would be anywhere. The diversity of our residents in their varied cultures, race, religion, and ethnicity help motivate and empower themselves as well as the employees to make this a place that anyone would want to live.

Case in point, showing the motivation and empowerment of the employees and residents is when we had the recent black out. The residents simply took it as an inconvenience. That is until word came that our building would be used as an evacuation site due to the possible explosion at the nearby oil refinery.

Displaced persons began to arrive with nothing but what they could grab before they were forced from their homes. Employees and residents gathered food and water to help those displaced. Employees and residents also worked side by side in the patrolling of the property. As the hours went on, and night turned into day and more of the residents began to awake they too joined into the effort. Some offered their food and drink, and some offered the use of their apartments so that those who were ill could have a place to lie down.

At a time when patience was low and tempers were high, the generous hearts, remarkable spirits and sense of pride shown from our City, our Employees and our Residents shows that Coogan Terrace Pride is strong and growing stronger everyday.

## **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.

## **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? \$ 191,832.00

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

<b>Demolition/Disposition Activity Description (Not including Activities Associated with HOPE VI or Conversion Activities)</b>
1a. Development name:
1b. Development (project) number:

2. Activity type: Demolition <input type="checkbox"/> Disposition <input type="checkbox"/>
3. Application status (select one) Approved <input type="checkbox"/> Submitted, pending approval <input type="checkbox"/> Planned application <input type="checkbox"/>
4. Date application approved, submitted, or planned for submission: <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 (File name)
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 Michigan**

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:

The Melvindale Housing Commission operates a 199-unit senior/handicap public housing high-rise, as well as a small Section 8 program. The year 2004 and the years following offer new challenges for public housing. The Melvindale Housing Commission accepts these challenges through their commitment to provide safe, decent, affordable housing for low-income individuals and families.

The strength of our mission encourages forward movement supporting our position for affordable independent living. By remaining in compliance with applicable statutes and regulations, we will make our units more marketable to the community to become the housing of choice for the very low-income individuals and families of our community. We seek to achieve a level of customer satisfaction, which will give the agency the highest score possible in the Public Housing Assessment System by promoting a positive work environment and projecting a customer-friendly and fiscally prudent leadership. A quality preventive maintenance plan will assist in retaining a high standard of property and in turn will contribute to the safe and secure



environment necessary for the low income and very low income residents we serve and will continue to attract.

Through appropriate improvement and beautification of landscaping and litter free properties, we strive to develop pride in the environment of our present and future residents, thus achieving the perception that low-income housing means safe, friendly, comfortable and affordable housing. We look to the future to expand the range and quality of housing choices available, and to reduce the turn around time for placement of our clients.

To reduce our dependency of federal funding by researching alternative funding sources to meet operational goals, and strive to operate so that income exceeds expenses. One way this can be achieved is to provide opportunities for the outside community to participate in in-house activities and functions. This effort will enhance the image of public housing in our community and will strengthen community marketability by allowing the general public to view the inside of a public housing facility.

The self-sufficiency of our participants is of great importance to us. By assisting them in achieving this goal, they become not only economically and financially strengthened, but also, will build confidence and the feeling of independence.

### **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:**

The Melvindale Housing Commission will consider a Substantial Deviation from our Five (5) Year Plan when we fail to obtain our set goals and objectives by plus or minus ten (10) percent

#### **B. Significant Amendment or Modification to the Annual Plan:**

The Melvindale Housing Commission will consider a Significant Amendment or Modification to the Annual Plan when:

- A. Any financial matters regarding Capital Fund monies must be changed
- B. Addition of Non-Emergency work items not included in the Annual & Five (5)

Year Plan

- C. Any changes in regards to demolition or disposition of properties, conversion Activities.

|

**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.

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

### List of Supporting Documents Available for Review

Applicable & On Display	Supporting Document	Related Plan Component
X	Section 8 rent determination (payment standard) policies <input checked="" 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
	Follow-up Plan to Results of the PHAS Resident Satisfaction Survey (if necessary)	Annual Plan: Operations and Maintenance and Community Service & Self-Sufficiency
X	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 type="checkbox"/> check here if included in the public housing A & O Policy	Annual Plan: Grievance Procedures
X	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
	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
	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

