# Springfield Housing Authority PHA Plans Springfield, Illinois

5 Year Plan for Fiscal Years 2000 - 2004 Annual Plan for Fiscal Year 2000

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:** Springfield Housing Authority, Springfield, Illinois

**PHA Number:** IL.004

**PHA Fiscal Year Beginning:** 01/2000

## **Public Access to Information**

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

- $\times$ Main administrative office of the PHA
  - PHA development management offices
  - PHA local offices

# **Display Locations For PHA Plans and Supporting Documents**

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

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

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

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

PHA Identification Section, Page 2

# 5-YEAR PLAN PHA FISCAL YEARS 2000 - 2004

[24 CFR Part 903.5]

## A. Mission

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

- The mission of the PHA is the same as that of the Department of Housing and Urban Development: To promote adequate and affordable housing, economic opportunity and a suitable living environment free from discrimination.
- The PHA's mission is: (state mission here)

**<u>MISSION</u>**: The Springfield Housing Authority is the primary leader in providing quality affordable housing to individuals and families, while encouraging partnerships necessary for residents to develop self-sufficiency and to be productive members of the community.

## **B.** Goals

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

| $\boxtimes$   | PHA C                  | Goal: Expand the supply of assisted housing  |
|---|------------------------|--|
|   | Object                 | ives:  |
|   | $\boxtimes$            | Apply for additional rental vouchers.  |
|   | $\boxtimes$            | Reduce public housing vacancies.   |
|   | $\boxtimes$            | Leverage private or other public funds to create additional housing                                      |
|   |                        | opportunities.   |
|   | $\boxtimes$            | Acquire or build units or developments   |
|   |                        | Other (list below)   |
| PHA Goal: Improve the quality of assisted housing Objectives: |                        |  |
|   |                        | Improve public housing management: (PHAS score) Above 80%  |
|   |                        | Improve public housing management: (ITI is score) Above 60%<br>Improve voucher management: (SEMAP score) |
|   | $\overline{\boxtimes}$ | Increase customer satisfaction.  |
|   | $\boxtimes$            | Concentrate on efforts to improve specific management functions.   |
|   |                        | (list; e.g., public housing finance; voucher unit inspections)   |
|   | $\boxtimes$            | Renovate or modernize public housing units.  |
|   |                        | Demolish or dispose of obsolete public housing.  |
|   | $\boxtimes$            | Provide replacement public housing.  |
|   |                        |  |

5 Year Plan Page 1

 $\square$ 

Provide replacement vouchers.

- Other: (list below)
- $\boxtimes$ PHA Goal: Increase assisted housing choices

**Objectives:** 

- Provide voucher mobility counseling.
- Conduct outreach efforts to potential voucher landlords.
- Increase voucher payment standards.
  - Implement voucher homeownership program.
  - Implement public housing or other homeownership programs.
  - Implement public housing site-based waiting lists.
  - Convert public housing to vouchers.
  - Other: (list below)

## HUD Strategic Goal: Improve community quality of life and economic vitality

| PHA C       | Goal: Provide an improved living environment                                 |
|-------------|--|
| Object      | ives:  |
| $\square$   | Implement measures to deconcentrate poverty by bringing higher income public |
|             | housing households into lower income developments.                           |
| $\bowtie$   | Implement measures to promote income mixing in public housing by assuring    |
|             | access for lower income families into higher income developments.            |
| $\boxtimes$ | Implement public housing security improvements.                              |
| $\boxtimes$ | Designate developments or buildings for particular resident groups (elderly, |
|             | persons with disabilities).  |
|             | Other: (list below)  |
|             |  |

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

 $\boxtimes$ PHA Goal: Promote self-sufficiency and asset development of assisted households **Objectives:** 

Х Increase the number and percentage of employed persons in assisted families.

- $\boxtimes$ Provide or attract supportive services to improve assistance recipients' employability.
- $\boxtimes$ Provide or attract supportive services to increase independence for the elderly or families with disabilities.
- Other: (list below)

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

| PHA Goal:   | Ensure equal opportunity and affirmatively further fair housing |
|-------------|---|
| Objectives: |   |

- Undertake affirmative measures to ensure access to assisted housing regardless of race, color, religion national origin, sex, familial status, and disability.
- Undertake affirmative measures to provide a suitable living environment for families living in assisted housing, regardless of race, color, religion national origin, sex, familial status, and disability.
- Undertake affirmative measures to ensure accessible housing to persons with all varieties of disabilities regardless of unit size required.

Other: (list below)

 $\boxtimes$ 

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

- 1. To encourage and support the youth of today toward becoming the leaders of tomorrow.
- 2. To be the best landlord in the Springfield Community.
- **3.** To obtain and maintain partnerships and agreements with various community resources.
- 4. To equip residents with the skills to become self-sufficient.
- 5. To provide quality housing.
- 6. To achieve a 97% occupancy rate.
- 7. To improve the overall image of the Springfield Housing Authority.
- 8. To establish an income-stream apart from that generated by rent.

## Annual PHA Plan PHA Fiscal Year 2000

[24 CFR Part 903.7]

## i. Annual Plan Type:

Select which type of Annual Plan the PHA will submit.

#### Standard Plan

#### **Streamlined Plan:**

- High Performing PHA
- Small Agency (<250 Public Housing Units)
- Administering Section 8 Only

## Troubled Agency Plan

## ii. Executive Summary of the Annual PHA Plan

[24 CFR Part 903.7 9 (r)]

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

## iii. Annual Plan Table of Contents

#### [24 CFR Part 903.7 9 (r)]

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

#### **Table of Contents**

|     |  |    | Page # |
|-----|--|----|--------|
| Ar  | nual Plan  |    |        |
| i.  | Executive Summary                                    |    | 1      |
| ii. | Table of Contents                                    |    |        |
|     | 1. Housing Needs                                     | 4  |        |
|     | 2. Financial Resources                               |    | 10     |
|     | 3. Policies on Eligibility, Selection and Admissions | 12 |        |
|     | 4. Rent Determination Policies                       |    | 21     |
|     | 5. Operations and Management Policies                |    | 24     |
|     | 6. Grievance Procedures                              |    | 26     |
|     | 7. Capital Improvement Needs                         |    | 27     |
|     | 8. Demolition and Disposition                        |    | 35     |
|     | 9. Designation of Housing                            | 36 |        |
|     | 10. Conversions of Public Housing                    | 38 |        |
|     | 11. Homeownership                                    |    | 40     |
|     |  |    |        |

| 12. Community Service Programs  |  |    |
|---|--|----|
| 13. Crime and Safety  |  | 44 |
| 14. Pets (Inactive for January 1 PHAs)                                  |  | 46 |
| 15. Civil Rights Certifications (included with PHA Plan Certifications) |  | 46 |
| 16. Audit   |  | 46 |
| 17. Asset Management  |  | 46 |
| 18. Other Information   |  | 47 |
|   |  |    |

#### Attachments

 $\times$ 

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

**Required Attachments:** 

- Admissions Policy for Deconcentration (IL004a01)
- FY 2000 Capital Fund Program Annual Statement (Pages 28 30)
  - Most recent board-approved operating budget (Required Attachment for PHAs that are troubled or at risk of being designated troubled ONLY)

**Optional Attachments:** 

- PHA Management Organizational Chart (**IL004b01**)
- FY 2000 Capital Fund Program 5 Year Action Plan (Pages 31 34)
  - Public Housing Drug Elimination Program (PHDEP) Plan
- Comments of Resident Advisory Board or Boards (must be attached if not included in PHA Plan text)
- Other (List below, providing each attachment name)

#### Supporting Documents Available for Review

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

| List of Supporting Documents Available for Review |   |                           |  |  |  |
|---|---|---------------------------|--|--|--|
| Applicable<br>&<br>On Display                     | Supporting Document   | Applicable Plan Component |  |  |  |
| Х   | PHA Plan Certifications of Compliance with the PHA Plans<br>and Related Regulations   | 5 Year and Annual Plans   |  |  |  |
| Х   | State/Local Government Certification of Consistency with the Consolidated Plan  | 5 Year and Annual Plans   |  |  |  |
| Х   | Fair Housing Documentation:<br>Records reflecting that the PHA has examined its programs or<br>proposed programs, identified any impediments to fair<br>housing choice in those programs, addressed or is<br>addressing those impediments in a reasonable fashion in<br>view of the resources available, and worked or is working | 5 Year and Annual Plans   |  |  |  |

|                  | List of Supporting Documents Available for Review  |                           |  |  |  |
|------------------|--|---------------------------|--|--|--|
| Applicable       | Supporting Document  | Applicable Plan Component |  |  |  |
| &<br>On Dianlass |  |                           |  |  |  |
| On Display       | with local inviadiations to implement any of the inviadiations?  |                           |  |  |  |
|                  | with local jurisdictions to implement any of the jurisdictions' initiatives to affirmatively further fair housing that require the |                           |  |  |  |
|                  | PHA's involvement.   |                           |  |  |  |
| Х                | Consolidated Plan for the jurisdiction/s in which the PHA is   | Annual Plan:              |  |  |  |
| Λ                | located (which includes the Analysis of Impediments to Fair  | Housing Needs             |  |  |  |
|                  | Housing Choice (AI)) and any additional backup data to   | Housing Hoods             |  |  |  |
|                  | support statement of housing needs in the jurisdiction   |                           |  |  |  |
| Х                | Most recent board-approved operating budget for the public   | Annual Plan:              |  |  |  |
|                  | housing program  | Financial Resources;      |  |  |  |
|                  |  |                           |  |  |  |
| Х                | Public Housing Admissions and (Continued) Occupancy  | Annual Plan: Eligibility, |  |  |  |
|                  | Policy (A&O), which includes the Tenant Selection and  | Selection, and Admissions |  |  |  |
|                  | Assignment Plan [TSAP]   | Policies                  |  |  |  |
|                  |  |                           |  |  |  |
| Х                | Section 8 Administrative Plan  | Annual Plan: Eligibility, |  |  |  |
|                  |  | Selection, and Admissions |  |  |  |
|                  |  | Policies                  |  |  |  |
| Х                | Public Housing Deconcentration and Income Mixing   | Annual Plan: Eligibility, |  |  |  |
|                  | Documentation:   | Selection, and Admissions |  |  |  |
|                  | 1. PHA board certifications of compliance with   | Policies                  |  |  |  |
|                  | deconcentration requirements (section 16(a) of the US  |                           |  |  |  |
|                  | Housing Act of 1937, as implemented in the 2/18/99   |                           |  |  |  |
|                  | Quality Housing and Work Responsibility Act Initial  |                           |  |  |  |
|                  | <i>Guidance; Notice</i> and any further HUD guidance) and  |                           |  |  |  |
|                  | 2. Documentation of the required deconcentration and income mixing analysis  |                           |  |  |  |
| X                | Public housing rent determination policies, including the  | Annual Plan: Rent         |  |  |  |
| Λ                | methodology for setting public housing flat rents  | Determination             |  |  |  |
|                  | $\square$ check here if included in the public housing   | Determination             |  |  |  |
|                  | A & O Policy   |                           |  |  |  |
| Х                | Schedule of flat rents offered at each public housing  | Annual Plan: Rent         |  |  |  |
| <b>1</b>         | development  | Determination             |  |  |  |
|                  | check here if included in the public housing   | Determination             |  |  |  |
|                  | A & O Policy   |                           |  |  |  |
| X                | Section 8 rent determination (payment standard) policies   | Annual Plan: Rent         |  |  |  |
| 24               | $\square$ check here if included in Section 8  | Determination             |  |  |  |
|                  | Administrative Plan  |                           |  |  |  |
| X                | Public housing management and maintenance policy   | Annual Plan: Operations   |  |  |  |
| 1                | documents, including policies for the prevention or  | and Maintenance           |  |  |  |
|                  | eradication of pest infestation (including cockroach   |                           |  |  |  |
|                  | infestation)   |                           |  |  |  |
| Х                | Public housing grievance procedures  | Annual Plan: Grievance    |  |  |  |
| -                | $\square$ check here if included in the public housing   | Procedures                |  |  |  |
|                  | A & O Policy   |                           |  |  |  |
| Х                | Section 8 informal review and hearing procedures   | Annual Plan: Grievance    |  |  |  |
| 2 <b>1</b>       | $\square$ check here if included in Section 8  | Procedures                |  |  |  |
|                  | Administrative Plan  |                           |  |  |  |
|                  | Autilitisu au ve r tali  |                           |  |  |  |

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

# **<u>1. Statement of Housing Needs</u>**

[24 CFR Part 903.7 9 (a)]

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

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

| Housing Needs of Families in the Jurisdiction |         |                    |          |         |                    |      |               |
|---|---------|--------------------|----------|---------|--------------------|------|---------------|
|   |         | by                 | Family T | ype     |                    |      |               |
| Family Type                                   | Overall | Afford-<br>ability | Supply   | Quality | Access-<br>ibility | Size | Loca-<br>tion |
| Income <= 30% of AMI                          | 4603    | 48%                | 3        | 3       | 1                  | 1    | 4             |
| Income >30% but<br><=50% of AMI               | 4200    | 50%                | 2        | 3       | 1                  | 1    | 4             |
| Income >50% but<br><80% of AMI                | 848     | 18%                | 2        | 3       | 1                  | 1    | 3             |
| Elderly                                       | 364     | 43%                | 2        | 3       | 1                  | 1    | 2             |
| Families with Disabilities                    |         |                    | 2        | 3       | 1                  | 1    | 2             |
| African American                              | 1094    | N/A                | 2        | N/A     | N/A                | N/A  | 2             |
| Native American                               | .30     | N/A                | 2        | N/A     | N/A                | N/A  | 3             |
| Hispanic                                      | .60     | N/A                | 2        | N/A     | N/A                | N/A  | 2             |
| White   | 8713    | N/A                | 2        | N/A     | N/A                | N/A  | 1             |

What sources of information did the PHA use to conduct this analysis? (Check all that apply; all materials must be made available for public inspection.)

| $\boxtimes$ | Consolidated Plan of the Jurisdiction/s                                     |
|-------------|---|
|             | Indicate year: 1995   |
|             | U.S. Census data: the Comprehensive Housing Affordability Strategy ("CHAS") |
|             | dataset   |
|             | American Housing Survey data  |
|             | Indicate year:  |
| $\boxtimes$ | Other housing market study  |
|             | Indicate year: 1996   |
|             | Other sources: (list and indicate year of information)                      |

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

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

| Housing Needs of Families on the Waiting List   |               |                     |                 |  |  |  |
|---|---------------|---------------------|-----------------|--|--|--|
| Waiting list type: (select one)         Section 8 tenant-based assistance         Public Housing         Combined Section 8 and Public Housing         Public Housing Site-Based or sub-jurisdictional waiting list (optional)         If used, identify which development/subjurisdiction: |               |                     |                 |  |  |  |
|   | # of families | % of total families | Annual Turnover |  |  |  |
| Waiting list total<br>Extremely low income<br><=30% AMI   | 101<br>100    | 36<br>40            | N/A<br>N/A      |  |  |  |
| Very low income<br>(>30% but <=50%<br>AMI)  | 0             | 0                   | N/A             |  |  |  |
| Low income<br>(>50% but <80%<br>AMI)  | 0             | 0                   | N/A             |  |  |  |
| Families with children  | 80            | 35                  | N/A             |  |  |  |
| Elderly families  | 7             | 3                   | N/A             |  |  |  |
| Families with Disabilities  | 14            | 44                  | N/A             |  |  |  |
| White   | 31            | 33                  | N/A             |  |  |  |
| Black   | 67            | 38                  | N/A             |  |  |  |
| Hispanic/Asian  | 3             | 100                 | N/A             |  |  |  |
| Other   |               | 0                   | N/A             |  |  |  |
| Characteristics by<br>Bedroom Size (Public<br>Housing Only)   |               |                     |                 |  |  |  |
| 1BR 23  |               |                     |                 |  |  |  |
| 2 BR 40   |               |                     |                 |  |  |  |
| 3 BR 17   |               |                     |                 |  |  |  |
| 4 BR  | 11            |                     |                 |  |  |  |
| 5 BR  | 9             |                     |                 |  |  |  |
| 5+ BR   | 5+ BR         |                     |                 |  |  |  |

| Housing Needs of Families on the Waiting List                                      |  |  |  |  |
|--|--|--|--|--|
| Is the waiting list closed (select one)? 🛛 No 🗌 Yes                                |  |  |  |  |
| If yes:  |  |  |  |  |
| How long has it been closed (# of months)?   |  |  |  |  |
| Does the PHA expect to reopen the list in the PHA Plan year? No Yes                |  |  |  |  |
| Does the PHA permit specific categories of families onto the waiting list, even if |  |  |  |  |
| generally closed? No Yes   |  |  |  |  |

| Housing Needs of Families on the Waiting List  |               |                     |                 |
|--|---------------|---------------------|-----------------|
| <ul> <li>Waiting list type: (select one)</li> <li>Section 8 tenant-based assistance</li> <li>Public Housing</li> <li>Combined Section 8 and Public Housing</li> <li>Public Housing Site-Based or sub-jurisdictional waiting list (optional)</li> <li>If used, identify which development/subjurisdiction:</li> </ul> |               |                     |                 |
|  | # of families | % of total families | Annual Turnover |
| Waiting list total   | 174           | 64                  | N/A             |
| Extremely low income <=30% AMI   | 150           | 60                  | N/A             |
| Very low income<br>(>30% but <=50%<br>AMI)   | 8             | 100                 | N/A             |
| Low income<br>(>50% but <80%<br>AMI)   | 1             | 100                 | N/A             |
| Families with children   | 141           | 65                  | N/A             |
| Elderly families   | 15            | 68                  | N/A             |
| Families with Disabilities   | 18            | 56                  | N/A             |
| White  | 62            | 67                  | N/A             |
| Black  | 110           | 6                   | N/A             |
| Hispanic/Asian   |               | 0                   | N/A             |
| Other  | 2             | 100                 | N/A             |

| Housing Needs of Families on the Waiting List                                      |
|--|
| Is the waiting list closed (select one)? X No Yes                                  |
| If yes:  |
| How long has it been closed (# of months)?   |
| Does the PHA expect to reopen the list in the PHA Plan year? No Yes                |
| Does the PHA permit specific categories of families onto the waiting list, even if |
| generally closed? No Yes   |

## C. Strategy for Addressing Needs

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

## (1) Strategies

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

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

Select all that apply

| $\boxtimes$ | Employ effective maintenance and management policies to minimize the number of  |
|-------------|---|
|             | public housing units off-line   |
| $\boxtimes$ | Reduce turnover time for vacated public housing units   |
|             | Reduce time to renovate public housing units  |
| $\boxtimes$ | Seek replacement of public housing units lost to the inventory through mixed finance development  |
|             | Seek replacement of public housing units lost to the inventory through section 8 replacement housing resources  |
| $\boxtimes$ | Maintain or increase section 8 lease-up rates by establishing payment standards that will enable families to rent throughout the jurisdiction   |
| $\boxtimes$ | Undertake measures to ensure access to affordable housing among families assisted<br>by the PHA, regardless of unit size required   |
|             | Maintain or increase section 8 lease-up rates by marketing the program to owners,   |
| $\boxtimes$ | particularly those outside of areas of minority and poverty concentration<br>Maintain or increase section 8 lease-up rates by effectively screening Section 8<br>applicants to increase owner acceptance of program |
| $\boxtimes$ | Participate in the Consolidated Plan development process to ensure coordination   |
| $\boxtimes$ | with broader community strategies<br>Other (list below)   |
|             | Marketing efforts   |