### List of Supporting Documents Available for Review

Applicable & On Display	Supporting Document	Related Plan Component
	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 (PHDEP) semi-annual performance report	Annual Plan: Safety and Crime Prevention
	PHDEP-related documentation: <ul style="list-style-type: none"> <li>· Baseline law enforcement services for public housing developments assisted under the PHDEP plan;</li> <li>· 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);</li> <li>· Partnership agreements (indicating specific leveraged support) with agencies/organizations providing funding, services or other in-kind resources for PHDEP-funded activities;</li> <li>· Coordination with other law enforcement efforts;</li> <li>· Written agreement(s) with local law enforcement agencies (receiving any PHDEP funds); and</li> <li>· 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.</li> </ul>	Annual Plan: Safety and Crime Prevention
X	Policy on Ownership of Pets in Public Housing Family Developments (as required by regulation at 24 CFR Part 960, Subpart G) <input type="checkbox"/> check here if included in the public housing A & O Policy	Pet Policy
X	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**

<b>PHA Name: Melvindale Housing Commission</b>	<b>Grant Type and Number</b> Capital Fund Program: 2004 MI28P04850104 Capital Fund Program Replacement Housing Factor Grant No:	<b>Federal FY of Grant:</b> <b>2004</b>
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Original Annual Statement  
 Performance and Evaluation Report for Period Ending:  Reserve for Disasters/ Emergencies  Revised Annual Statement (revision no: )  
 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	19,183.00			
3	1408 Management Improvements				
4	1410 Administration				
5	1411 Audit				
6	1415 liquidated Damages				
7	1430 Fees and Costs				
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	160,000.00			
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Nondwelling Structures				
13	1475 Nondwelling Equipment	12,649.00			
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)	191,832.00			
21	Amount of line 20 Related to LBP Activities	-0-			
22	Amount of line 20 Related to Section 504 Compliance	-0-			
23	Amount of line 20 Related to Security	-0-			

Annual Statement/Performance and Evaluation Report						
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary						
PHA Name: <b>Melvindale Housing Commission</b>		Grant Type and Number Capital Fund Program: 2004 MI28P04850104 Capital Fund Program Replacement Housing Factor Grant No:			Federal FY of Grant: <b>2004</b>	
<input checked="" type="checkbox"/> Original Annual Statement		<input type="checkbox"/> Reserve for Disasters/ Emergencies			<input type="checkbox"/> Revised Annual Statement (revision no: )	
<input type="checkbox"/> Performance and Evaluation Report for Period Ending:		<input type="checkbox"/> Final Performance and Evaluation Report				
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost		
24	Amount of line 20 Related to Energy Conservation Measures	-0-				

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

PHA Name: Melvindale Housing Commission		Grant Type and Number Capital Fund Program #: 2004 MI28P04850104 Capital Fund Program Replacement Housing Factor #:			Federal FY of Grant: <b>2004</b>			
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work
				Original	Revised	Funds Obligated	Funds Expended	
MI048	Operations	1406		19,183				
MI048	Bathroom Renovations	1460		50,000				
MI048	Carpet Replacement in Units	1460		60,000				
MI048	Upgrade Heat/Cool	1460		50,000				
MI048	Comp. Hard/Software Upgrade/Repl	1475		4,649				
MI048	Replacement of X-Mas Des.	1475		4,000				
MI048	Comm/Lobby Furniture Replacement	1475		4,000				



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

PHA Name: Melvindale Housing Commission		Grant Type and Number Capital Fund Program #: 2004 MI28P04850104 Capital Fund Program Replacement Housing Factor #:					Federal FY of Grant: 2004
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	
MI048	3/31/06			9/30/07			
MI048	3/31/06			9/30/07			
MI048	3/31/06			9/30/07			
MI048	3/31/06			9/30/07			
MI048	3/31/06			9/30/07			
MI048	3/31/06			9/30/07			
MI048	3/31/06			9/30/07			

**Annual Statement/Performance and Evaluation Report**  
**Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary**

<b>PHA Name:</b> <b>Melvindale Housing Commission</b>	<b>Grant Type and Number</b> Capital Fund Program: 2003 MI28P04850103 Capital Fund Program Replacement Housing Factor Grant No:	<b>Federal FY of Grant:</b> <b>2003</b>
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Original Annual Statement  
 Performance and Evaluation Report for Period Ending:

Reserve for Disasters/ Emergencies  Revised Annual Statement (revision no: (1))  
 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	-0-	19,183.00		
3	1408 Management Improvements				
4	1410 Administration				
5	1411 Audit				
6	1415 liquidated Damages				
7	1430 Fees and Costs				
8	1440 Site Acquisition		12,649.00		
9	1450 Site Improvement	197,089.00	160,000.00		
10	1460 Dwelling Structures				
11	1465.1 Dwelling Equipment—Nonexpendable	50,000.00	-0-		
12	1470 Nondwelling Structures				
13	1475 Nondwelling Equipment				
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1498 Mod Used for Development				
19	1502 Contingency				
20	Amount of Annual Grant: (sum of lines 2-19)	247,089.00	191,832.00		
21	Amount of line 20 Related to LBP Activities	-0-			
22	Amount of line 20 Related to Section 504 Compliance	-0-			
23	Amount of line 20 Related to Security	-0-			

Annual Statement/Performance and Evaluation Report				
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary				
PHA Name: <b>Melvindale Housing Commission</b>		Grant Type and Number Capital Fund Program: 2003 MI28P04850103 Capital Fund Program Replacement Housing Factor Grant No:		Federal FY of Grant: <b>2003</b>
<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	-0-		

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

PHA Name: Melvindale Housing Commission		Grant Type and Number Capital Fund Program #: 2003 MI28P04850103 Capital Fund Program Replacement Housing Factor #:				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 Proposed Work
				Original	Revised	Funds Obligated	Funds Expended	
MI048	Build Garage	1470	1	50,000	-0-			
MI048	Replace Kitchen Floors	1460	200	197,089	160,000			
MI048	Operations	1406		-0-	19,183			
MI048	Landscape	1450		-0-	12,649			

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

PHA Name: Melvindale Housing Commission		Grant Type and Number Capital Fund Program #: 2003 MI28P04850103 Capital Fund Program Replacement Housing Factor #:					Federal FY of Grant: 2003	
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		
MI048	9/16/05			9/16/07				
MI048	9/16/05			9/16/07				
MI048	9/16/05			9/16/07				
MI048	9/16/05			9/16/07				



**Annual Statement/Performance and Evaluation Report**  
**Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary**

<b>PHA Name:</b> <b>Melvindale Housing Commission</b>	<b>Grant Type and Number</b> Capital Fund Program: 2002 MI28P04850102 Capital Fund Program Replacement Housing Factor Grant No:	<b>Federal FY of Grant:</b> <b>2002</b>
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Original Annual Statement  
 Performance and Evaluation Report for Period Ending: 9/30/03  
 Reserve for Disasters/ Emergencies  
 Revised Annual Statement (revision no: )  
 Final Performance and Evaluation Report

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations				
3	1408 Management Improvements				
4	1410 Administration				
5	1411 Audit				
6	1415 liquidated Damages				
7	1430 Fees and Costs				
8	1440 Site Acquisition				
9	1450 Site Improvement	55,089		18,796	18,796
10	1460 Dwelling Structures				
11	1465.1 Dwelling Equipment—Nonexpendable	177,000			
12	1470 Nondwelling Structures				
13	1475 Nondwelling Equipment	15,000		2,858	2,858
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)	247,089			
21	Amount of line 20 Related to LBP Activities	-0-			
22	Amount of line 20 Related to Section 504 Compliance	-0-			
23	Amount of line 20 Related to Security	25,089			

Annual Statement/Performance and Evaluation Report				
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary				
PHA Name: <b>Melvindale Housing Commission</b>		Grant Type and Number Capital Fund Program: 2002 MI28P04850102 Capital Fund Program Replacement Housing Factor Grant No:		Federal FY of Grant: <b>2002</b>
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input type="checkbox"/> Revised Annual Statement (revision no: )				
<input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 9/30/03 <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	-0-		



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

PHA Name: Melvindale Housing Commission		Grant Type and Number Capital Fund Program #: 2002 MI28P04850102 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	
MI048	Bathroom Renovations in units	1450		30,000				
MI048	Security Equipment new/upgrade/replace	1450		25,089		18,796	18,796	
MI048	Replacement of Appliance in units	1465.1	400	177,000				
MI048	Maintenance Equipment New/upgrade/replace	1475		15,000		2,858	2,858	

**Annual Statement/Performance and Evaluation Report**

**Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)**

**Part III: Implementation Schedule**

PHA Name: Melvindale Housing Commission		Grant Type and Number Capital Fund Program #: 2002 MI28P04850102 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	
MI048	5/30/04			5/30/06			
MI048	5/30/04			5/30/06			
MI048	5/30/04			5/30/06			
MI048	5/30/04			5/30/06			