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

Select all that apply



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

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

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

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

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



 $\bowtie$ 

Employ admissions preferences aimed at families who are working Adopt rent policies to support and encourage work Other: (list below)

## Need: Specific Family Types: The Elderly

## **Strategy 1: Target available assistance to the elderly:**

Select all that apply



Seek designation of public housing for the elderly

Apply for special-purpose vouchers targeted to the elderly, should they become available

Other: (list below)

#### Need: Specific Family Types: Families with Disabilities

**Strategy 1: Target available assistance to Families with Disabilities:** Select all that apply

- $\boxtimes$ Seek designation of public housing for families with disabilities
  - Carry out the modifications needed in public housing based on the section 504 Needs Assessment for Public Housing
- Apply for special-purpose vouchers targeted to families with disabilities, should they become available

Affirmatively market to local non-profit agencies that assist families with disabilities Other: (list below)

#### Need: Specific Family Types: Races or ethnicities with disproportionate housing needs

#### Strategy 1: Increase awareness of PHA resources among families of races and ethnicities with disproportionate needs:

Select if applicable

 $\boxtimes$ 

- Affirmatively market to races/ethnicities shown to have disproportionate housing needs
  - Other: (list below)

# Strategy 2: Conduct activities to affirmatively further fair housing

Select all that apply

- $\mathbf{X}$ Counsel section 8 tenants as to location of units outside of areas of poverty or minority concentration and assist them to locate those units
- Market the section 8 program to owners outside of areas of poverty /minority concentrations
- Other: (list below)

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

#### (2) Reasons for Selecting Strategies

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

Funding constraints

Staffing constraints

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

# 2. Statement of Financial Resources

#### [24 CFR Part 903.7 9 (b)]

 $\boxtimes$ 

 $\boxtimes$ 

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

| Fina                                  | ncial Resources: |              |
|---------------------------------------|------------------|--------------|
| Planned Sources and Uses              |                  |              |
| Sources Planned \$ Planned Uses       |                  | Planned Uses |
| 1. Federal Grants (FY 2000 grants)    |                  |              |
| a) Public Housing Operating Fund      | 2,220,163        |              |
| b) Public Housing Capital Fund        | 1,665,943        |              |
| c) HOPE VI Revitalization             | N/A              |              |
| d) HOPE VI Demolition                 | N/A              |              |
| e) Annual Contributions for Section 8 | 6,127,919        |              |
| Tenant-Based Assistance               |                  |              |
| f) Public Housing Drug Elimination    | 203,060          |              |
| Program (including any Technical      |                  |              |
| Assistance funds)                     |                  |              |
| g) Resident Opportunity and Self-     | N/A              |              |
| Sufficiency Grants                    |                  |              |
| h) Community Development Block        | N/A              |              |
| Grant                                 |                  |              |
| i) HOME                               | N/A              |              |
| Other Federal Grants (list below)     | N/A              |              |
|                                       |                  |              |

| Fina                                     | ncial Resources: |                            |
|--|------------------|----------------------------|
| Planned Sources and Uses                 |                  |                            |
| Sources                                  | Planned \$       | Planned Uses               |
| 2. Prior Year Federal Grants             |                  |                            |
| (unobligated funds only) (list below)    |                  |                            |
| Comprehensive Grant Program 1998         | 1,400,000        |                            |
| Comprehensive Grant Program 1999         | 1,665,943        |                            |
| HOPE VI                                  | 10,000,000       |                            |
| 3. Public Housing Dwelling Rental Income | 1,347,600        | Public Housing             |
|  |                  |                            |
| 4. Other income (list below)             | 94,950           | Public Housing             |
| 4. Non-federal sources (list below)      |                  |                            |
| Illinois Violence Prevention Grant       | 31,000           | Violence Prevention        |
| Teen REACH Grant                         | 70,000           | Youth Programs             |
| Junior League Grant                      | 1,598            | Youth Programs             |
| Summer Food ISBE                         | 21,000           | Children's Food<br>Program |
| CSPAP                                    | 5,000            | Youth Programs             |
| TOTAL RESOURCES                          | 24,854,176       |                            |

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

[24 CFR Part 903.7 9 (c)]

## A. Public Housing

Exemptions: PHAs that do not administer public housing are not required to complete subcomponent 3A.

## (1) Eligibility

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



When families are within a certain number of being offered a unit: (state number) When families are within a certain time of being offered a unit: as soon as possible. Other: (describe) When all requested information has been verified.

- b. Which non-income (screening) factors does the PHA use to establish eligibility for admission to public housing (select all that apply)?
  - Criminal or Drug-related activity
  - Rental history
  - Housekeeping Projects 4-20, 4-22
  - Other (describe)
- c. X Yes No: Does the PHA request criminal records from local law enforcement agencies for screening purposes?
- d. X Yes No: Does the PHA request criminal records from State law enforcement agencies for screening purposes?
- e. X Yes No: Does the PHA access FBI criminal records from the FBI for screening purposes? (either directly or through an NCIC-authorized source)

## (2)Waiting List Organization

- a. Which methods does the PHA plan to use to organize its public housing waiting list (select all that apply)
- Community-wide list
  - Sub-jurisdictional lists
  - Site-based waiting lists
  - Other (describe)

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

- PHA main administrative office
  - PHA development site management office
  - Other (list below)
- c. If the PHA plans to operate one or more site-based waiting lists in the coming year, answer each of the following questions; if not, skip to subsection (3) Assignment
  - 1. How many site-based waiting lists will the PHA operate in the coming year? Three
  - 2. Xes No: Are any or all of the PHA's site-based waiting lists new for the upcoming year (that is, they are not part of a previously-HUD-approved site based waiting list plan)? If yes, how many lists? One
  - 3. Yes No: May families be on more than one list simultaneously If yes, how many lists? Three

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



## (3) Assignment

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



- b. Yes No: Is this policy consistent across all waiting list types?
- c. If answer to b is no, list variations for any other than the primary public housing waiting list/s for the PHA:

## (4) Admissions Preferences

a. Income targeting:

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

b. Transfer policies:

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

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

- 1. Yes X No: Has the PHA established preferences for admission to public housing (other than date and time of application)? (If "no" is selected, skip to subsection (5) Occupancy)
- 2. Which of the following admission preferences does the PHA plan to employ in the coming year? (select all that apply from either former Federal preferences or other preferences)

Former Federal preferences:

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

High rent burden (rent is > 50 percent of income)

Other preferences: (select below)

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

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

Date and Time

Former Federal preferences:

Involuntary Displacement (Disaster, Government Action, Action of Housing Owner, Inaccessibility, Property Disposition) Victims of domestic violence Substandard housing Homelessness High rent burden Other preferences (select all that apply)

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

4. Relationship of preferences to income targeting requirements:

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

## (5) Occupancy

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

| $\boxtimes$ |
|-------------|
| $\boxtimes$ |
| $\square$   |
|             |

 $\times$ 

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

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

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

## (6) Deconcentration and Income Mixing

a. X Yes No: Did the PHA's analysis of its family (general occupancy) developments to determine concentrations of poverty indicate the need for measures to promote deconcentration of poverty or income mixing?

| b. 🔀        | Yes No: Did the PHA adopt any changes to its <b>admissions policies</b> based on<br>the results of the required analysis of the need to promote<br>deconcentration of poverty or to assure income mixing?  |
|-------------|--|
| c. If th    | e answer to b was yes, what changes were adopted? (select all that apply)<br>Adoption of site-based waiting lists<br>If selected, list targeted developments below:  |
|             | Employing waiting list "skipping" to achieve deconcentration of poverty or income mixing goals at targeted developments<br>If selected, list targeted developments below:  |
|             | Employing new admission preferences at targeted developments<br>If selected, list targeted developments below:   |
| $\boxtimes$ | Other (list policies and developments targeted below)<br>Incentives to target higher-income families to live in SHA Family Developments,<br>specifically IL4-05 Brandon Court.   |
| d. 🗌        | Yes 🔀 No: Did the PHA adopt any changes to <b>other</b> policies based on the results of the required analysis of the need for deconcentration of poverty and income mixing?   |
| e. If th    | ne answer to d was yes, how would you describe these changes? (select all that apply)  |
|             | Additional affirmative marketing<br>Actions to improve the marketability of certain developments<br>Adoption or adjustment of ceiling rents for certain developments<br>Adoption of rent incentives to encourage deconcentration of poverty and income-<br>mixing<br>Other (list below)  |
|             | ed on the results of the required analysis, in which developments will the PHA make<br>l efforts to attract or retain higher-income families? (select all that apply)<br>Not applicable: results of analysis did not indicate a need for such efforts<br>List (any applicable) developments below:<br>SHA Family Developments, specifically IL4-05, Brandon Court. |
| -           | sed on the results of the required analysis, in which developments will the PHA make<br>l efforts to assure access for lower-income families? (select all that apply)<br>Not applicable: results of analysis did not indicate a need for such efforts<br>List (any applicable) developments below:   |

## **B. Section 8**

Exemptions: PHAs that do not administer section 8 are not required to complete sub-component 3B. Unless otherwise specified, all questions in this section apply only to the tenant-based section 8 assistance program (vouchers, and until completely merged into the voucher program, certificates).

## (1) Eligibility

| <ul> <li>a. What is the extent of screening conducted by the PHA? (select all that apply)</li> <li>Criminal or drug-related activity only to the extent required by law or regulation</li> <li>Criminal and drug-related activity, more extensively than required by law or regulation</li> </ul> |
|---|
| <ul> <li>More general screening than criminal and drug-related activity (list factors below)</li> <li>Other (list below)</li> </ul>   |
| b. Xes No: Does the PHA request criminal records from local law enforcement agencies for screening purposes?  |
| c. X Yes No: Does the PHA request criminal records from State law enforcement agencies for screening purposes?  |
| d. X Yes No: Does the PHA access FBI criminal records from the FBI for screening purposes? (either directly or through an NCIC-authorized source)   |
| e. Indicate what kinds of information you share with prospective landlords? (select all that apply)   |
| Criminal or drug-related activity   |
| Other (describe below)  |
| The Springfield Housing Authority will provide the name, address and telephone number of  |
|   |

The Springfield Housing Authority will provide the name, address and telephone number of previous landlords to prospective landlords if the information is requested.

## (2) Waiting List Organization

- a. With which of the following program waiting lists is the section 8 tenant-based assistance \_\_\_\_\_waiting list merged? (select all that apply)
- None
   Federal public housing
   Federal moderate rehabilitation
   Federal project-based certificate program
   Other federal or local program (list below)
  - FY 2000 Annual Plan Page 18

- b. Where may interested persons apply for admission to section 8 tenant-based assistance? (select all that apply)
- PHA main administrative office
  - Other (list below)

#### (3) Search Time

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

If yes, state circumstances below:

If an applicant is unable to find suitable housing within the standard 60-day period, an extension may be granted. Medical reasons may also substantiate an extension to the standard 60-day search period.

#### (4) Admissions Preferences

a. Income targeting

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

- b. Preferences
- 1. Yes No: Has the PHA established preferences for admission to section 8 tenantbased assistance? (other than date and time of application) (if no, skip to subcomponent (5) Special purpose section 8 assistance programs)
- 2. Which of the following admission preferences does the PHA plan to employ in the coming year? (select all that apply from either former Federal preferences or other preferences)

Former Federal preferences

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

High rent burden (rent is > 50 percent of income)

Other preferences (select all that apply)

Working families and those unable to work because of age or disability

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

The SHA Section 8 department will give preference to those applicants who are not currently receiving subsidized housing assistance from the Springfield Housing Authority.

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

## 1 Date and Time

Former Federal preferences

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

Other preferences (select all that apply)

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

The SHA Section 8 department will give preference to those applicants who are not currently receiving subsidized housing assistance from the Springfield Housing Authority.

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

- Date and time of application
  - Drawing (lottery) or other random choice technique
- 5. If the PHA plans to employ preferences for "residents who live and/or work in the jurisdiction" (select one)
  - This preference has previously been reviewed and approved by HUD
  - The PHA requests approval for this preference through this PHA Plan

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

- The PHA applies preferences within income tiers
- $\boxtimes$

Not applicable: the pool of applicant families ensures that the PHA will meet income targeting requirements

## (5) Special Purpose Section 8 Assistance Programs

- a. In which documents or other reference materials are the policies governing eligibility, selection, and admissions to any special-purpose section 8 program administered by the PHA contained? (select all that apply)
- The Section 8 Administrative Plan
  - Briefing sessions and written materials
  - Other (list below)
- b. How does the PHA announce the availability of any special-purpose section 8 programs to the public?
  - Through published notices

Other (list below)

# 4. PHA Rent Determination Policies

[24 CFR Part 903.7 9 (d)]

# A. Public Housing

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

## (1) Income Based Rent Policies

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

a. Use of discretionary policies: (select one)

| $\mathbf{\nabla}$ |  |
|-------------------|--|
| $^{\sim}$         |  |
|                   |  |

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

---or---

imes

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

#### b. Minimum Rent

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



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

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

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

- 1. Yes No: Does the PHA plan to charge rents at a fixed amount or percentage less than 30% of adjusted income?
- 2. If yes to above, list the amounts or percentages charged and the circumstances under which these will be used below:
- d. Which of the discretionary (optional) deductions and/or exclusions policies does the PHA plan to employ (select all that apply)
  - For the earned income of a previously unemployed household member
  - For increases in earned income
  - Fixed amount (other than general rent-setting policy)

If yes, state amount/s and circumstances below:

Fixed percentage (other than general rent-setting policy) If yes, state percentage/s and circumstances below:

- For other family members
- For transportation expenses
- For the non-reimbursed medical expenses of non-disabled or non-elderly families
- Other (describe below)

## e. Ceiling rents

No

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

| Х |
|---|
|   |

Yes for all developments

Yes but only for some developments

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

| $\boxtimes$ |
|-------------|
|             |
|             |
|             |

For all developments

- For all general occupancy developments (not elderly or disabled or elderly only)
- For specified general occupancy developments
- For certain parts of developments; e.g., the high-rise portion
- For certain size units; e.g., larger bedroom sizes
- Other (list below)
- 3. Select the space or spaces that best describe how you arrive at ceiling rents (select all that apply)
- Market comparability study
  - Fair market rents (FMR)
  - 95<sup>th</sup> percentile rents
  - 75 percent of operating costs
  - 100 percent of operating costs for general occupancy (family) developments
  - Operating costs plus debt service
    - The "rental value" of the unit
  - Other (list below)

f. Rent re-determinations:

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

| Never  |
|--|
| At family option   |
| Any time the family experiences an income increase                           |
| Any time a family experiences an income increase above a threshold amount or |
| percentage: (if selected, specify threshold) \$100.00/month                  |
| Other (list below)   |
| Yes 🔀 No: Does the PHA plan to implement individual savings accounts for     |
| residents (ISAs) as an alternative to the required 12 month                  |
| disallowance of earned income and phasing in of rent increases               |
| the next year?   |
|  |

## (2) Flat Rents

- 1. In setting the market-based flat rents, what sources of information did the PHA use to establish comparability? (select all that apply.)
  - The section 8 rent reasonableness study of comparable housing
  - Survey of rents listed in local newspaper
  - Survey of similar unassisted units in the neighborhood

Other (list/describe below)

Fair Market Rents

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

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

## (1) Payment Standards

Describe the voucher payment standards and policies.

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

- At or above 90% but below100% of FMR
- 100% of FMR
  - Above 100% but at or below 110% of FMR
  - Above 110% of FMR (if HUD approved; describe circumstances below)

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

- FMRs are adequate to ensure success among assisted families in the PHA's segment of the FMR area
- The PHA has chosen to serve additional families by lowering the payment standard

in

| Reflects market or submarket |
|------------------------------|
|------------------------------|

- Other (list below)
- c. If the payment standard is higher than FMR, why has the PHA chosen this level? (select all that apply)
  - FMRs are not adequate to ensure success among assisted families in the PHA's segment of the FMR area
  - Reflects market or submarket
  - To increase housing options for families
  - Other (list below)
- d. How often are payment standards reevaluated for adequacy? (select one)
- Annually

- Other (list below)
- e. What factors will the PHA consider in its assessment of the adequacy of its payment standard? (select all that apply)
- Success rates of assisted families
  - Rent burdens of assisted families
  - Other (list below)

## (2) Minimum Rent

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

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

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

## 5. Operations and Management

[24 CFR Part 903.7 9 (e)]

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

## A. PHA Management Structure

Describe the PHA's management structure and organization.

(select one)

An organization chart showing the PHA's management structure and organization is attached (**IL004c01**).

#### A brief description of the management structure and organization of the PHA follows:

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

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

| Program Name                | Units or Families | Expected         |
|-----------------------------|-------------------|------------------|
|                             | Served at Year    | Turnover         |
|                             | Beginning         |                  |
| Public Housing              | 913               | 192              |
| Section 8 Vouchers          | 219               | 20               |
| Section 8 Certificates      | 602               | 60               |
| Section 8 Mod Rehab         | 135               | 15               |
| Special Purpose Section     | New Construction  | New Construction |
| 8 Certificates/Vouchers     | 101               | 0                |
| (list individually)         |                   |                  |
| Public Housing Drug         | 913               | 0                |
| Elimination Program         |                   |                  |
| (PHDEP)                     |                   |                  |
| Other Federal               |                   |                  |
| Programs(list individually) |                   |                  |

#### C. Management and Maintenance Policies

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

- (1) Public Housing Maintenance and Management: (list below)
  - a. Admissions and Continued Occupancy Policy
  - b. Housing Management Standard Operating Procedures (Criminal Records Management)
  - c. Personnel Policy (Drug Free Workplace)
  - d. Procurement Policy (Asset Disposition, Buy American)
  - e. Maintenance Standard Operating Procedures
  - f. Maintenance Management Plan
  - g. Pest Control Policy
  - h. "One Strike and You're Out" Policy
  - i. Criminal Trespass Policy
  - j. Standard Security Procedures
  - k. Check Signing Policy

1.

Funds Transfer Policy

- m. Investment Guidelines
- n. Capitalization Policy
- (1) Section 8 Management: (list below)
  - a. Section 8 Administrative Plan
  - b. Section 8 Standard Operating Procedures
  - c. Section 8 Private Landlord Program Workshop Booklet

## 6. PHA Grievance Procedures

[24 CFR Part 903.7 9 (f)]

Exemptions from component 6: High performing PHAs are not required to complete component 6. Section 8-Only PHAs are exempt from sub-component 6A.