**Annual Statement/Performance and Evaluation Report  
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary**

<b>PHA Name:</b> <b>Melvindale Housing Commission</b>	<b>Grant Type and Number</b> Capital Fund Program: 2001 MI28P04850101 Capital Fund Program Replacement Housing Factor Grant No:	<b>Federal FY of Grant:</b> <b>2001</b>
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Original Annual Statement     
 Reserve for Disasters/ Emergencies     
 Revised Annual Statement (revision no:    )
  
 Performance and Evaluation Report for Period Ending: 9/30/03     
 Final Performance and Evaluation Report

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations				
3	1408 Management Improvements				
4	1410 Administration				
5	1411 Audit				
6	1415 liquidated Damages				
7	1430 Fees and Costs	-0-	1200.00	1200.00	500.00
8	1440 Site Acquisition				
9	1450 Site Improvement	9083.00	47488.53	47488.53	35271.93
10	1460 Dwelling Structures	212473.00	184680.00	184680.00	105571.65
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Nondwelling Structures				
13	1475 Nondwelling Equipment	40000.00	28187.47	28187.47	28187.47
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				

**Annual Statement/Performance and Evaluation Report  
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary**

<b>PHA Name:</b> <b>Melvindale Housing Commission</b>	<b>Grant Type and Number</b> Capital Fund Program: 2001 MI28P04850101 Capital Fund Program Replacement Housing Factor Grant No:	<b>Federal FY of Grant:</b> <b>2001</b>
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Original Annual Statement     
 Reserve for Disasters/ Emergencies     
 Revised Annual Statement (revision no:    )
  
 Performance and Evaluation Report for Period Ending: 9/30/03     
 Final Performance and Evaluation Report

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
20	Amount of Annual Grant: (sum of lines 2-19)	261556.00	261556.00	261556.00	261556.00
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		20000.00		
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: Melvindale Housing Commission		Grant Type and Number Capital Fund Program #: 2001 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	
MI048	Screen/Window Repair-Replacement Caulk	1460		167473	100050	100050	35050	50%
MI048	Replacement of Canopy	1450		9083	27488.53	27488.53	19578	75%
MI048	Hallway Carpet Replacement	1460		45000	37207	37207	37207	100%
MI048	Truck/Plow Replacement	1475		40000	28187.47	28187.47	28187.47	100%
MI048	Architect	1430		-0-	1200	1200	500	90%
MI048	Outside Lighting repair-emergency	1450		-0-	20000	20000	15693.93	90%
MI048	Domestic waterpump repair - emergency	1460		-0-	7000	7000	1011.48	50%
MI048	Painting of Occ. Units	1460		-0-	40423	40423	32303.17	90%

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

PHA Name: Melvindale Housing Commission		<b>Grant Type and Number</b> Capital Fund Program #: 2001 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	

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

PHA Name: Melvindale Housing Commission	<b>Grant Type and Number</b> Capital Fund Program #: 2001 Capital Fund Program Replacement Housing Factor #:	Federal FY of Grant: 2001
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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	
MI048	6/30/03			6/30/05			
MI048	6/30/03			6/30/05			
MI048	6/30/03			6/30/05			
MI048	6/30/03			6/30/05			
MI048	6/30/03			6/30/05			
MI048	6/30/03			6/30/05			
MI048	6/30/03			6/30/05			
MI048	6/30/03			6/30/05			

## 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.

<b>CFP 5-Year Action Plan</b>		
<input type="checkbox"/> Original statement <input checked="" type="checkbox"/> Revised statement		
Development Number	Development Name (or indicate PHA wide)	
MI048	Coogan Terrace	
Description of Needed Physical Improvements or Management Improvements	Estimated Cost	Planned Start Date (HA Fiscal Year)
Building of Garage	75,000	2005
Replace Counter Tops/Cabinets	94,650	2005
Architect	3,000	2005
Operations	19,182	2005
Painting of Occ. Units	25,500	2006
Replacement of window blinds	62,318	2006
Elevator Upgrades	84,832	2006
Operations	19,182	2006
Elevator Upgrades	181,832	2007
Operations	10,000	2007
Computer Hardware/software	7,000	2008
Maintenance equipment upgrade/replace	15,000	2008
Concrete work	125,000	2008
Landscaping/outdoor furnishings	25,650	2008
Operations	19,182	2008
Upgrade of heating & cooling system	172,650	2009
Operations	19,182	2009
<b>Total estimated cost over next 5 years</b>	<b>959,160</b>	



## 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.

<b>Fiscal Year of Funding</b>	<b>PHDEP Funding Received</b>	<b>Grant #</b>	<b>Fund Balance as of Date of this Submission</b>	<b>Grant Extensions or Waivers</b>	<b>Grant Start Date</b>	<b>Grant Term End Date</b>
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.