## A. Public Housing

Х

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

If yes, list additions to federal requirements below:

- 2. Which PHA office should residents or applicants to public housing contact to initiate the PHA grievance process? (select all that apply)
  - PHA main administrative office
    - PHA development management offices
    - Other (list below)

## B. Section 8 Tenant-Based Assistance

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

If yes, list additions to federal requirements below:

- 2. Which PHA office should applicants or assisted families contact to initiate the informal review and informal hearing processes? (select all that apply)
- PHA main administrative office
  - Other (list below)

# 7. Capital Improvement Needs

[24 CFR Part 903.7 9 (g)]

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

#### A. Capital Fund Activities

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

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

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

Select one:

- The Capital Fund Program Annual Statement is provided as an attachment to the PHA Plan at \_\_\_\_\_.

-or-

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

Component 7 Capital Fund Program Annual Statement Parts I, II, and II See Following Pages

## Annual Statement Capital Fund Program (CFP) Part I: Summary

Capital Fund Grant Number FFY of Grant Approval: (01/2000)

## Original Annual Statement

Γ

| Line No. | Summary by Development Account                            | Total Estimated Cost |
|----------|---|----------------------|
| 1        | Total Non-CGP Funds                                       |                      |
| 2        | 1406 Operations   | 242,662.00           |
| 3        | 1408 Management Improvements                              | 366,800.00           |
| 4        | 1410 Administration                                       | 182,347.00           |
| 5        | 1411 Audit  |                      |
| 6        | 1415 Liquidated Damages                                   |                      |
| 7        | 1430 Fees and Costs                                       | 78,000.00            |
| 8        | 1440 Site Acquisition                                     |                      |
| 9        | 1450 Site Improvement                                     |                      |
| 10       | 1460 Dwelling Structures                                  | 914,368.00           |
| 11       | 1465.1 Dwelling Equipment-Nonexpendable                   |                      |
| 12       | 1470 Nondwelling Structures                               |                      |
| 13       | 1475 Nondwelling Equipment                                |                      |
| 14       | 1485 Demolition   |                      |
| 15       | 1490 Replacement Reserve                                  |                      |
| 16       | 1492 Moving to Work Demonstration                         |                      |
| 17       | 1495.1 Relocation Costs                                   |                      |
| 18       | 1498 Mod Used for Development                             |                      |
| 19       | 1502 Contingency  | 39,319.00            |
| 20       | Amount of Annual Grant (Sum of lines 2-19)                | 1,823,496.00         |
| 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                     | 291,800.00           |
| 24       | Amount of line 20 Related to Energy Conservation Measures | 0                    |

## Annual Statement Capital Fund Program (CFP) Part II: Supporting Table

| Development        | General Description of Major Work                                 | Development | Total                  |
|--------------------|---|-------------|------------------------|
| Number/Name        | Categories  | Account     | Estimated              |
| HA-Wide Activities |   | Number      | Cost                   |
| IL 4-2             | Provide asphalt parking lot sealing                               |             | 4,500.00               |
|                    |   |             |                        |
| IL 4-31            | Bathroom and kitchen renovation, replace                          |             |                        |
|                    | thermostats, and renovate vestibule                               |             | 445,460.00             |
|                    | Refinish lobby, common room and office, and seal-coat parking lot |             | 9,158.00               |
|                    | sear-coat parking for   |             | 9,138.00               |
| IL 4-32            | No work items scheduled   |             | 0                      |
| IL 4-6             | No work items scheduled   |             | 0                      |
| IL 4-9             | Replace bathrooms   |             | 83,240.00              |
| IL +- )            | Kitchen replacement   |             | 273,119.00             |
|                    |   |             | ,                      |
| Scattered Sites    |   |             |                        |
| IL 4-10            | Water heaters   |             | 29,260.00              |
|                    | Painting  |             | 24,900.00              |
|                    | Concrete patios<br>Bathroom plumbing                              |             | 14,731.00              |
|                    | Exterior doors  |             | 10,000.00<br>10,000.00 |
|                    | Window replacement  |             | 10,000.00              |
|                    |   |             | ,                      |
| Agency Wide        | Operations  | 1406        | 242,662.00             |
| Management         | Security and crime prevention                                     | 1408        | · ·                    |
| Improvements       | Staff training and travel   | 1408        | 40,000.00              |
|                    | Upgrade computer system, drives, hardware and software            | 1408        | 35,000.00              |
|                    | FM&C salaries, FM&C benefits                                      | 1408        | ,                      |
|                    | A/E fees  | 1410        | 78,000.00              |
|                    | Contingency   | 1502        | 39,319.00              |
|                    |   |             |                        |
|                    |   |             |                        |
## Annual Statement Capital Fund Program (CFP) Part III: Implementation Schedule

| Development<br>Number/Name<br>HA-Wide Activities | All Funds Obligated<br>(Quarter Ending Date) | All Funds Expended<br>(Quarter Ending Date) |
|--|--|---|
| IL 4-2   |  |   |
| IL 4-31  |  |   |
| IL 4-9   |  |   |
| IL 4-10  |  |   |
| 1406 Operations                                  |  |   |
| 1408 Management<br>Improvement                   | 06/30/2002                                   | 12/20/2002                                  |
| 1410<br>Administration                           |  |   |
| 1430 Fees & Costs                                |  |   |
| 1502 Contingency                                 |  |   |
|  |  |   |

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

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

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

b. If yes to question a, select one:

The Capital Fund Program 5-Year Action Plan is provided as an attachment to the PHA Plan at \_\_\_\_\_.

-or-

The Capital Fund Program 5-Year Action Plan is provided below: (if selected, copy the CFP optional 5 Year Action Plan from the Table Library and insert here)

| Development                          | Development Name                      | Number          | % Vac      | ancies     |                    |
|--------------------------------------|---------------------------------------|-----------------|------------|------------|--------------------|
| Number                               | (or indicate PHA wide)                | Vacant          | in Deve    | lopment    |                    |
|                                      |                                       | Units           |            |            |                    |
|                                      | <b>Major Byrd Apartments</b>          | 10              | 15%        |            |                    |
| IL 4-2                               | 125 North Thirteenth Street           |                 |            |            |                    |
| Description of Nee                   | eded Physical Improvements or Manag   | gement Improve  | ements     | Estimated  | Planned Start Date |
|                                      |                                       |                 |            | Cost       | (HA Fiscal Year)   |
| Electrical, mechai                   | nical, window, and plumbing work; ex  | terior hardware | , interior | 169,677.00 | 2001               |
| doors and siding f                   | for the Cottages                      |                 |            |            |                    |
|                                      |                                       |                 |            | 161,052.00 | 2002               |
| Electrical, mecha                    | nical, tuckpointing/sealing and sprin | kler work       |            |            |                    |
|                                      |                                       |                 |            | 0          | 2003               |
| No Work Items Scheduled              |                                       |                 |            |            |                    |
| 211,2                                |                                       |                 |            | 211,234.00 | 2004               |
| Air conditioning/electrical upgrades |                                       |                 |            |            |                    |
| Total estimated co                   | ost over next 5 years                 |                 |            | 541,963.00 |                    |

|   | Optional 5-Year Action             | n Plan Tables   |            |           |                    |
|---|------------------------------------|-----------------|------------|-----------|--------------------|
| Development   | Development Name                   | Number          | % Vac      | ancies    |                    |
| Number  | (or indicate PHA wide)             | Vacant          | in Deve    | lopment   |                    |
|   |                                    | Units           |            |           |                    |
|   | Bonansinga High-Rise               | 4               | 4%         |           |                    |
| IL 4-31   | 825 West Jefferson Street          |                 |            |           |                    |
| Description of Ne   | eded Physical Improvements or Mana | agement Improve | ements     | Estimated | Planned Start Date |
|   |                                    |                 |            | Cost      | (HA Fiscal Year)   |
| Boiler work   |                                    |                 |            | 44,653.00 | 2001               |
| Landscaping and trash enclosures                          |                                    |                 | 29,830.00  | 2001      |                    |
|   |                                    |                 |            |           |                    |
| Bathroom, GFI and thermostat replacement, and boiler work |                                    |                 | 201,989.00 | 2002      |                    |

| Emergency lighting, site lighting, and carpet all units | 165,375.00 | 2002 |
|---|------------|------|
| No Work Items Scheduled                                 | 0          | 2003 |
| Air conditioning installed/electrical upgrades          | 211,234.00 | 2004 |
| Total estimated cost over next 5 years                  | 653,090.00 |      |

| Development<br>Number                                 | Development Name<br>(or indicate PHA wide)                            | Number<br>Vacant<br>Units | % Vacancies<br>in Development |              |                    |  |
|---|---|---------------------------|-------------------------------|--------------|--------------------|--|
| IL 4-32   | Sankey High-Rise<br>415 West Allen Street                             | 43                        | 46%                           |              |                    |  |
| Description of Ne                                     | eded Physical Improvements or Ma                                      | nagement Improve          | ements                        | Estimated    | Planned Start Date |  |
|   |   |                           |                               | Cost         | (HA Fiscal Year)   |  |
| Tuckpointing, re                                      | finish exterior, sprinkler upgrade                                    |                           |                               | 85,165.00    | 00 2001            |  |
| Replace common  | e common air handler, heating system, and boiler work 102,328.00 2001 |                           | 2001                          |              |                    |  |
| Heating system a                                      | and emergency call system   |                           |                               | 77,884.00    | 2002               |  |
| Shower valves an                                      | Shower values and bath lav sinks91,799.00                             |                           |                               |              | 2002               |  |
| Kitchen renovatio                                     | Kitchen renovation 380,500.00   |                           |                               |              | 2003               |  |
| Property acquisit                                     |   |                           |                               |              | 2003               |  |
| Carpet all units                                      |   |                           | 141,800.00                    | 2003         |                    |  |
| Air conditioning installed/electrical upgrades211,234 |   |                           | 211,234.00                    | 2004         |                    |  |
| Total estimated c                                     | ost over next 5 years   |                           |                               | 1,577,085.00 |                    |  |

|  | Optional 5-Year Action P            | lan Tables    |            |            |                    |
|--|-------------------------------------|---------------|------------|------------|--------------------|
| Development                                    | Development Name                    | Number        | % Vac      | ancies     |                    |
| Number   | (or indicate PHA wide)              | Vacant        | in Deve    | lopment    |                    |
|  |                                     | Units         |            |            |                    |
|  | Sankey High-Rise Apartments         | 0             | 0%         |            |                    |
| IL 4-6   | 401 West Allen Street               |               |            |            |                    |
| Description of Nee                             | ded Physical Improvements or Manage | ement Improve | ments      | Estimated  | Planned Start Date |
|  |                                     |               |            | Cost       | (HA Fiscal Year)   |
| Mechanical system                              | ical system upgrade                 |               | 120,152.00 | 2001       |                    |
| Carpet all apartme                             | et all apartment units              |               |            | 141,800.00 | 2001               |
| Tuckpointing, refi                             | nting, refinish exterior            |               |            | 75,000.00  | 2001               |
| Shower valves                                  |                                     |               |            | 56,408.00  | 2001               |
| Sprinkler upgrade                              | ;                                   | 863.00        |            |            | 2001               |
| Unit entrance doors [BTM seal]                 |                                     |               | 6,268.00   | 2002       |                    |
| No Work Items Scheduled                        |                                     |               |            | 0          | 2003               |
| Air conditioning installed/electrical upgrades |                                     |               |            | 211,233.00 | 2004               |
| Total estimated cost over next 5 years         |                                     |               |            | 611,724.00 |                    |

| Optional 5-Year Action Plan Tables             |                                  |                 |           |            |                           |
|--|----------------------------------|-----------------|-----------|------------|---------------------------|
| Development                                    | Development Name                 | Number          | % Vaca    | ancies     |                           |
| Number   | (or indicate PHA wide)           | Vacant          | in Deve   | lopment    |                           |
|  |                                  | Units           |           |            |                           |
|  | Hildebrandt High-Rise            | 51              | 44%       |            |                           |
| IL 4-9   | 1151 North Eighth Street         |                 |           |            |                           |
| Description of Nee                             | ded Physical Improvements or Man | agement Improve | ments     | Estimated  | <b>Planned Start Date</b> |
|  |                                  |                 |           | Cost       | (HA Fiscal Year)          |
| Replace entry door                             | rs to units                      |                 |           | 40,788.00  | 2001                      |
| Air conditioning s                             | leeve insulated covers           |                 |           | 31,346.00  | 2001                      |
| Repaint window pa                              | mels                             |                 |           | 8,970.00   | 2001                      |
| Refinish lobby and                             | loffice                          |                 |           | 9,487.00   | 2001                      |
| Bi-heat units or A                             | /C units                         |                 |           | 181,397.00 | 2002                      |
| Replace windows on first floor                 |                                  |                 | 36,225.00 | 2002       |                           |
| No Work Items Scheduled                        |                                  |                 |           | 0          | 2003                      |
| Air conditioning installed/electrical upgrades |                                  |                 |           | 211,233.00 | 2004                      |
| Total estimated co                             | st over next 5 years             |                 |           | 519,446.00 |                           |

|   | Optional 5-Year Actio                      | on Plan Tables            |                               |            |                    |
|---|--|---------------------------|-------------------------------|------------|--------------------|
| Development<br>Number   | Development Name<br>(or indicate PHA wide) | Number<br>Vacant<br>Units | % Vacancies<br>in Development |            |                    |
| Scattered Sites   | PHA Wide                                   | 20                        | 9%                            |            |                    |
|   | led Physical Improvements or Ma            | nagement Improve          | ements                        | Estimated  | Planned Start Date |
| <b>I</b>  | Jan Para and A                             |                           |                               | Cost       | (HA Fiscal Year)   |
| Roofing [force acco   | ount] 4-12                                 |                           |                               | 37,325.00  | 2001               |
| Roofing [force acco   | ount], new thermostats and interio         | or outlets 4-14           |                               | 47,330.00  | 2001               |
|   | terior lights, and pest control 4-1        |                           |                               | 13,091.00  | 2001               |
| Asphalt sealing, Gl   | FIs, and pest control 4-19                 |                           |                               | 23,224.00  | 2001               |
| Asphalt sealing 4-2   |  |                           |                               | 18,731.00  | 2001               |
| New drive or parking and site-seeding 4-516,197.00Insulate attic, caulk windows and exterior doors and frames 4-1016,197.00 |  |                           |                               | 16,197.00  | 2002               |
| [1111 Apts.]  |  |                           |                               | 9,980.00   | 2002               |
| Intercom system 4   | -10 [1111 Apts.]                           |                           |                               | 4,410.00   | 2002               |
| Overhead door 4-1   | 0 [1111 Apts.]                             |                           |                               | 748.00     | 2002               |
| Asphalt overlay 4-1   | 14   |                           |                               | 51,342.00  | 2002               |
| Showers and show  | er surrounds 4-19                          |                           |                               | 49,336.00  | 2002               |
| Range surrounds 4-19         2,166.00   |  |                           |                               | 2002       |                    |
| Kitchen replacement 4-12 23,746.00  |  |                           |                               | 23,746.00  | 2003               |
| Kitchen replacement 4-14 23,747.00  |  |                           | ,                             | 2003       |                    |
| No Work Items Scheduled 0   |  |                           | 0                             | 2004       |                    |
| Total estimated cos   | st over next 5 years                       |                           |                               | 381,373.00 |                    |

|                       | Optional 5-Year Acti                       | on Plan Tables            |                  |                    | ]                  |
|-----------------------|--|---------------------------|------------------|--------------------|--------------------|
| Development<br>Number | Development Name<br>(or indicate PHA wide) | Number<br>Vacant<br>Units | % Vac<br>in Deve | ancies<br>elopment |                    |
|                       | PHA Wide                                   |                           |                  |                    |                    |
| Description of Ne     | eded Physical Improvements or Ma           | nagement Improve          | ements           | Estimated          | Planned Start Date |
|                       |  |                           |                  | Cost               | (HA Fiscal Year)   |
| 1406 Operations       |  |                           |                  | 242,662.00         | 2001               |
|                       | d crime prevention                         |                           |                  | 150,000.00         | 2001               |
| 1408 Staff trainin    | g and travel                               |                           |                  | 40,000.00          | 2001               |
| 1408 Upgrade con      | nputer system, drives, hardware an         | nd software               |                  | 35,000.00          | 2001               |
|                       | ries, FM&C benefits                        |                           |                  | 182,347.00         | 2001               |
| 1430 A/E fees         |  |                           |                  | 78,000.00          | 2001               |
| 1502 Contingenc       | У  |                           |                  | 39,319.00          | 2001               |
| 1406 Operations       |  |                           |                  | 242,662.00         | 2002               |
| -                     | d crime prevention                         |                           |                  | 150,000.00         | 2002               |
| 1408 Staff trainin    | -  |                           |                  | 40,000.00          | 2002               |
|                       | nputer system, drives, hardware an         | nd software               |                  | 35,000.00          | 2002               |
|                       | ries, FM&C benefits                        |                           |                  | 182,347.00         | 2002               |
| 1430 A/E fees         | ,  |                           |                  | 78,000.00          | 2002               |
| 1502 Contingenc       | У  |                           |                  | 39,319.00          | 2002               |
| 1406 Operations       |  |                           |                  | 242,662.00         | 2003               |
| 1408 Security and     | d crime prevention                         |                           |                  | 150,000.00         | 2003               |
| 1408 Staff trainin    | g and travel                               |                           |                  | 40,000.00          | 2003               |
| 1408 Upgrade con      | nputer system, drives, hardware an         | nd software               |                  | 35,000.00          | 2003               |
| 1410 FM&C sala        | ries, FM&C benefits                        |                           |                  | 182,347.00         | 2003               |
| 1430 A/E fees         |  |                           |                  | 78,000.00          | 2003               |
| 1502 Contingenc       | y  |                           |                  | 39,319.00          | 2003               |
| 1406 Operations       |  |                           |                  | 242,662.00         | 2004               |
| -                     | d crime prevention                         |                           |                  | 150,000.00         | 2004               |
| 1408 Staff trainin    |  |                           |                  | 40,000.00          | 2004               |
|                       | nputer system, drives, hardware an         | nd software               |                  | 35,000.00          | 2004               |
|                       | ries, FM&C benefits                        |                           |                  | 182,347.00         | 2004               |
| 1430 A/E fees         |  |                           |                  | 78,000.00          | 2004               |
| 1502 Contingenc       | у  |                           |                  | 39,319.00          | 2004               |
|                       |  |                           |                  |                    |                    |
| Total estimated co    | ost over next 5 years                      |                           |                  | 3,069,312.00       |                    |

# **B. HOPE VI and Public Housing Development and Replacement** Activities (Non-Capital Fund)

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

| $\boxtimes$ | Yes   | No: | a) Has the PHA received a HOPE VI revitalization grant? (if no, skip to        |
|-------------|-------|-----|--|
|             |       |     | question c; if yes, provide responses to question b for each grant,            |
|             |       |     | copying and completing as many times as necessary)                             |
|             |       |     | b) Status of HOPE VI revitalization grant (complete one set of                 |
|             |       |     | questions for each grant)  |
|             |       | 1.  | Development name: Madison Park Place   |
|             |       | 2.  | Development (project) number: IL06URD004I194                                   |
|             |       | 3.  | Status of grant: (select the statement that best describes the current status) |
|             |       |     | Revitalization Plan under development  |
|             |       |     | Revitalization Plan submitted, pending approval                                |
|             |       |     | Revitalization Plan approved   |
|             |       |     | Activities pursuant to an approved Revitalization Plan                         |
|             |       |     | underway   |
|             |       |     |  |
|             | Yes 🔀 | No: | c) Does the PHA plan to apply for a HOPE VI Revitalization grant in            |
|             |       |     | the Plan year?   |
|             |       |     | If yes, list development name/s below:   |
|             |       |     |  |
| $\boxtimes$ | Yes   | No: | d) Will the PHA be engaging in any mixed-finance development                   |
|             |       |     | activities for public housing in the Plan year?                                |
|             |       |     | If yes, list developments or activities below:                                 |
|             |       |     | HOPE VI: MADISON PARK PLACE  |
|             |       |     |  |
|             | Yes 🔀 | No: | e) Will the PHA be conducting any other public housing development or          |
|             |       |     | replacement activities not discussed in the Capital Fund Program               |
|             |       |     | Annual Statement?  |
|             |       |     | If yes, list developments or activities below:                                 |
|             |       |     |  |

# 8. Demolition and Disposition

### [24 CFR Part 903.7 9 (h)]

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

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

2. Activity Description



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

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

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

[24 CFR Part 903.7 9 (i)]

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

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

submission; PHAs completing streamlined submissions may skip to component 10.)