<b>FFY _____ PHDEP Budget Summary</b>	
<b>Original statement</b>	
<b>Revised statement dated:</b>	
<b>Budget Line Item</b>	<b>Total Funding</b>
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	
<b>TOTAL PHDEP FUNDING</b>	

### 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.

<b>9110 – Reimbursement of Law Enforcement</b>					<b>Total PHDEP Funding: \$</b>		
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.							

<b>9115 - Special Initiative</b>					<b>Total PHDEP Funding: \$</b>		
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.							

<b>9116 - Gun Buyback TA Match</b>					<b>Total PHDEP Funding: \$</b>		
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.							

<b>9120 - Security Personnel</b>					<b>Total PHDEP Funding: \$</b>		
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.							

<b>9130 - Employment of Investigators</b>					<b>Total PHDEP Funding: \$</b>		
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.							

<b>9140 – Voluntary Tenant Patrol</b>					<b>Total PHDEP Funding: \$</b>		
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.							

<b>9150 - Physical Improvements</b>					<b>Total PHDEP Funding: \$</b>		
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.							

<b>9160 - Drug Prevention</b>					<b>Total PHDEP Funding: \$</b>		
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.							

<b>9170 - Drug Intervention</b>					<b>Total PHDEP Funding: \$</b>		
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.							

<b>9180 - Drug Treatment</b>					<b>Total PHDEP Funding: \$</b>		
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.							

<b>9190 - Other Program Costs</b>					<b>Total PHDEP Funds: \$</b>		
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 1: 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:

Margaret Boyle

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

- Elected  
 Appointed

C. The term of appointment is (include the date term expires): Terms are (5) five years. Commissioner Boyle's Term expires 11/20/07

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:

11/19/03

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

Mayor of the City of Melvindale  
James M. Kinard

(election in Nov. 03, will determine new Mayor)

## **Required Attachment 2: 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.)

### RESIDENT ADVISORY BOARD MEMBERS

Leola Hamby  
Mary Konofalski  
Cathleen Saucedo  
Margaret McCarthy  
Margaret Boyle  
Leonard Wenzel  
Christine Koteles  
Susan Walker  
Jeffery Seidman  
Shirley Leach  
Dortha Kliaber  
Betty Crowe  
Pascal Pettinato  
Cheryl Werling  
Debra McDaniel  
Edward Pawlowski  
Donald Meyer

## STATEMENT OF PROGRESS

For almost two decades, the Melvindale Housing Commission has provided quality housing to hundreds of older persons, handicapped and disabled. The Melvindale Housing Commission continues to extend and expand these services to people in need of housing as we move forward in the 21<sup>st</sup>. century by addressing management, marketability, security, tenant based housing, maintenance, equal opportunity, fiscal responsibility and supportive services issues.

The Melvindale Housing Commission continues to promote a positive work environment by using the diverse roles performed by an efficient team of employees committed to excellence in strengthening its management.

The Melvindale Housing Commission has made every effort to provide a safe and secure environment through, improved lighting, in addition to security cameras inside and outside of the property. The resident perception of safety and security has improved the public housing development through monthly presentations to the residents given by the Melvindale Fire and The Melvindale Police Departments. The Melvindale Housing Commission purchased videos on safety and security for public viewing or on individual loan.

The Melvindale Housing Commission has implemented a preventative maintenance plan by computerizing work orders and use data to check appropriate and necessary replacement and/or repair in a cost saving turn around time.

The Melvindale Housing Commission tries very hard to be fiscally responsible and monitor expenditures to not exceed budget allocations. Through our initiatives, the installation of high frequency antennae will assist in generating additional funding to supplement HUD funding.

In an effort to enhance the public image of public housing. The Melvindale Housing Commission continues to provide opportunities for the outside community to participate in in-house activities and functions. The Wayne County Health Fair at Coogan Terrace is an initiative of city and county governments to allow health services and information on pertinent issues to be available to the tenants, and to the people in the community.

The supportive services opportunities for all residents has been made available through monthly sponsored activities that deal with health, social services, financial and security issues.

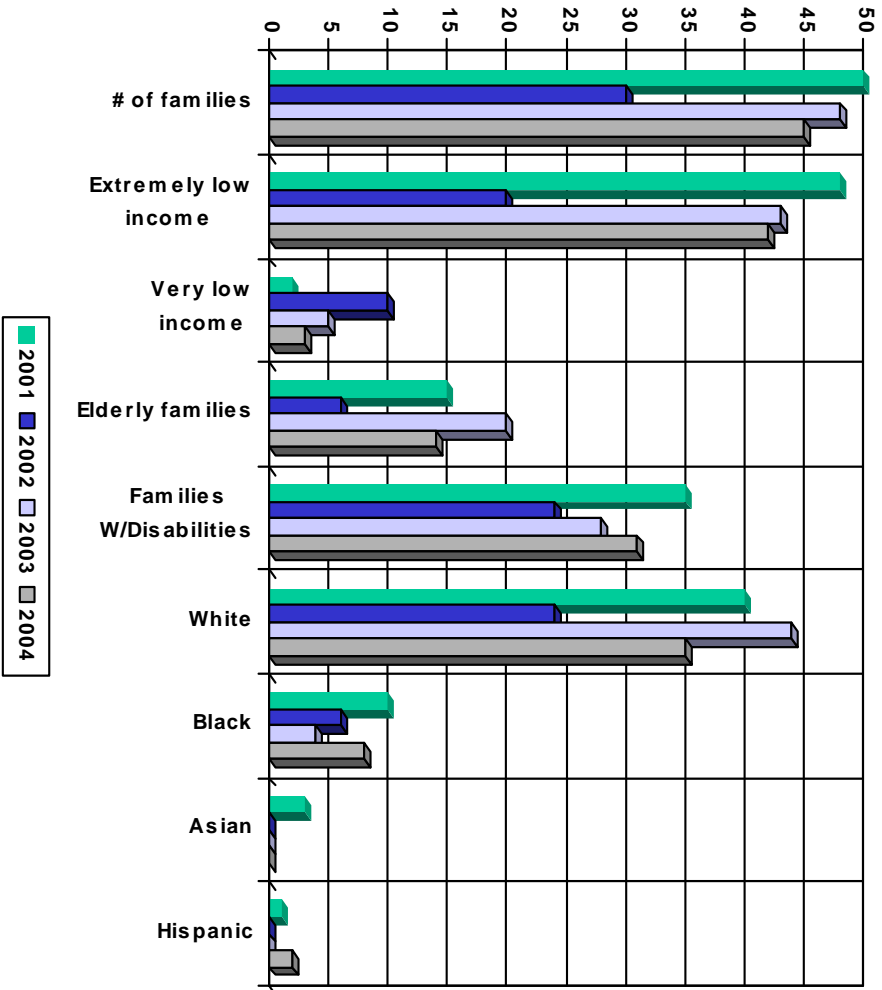
We have implemented a computer- training course as well as a book club, which is open to all residents. The pride that the residents take in themselves as individuals and as a group help promote Coogan Terrace Pride not only here where they live, but also where ever they go.