2. Activity Description

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

| Designation of Public Housing Activity Description                                  |
|---|
| 1a. Development name: Major Byrd Apartments   |
| 1b. Development (project) number: IL4-02  |
| 2. Designation type:  |
| Occupancy by only the elderly   |
| Occupancy by families with disabilities $\boxtimes$                                 |
| Occupancy by only elderly families and families with disabilities                   |
| 3. Application status (select one)  |
| Approved; included in the PHA's Designation Plan                                    |
| Submitted, pending approval   |
| Planned application   |
| 4. Date this designation approved, submitted, or planned for submission: 06/16/1999 |
| 5. If approved, will this designation constitute a (select one) N/A                 |
| New Designation Plan  |
| Revision of a previously-approved Designation Plan?                                 |
| 6. Number of units affected: 75   |
| 7. Coverage of action (select one)  |
| Part of the development   |
| Total development   |

| Designation of Public Housing Activity Description   |
|--|
| 1a. Development name: Bonansinga Apartments  |
| 1b. Development (project) number: IL4-03(1)  |
| 2. Designation type:   |
| Occupancy by only the elderly $\boxtimes$  |
| Occupancy by families with disabilities  |
| Occupancy by only elderly families and families with disabilities                          |
| 3. Application status (select one)   |
| Approved; included in the PHA's Designation Plan   |
| Submitted, pending approval  |
| Planned application  |
| 4. Date this designation approved, submitted, or planned for submission: <u>06/16/1999</u> |

| 5. If approved, will this designation constitute a (select one) N/A |
|---|
| New Designation Plan  |
| Revision of a previously-approved Designation Plan?                 |
| 6. Number of units affected: 98                                     |
| 6. Coverage of action (select one)                                  |
| Part of the development   |

Total development

| Designation of Public Housing Activity Description                                  |
|---|
| 1a. Development name: Sankey Senior Apartments                                      |
| 1b. Development (project) number: IL4-03(2) and IL4-06                              |
| 2. Designation type:  |
| Occupancy by only the elderly $\boxtimes$   |
| Occupancy by families with disabilities   |
| Occupancy by only elderly families and families with disabilities                   |
| 3. Application status (select one)  |
| Approved; included in the PHA's Designation Plan                                    |
| Submitted, pending approval   |
| Planned application   |
| 4. Date this designation approved, submitted, or planned for submission: 07/13/1995 |
| 5. If approved, will this designation constitute a (select one) N/A                 |
| New Designation Plan  |
| Revision of a previously-approved Designation Plan?                                 |
| 6. Number of units affected: IL4-03(2): 103 and IL4-06: 108                         |
| 7. Coverage of action (select one)  |
| Part of the development   |
| Total development   |

| Designation of Public Housing Activity Description   |
|--|
| 1a. Development name: Hildebrandt Senior Apartments  |
| 1b. Development (project) number: IL4-09   |
| 2. Designation type:   |
| Occupancy by only the elderly $\boxtimes$  |
| Occupancy by families with disabilities  |
| Occupancy by only elderly families and families with disabilities                          |
| 3. Application status (select one)   |
| Approved; included in the PHA's Designation Plan   |
| Submitted, pending approval  |
| Planned application  |
| 4. Date this designation approved, submitted, or planned for submission: <u>07/13/1995</u> |
| 5. If approved, will this designation constitute a (select one) N/A                        |

| New Designation Plan                                |
|---|
| Revision of a previously-approved Designation Plan? |
| 6. Number of units affected: 150                    |
| 7. Coverage of action (select one)                  |
| Part of the development                             |
| X Total development                                 |

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

[24 CFR Part 903.7 9 (j)]

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

### A. Assessments of Reasonable Revitalization Pursuant to section 202 of the HUD FY 1996 HUD Appropriations Act

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

2. Activity Description

Yes No:

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

| Conversion of Public Housing Activity Description  |
|--|
| 1a. Development name:  |
| 1b. Development (project) number:  |
| 2. What is the status of the required assessment?  |
| Assessment underway  |
| Assessment results submitted to HUD  |
| Assessment results approved by HUD (if marked, proceed to next question)                   |
| Other (explain below)  |
|  |
| 3. Yes No: Is a Conversion Plan required? (If yes, go to block 4; if no, go to             |
| block 5.)  |
| 4. Status of Conversion Plan (select the statement that best describes the current status) |
| Conversion Plan in development   |
| Conversion Plan submitted to HUD on: (DD/MM/YYYY)  |

| <ul> <li>Conversion Plan approved by HUD on: (DD/MM/YYYY)</li> <li>Activities pursuant to HUD-approved Conversion Plan underway</li> </ul> |
|--|
| 5. Description of how requirements of Section 202 are being satisfied by means other than  |
| conversion (select one)  |
| Units addressed in a pending or approved demolition application (date  |
| submitted or approved:   |
| Units addressed in a pending or approved HOPE VI demolition application  |
| (date submitted or approved: )   |
| Units addressed in a pending or approved HOPE VI Revitalization Plan (date   |
| submitted or approved: )   |
| Requirements no longer applicable: vacancy rates are less than 10 percent  |
| Requirements no longer applicable: site now has less than 300 units  |
| Other: (describe below)  |
|  |

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

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

# **<u>11. Homeownership Programs Administered by the PHA</u>**

[24 CFR Part 903.7 9 (k)]

### A. Public Housing

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

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

## 2. Activity Description

 □ Yes ⊠ No:
 Has the PHA provided all required activity description information for this component in the **optional** Public Housing Asset

 Management Table? (If "yes", skip to component 12. If "No", complete the Activity Description table below.)

| Public Housing Homeownership Activity Description                                  |
|--|
| (Complete one for each development affected)                                       |
| 1a. Development name: Madison Park Place   |
| 1b. Development (project) number: IL 06URD004I194 (John Hay Homes HOPE VI          |
| Revitalization – Springfield, Illinois)  |
| 2. Federal Program authority:  |
| HOPE I   |
| ∑ 5(h)   |
| Turnkey III  |
| Section 32 of the USHA of 1937 (effective 10/1/99)                                 |
| 3. Application status: (select one)  |
| Approved; included in the PHA's Homeownership Plan/Program                         |
| Submitted, pending approval  |
| Planned application  |
| 4. Date Homeownership Plan/Program approved, submitted, or planned for submission: |
| August 11, 1999 with the HOPE VI Revised Revitalization Plan                       |
| 5. Number of units affected: 44  |
| 6. Coverage of action: (select one)  |
| Part of the development  |
| Total development  |

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

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

| Yes | No:    |
|-----|--------|
| Yes | I INO. |

Will the PHA limit the number of families participating in the section 8 homeownership option?

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

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

b. PHA-established eligibility criteria

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

# 12. PHA Community Service and Self-sufficiency Programs

### [24 CFR Part 903.7 9 (1)]

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

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

1. Cooperative agreements:

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

> If yes, what was the date that agreement was signed? April 27, 1999

- 2. Other coordination efforts between the PHA and TANF agency (select all that apply)
- $\boxtimes$ Client referrals
  - Information sharing regarding mutual clients (for rent determinations and otherwise)
- Coordinate the provision of specific social and self-sufficiency services and programs to eligible families
  - Jointly administer programs
- Partner to administer a HUD Welfare-to-Work voucher program
  - Joint administration of other demonstration program
  - Other (describe) Participate in Illinois Department of Human Services-sponsored Welfare Services Committee which deals with welfare-to-work initiative in Sangamon County, Illinois.
- **B.** Services and programs offered to residents and participants

## (1) General

a. Self-Sufficiency Policies

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

- Public housing rent determination policies
- Public housing admissions policies
- Section 8 admissions policies
- Preference in admission to section 8 for certain public housing families
- $\overline{X}$ Preferences for families working or engaging in training or education
- programs for non-housing programs operated or coordinated by the PHA
- $\boxtimes$ Preference/eligibility for public housing homeownership option participation
  - Preference/eligibility for section 8 homeownership option participation
  - Other policies (list below)

b. Economic and Social self-sufficiency programs

 $\bigtriangledown$  Yes  $\square$  No:

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

| Services and Programs  |                   |  |  |  |
|--|-------------------|--|--|--|
| Program Name & Description<br>(including location, if appropriate) | Estimated<br>Size | Allocation<br>Method<br>(waiting<br>list/random<br>selection/specific<br>criteria/other)   | Access<br>(development office /<br>PHA main office / other<br>provider name) | Eligibility<br>(public housing or<br>section 8<br>participants or<br>both) |
| Family Self-Sufficiency Program                                    | 113<br>No Limit   | Any resident of<br>Public Housing<br>or Section 8 who<br>wants to seek<br>and maintain<br>employment and<br>become free from<br>welfare<br>assistance. | PHA main office and<br>home visits once<br>enrolled in program.              | Both   |

## (2) Family Self Sufficiency program/s

### a. Participation Description

| Family Self Sufficiency (FSS) Participation |                                 |                               |  |
|---|---------------------------------|-------------------------------|--|
| Program                                     | Required Number of Participants | Actual Number of Participants |  |
|   | (start of FY 2000 Estimate)     | (As of: 10/01/99)             |  |
| Public Housing                              | 0                               | 40                            |  |
| Section 8                                   | 25                              | 73                            |  |

b. X Yes No: If the PHA is not maintaining the minimum program size required by HUD, does the most recent FSS Action Plan address the steps the PHA plans to take to achieve at least the minimum program size? If no, list steps the PHA will take below:

### C. Welfare Benefit Reductions

- 1. The PHA is complying with the statutory requirements of section 12(d) of the U.S. Housing Act of 1937 (relating to the treatment of income changes resulting from welfare program requirements) by: (select all that apply)
- Adopting appropriate changes to the PHA's public housing rent determination policies and train staff to carry out those policies
- Informing residents of new policy on admission and reexamination
   Actively notifying residents of new policy at times in addition to adr
  - Actively notifying residents of new policy at times in addition to admission and reexamination.
- Establishing or pursuing a cooperative agreement with all appropriate TANF agencies regarding the exchange of information and coordination of services
- Establishing a protocol for exchange of information with all appropriate TANF agencies
- Other: (list below)

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

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

#### [24 CFR Part 903.7 9 (m)]

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

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

- 1. Describe the need for measures to ensure the safety of public housing residents (select all that apply)
- [ ] High incidence of violent and/or drug-related crime in some or all of the PHA's developments
- $\boxtimes$ High incidence of violent and/or drug-related crime in the areas surrounding or adjacent to the PHA's developments
  - Residents fearful for their safety and/or the safety of their children
- Observed lower-level crime, vandalism and/or graffiti
  - People on waiting list unwilling to move into one or more developments due to perceived and/or actual levels of violent and/or drug-related crime
  - Other (describe below)
- 2. What information or data did the PHA used to determine the need for PHA actions to improve safety of residents (select all that apply).
  - Safety and security survey of residents
- $\mathbf{X}$ Analysis of crime statistics over time for crimes committed "in and around" public housing authority
  - Analysis of cost trends over time for repair of vandalism and removal of graffiti **Resident** reports
  - PHA employee reports
  - Police reports
- Demonstrable, quantifiable success with previous or ongoing anticrime/anti drug programs
- $\boxtimes$ Other (describe below) SHA internal Security Department reports.
- 3. Which developments are most affected? (list below)
  - IL4-05 Brandon Court
  - IL4-10 Johnson Park, 1111 South 19th Street Apartments, Lincolnwood Estates

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

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

- $\mathbf{X}$ Contracting with outside and/or resident organizations for the provision of crimeand/or drug-prevention activities
- Crime Prevention Through Environmental Design
- Activities targeted to at-risk youth, adults, or seniors
- Volunteer Resident Patrol/Block Watchers Program

Other (describe below) Neighborhood Policing initiatives

 $\bowtie$ 

 Which developments are most affected? (list below) IL4-05 Brandon Court IL4-10 Johnson Park, 1111 South 19<sup>th</sup> Street Apartments, Lincolnwood Estates

## C. Coordination between PHA and the police

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

| /e- |
|-----|
|     |
|     |
|     |
|     |
|     |

IL4-05 Brandon Court IL4-10 Johnson Park, 1111 South 19<sup>th</sup> Street Apartments, Lincolnwood Estates

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

PHAs eligible for FY 2000 PHDEP funds must provide a PHDEP Plan meeting specified requirements prior to receipt of PHDEP funds.

| $\boxtimes$ | Yes | No: Is th | ne PHA    | eligible to | o participat | e in the | PHDEP | in the | fiscal | year | covered |
|-------------|-----|-----------|-----------|-------------|--------------|----------|-------|--------|--------|------|---------|
|             |     | b         | y this PH | HA Plan?    |              |          |       |        |        |      |         |

|             | •               |                 |                |                 |           |
|-------------|-----------------|-----------------|----------------|-----------------|-----------|
| $\boxtimes$ | No: Has the PHA | included the PH | DEP Plan for F | FY 2000 in this | PHA Plan? |

Yes X No: This PHDEP Plan is an Attachment. (Attachment Filename: \_\_\_\_)

# **14. RESERVED FOR PET POLICY**

[24 CFR Part 903.7 9 (n)]

Yes

# **15.** Civil Rights Certifications

[24 CFR Part 903.7 9 (o)]

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

# **16.** Fiscal Audit

[24 CFR Part 903.7 9 (p)]

1.  $\bigtriangledown$  Yes  $\square$  No: Is the PHA required to have an audit conducted under section 5(h)(2) of the U.S. Housing Act of 1937 (42 U S.C. 1437c(h))? (If no, skip to component 17.) 2.  $\bigtriangledown$  Yes  $\square$  No: Was the most recent fiscal audit submitted to HUD? 3. Yes  $\Box$  No: Were there any findings as the result of that audit? 4.  $\Box$  Yes  $\boxtimes$  No: If there were any findings, do any remain unresolved? If yes, how many unresolved findings remain? 5.  $\bigtriangledown$  Yes  $\square$  No: Have responses to any unresolved findings been submitted to HUD? If not, when are they due (state below)?

# **17. PHA Asset Management**

[24 CFR Part 903.7 9 (q)]

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

- 1.  $\bigtriangledown$  Yes  $\square$  No: Is the PHA engaging in any activities that will contribute to the long-term asset management of its public housing stock, including how the Agency will plan for long-term operating, capital investment, rehabilitation, modernization, disposition, and other needs that have **not** been addressed elsewhere in this PHA Plan?
- 2. What types of asset management activities will the PHA undertake? (select all that apply)
  - Not applicable
  - Private management
  - Development-based accounting
  - Comprehensive stock assessment
- Other: (list below)

Exploring options for generating revenue independent of HUD subsidy.

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

## **18.** Other Information

[24 CFR Part 903.7 9 (r)]

| A. | Resident  | Advisorv | Board | Recommen | dations |
|----|-----------|----------|-------|----------|---------|
| 1  | Restautit | 11015015 | Douru | Recommen | aations |

| 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: (if comments were received, the PHA MUST select one)

Attached at Attachment (File name)

Provided below:

 $\boxtimes$ 

Following numerous Advisory Board Meetings, there were no comments received by SHA residents or other attendees.

| 3.         | In what manner  | did the PHA | address those | comments? (  | select all that | apply) |
|------------|-----------------|-------------|---------------|--------------|-----------------|--------|
| <i>J</i> . | III what mainer |             |               | commentes. ( | beleet un unu   | (uppi) |

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

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

Other: (list below)

There were no comments to be addressed by the SHA.

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

- 1. Yes No: Does the PHA meet the exemption criteria provided section 2(b)(2) of the U.S. Housing Act of 1937? (If no, continue to question 2; if yes, skip to sub-component C.)
- 2. Yes X No: Was the resident who serves on the PHA Board elected by the residents? (If yes, continue to question 3; if no, skip to sub-component C.)
- 3. Description of Resident Election Process

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

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

b. Eligible candidates: (select one)

Any recipient of PHA assistance

| Any Any Any | y head of household receiving PHA assistance<br>y adult recipient of PHA assistance<br>y adult member of a resident or assisted family organization<br>her (list) |
|-------------|---|
| _ ~         | voters: (select all that apply)   |
|             | adult recipients of PHA assistance (public housing and section 8 tenant-based stance)   |
| Rep         | presentatives of all PHA resident and assisted family organizations<br>er (list)  |
|             | ent of Consistency with the Consolidated Plan<br>licable Consolidated Plan, make the following statement (copy questions as many times as                         |
| 1. Consolic | lated Plan jurisdiction: Springfield, Illinois  |
|             | A has taken the following steps to ensure consistency of this PHA Plan with the lated Plan for the jurisdiction: (select all that apply)                          |
|             | e PHA has based its statement of needs of families in the jurisdiction on the needs ressed in the Consolidated Plan/s.  |
|             | PHA has participated in any consultation process organized and offered by the   |
|             | nsolidated Plan agency in the development of the Consolidated Plan.   |
|             | PHA has consulted with the Consolidated Plan agency during the development<br>his PHA Plan.   |
| Act         | ivities to be undertaken by the PHA in the coming year are consistent with the<br>actives contained in the Consolidated Plan. (list below)                        |

Other: (list below) 

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

### D. Other Information Required by HUD

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

# **Attachments**

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

Table Library

# SPRINGFIELD HOUSING AUTHORITY

## ADMISSION AND CONTINUED OCCUPANCY POLICY

## <u>INDEX</u>

|    | TITLE  | PAGE # |
|----|--|--------|
| 4  | STATEMENT OF APPROACH                            |        |
|    | MISSION STATEMENT & NON-DISCRIMINATION STATEMENT |        |
| 5  |  |        |
|    | PART I NEW ADMISSIONS                            |        |
| 6  | ELIGIBILITY FOR ADMISSION                        |        |
|    | PROCESSING APPLICATIONS                          |        |
| 6  | FAMILY ELIGIBILITY                               |        |
| 7  | DISABLED PERSON                                  |        |
| 7  | 7<br>ELDERLY FAMILY<br>FAMILY                    |        |
| 8  | HANDICAP   |        |
| 8  | NEAR ELDERLY                                     |        |
| 8  | NON-ELDERLY DISABLED PERSON                      |        |
| 8  | MIXED POPULATION PROJECT                         |        |
| 8  | SINGLE PERSON                                    |        |
| 8  | NET INCOME LIMITS                                |        |
| 9  | DEFINITION OF INCOME                             |        |
| 9  | CALCULATION OF INCOME                            |        |
| 12 | DISALLOWANCE OF EARNED INCOME                    |        |
| 13 | ACHIEVEMENT OF MIXED INCOMES AND POPULATIONS     |        |
| 13 |  |        |

| 14 | TOTAL TENANT PAYMENTS/MINIMUM TENANT RENTS                                 |   |
|----|--|---|
|    | FLAT RENTS   |   |
| 14 | RENT CEILINGS  |   |
| 15 | STATUS OF ELIGIBILITY  |   |
| 15 | PENDING ELIGIBILITY  |   |
| 15 |  |   |
| 15 | ELIGIBLE APPLICANTS  |   |
| 16 | INELIGIBLE APPLICANTS  |   |
| 16 | FORMAL HEARING   |   |
| 17 | WAITING LIST   |   |
| 17 | CHANGE IN APPLICANTS CIRCUMSTANCES 17<br>REMOVAL OF NAME FROM WAITING LIST | , |
| 17 |  |   |
| 18 | CHANGE IN APPLICANT INFORMATION  |   |
| 18 | UNIT SIZE REQUIRED   |   |
| 19 | APPLICANT ABILITY TO LIVE INDEPENDENTLY                                    |   |

#### PART II SELECTION OF APPLICANTS FROM WAITING LIST

INTAKE DEPARTMENT

20

20

21

21

- STANDARDS FOR ADMISSION
- 20 SOCIAL DESIRABILITY
- 20 LANDLORD HISTORY
- RENT PAYING PRACTICES
- INCOME ELIGIBILITY CRITERIA
  - FAMILY COMPOSITION CONFORM TO OCCUPANCY STANDARDS INTAKE REVIEW PANEL

21

| 21                         |   |  |  |  |  |  |
|----------------------------|---|--|--|--|--|--|
| 22                         | MIXED POPULATION AND INCOME PROJECTS  |  |  |  |  |  |
| 22                         | ACHIEVEMENT OF MIXED INCOME POPULATIONS   |  |  |  |  |  |
| 22                         | REASONS FOR DENIAL OF HOUSING ASSISTANCE  |  |  |  |  |  |
| 22                         | AUTOMATIC DENIAL OF UNDESIRABLE APPLICANTS  |  |  |  |  |  |
| 23                         | OTHER REASONS FOR DENIAL OF HOUSING ASSISTANCE<br>DISABLED INDIVIDUALS  |  |  |  |  |  |
| 25                         | DESIGNATED HOUSING  |  |  |  |  |  |
| 25                         | OFFER OF HOUSING  |  |  |  |  |  |
| 26                         | LEASING   |  |  |  |  |  |
| 26                         | SOLVENCY CONSIDERATION  |  |  |  |  |  |
| 27                         | DE-CONCENTRATION POLICY   |  |  |  |  |  |
| 27                         | PRIORITY IN THE SELECTION OF RESIDENTS  |  |  |  |  |  |
| 28                         |   |  |  |  |  |  |
|                            |   |  |  |  |  |  |
|                            | PART III CONTINUED OCCUPANCY  |  |  |  |  |  |
| 20                         | PART III CONTINUED OCCUPANCY<br>RE-EXAMINATION OF ELIGIBILITY FOR CONTINUED OCCUPANCY   |  |  |  |  |  |
| 29                         |   |  |  |  |  |  |
| 29                         | RE-EXAMINATION OF ELIGIBILITY FOR CONTINUED OCCUPANCY   |  |  |  |  |  |
| 29<br>29                   | RE-EXAMINATION OF ELIGIBILITY FOR CONTINUED OCCUPANCY<br>SCHEDULE OF RE-EXAMINATION   |  |  |  |  |  |
| 29<br>29<br>30             | RE-EXAMINATION OF ELIGIBILITY FOR CONTINUED OCCUPANCY<br>SCHEDULE OF RE-EXAMINATION<br>INTERIM RENT REVIEWS & MISREPRESENTATION OF INCOME   |  |  |  |  |  |
| 29<br>29<br>30<br>31       | RE-EXAMINATION OF ELIGIBILITY FOR CONTINUED OCCUPANCY<br>SCHEDULE OF RE-EXAMINATION<br>INTERIM RENT REVIEWS & MISREPRESENTATION OF INCOME<br>RENT ADJUSTMENT RESULTING FROM RECERTIFICATION   |  |  |  |  |  |
| 29<br>29<br>30             | RE-EXAMINATION OF ELIGIBILITY FOR CONTINUED OCCUPANCY<br>SCHEDULE OF RE-EXAMINATION<br>INTERIM RENT REVIEWS & MISREPRESENTATION OF INCOME<br>RENT ADJUSTMENT RESULTING FROM RECERTIFICATION<br>PENALTIES FOR NON-COMPLIANCE W/RECERT. REQUIREMENTS<br>TRANSFERS<br>MISREPRESENTATION  |  |  |  |  |  |
| 29<br>29<br>30<br>31       | RE-EXAMINATION OF ELIGIBILITY FOR CONTINUED OCCUPANCY<br>SCHEDULE OF RE-EXAMINATION<br>INTERIM RENT REVIEWS & MISREPRESENTATION OF INCOME<br>RENT ADJUSTMENT RESULTING FROM RECERTIFICATION<br>PENALTIES FOR NON-COMPLIANCE W/RECERT. REQUIREMENTS<br>TRANSFERS   |  |  |  |  |  |
| 29<br>29<br>30<br>31       | RE-EXAMINATION OF ELIGIBILITY FOR CONTINUED OCCUPANCY<br>SCHEDULE OF RE-EXAMINATION<br>INTERIM RENT REVIEWS & MISREPRESENTATION OF INCOME<br>RENT ADJUSTMENT RESULTING FROM RECERTIFICATION<br>PENALTIES FOR NON-COMPLIANCE W/RECERT. REQUIREMENTS<br>TRANSFERS<br>MISREPRESENTATION<br>31  |  |  |  |  |  |
| 29<br>29<br>30<br>31       | RE-EXAMINATION OF ELIGIBILITY FOR CONTINUED OCCUPANCY<br>SCHEDULE OF RE-EXAMINATION<br>INTERIM RENT REVIEWS & MISREPRESENTATION OF INCOME<br>RENT ADJUSTMENT RESULTING FROM RECERTIFICATION<br>PENALTIES FOR NON-COMPLIANCE W/RECERT. REQUIREMENTS<br>TRANSFERS<br>MISREPRESENTATION<br>31<br>SOCIAL REHABILITATION STANDARD<br>31                      |  |  |  |  |  |
| 29<br>29<br>30<br>31<br>31 | RE-EXAMINATION OF ELIGIBILITY FOR CONTINUED OCCUPANCY<br>SCHEDULE OF RE-EXAMINATION<br>INTERIM RENT REVIEWS & MISREPRESENTATION OF INCOME<br>RENT ADJUSTMENT RESULTING FROM RECERTIFICATION<br>PENALTIES FOR NON-COMPLIANCE W/RECERT. REQUIREMENTS<br>TRANSFERS<br>MISREPRESENTATION<br>31<br>SOCIAL REHABILITATION STANDARD<br>31<br>COMMUNITY SERVICE |  |  |  |  |  |

| 0.0 | NOTIFICATIONS OF REQUIREMENT                             |
|-----|--|
| 32  | VOLUNTEER OPPORTUNITIES                                  |
| 33  | THE PROCESS  |
|     | 33<br>NOTIFICATION OF NON-COMPLIANCE W/COMMUNITY SERVICE |
| 33  | OPPORTUNITY FOR CURE                                     |
| 34  | INSPECTIONS  |
| 34  | INITIAL INSPECTIONS                                      |
| 34  |  |
| 34  | 60-DAY INSPECTIONS                                       |
| 34  | ONGOING INSPECTIONS                                      |
| 34  | SPECIAL INSPECTIONS                                      |
| 35  | MOVE -OUT INSPECTIONS                                    |
|     | RENT POLICY  |
| 35  | TYPES AND NUMBERS OF PETS                                |
| 35  |  |
|     | ADDENDUM TO THE INTAKE AND OCCUPANCY POLICY              |

DEFINITIONS

36

EXHIBIT A -CEILING RENT

42

EXHIBIT B - PET POLICY

43

EXHIBIT C – GRIEVANCE POLICY

- EXHIBIT D RENT POLICY
- 46 58

EXHIBIT E - LEASE

# STATEMENT OF APPROACH

The Springfield Housing Authority will use the guidelines and procedures prescribed by HUD at time of applicant processing to make a final determination of family eligibility (Note: The Springfield Housing Authority's staff must process the family based upon regulations/policies in effect at the time of processing).

The Springfield Housing Authority assumes full responsibility for ensuring that the staff is knowledgeable in certification requirements and other HUD regulations determining eligibility for public housing. In the event of lack of clarity in any statement made by staff, the written procedures contained herein shall prevail over all verbal statements of staff unless accepted by the Executive Director in writing. Further, any policy or procedure contained in this statement of policies, if any, which is inconsistent with HUD regulations shall be superseded by the appropriate HUD regulation.

The conditions and requirements of the current Springfield Housing Authority lease are incorporated herein by reference and attached hereto as part of the appendix.

## ADMISSION TO AND CONTINUED OCCUPANCY OF UNITS OWNED AND OPERATED BY THE SPRINGFIELD HOUSING AUTHORITY

## **MISSION STATEMENT**

The Springfield Housing Authority is the primary leader in providing quality affordable housing to individuals and families, while encouraging partnerships necessary for residents to develop self-sufficiency and to be productive members of the community.

### **NON-DISCRIMINATION STATEMENT**

The Springfield Housing Authority shall not discriminate because of race, color, sex, creed, religion, age, disability, handicap or national origin in the leasing, rental, or other disposition of housing or related facilities (including land) included in any developments under its jurisdiction covered by a contract for annual contributions under the United States Housing Act of 1937, as amended, or in the use of or account of race, color, sex, creed, religion, age, disability/handicap or national origin, deny to any family the opportunity to apply for such housing, nor deny any eligible applicant the opportunity to lease or rent any dwelling in any such housing suitable to its needs.

The Springfield Housing Authority complies with applicable federal, state and local fair housing laws and applicable provision of the Americans Disability Acts.

Springfield Housing Authority records, with respect to applications for admission to any low-rent public housing assisted under the United States Housing Act of 1937, as amended, shall indicate as to each application the date and time of receipt; eligibility or non-eligibility of the applicant; the unit size for those eligible; the date, location, and circumstance of each vacancy offered, accepted and/or rejected.

## PART I NEW ADMISSIONS

#### A Eligibility for admission

The admissions process begins when an individual interested in Public Housing and/or Homeownership Program comes to the Springfield Housing Authority to apply for housing assistance.

The applicant will receive an application packet inclusive of written instruction(s) for completing the application and a reference list detailing the criteria needed to verify eligibility. Applicants and adult family members are required to provide the Springfield Housing Authority with signed release forms authorizing the Springfield Housing Authority to obtain pertinent information concerning the applicant (and all adult family members) relative to eligibility criteria. **Failure to sign and provide SHA the release forms will make an applicant ineligible for housing assistance at the Springfield Housing Authority.** 

Springfield Housing Authority will coordinate efforts with other community resources/agencies to compile information relative to an applicant's suitability for public housing.

#### B. <u>Processing Applications for Admission</u>

1. A completed application packet with appropriate documentation will be accepted from each family seeking admission to low rent housing owned and managed by the Springfield Housing Authority.

The application will be reviewed for completeness, legibility and accuracy to ensure that all necessary information is included and the application signed by the applicant. If incomplete, the applicant shall be informed of any informational deficiencies or incomplete documents and/or the need for additional information or documentation.

- 2. Applicants shall be interviewed by SHA staff and the application process for public housing will be explained. The interview shall include an overview of the following:
  - (a) application
  - (b) documents to verify eligibility
  - (c) signed release forms
  - (d) explanation of the waiting list
- 3. eligibility information will be reviewed and a determination made with respect to the following:

| a. | family eligibility                   |
|----|--------------------------------------|
| b. | net income limits for admission      |
| С. | annualized income                    |
| d. | employment criteria (if applicable)  |
| e. | total tenant payment (TTP)           |
| f. | standard's of admission              |
| g. | rent payment history (36 months)     |
| ĥ. | housekeeping habits                  |
| i. | social desirability/criminal history |
| j. | handicapped/disabled status          |
| k. | family composition and bedroom size  |

- 4. Annual family income will be computed in accordance with definitions and procedures as set forth in this policy and the Code of Federal Regulations, as amended.
- 5. Status of eligibility will be determined and written notification of eligibility or ineligibility shall be provided to the applicant.
- 6. All applications will be placed onto the waiting list and processed for housing offers based on date and time of application.
- 7. Application process will not exceed thirty (30) days.

#### C. <u>Family Eligibility</u>

To be eligible for admission into the Springfield Housing Authority public housing program, an applicant must meet the requirements/definition of one of the family types below:

 Disabled Person - a person who is under a disability as defined in Section 223 of the Social Security Act (42 U.S.C. 423) or in Section 102(b) (5) of the Developmental Disabilities Services and Facilities Construction Amendment of 1970 (42 U.S.C. 6001(7)) (24 CFR 912.2).

A copy of Americans Disability Act (ADA) is available for review at the Springfield Housing Authority.

- 2. <u>Elderly Family</u> a family whose head, spouse or sole member is at least 62 years of age, or a disabled or handicapped person as defined in this section, and may include two (2) or more elderly, disabled or handicapped persons living together, or one or more such persons living with another person who is determined to be essential to is/her care and well being.
- Family (I) two or more persons sharing residency whose income and resources are available to meet the family's needs and who are either related by blood, marriage or operation of law, or have evidenced a stable family relationship; (2) a pregnant woman; (3) an elderly family or single person as defined in this part; or (4) the remaining member of a resident family;

(Remaining Family Member) - a person is considered to be a remaining family

member when the person was on the application for housing or on the most recent certification (whichever occurred later), and only under circumstances wherein the original lease-holder has died or if a court order awards the unit to the spouse of the lease holder.

- 4. <u>**Handicapped Person**</u> a person having a physical or mental impairment which: (I) is expected to be of a long-continued and indefinite duration; (2) substantially impedes his/her ability to live independently; and (3) is of such a nature that such impairment could be improved by more suitable housing conditions (24 CFR 912.2).
- 5. **Near Elderly Families** those whose head or spouse (or sole survivor) is at least 50 years of age but below 62 years of age and qualify for elderly projects only.
- 6. **Non-elderly Disabled Person** a person with a disability who is less than 62 years of age.
- 7. <u>**Mixed Population Project**</u> a public housing project reserved for occupancy by elderly and disabled families.
- 8. <u>Single Person</u> a person living alone or intending to live alone and who does not qualify as an elderly family as defined in this part, or as the remaining member of a resident family.

In all of the definitions 1 through 8 above, the applicant and/or head of household, must be 18 years of age and/or classified as an adult or as an emancipated minor as defined by Illinois State Law.

#### D. <u>Net Income Limits</u>

Net income for admission shall not exceed the following amounts at the time of admission (income limits effective as of January 27, 1999, and are subject to change):

|                | Maximum Income Limits                          |
|----------------|--|
| No. of Persons | for Admission to Family & Elderly Developments |
|                |  |

Very Low Income

Low Income

| 1         | 17,150 | 27,450 |
|-----------|--------|--------|
| 2         | 19,600 | 31,350 |
| 3         | 22,050 | 35,300 |
| 4         | 24,500 | 39,200 |
| 5         | 26,450 | 42,350 |
| 6         | 28,400 | 45,400 |
| 7         | 30,400 | 48,600 |
| 8 or more | 32,350 | 51,750 |

Income limits change annually. Such limits are provided by HUD and are forwarded to the Springfield Housing Authority. A copy of the current net income limits is available for viewing at the Springfield Housing Authority and may be reviewed upon request.

#### E. <u>Definition of Income</u>

Total family income is the anticipated total income from all sources received by (1) head-ofhousehold and spouse, and (2) each additional member of the family residing in the household who is at least 18 years of age, exclusive of the income of full-time students (other than the head or spouse) or income which is temporary, non-recurring or sporadic as defined in this section.

Total family income shall also include that portion of the income of the head-of-household and/or spouse, both or either temporarily absent.

- 1. Total family income includes, but is not limited to, the following:
  - a. The full amount of wages and salaries, overtime pay, commissions, fees, tips, bonuses, and other compensation for personal services, all prior to any payroll deductions.
  - b. The net income from operation of a business or profession (for this purpose, expenditures for business expansion or amortization of capital indebtedness and an allowance for depreciation of capital assets shall not be deducted to determine net income from a business).
  - c. Interest, dividends, and other net income of any kind from real or personal property (for this purpose, expenditures for amortization of capital indebtedness and an allowance for depreciation of capital assets shall not be deducted to determine the net income from real or personal property).
  - d. Where the family has net family assets in excess of \$5,000.00, annual income shall include the greater of the actual income derived from all net family assets or a percentage of the value of such assets based on the current passbook savings rate as determined by HUD.
  - e. The full amount of periodic payments received from social security, annuities, insurance policies, retirement funds,

pensions, disability or death benefits and other similar types of periodic receipts, excluding a lump-sum payment for the delayed start of a periodic payment.

- f. Payments in lieu of earnings, such as unemployment and disability compensation, worker's compensation, and severance pay.
- g. The amount of Welfare Assistance income to be included as income shall consist of the amount of the cash allowance or grant. (TANF Temporary assistance to needy families.)
- h. Periodic and determinable allowances, such as alimony and child support payments, and regular contributions or gifts received from any person not residing in the dwelling.
  - I regular pay, special payments and allowances of a member of the Armed Forces (whether or not living in the dwelling) who is head of the family, spouse, other person whose dependents are residing in the unit. (Excluding hazardous duty pay as defined herein);
- j. Income of head of household or spouse both or either temporary absents.
- 2. Annual Income does not include such temporary, non-recurring or sporadic income such as:
  - a. Casual, sporadic and irregular gifts.

i.