ATTACHMENT # 4

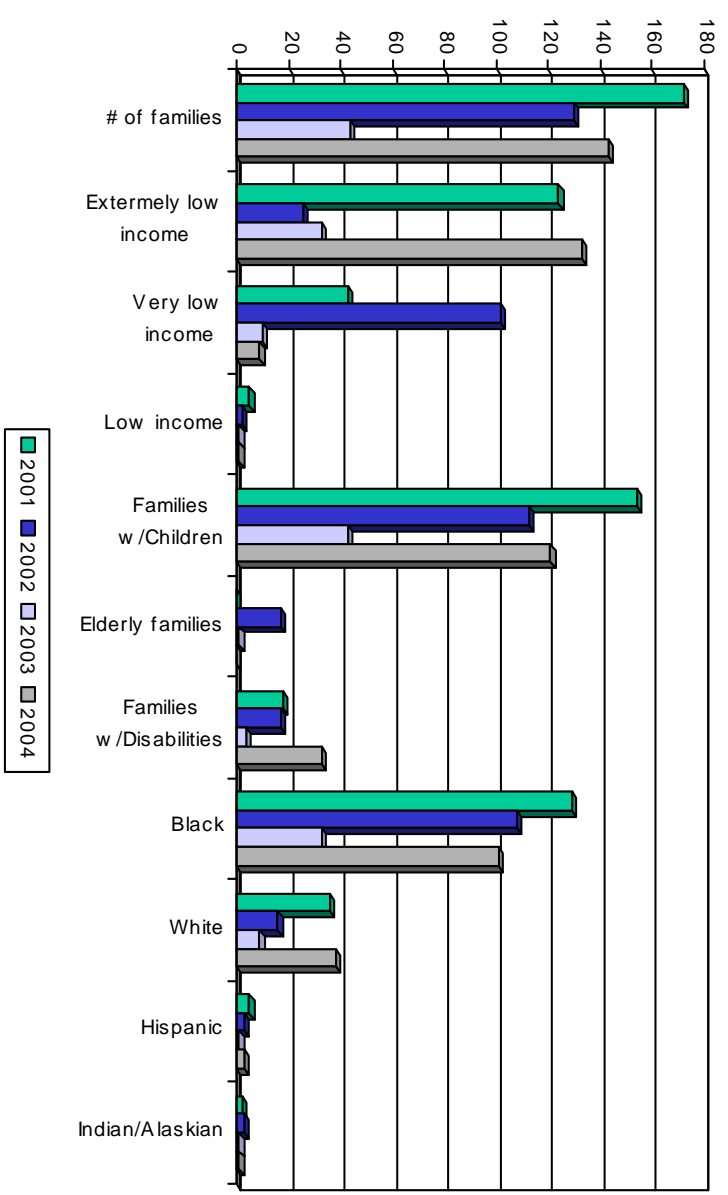
COMMENTS OF RESIDENT ADVISORY BOARD

NO COMMENTS OR CHANGES WERE MADE BY THE RESIDENT ADVISORY  
BOARD

# LOW INCOME PUBLIC HOUSING WAITING LIST INFORMATION



# SECTION 8 WAITING LIST INFORMATION



ACHIEVED GOALS

- 1.) The Melvindale Housing Commission has achieved its goal of becoming a High Performer
- 2.) The Melvindale Housing Commission has achieved its goal of full compliance as defined by program audit findings
- 3.) The Melvindale Housing Commission has achieved its goal by building its Public Housing waiting list to one that requires 8 months to 1 year wait for Housing
- 4.) The Melvindale Housing Commission has achieved its goal by filling its units within 14 days of them becoming vacant
- 5.) The Melvindale Housing Commission has achieved its goal by achieving and sustaining an occupancy rate of at least 98%
- 6.) The Melvindale Housing Commission continues to promote a motivating work environment
- 7.) The Melvindale Housing Commission has achieved its goal in customer satisfaction by scoring an average of 9.3 out of 10 on Resident Survey results released June 2003
- 8.) The Melvindale Housing Commission has achieved its goal in security issues. Additional security cameras have been installed, police officers have lived in the Public Housing facility over several years, safety awareness classes are taught
- 9.) The Melvindale Housing Commission has achieved its goal of qualifying as at least a standard performer under SEMAP
- 10.) The Melvindale Housing Commission has achieved its goal of attracting at least 10 new Landlords to the Section 8 program
- 11.) The Melvindale Housing Commission has achieved its goal of doing new unit inspections for Section 8 within 7 days
- 12.) The Melvindale Housing Commission has achieved its goal by implementing a preventative maintenance plan
- 13.) The Melvindale Housing Commission has achieved its goal by maintaining an average response time of 24 hours or less in responding to emergency work orders
- 14.) The Melvindale Housing Commission has achieved its goal by creating an appealing, up to-date environment in its Public Housing development
- 15.) The Melvindale Housing Commission has achieved its goal by maintaining an average response time of 14 days or less in responding to routine work orders
- 16.) The Melvindale Housing Commission has and will continue to operate in compliance with all Equal Opportunity laws and regulations
- 17.) The Melvindale Housing Commission has and will continue to ensure



equal treatment of all applicants, residents, tenant-based participants, employees, and vendors

- 18.) The Melvindale Housing Commission has achieved its goal of ensuring that Supportive Service opportunities are present for every Public Housing resident by the hiring of a Social Worker to the staff