- b. Amounts that are specifically for or are in reimbursement of the cost of medical expenses.
- c. Lump-sum additions to family assets, such as inheritances, insurance payments (including payments under health and accident insurance and worker's compensations), capital gains, and settlements for personal or property losses.
- d. Amounts of educational scholarships and grants paid directly to the student or to the educational institution, and amounts paid by the government to a veteran for use in meeting the costs of tuition, fees, books and equipment. Any amounts of such scholarship money's or payments to veterans not used for the above purposes that are available for subsistence are to be included as income.
- e. The hazardous duty pays to a family member in the armed forces away from home and exposed to hostile fire.
- f. In come from employment of children (including foster children) under the age of 18 years.

- g. Payments received for the care of foster children.
- h. Amounts specifically excluded by any other federal statute from consideration as income for purposes of determining eligibility or benefits under a category of assistance programs that includes assistance under the 1937 Act.
- i. Any Earned Income Tax Credit.
- j. Adoption assistance payment in excess of \$480.00 per adopted child.
- k. relocation payments made under Title II of the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970.
- 3. Other income exclusions (but not limited to) are as follows:
  - a. The value of the allotment provided to an eligible household for coupons under the Food Stamp Act of 1977.
  - b. Payments to volunteers under the Domestic Volunteer Service Act of 1973.
  - c. Payments received under the Alaska Native Claims Settlement Act.
  - d. Income derived from certain sub-marginal land of the United States that is held in trust for certain Indian tribes (25 U.S.C. 459e).
  - e. Payments or allowances made under the Department of Health and Human Services' Low Income Home Energy Assistance Program.
  - f. Payments received from the Job Training Partnership Act (JTPA).
  - g. Income derived from the disposition of funds of the Grand River and of Ottawa Indians.
  - h. The first \$2,000.00 of per capita shares received from judgment funds awarded by the Indian Claims Commission or the Court-of-Claims or from funds held in trust for an Indian Tribe by the Secretary of Interior.
  - i. Grants/Scholarships under Title IV of Higher Education Act of 1965.
  - j. Programs funded under Title V of Older Americans Act.

- k. Agent Orange Settlement Fund payments.
  - Reimbursement costs under the ChildCare and Development Block Grant Act of 1990.

If it is not feasible to anticipate a level of income over a 12-month period, the income anticipated for a shorter period may be annualized, subject to a re-determination at the end of the shorter period.

In the case of self-employed persons, "income" means the net income from operation of the business or profession.

The Springfield Housing Authority shall require applicants to execute a HUD-approved release and consent form which authorizes any depository or private source of income, or any Federal, State or local agency to furnish or release to the Authority such information as determined necessary to determine eligibility. The Springfield housing Authority shall also have the right to request and utilize annual Federal Income Tax forms for income verification purposes.

### F. <u>Calculation of Income</u>

Ι.

Income will be calculated to determine whether or not an applicant's income falls within the written established HUD-prescribed limits. The Quality Housing and Work Responsibility Act of 1998 imposed a general rule that not less than 40 % of admissions in any fiscal year must be families whose income does not exceed 30 % of leading income for the area. (extremely low income families).

If the estimated income range is within the prescribed income limits (or minimum of applicable), the following appropriate deductions will be considered in determining adjusted income.

- a. \$480.00 for each dependent under 18 years of age, fulltime student or disabled person.
- b. \$400.00 for an elderly and or disabled family.
- c. Medical expenses in excess of 3% of gross income for elderly and or disabled family.
- d. Child care expenses for which the applicant qualifies.

The Springfield Housing Authority reserves the right to determine eligibility of any income deductions. All deductions are subject to the family definitions here in.

### G. Disallowance of Earned Income

The 1998 act exempts earned income for families who start work or self-sufficiency programs. The families rent will not increase for a period of twelve (12) months, if the increase of income results from:

- 1. Earnings of a previously unemployed family member
- 1. Earnings of a family member during participation in a family selfsufficiency training program.
- 2. Earnings of a family member who has been receiving welfare in the
#### previous six (6) months.

After the twelve (12) month disallowance, a family rent increase must be phased in. The phase-in rent cannot increase as a result of the earned income by more than 50 % for an additional twelve (12) months.

#### Achievement of Mixed Incomes and Populations

To obtain a broad range of incomes and to avoid a concentration of the most economically and socially deprived families in any one development, the Springfield Housing Authority may select applicants from both the low and very low income ranges.

## TOTAL TENANT PAYMENTS (TTP)/MINIMUM TENANT RENT(S)

Tenant rent is the Total Tenant Rent Payment less any applicable utility allowance to cover tenant paid utilities.

a.

The Total Tenant Payment is the greatest of:

- 1. Thirty percent (30%) of family monthly adjusted income.
- 2. Ten percent (10%) of the family monthly gross income.
- 3. A Minimum Tenant Rent of \$50.00.
- 4. A flat rent that is equal to current fair market rent.
- 5. Current ceiling rent, if applicable
- a. Total Tenant Payment is the amount charged a resident for the use of the dwelling, utilities and the accommodation and equipment (such as ranges and refrigerators).

The tenant has the opportunity to choose an income based or flat rent at move in or recertification. This choice is limited to change once per year.

Tenant rent is due and payable to the Springfield Housing Authority on or before the 1<sup>st</sup> day of the month and subject to a late charge if not paid by the end of the day on the seventh day of the month.

## Flat Rents

The annual letter to flat rent payers regarding the reexamination process will state the following:

- a. Each year at the time of the annual reexamination, the family has the option of selecting a flat rent amount in lieu of completing the reexamination process and having their rent based on the formula amount.
- b. The amount of the flat rent
- c. A fact sheet about formula rents that explains the types of income counted, the most common types of income excluded, and the categories allowances that can be deducted from income.

Families who opt for the flat rent will be required to go through the income reexamination process every three years, rather than the annual review they otherwise would undergo.

Families who opt for the flat rent may request to have a reexamination and return to the formula-based method once per year for any of the following reasons:

- 1. The family's income has decreased.
- 2. The family's circumstances have changed increasing their expenses for child care, medical expenses, etc.
- 3. Other circumstances creating a hardship on the family such that the formula method would be more financially feasible for the family.
- a. The dates upon which the Springfield Housing Authority expects to review the amount of the flat rent, the approximate rent increase the family could expect, and the approximate date upon which a future rent increase could become effective.
- b. The name and phone number of an individual to call to get additional information or counseling concerning flat rents.
- c. A certification for the family to sign accepting or declining the flat rent.

Each year prior to their anniversary date, Springfield Housing Authority will send a reexamination letter to the family offering the choice between a flat or a formula rent. The opportunity to select the flat rent is available only at this time. At the appointment, the Springfield Housing Authority may assist the family in identifying the rent method that would be most advantageous for the family. If the family whishes to select the flat rent method without meeting with the Springfield Housing Authority representative, they may make the selection on the form and return the form to the Springfield Housing Authority. In each case, the Springfield Housing Authority will cancel the appointment.

## Rent Ceilings

Springfield Housing Authority is authorized to request rent ceilings (less than 30% of net income) for residents in any one or more developments to correspond to special programming as approved by HUD. Developments with ceiling rents are identified in exhibit A.

# STATUS OF ELIGIBILITY

The application will be processed during a 30-day period in which the applicant must supply all required documentation to meet the eligibility criteria.

Once the applicant's information has been processed, the eligibility status of the applicant will be determined. An applicant shall fit into one of the following categories. The are:

1. <u>Pending Eligible</u> - Applicants which have missing information that would allow staff to verify eligibility. Once the file is complete (all required documentation is present), the file is sent to the Intake Manager for review

Applicants determined to be "pending eligible" will be placed on the waiting list by date and time of application. Before a pending file is reviewed, all eligibility information must be verified and documented in the applicant's file.

The information requested must be obtained within 30-days. It is the applicants responsibility to be able to obtain required information within 30-days or the application will be withdrawn from the waiting list.

 Eligible Applicant(s) – An applicant who meets the definition of family, has income is within established HUD income limits (or minimum, applicable), meets screening eligibility and applicant has been approved for housing by the Intake Manager.

3. <u>Ineligible Applicant(s)</u> - applicant who does not meet the definition of family and/or income is not within established HUD income limits (or minimum, if applicable) and/or does not meet the screening criteria.

## NOTIFICATION TO APPLICANTS

1. <u>Eligible Applicant(s)</u>- Written notification indicating an applicant's eligibility or ineligibility shall be forwarded to applicants. Applicants will be notified of a projected occupancy date to the extent that said date can be determined.

Such notification will not create a contract between the Springfield Housing Authority and the applicant.

2. **Ineligible Applicant(s)-** Applicants who are determined to be ineligible shall be notified of such determination in writing and the reasons for the ineligibility. A report of such determination shall be maintained in the applicant's file.

Such notices shall also inform the ineligible applicant of his/her right to an informal hearing upon request. Informal hearing request must be made in written form within (ten) 10 days of notification. An informal hearing will be awarded in all instances except for: prior eviction for non-payment of rent and outstanding balances owed the Springfield Housing Authority and/or any public housing authority.

A summary of the resolution will be forwarded to the applicant specifying the meeting date and the proposed disposition.

3. **Formal Hearing** - Applicants denied housing shall be eligible for a formal hearing on such denial following an informal hearing.

The Springfield Housing Authority must promptly notify any applicant determined to be ineligible for admission to a project of the basis for such determination, and must provide the applicant upon request, within a reasonable time after the determination is made, with an opportunity for a formal hearing on such determination (24 CFR 960.207).

The ineligible applicant must submit a written request for a formal hearing to the Director of Housing Management or his/her designee. The request must be signed by the applicant and filed by him/her (or a representative) within 10 days of the notice of ineligibility. The SHA will schedule the formal hearing and notify the applicant of the date and time.

The formal hearing, herein referred to shall be conducted by the SHA Grievance Officer. The decision of the grievance officer shall be final and exhaust the administrative remedies of the applicant.

The responsibilities of the Grievance Officer:

- a. To hear the appeal of the applicant(s) with regard to denial of housing;
- b. To review pertinent information submitted to the Director on which the denial of housing was based;
- c. Render a decision/resolution; and
- d. provide written summary of disposition to applicant within 14 days of the hearing.

In the event that the applicant has new, significant information, not previously submitted to the Director, the Grievance Officer may send the applicant's case back to the Intake Department for admission consideration based on the receipt of the new information.

## K. WAITING LIST

Three waiting lists will be maintained by the Springfield Housing Authority

- a. Elderly/disabled waiting list.
- b. Conventional family waiting list.
- c. Home ownership waiting list.

The list will be maintained by date and time of application and the Springfield Housing Authority may create an additional waiting list if changes in the federal regulations require such.

The Springfield Housing Authority reserves the right to, and may, close any waiting list if and when the average wait for a unit is one year or longer. The community-at-large will be notified of any decision to close the waiting list. The list may be closed by project type or bedroom size.

## Change in Applicant(s) Circumstances:

If an applicant placed on the waiting list status changes, the following shall apply:

If there is a change in an applicant's family composition or housing needs requiring a change in the bedroom size or type of housing for which the applicant is applying, the applicant will be transferred to the appropriate bedroom size list or the type of housing list based upon the original application, date and time.

## REMOVAL OF NAME FROM WAITING LIST

Applicants awaiting admission to the Springfield Housing Authority will be removed from the waiting list if:

- 1. Applicant requests that his/her name be removed.
- 2. Failure to accept an offered unit and/or failure to turn in required deposits (security, key, other) within time period in offer letter or within this policy.
- 3. Applicant was advised in writing of a requirement to inform the Springfield Housing Authority in writing of his/her continued interest in housing assistance by a specific date and failed to do so.
- 4. Applicant was notified in writing of a requirement to update his/her file information; however, failed to do so by a specific date.
- 5. Authority has attempted reasonable efforts to contact the applicant to determine if there is continued interest, but is unsuccessful.
- 6. Authority notified the applicant in writing of its intention to remove the applicant's name because the applicant no longer qualifies for public housing residency.
- 7. Applicant failed to respond to an offer of housing notification within the time period indicated in the offer letter.
- 8. The applicant has committed fraud or misrepresented information.
- 9. The applicant failed to meet the tenant selection criteria.

## NOTICE

All notices/letters to applicants shall be deemed to have been received by the applicant at such date and time when SHA has deposited said notice/letter in the regular United States Post Office box, postage prepaid, upon certification thereof by the appropriate SHA staff person, addressed to the applicant at the applicant's last known address as indicated in the SHA intake file.

## CHANGE IN APPLICANT INFORMATION

It is the responsibility of the applicant to notify the Authority of changes affecting the

applicant's eligibility, including but not limited to, address, family composition, income, or other circumstances affecting eligibility. Failure to notify the Springfield Housing Authority of such changes will result in the applicant being removed from the waiting list.

#### UNIT SIZE REQUIRED

The following standards will determine the number of bedrooms required to accommodate a family of a given size, except that such standards may be waived when a vacancy problem exists, and it is necessary to achieve or maintain full occupancy by temporarily assigning a family to a larger unit than is required.

| 1. | Number of Numbe |         | r of Persons |  |
|----|-----------------|---------|--------------|--|
|    | Bedrooms        | Minimum | Maximum      |  |
|    | 0               | 4       | 4            |  |
|    | 0               | I       | I            |  |
|    | 1               | 1       | 2            |  |
|    | 2               | 2       | 4            |  |
|    | 3               | 3       | 6            |  |
|    | 4               | 4       | 8            |  |
|    | 5               | 5       | 10           |  |

- 2. An unborn child will be counted as a person.
- 3. Dwelling units will be assigned such that:
  - a. Children under two (2) years of age may occupy the same bedroom with parents.
  - b. Medical needs shall be considered in determining bedroom size.
  - c. Living room will not be used as a bedroom.
  - d. Children of opposite sex will not share a bedroom.
  - e. Siblings of different generations (5 years or more difference in age) will not share a bedroom.
  - f. A caregiver is not required a separate bedroom.

## APPLICANT ABILITY TO LIVE INDEPENDENTLY OR WITH AID OF A CARETAKER (MEDICAL VERIFICATION)

The Springfield Housing Authority does not provide residential nursing care or care for the severely injured or disabled. Based on the above, the Springfield Housing Authority may request (in appropriate cases as determined by the Authority) medical proof or verification of an applicant's ability to live independently or with the aid of a live-in caretaker or other care taking arrangements. In cases where care taking arrangements are required, the applicant shall be required to provide proof or verification that such arrangements are available to the applicant and that the applicant has obtained such care taking services, and that such services shall begin at the time the applicant moves into a SHA living unit.

## PART II

# SELECTION OF APPLICANTS FROM THE WAITING LIST

# INTAKE DEPARTMENT

The Intake Department will have the primary responsibility for the screening and selection of all applicants for family and elderly developments. The goal of the department is to carefully scrutinize and review the application and all available information on a potential applicant to ensure that the applicant and/or family members socially, economically and physically/mentally qualify to reside in the Springfield Housing Authority based upon a set of established criteria.

Once the applicant file has been completed, the file is presented to the screening committee consisting of the Intake Manager and one member of the Resident Council Joint Officers Committee. The committee reviews the applicant information to verify it meets eligibility criteria. If the criteria are met, the committee signs off on the file and it is forwarded to the Director of Housing Management for final approval.

## **Standards for Admission**

The Springfield Housing Authority Intake Department will perform comprehensive screening of all applicants within the following categories:

- 1. Social Desirability A review of criminal history reports (including arrest and convictions, if any), and other information of all applicants including, but not limited to, information provided by the Springfield Police Department, Springfield Housing Authority Security Department and/or any other law enforcement agency, landlord, and social services organizations.
- 2. Criminal History -
  - No Felonious activity for 10 years
  - No Criminal activity for 3 years

Any individual that is in a current "wanted" status will be denied housing.

3. Landlord History – A review of previous and/or current landlord references determine the applicant's social history, rent paying habits, housekeeping abilities,

and general compliance with dwelling lease provisions, with no unpaid balances evident.

- Good rent paying records with past and present landlords for 36 months.
- No indebtedness to any Public Housing Agency.
- ✤ No record of disturbances, destruction of property or poor housekeeping habits.
- ✤ Have not breached a repayment agreement or been evicted from public housing.
- **Rent Paying Practices** A review of the payment history of the applicant/family 4. member to determine ability to pay rent with no unpaid balances evident to previous landlords.
- 5. **Income Eligibility Criteria** – Any and all maximum and minimum income limits as applicable.

#### Family Composition Conform to Occupancy Standards

In addition to the above, specific projects have additional criteria as further identified.

#### **PROJECT 4-20, AND 4-22**

#### **1. INTAKE REVIEW PANEL**

An "Intake Review Panel", hereinafter referred to as the "Panel", will have the primary responsibility for the screening and selection of applicants for Project 4-20 and 4-22 developments. The goal of the panel is to carefully scrutinize and review the application and all available information on a potential applicant to ensure that the applicant and/or family members socially, economically, physically and mentally qualify to reside in the Springfield Housing Authority based upon a set of established criteria.

The panel shall consist of six members representing:

- 1. Community Representatives (2)
- 2. Tenant Representatives
- Board of Commissioners 3.
- 4 Scattered Site Tenant Representatives
- 5. Intake Manager
- Director of Housing Management 6.

(1) (non-voting privileges) (non-voting privileges)

(2)

(1)

The Intake Manager and/or the Director of Housing Management shall attend meetings to present intake information to the committee and answer questions posed by the committee. All evaluation must occur at the scheduled meeting. Members not available for the meeting will not have the opportunity to grade the group of applicants reviewed at that meeting.

The committee shall have access to any/all available records, not prohibited by law or Springfield Housing Authority policy as promulgated by the Board of Commissioners, relative to each applicant family for the purpose of determining their suitability for public housing. In order to protect the privacy of applicants and to ensure the panel remains as objective as possible, all personal information (name, address, age etc.) relative to an applicant will be removed from documents provided to an applicant will be removed from documents provided to the committee. All applicants will be identified by a number and referenced by that number.

Two members of the panel shall constitute a quorum for the purpose of conducting business (one member of the quorum must not be a Springfield Housing Authority employee or a commissioner).

- **2.** Applicants must meet the following requirements to be considered for the new scattered site units in development 4-20 ( 3-4-5 Bedrooms new construction):
  - Head of household employment income is between \$10,000.00 and \$49,500.00.
  - Must maintain continued employment with any lapse in employment not to exceed 90 days.

(Failure to meet this requirement will result in transfer to development without established employment criteria.)

- **3.** Applicants must meet the following requirements to be considered for the new scattered site unit in development 4-22 (3 Bedroom homes):
  - Head of household employment income is between \$16,400.00 and \$43,500.00.
  - Must maintain continued employment with any lapse in employment not to exceed 90 days.

(failure to meet this requirement will result in transfer to development without established employment criteria.)

## MIXED POPULATION AND INCOME PROJECTS

A mixed population project is a public housing project reserved for occupancy by elderly and disabled families as defined herein.

## ACHIEVEMENT OF MIXED INCOMES AND POPULATIONS

To obtain a broad range of incomes and to avoid a concentration of the most economically and socially deprived families in any one development, the Springfield Housing Authority may select applicants from both the low and very low income ranges (50% and 80%). At least 40% annually of admissions must be at or below 30% of medium income.

## REASONS FOR DENIAL OF HOUSING ASSISTANCE

#### Automatic denial of Undesirable Applicants

Applicants are deemed "undesirable" when they or members of their household commit or have committed acts which seriously endanger the health, safety or welfare of other tenants or are a source of danger to property or the peaceful enjoyment of tenants, and/or neighbors, or have established a negative pattern of behavior in terms of responsibility for lease obligations and/or have established a pattern of behavior which may adversely affect the financial stability of the Housing Authority or the development in which the applicant may be placed in residence.

Public Housing **shall not** be available to applicants and/or members of their households who have been convicted of any criminal activity within the past three years and no felonious activity within the past 10 years. The criminal activity shall include, but not be limited to, any of the following serious misconduct:

- A. Illegal use, possession, manufacture or sale of a firearm or other weapon or the threat to use an illegal firearm or other weapon;
- B. Illegal manufacture, sale, distribution, use, possession, or possession with intent to manufacture, sell, distribute or use of a controlled substance, unless such controlled substance was obtained pursuant to a valid prescription issued by a licensed medical practitioner.
- C. Sexual molestation, rape, debauchery of a minor, indecent exposure, prostitution, child pornography, sexual or physical abuse, neglect, child abandonment, and other similar or related serious crimes.
- D. Arson.
- E. Denied for Life- If any family member has been convicted of manufacturing methanphetamine (speed) in a public housing or in a Section 8 assisted property.

## OTHER REASONS FOR DENIAL OF HOUSING ASSISTANCE

There shall be a presumption that an applicant's involvement (previous and/or current) in any of the serious misconduct listed below constitutes a serious danger to the health, safety and welfare of residents or employees of the Springfield Housing Authority and may constitute sufficient reasons for denial of admission:

Applicants whose background includes a history of arrest and/or convictions of battery and/or assault of any type against a person or persons. Applicants who have a history of anti-social behavior and/or conduct involving petty crimes and/or a demonstrated pattern of negative activity. Applicants who are confirmed alcoholics based upon reports from a probation officer, law enforcement agency, health agency, hospital or the family, indicating that the individual is currently/recently addicted to a controlled substance, illegal drug or alcohol.

**Exception:** In cases where an alcoholic and/or drug addict is undergoing treatment by a professional agency upon discharge from the institution, the applicant may not be considered ineligible if the applicant provides proof of participation and successful completion of a rehabilitation program. Applicants, members of their households and/or guests or other invitee who engage in criminal or negative activities.

a. Applicants who come to the admission's office who appear to be under the influence of an intoxicant or drugs. Applicants who act in a violent, disruptive and/or otherwise inappropriate manner towards any Housing Authority Staff

member.

b. Applicants who have demonstrated a pattern of behavior which endangers the health, safety and welfare of other persons by threats or acts of physical violence, gross negligence or irresponsibility. Applicants who have exhibited a pattern of failure to take proper care of Public Housing Authority or other property, and/or who have exhibited a pattern of poor housekeeping which is a danger to the health, safety and/or welfare of residents/ tenants and/or neighbors.

c. Applicants who have willfully misrepresented and/or committed fraud in the application or continued occupancy of public housing or otherwise.

a. Applicants who do not have the ability in terms of physical or mental impairment to meet the normal and usual requirements for residency in SHA property subject to the provision of reasonable accommodations where economically feasible and/or whose occupancy represents a danger to other applicants, other tenants and/or SHA staff.

# b. Has a lifetime registration under state sex offender registration program – DENIED FOR LIFE.

f. Applicants who have abandoned a public housing unit without providing prior notification to management so that the dwelling unit could be secured and protected from vandalism or other damage.

- g. Applicants who have a history of anti-social behavior as a former tenant or guest on public housing property.
- h. Applicants who have a history of fraud in regard to participation in federal, state or local program.
- i. Applicants who were evicted as a former tenant from the Springfield Housing Authority, any other public housing authority or the private sector.

**EXCEPTION** - If any applicant can provide a favorable landlord history evidencing a five year period from the date of application submission for conventional housing.

j. Any family or person may be denied admission to any Springfield Housing Authority program if such admission would prove detrimental to the development or its residents or impose a **direct threat** to the safety, health and welfare of residents, neighbors and/or SHA staff.

"Direct threat" is defined as a significant risk to the health or safety of others which cannot be eliminated by a modification of policies, practices or procedures or by the provision of auxiliary aids and services.

Applicants denied under the above categories will have the opportunity to request a hearing. (See "Informal Hearing").

## Disabled Individuals

SHA complies with Section 504 of the Americans with Disabilities Act (ADA) and will attempt to make reasonable accommodation for disabled individuals who can reside in SHA properties based on the availability of such reasonable accommodations.

The Springfield Housing Authority adheres to, and actively supports and enforces, the provisions of Section 504 of the Americans with Disabilities Act. The Authority has available and maintains resident units modified to accommodate individuals with disabilities. If such vacant units are available upon request.

Behavior or conduct which negatively impacts an applicant's ability to fulfill lease obligations, or otherwise would be a violation of the lease, may form the basis for rejection of a disabled individual where such behavior cannot be corrected or contained by reasonable accommodations even if the behavior is related to the disability.

Applicants who have been verified as having a temporary disability as determined by Social Security standards (expected to last less than two years) shall not qualify as an elderly family and shall not be admitted based thereon, nor placed in elderly developments. Such applicants are not precluded from applying in other applicant categories.

The Springfield Housing Authority shall make an effort to provide individuals with "special needs" reasonable accommodations. The Authority may make inquiries to the extent necessary to:

- 1. Verify the existence of a disability (not the nature of the disability) based on the applicant's declarations only.
- 2. Determine if the applicant qualifies for a specially designed barrier-free unit or other reasonable accommodation.
- 3. Determine if the family qualifies as an "elderly/disabled family" and is entitled to admission to an elderly development (subject to elderly only designation, if any)
- 4. Verify whether the disabling condition is a permanent or temporary condition.

#### **DESIGNATED HOUSING**

The Springfield Housing Authority operates elderly buildings which serve the housing needs of the elderly. Three buildings have been designated for the elderly population and the remaining one for the disabled population.

The Springfield Housing Authority will make units available in the designated building to the population for which it was designated.

At the time of application applicants will be given the opportunity to specify designated housing.

## OFFER OF HOUSING

Offer of housing will be made to applicants based upon the availability and bedroom size needed by the applicant. Housing offers will be made to approved applicants in the sequence that their name appears on the waiting list.

Units will be assigned based on the number of days vacant. The unit with the greatest number of days will be offered to the next eligible applicant.

A pre-occupancy orientation will be held for new admissions to the Springfield Housing Authority. Attendance is mandatory prior to occupying a Springfield Housing Authority unit. The Springfield Housing Authority shall refuse occupancy to any person who refuse and/or fail to attend the orientation. Date and time of required orientation shall be contained in approval letter sent by the Intake Manager to approved and eligible applicants as units come available for occupancy.

The Springfield Housing Authority may assign units to applicants in order to meet the leasing goals set by management. The Authority will not offer or assign, and an applicant cannot select, a vacant unit that is not ready to rent.

After attendance of orientation, applicants shall have 30 days to accumulate and pay the deposits and first month's rent. Applicants will schedule move-in inspection and projected date of orientation with the site manager. In the event an applicant fails to accumulate the required amount within the above-stated thirty (30) day period, the applicant's name will be removed from the waiting list. Applicants removed from the waiting list under this provision may re-apply for housing. However, if an applicant refuse unit offered twice, their application will be denied.

If an applicant is offered a unit and refuses it, the applicant's name will be removed from the waiting list. The applicant may re-apply for housing with a new date and time of application, if an applicant fails to accept an offered unit twice, their application for housing will be denied.

A listing of units offered to the applicant inclusive of location and date will be maintained in the applicant's file folder.

Section 227 of the Housing and Urban Renewal Recovery Act of 1983 provides that elderly and handicapped residents cannot be denied the right to have common household pets. See Pet Policy in Exhibit B

Payment by the applicant and/or the receiving by the Springfield Housing Authority of any deposits and/or first month's rent shall or any part thereof shall not constitute "acceptance" of an offer by or with the Springfield Housing Authority or the applicant. Only the signing of the lease shall constitute a contract between the applicant and the Springfield Housing Authority

## **LEASING**

Prior to admission, a lease shall be signed by the family head and spouse and executed by the Springfield Housing Authority. The head of the family is the responsible person of the family who is legally responsible for the family group, and who is actually looked to and held accountable for the lease obligations.

- 1. If a resident meets transfer guidelines and transfers within SHA, a new lease will be executed for the dwelling into which the family is moved.
- 2. If, at any time during the term of the lease, a change in the resident's status or change of Federal Regulation resulting in the need for changing or amending any provision(s) of the lease either:

- a. A new lease agreement will be executed; or
- b. An appropriate addendum will be prepared and made a part of the existing lease, or appropriate insertions will be made within the instrument. All copies of such riders or insertions are to be dated and signed by the management representative and the tenant.
- 3. Notice of rent adjustments which are issued to amend the dwelling lease shall be signed by the Intake Manager or his/her designee and the tenant. A copy will be placed in the resident's file and a copy given to the resident.
- 4. In order for the applicant/tenant to add someone to the dwelling lease after it has been properly executed the person(s) must meet the definition of family and meet eligibility criteria as specified.

## SOLVENCY CONSIDERATION

Springfield Housing Authority will attain a resident body in each development comprised of families with a broad range of incomes and rent paying ability which is generally representative of the range of low-income families in Springfield Housing Authority service delivery area.

## **DE-CONCENTRATION POLICY**

The Housing Authority shall make every effort to de-concentrate families of certain income characteristics within the PHA complexes. To achieve this, the Housing Authority may offer incentives for eligible families having higher incomes to occupy dwelling units in projects predominantly occupied by eligible families having lower incomes, and provide for occupancy of eligible families having lower incomes in project predominantly occupied by eligible families having authority allow for the eligible families having higher income. Incentives by the Housing Authority allow for the eligible family to have the sole discretion in determining whether to accept the incentive and the agency may not take any adverse action toward any eligible family for choosing not to accept these incentives.

The skipping of a family on the waiting list to reach another family to implement this deconcentration policy shall not be considered an adverse action. As such, the Housing Authority will continue to accept applications and place the individuals on a waiting list. Selection will be made based on a combination of the local preferences and an income target mix. Family who qualifies as a higher income family (exceeds 30% of medium income) may accept a dwelling unit assignment and be placed randomly into a vacant housing unit.

The Housing Authority will track the income mix within each project and building, i.e. highrise, as an effort to avoid a concentration of higher or lower income families in any one building, i.e. high-rise or development.

Efforts through marketing and outreach shall be made to increase the number of families with incomes greater than thirty (30) percent of median income in the projects noted above in order to avoid concentrations of very low-income families in the projects as per the requirements of the QHWRA of 1998. An incentive of a \$100.00 credit on the third month rent will be offered to higher income families in order to promote occupancy in the lower income family developments.

<u>Priority in the Selection of Residents</u> – Residents will be selected from among applicants eligible for dwelling units of given size and within such ranges of rent as may be established from time to time to ensure the financial solvency and stability of the program as set forth in Appendix I, provided, however, that due consideration will be given, at all times, to the rent-paying ability of the applicant as it relates to the solvency of the Authority, and that elderly families will be given preference for units specifically built for elderly families.

## CONTINUED OCCUPANCY Part III

## **RE-EXAMINATION OF ELIGIBILITY FOR CONTINUED OCCUPANCY**

Only those families who qualify under the definition of "family" as defined in Section I. Part A., are eligible for continued occupancy except in the case of a person or persons designated as "remaining family member" who is at least 18 years of age (as designated by state law and/or legally competent to execute a lease) may be permitted to remain but must be based on eligibility criteria.

The eligibility of all families is to be re-examined at least once every 12 months, and upon determination of family income as defined in Section 913.106 CFR for the ensuing year, the rent shall be adjusted accordingly. Families with Income based rents will be recertified annually and shall be scheduled sixty (60) days prior to the anniversary date of the lease execution. A new lease will be executed effective the tenants anniversary month. Residents with flat rent will be scheduled for recertification every three years.

## A <u>Schedule of Re-examinations</u>

Residents with income based rent will be scheduled for recertification each year sixty (60) days prior to their anniversary date. The time between admission and the first recertification shall not exceed 12 months. Residents with flat rent will be scheduled for recertification every three years sixty (60) days prior to lease expiration.

When it is not possible to determine family income for a one-year period within any reasonable degree of accuracy at the time of admission or regular recertification, consideration should be given to the tenant's past income and an interim re-examination scheduled.

## B. Interim Rent Reviews and Misrepresentation of Income

Misrepresentation of and/or change in income after the initial lease is signed and recertification completed must be reported to the Springfield Housing Authority within ten (10) days of the occurrence. Failure to report the misrepresented income or changed income will deem the effective date of rent retroactive to the tenant's initial employment date. Limited to \$100.00 per month change and no more than twice per year.

1. Rent will remain in effect for the period between regular rent determinations unless during such period:

Resident can show a change of \$100.00 or more per month in his/her household income (such as a decline and/or increase in income) which would justify a reduction and/or increase in rent pursuant to the schedule of rents. Interim adjustments will not exceed two per year (12 month period). Such a change must be reported to management within ten (10) days of its occurrence. If It is found that a resident has misrepresented to management the facts upon which his/her rent is based, so that the rent he/she is paying is less than he/she should have been charged, the increase in rent will be made retroactive.

2. Interim rent adjustments will be made to accommodate those changes that were not anticipated at the time of the determination of rent, such as:

- a. Loss of a resident through death, divorce, marriage or the addition of a family member, who in accordance with the Authority policy should become the tenant.. (must be determined eligible)
- a. Loss or addition of greater than \$100.00 in income and/or expenses.
- b. Change in family composition.
- c. Changes in the Federal Housing law, which the housing authority and tenants are required to follow.

Increases in rent will become effective the first day of the second month following the month in which the change was reported.

Decreases in rent are to be made effective the first of the month following the month in which the change was reported.

Circumstances resulting in increased or decreased rent will be verified prior to adjusting the rent.

Failure to comply with this policy will be grounds for the termination of the lease.

#### Rent Adjustment Resulting From Recertification

1. If there is any change in the rent, the lease will be amended or a new lease will be executed.

Decreases in rent will take effect on the first day of the following month in which the recertification was completed. Increases will be effective the first day of the second month following the month the recertification was completed

2. If there is a change in the family composition that would necessitate a change in bedroom size, the resident will be moved to a unit of an appropriate size if available and a new lease will be executed.

If an appropriate size unit is not available, the resident will be placed on a transfer list and moved to such unit when one does become available.

Tenants will be notified in writing of any change in rent resulting from a rent adjustment.

## Penalties for Non-Compliance with Recertification Requirements

- 1. If the annual re-exam is not completed as of the anniversary date and such delays are due solely to the family failure to comply, the Springfield Housing Authority shall:
  - a. In the event of an increase in rent, make the increase retroactive to the effective date with less than a thirty (30-day notice.
  - b. Terminate tenancy of the family.
- 2. If the family did not comply with interim reporting requirements, the Springfield

Housing Authority shall:

- a. Retroactively increase the resident rent effective the first of the month following the month that the increase in the resident's income was effective; and/or
- b. Terminate residency of the resident family.

# <u>Transfer</u>

Transfers for the convenience of the resident, including transfers to the new scattered sites program and home ownership program, shall be reviewed and determined by the Housing Director pursuant to transfer regulations. Transfers for medical purposes, re-locations pursuant to demolition and/or disposition, family composition, emergencies and other social programs, if any, shall be reviewed and determined by the Housing Director or his/her designee. The Housing Director or his designee may review and make determinations on transfer issues.

Residents must reside one year under the lease terms in order to qualify for a transfer. Transfers initiated by tenant will be approved at the sole discretion of the Springfield Housing Authority. Mandatory transfers will be made according to HUD regulations.

## **Misrepresentation**

The resident will be notified in writing of any misrepresentations or lease violations revealed through the annual rent review (re-certification, interim rent reviews), or other occurrences and any other corrective action required by the Authority.

## Social Rehabilitation Standards

The Springfield Housing Authority recognizes that a resident and/or a household family member may experience social, physical and/or emotional/mental problems for which the individual may/should seek rehabilitation/medical services. Evidence that an individual has sought and is actively engaged in such services may be considered in the determination of whether an individual or family should be evicted due to anti-social behavior. Notwithstanding the above, evidence that an individual has sought rehabilitative/ medical services does not excuse anti-social behavior and shall not be fully determinative as to whether an individual should not be evicted. The Housing Director shall review each incident on a case-by-case basis taking into consideration the seriousness of the anti-social behavior, treatment, if any, and any other factors relevant to the case being reviewed.

## COMMUNITY SERVICE

## <u>General</u>

In order to be eligible for continued occupancy. (unless they are exempt from this requirement.) Each adult family member must either (1) contribute eight hours per month of community services (not including political activities) within the community in which the public housing development is located, or (2) participate in an economic self-sufficiency program

## Exemptions

Adult family members of tenant families are exempt from this requirement if they qualify under one of

the following:

- a. Family members who are 62 or older.
- b. Family members who are blind or disabled
- c. Family members engaged in work activity.
- d. Family members who are exempt from work activity under par A title IV of the Social Security Act or under any other State welfare program, including the welfare-to-work program.
- e. Family members receiving assistance under State program funded under part A title IV of the Social Security Act or under any State welfare program, including welfare-to-work and who are in compliance with the program.

## Notification of Requirement

The Springfield Housing Authority shall identify all adult family members of the community service requirement.

The Springfield Housing Authority shall notify all such family members of the community service requirement and of the categories of individuals who are exempt from the requirement. The notification will provide the opportunity from family members to claim and explain an exempt status. The Springfield Housing Authority shall verify such claims.

The notification will advise families that their community service obligation will begin upon execution of lease containing these provisions, by the head of household. For family's paying a flat rent, the obligation begins on the date their annual reexamination would have been effective had an annual reexamination taken place. It will also advise them that failure to comply with the community service requirement will result in ineligibility for continued occupancy at the time of the subsequent annual reexamination.

## **Volunteer Opportunities**

Community service includes performing work or duties in the public benefit that serve to improve the quality of life and/or enhance resident self-sufficiency, and/or increase the self-responsibility of the resident within the community.

An economic self sufficiency program is one that is designed to encourage, assist, train or facilitate the economic independence of participants and their families or to provide work for participants. These programs may include programs for job training, work placement, basic skills training, education, English proficiency, work fare, financial or household management, apprenticeship, and any program necessary to ready a participant to work (such as substance or mental health treatment).

The Springfield Housing Authority will coordinate with social services agencies, local schools, and the Human Resources Office in identifying a list of volunteer community service positions.

Together with the resident advisory councils, the Springfield Housing Authority may create volunteer positions such as hall monitory, litter patrol and supervising and record keeping for volunteers.

## The Process

At the first annual reexamination on or after October 1, 1999, and each annual reexamination thereafter, there the Springfield Housing Authority will do the following:

- a. Provide a list of volunteer opportunities to the family members.
- b. Provide information about obtaining suitable volunteer positions.
- c. Provide a volunteer time sheet to the family member, instructions for the time sheet require the individual to complete the form and have a supervisor date and sign for each period of work.
- d. Assign family members to a volunteer coordinator who will assist the family members in identifying appropriate assignments Volunteer Coordinator will track the family member's progress monthly and will meet with the family member as needed to best encourage compliance.
- e. Thirty (30) days before the family's next lease anniversary date, the volunteer coordinator will advise the Springfield Housing Authority whether each applicable adult family member is in compliance with the community service requirement.

#### Notification of Non-Compliance with Community Service Requirement

The Springfield Housing Authority will notify any family found to be in non-compliance of the following:

- a. The family member(s) has been determined to be in noncompliance.
- b. That the determination is subject to the grievance procedure; and
- c. That, unless the family member(s) enter into an agreement to comply, the lease will not be renewed or will be terminated;

## Opportunity for Cure

The Springfield Housing Authority will offer the family member(s) the opportunity to enter into an agreement prior to the anniversary of the lease. The agreement shall state that the family member(s) agrees to enter into an economic self-sufficiency program or agrees to contribute to community service for as many hours as needed to comply with the requirement over the past 12-month period. The cure shall occur over the 12-month period beginning with the date of the agreement and the resident shall at the same time stay current with that year's community service requirement. The first hours a resident earns goes toward the current commitment until the current year's commitment is made

The volunteer coordinator will assist the family member in identifying volunteer opportunities and will track compliance on a monthly basis. If any applicable family member does not accept the terms of the agreement, does not fulfill their obligation to participate in an economic self-sufficiency program,

or falls behind in there obligation under the agreement to perform community service by more than three (3) hours after (3) months, the Springfield Housing Authority shall take action to terminate the lease.

## INSPECTIONS

There are basically five types of inspections: (1) Move-In, (2) 60-day, (3) Ongoing (4) Special and (5) Move-out. The Springfield Housing Authority uses several variations of these inspections to verify housing quality standards, enforce the dwelling lease, investigate complaints, and to protect our investment in public housing facilities.

#### **Move-In Inspections**

Are the first inspections made of units coming into your program. Initial inspections are geared towards new move ins and acceptance of modernization new construction or rehabilitation projects. When a new unit is submitted for approval, an HQS inspection must be conducted before approval can be given. The same is true for conventional housing units, which were repaired under MOD or maintenance repair program.

#### 60-day Inspections

Are conducted 60-day after a tenant moves into a unit.

#### **Ongoing Inspections**

Are conducted every 6 months to ensure the continued quality of our client's living conditions and to ascertain any repairs that may be needed. HUD required that every unit, including vacant and non-dwelling.

## Special Inspections

Are used to ensure tenant safety or lease compliance through swift corrective action. These inspections may be triggered by the resident or the property owner.

#### **Move-Out Inspections**

Prior to a family vacating a dwelling unit, the family will be encouraged to participate in a move-out inspection along with a member of the Springfield Housing Authority Management and Inspection staff. The condition of the dwelling unit will be recorded on the inspection form utilized for the move-in/pre-occupancy inspection of the same dwelling unit.

This system will allow for a comparison of the pre-occupancy condition of the unit versus the move-our condition of the unit. ANY CLAIM AGAINST THE FAMILY FOR RESIDENT-CAUSED DAMAGES WILL BE BASED UPON THIS COMPARISON.

#### RENT POLICY

Rent is due by the first of each month. Payment must be in the form of a money order or check. Cash will not be accepted. The seventh day of each month will be considered the cut-off for late payment. On this day or the closest business day, the drop box will be emptied and all payments will be processed. Likewise, all payments received on the seventh through the U. S. mail will be processed. Rent not paid by the seventh day of the month is considered late. A late fee will be assessed and delinquency notices will be processed. This allows the tenant a fourteen days to

bring the account current (pay the balance in full). Notices will be sent Certificate of Mailing First Class Mail through the United States Postal Service. Tenants, who have received delinquency notices and who, at the end of the fourteen days, have not paid their account in full or entered into a repayment, will be processed for eviction. Additionally, tenants considered to be chronically delinquent will be processed for eviction.

"Processed for eviction" is defined as the scheduling of a court date, and filing of a complaint. "Chronically Delinquent" is defined as a tenant who has been processed for eviction on two occasions in the past twelve months. "Repayment Agreements" are a legal document where the tenant makes arrangements to pay an outstanding balance due to the Springfield Housing Authority.

## Types and Numbers of Pets

The Springfield Housing Authority will allow only domesticated dogs, cats, birds, and fish in aquariums in units. All dogs and cats must be neutered and cats should be declawed.

Only one (1) pet per unit allowed.

Any animal deemed to be potentially harmful to the health or safety of others, including attach or fight trained dogs, will not be allowed.

No animal may exceed thirty (30) pounds in weight.

## DEFINITIONS

#### Adjusted Income

Annual Income less:

- a) \$480 for each dependent,
- b) \$400 for any elderly family,
- c) Medical expenses in excess of three percent of annual income for an elderly family, and,
- d) Child cares expenses.

#### Age

The head of the household must be 18 years of age or older and/or an adult (previously married), or emancipated as defined by Illinois State Law.

#### Annual Income

Annual Income is anticipated total income from all sources received by the family head and spouse (even if temporarily absent) and by each additional member of the family, including all net income derived from assets, for the 12- month period following the effective date of initial determination or re-examination of income, exclusive of income that is temporary, non-recurring or sporadic, and exclusive of certain types of income.

#### <u>Assets</u>

The value of equity in real property, savings, stocks, bonds and other forms of capital investments. For eligibility purposes only, if the net family assets are in excess of \$5,000, annual income shall include the greater of the actual income derived from all net family assets or a percentage of the value of such assets based on the current passbook savings rate as determined by HUD.

#### Care Giver

Should it be determined that a live-in caregiver is essential to the care and "well-being" of an applicant family (including a sole member household), the live-in caregiver WILL NOT be a party to the lease NOR will the caregivers income be taken into consideration in the calculation of resident rent. In the event that the family vacates the unit, the caregivers will be required to vacate as well. IN NO CASE WILL THE CAREGIVER BE CONSIDERED THE REMAINING MEMBER OF THE RESIDENT FAMILY. A caregiver does not require a separate bedroom.

#### **Ceiling Rent**

Maximum rent allowed for some units in public housing projects.

#### Child Care Expenses

Amounts anticipated to be paid by the family for the care of children under 13 years of age during the period for which annual income is computed only where such care is necessary to enable a family member to be gainfully employed or to further his/her education. The amount deducted shall reflect reasonable charges for childcare and in the case of childcare necessary to permit employment, the amount deducted shall not exceed the amount of income received from such employment.

#### **Community Service Requirement**

This requires all adult family members residing in public housing to work eight (8) hours of community services per month. The only exceptions are elderly, disabled, employed, section 8, or work program participants.

#### **Dependent**

A member of the family household (excluding foster children), other than the family head or spouse, who is under 18 years of age, is a disabled person, handicapped person, or a full-time student.

#### **Disabled Person**

A person under a disability as defined in Section 223 of the Social Security Act or Section 102 of the Developmental Disabilities Services and Facilities Construction Amendments of 1970.

#### **Elderly Family**

A family whose head or spouse (or sole member) is a person who is an elderly, disabled or

handicapped person. It may include two or more elderly, disabled or handicapped person living together, or one or more such persons living with another person who is determined to be essential in taking care of his/her well being.

#### Elderly Person

A person who is at least 62 years of age.

#### **Family**

"Family" means: (1) two or more persons sharing residency whose income and resources are available to meet the family's needs and who are either related by blood, marriage or operation of law, or have evidenced a stable family relationship; (2) a pregnant woman; (3) an elderly family or single person as defined in this part; (4) the remaining member of a resident family; and (5) a displaced person.

## Flat Rent

A rent amount the family may choose to pay in lieu of having their rent determined under the formula method. The flat rent is established by the Housing Authority set at the lesser of the market value for the unit or the cost to operate the unit. Families selecting the flat rent option have their income evaluated once every three years, rather than annually.

#### Full-time Student

A person who is carrying a subject load that is considered full-time for day students under the standards and practices of the educational institution attended. An educational institution includes a vocational school with a diploma or certified program as well as an institution offering a college degree.

#### Handicapped Person

A person having a physical or mental impairment that: (1) is expected to be of long-continued and indefinite duration; (2) substantially impedes his/her ability to live independently; and (3) is of such a nature that such ability could be improved by more suitable housing conditions.

#### HUD

Department of Housing and Urban Development.

#### **INSPECTIONS**

#### Move-In Inspections

PRIOR to move-in/occupancy, a representative of the family and of the Management will accomplish a physical inspection of the dwelling unit. The Management representative will demonstrate to the Family the operation of the appliances/ unit fixtures (i.e. thermostat, etc.).

#### Move-out Inspections

Prior to a family vacating a dwelling unit, the family will be encouraged to participate in a move-out inspection along with a member of the SHA Housing Management and Inspections staff. The condition of the dwelling unit will be recorded on the inspection form utilized for the move-in/pre-occupancy inspection of the same dwelling unit. This system will allow for a comparison of the pre-occupancy condition of the unit versus the move-out condition of the unit. ANY CLAIM AGAINST THE FAMILY FOR RESIDENT-CAUSED DAMAGES WILL BE BASED UPON THIS COMPARISON.

Following move-out by the Family, renovation and/or redecoration of the dwelling unit as result of the Family's occupancy will be accomplished. Charges for items of repair, renovation and/or redecoration of the dwelling unit made necessary by abuse, negligence or deliberate destruction by the Family will be assessed against the Family's security deposit. Should the security deposit prove insufficient relative to the actual cost of such repairs, the management will take any and all actions at its disposal to collect the remaining balance from the Family.

#### 60-day Inspections

An inspection will be made 60 days after initial move in to determine housekeeping acceptability and structural maintenance. If this is passed the unit inspections will then continue on a 6-month basis. However, if the initial inspection fails, another inspection will be scheduled. If the second fails, the SHA may initiate eviction proceedings.

#### Live-in Caregiver

A "live-in caregiver" is one who is MEDICALLY NECESSARY to allow the Family to live independently and who is validated by a medical professional to provide medical care.

#### Lower Income Family

A family whose annual income does not exceed 80 percent of the median income for the area, as determined by HUD, with adjustments for smaller and larger families.

#### Medical Expenses

Those medical expenses, including medical insurance premiums that are anticipated during the period for which annual income is computed and that are not covered by insurance.

#### Minor

A minor is defined as a member of the household, other than the head, who is under the age of 18 or a full-time student.

#### Monthly Adjusted income

One-twelfth (1/12) of annual adjusted income.

#### Net Family Assets

Value of equity in real property, savings, stocks, bonds, and other forms of capital investment, excluding interests in Indian trust land and excluding equity accounts in HUD home ownership programs. The value of necessary items of personal property, such as furniture and automobiles, shall be excluded. In cases where a trust fund has been established and the trust is not revocable by, or under the control of, any member of the family or household, the value of the trust fund will not be considered an asset so long as the fund continues to be held in trust. Any income distributed from the trust fund shall be counted when determining annual income. In determining net family assets, the Authority shall include the value of any assets disposed of by an applicant or resident for less than fair market value (including disposition in trust, but not in a foreclosure or bankruptcy sale) during the two (2) years preceding the date of application for the program or re-examination, as applicable, in excess of the consideration received therefore. In the case of a disposition as part of a separation or divorce settlement, the disposition will not be considered to be for less than fair market value if the applicant or resident receives important consideration not measurable in dollar terms.

## <u>PHA</u>

Public Housing Authority.

#### **QHWRA**

Quality Housing & Work Responsibility Act of 1998

## <u>SHA</u>

Springfield Housing Authority.

## Single Person

"Single Person" means a person living alone or intending to live alone and who does not qualify as an elderly family or a displaced person as defined in this part, or as the remaining member of a resident family.

#### Tenant Rent

The amount payable monthly by the family as rent to the SHA. Where all utilities (except the telephone) and other essential housing services are supplied by the SHA, tenant rent equals total tenant payment. Where some or all utilities (except telephone) and other essential housing services are not supplied by SHA and the cost thereof is not included in the amount paid as rent, tenant rent equals total tenant payment less the utility allowance.

The current income limits for admission and continued occupancy is available for inspection at the Central Office.

#### Total Tenant Payment

The total tenant payment shall be the gross family income less the following (no person in the family shall be entitled to more than one exemption):

- 1. A deduction of amounts paid by the family for the care of children under 13 years of age when determined to be necessary to employment of the head or spouse, except that the amount deducted shall not exceed the amount of income received by the family member thus released.
- 2. For elderly only, a deduction for extraordinary medical expenses where not compensated for or covered by insurance, defined for this purpose to mean medical expenses in excess of three (3) percent of total family income, medical insurance premiums are deductible and will be included in medical expenses.
- 3. An exemption of an amount equal to \$480 for each member of the family residing in the household (other than the head or his spouse), who is under 18 years of age or who is 18 years of age or older and is disabled or handicapped or a full-time student.
- 4. Four hundred dollars (\$400) for any family which the head of household is elderly and/or disabled.

## Utility Allowance

If the cost of utilities (except telephone or cable) and other housing services for an assisted unit is not included in the tenant rent, but is the responsibility of the family occupying the unit, an amount equal to the estimate made or approved by SHA of the monthly cost of a reasonable consumption of such utilities and other services for the unit by an energy conservation household of modest circumstances consistent with the requirements of safe, sanitary, and healthful living environment will be established as the utility allowance.

#### **Utility Reimbursement**

The amount, if any, by which the utility allowance for the unit, if applicable, exceeds the total payment for the family occupying the unit.

# <u>EXHIBIT A</u>

# **CEILING RENT**

| 4-02<br>4-05<br>4-06<br>4-09<br>4-10<br>4-12<br>4-14<br>4-18 | 1-Bedroom - \$325.00<br>3-Bedroom - \$350.00<br>1-Bedroom - \$325.00<br>1-Bedroom - \$325.00<br>2-Bedroom - \$450.00<br>Fair Market Rent<br>Fair Market Rent<br>Fair Market Rent | 2-Bedroom \$375.00<br>4-Bedroom \$400.00<br>2-Bedroom \$375.00<br>2-Bedroom \$375.00<br>3-Bedroom \$500.00 | 5-Bedroom \$450.00 |
|--|--|--|--------------------|
| 4-19   | Fair Market Rent   |  |                    |
| 4-20   | 3-Bedroom - \$500.00   | 4-Bedroom \$550.00   | 5-Bedroom \$600.00 |
| 4-22   | Fair Market Rent   |  |                    |
| 4-31   | 1-Bedroom –\$325.00  | 2-Bedroom \$375.00   |                    |
| 4-32   | 1-Bedroom - \$325.00   | 2-Bedroom \$375.00   |                    |

# <u>EXHIBIT B</u>

## PET POLICY

This Statement of Pet Policy is established for the Springfield Housing Authority (Springfield Housing Authority) on \_\_\_\_\_\_, 19\_\_\_\_\_.

Per the requirements of Section 526 of the Quality Housing and Work Responsibility Act of 1998, " a resident of a dwelling unit in a public housing may own one (1) or have one (1) common household pets present in the dwelling unit of such resident, subject to the reasonable requirements of the public housing agency, if the resident maintains each pet responsibility and in accordance with applicable state and local public health, animal control and animal anti-cruelty laws and regulations and with the policies established in the public housing agency plan for the agency".

## 1.0 Application for Pet Permit

Prior to housing any pet on the premises, the resident shall apply to Springfield housing Authority for a pet permit, which shall be accompanied by the following:

- 1.1 A current license issued by the appropriate authority, if applicable; and
- 1.2 Evidence that the pet has been spayed or neutered, as applicable; and
- 1.3 Evidence that the pet has received current rabies and distemper inoculations or boosters, as applicable, and
- 1.4 Evidence of payment of a \$150.00 pet damage deposit. This deposit must be paid in addition to Springfield Housing Authority's standard security deposit

## 2.0 All residents with pets shall comply with the following rules:

- 2.1 Permitted pets are domesticated dogs, cats, birds, and fish. The weight of the dog or cat may not exceed thirty (30) pounds (adult size).
- 2.2 Only one pet per household will be permitted.
- 2.3 Dogs and cats must be licensed yearly and residents must show proof of annual rabies and distemper booster inoculations required by state or local law.
- 2.4 Vicious and/or intimidating dogs will not be allowed.
- 2.5 All dogs and cats must be spayed or neutered, as applicable.
- 2.6 Dogs and cats shall remain inside the residents unit. No animal shall be permitted to be

loose in hallways, lobby areas, Laundromats, community rooms, yards or other common areas of the facility.

- 2.7 When taken outside the unit, dogs and cats must be kept on a leash, controlled by a adult.
- 2.8 Birds must be confined to a cage at all times.
- 2.9 Residents shall not permit their pet to disturb, interfere, or diminish the peaceful enjoyment of other residents. The terms, "disturb, interfere or diminish" shall include but not be limited to barking, howling, chirping, biting, scratching and other like activities.
- 2.10 Residents must provide litter boxes for cat waste, which must be kept in the dwelling unit. Residents shall not permit refuse from litter boxes to accumulate nor to become unsightly or unsanitary.
- 2.11 Residents are solely responsible for cleaning up pet droppings, if any, outside the unit and on facility grounds. Droppings must be disposed of by being placed in a sack and then placed in a refuse container outside the building.
- 2.12 Residents shall take adequate precautions and measures necessary to eliminate pet odors within or around the unit and shall maintain the unit in a sanitary condition at all times.
- 2.13 If pets are left unattended for a period of twenty-four (24) hours or more, Springfield Housing Authority may enter the dwelling unit, remove the pet and transfer it to the proper authorities, subject to the provision of the state law and pertinent local ordinances. Springfield Housing Authority accepts no responsibility for the animal under such circumstances.
- 2.14 Residents shall not alter their unit, patio or unit area in order to create an enclosure for any pet.
- 2.15 Residents are responsible for all damages caused by their pets, including the cost of cleaning the carpets and/or fumigation of units.
- 2.16 Residents are prohibited from feeding or harboring stray animals. The feeding of any stray animals shall constitute having a pet without written permission of the Authority.
- 2.17 Should any pet housed in an Authority facility give birth to a litter, the resident shall move from the premises all of said pets except one within thirty (30) days.
- 2.18 Residents must identify an alternate custodian for pets in the event of resident illness or other absence from the dwelling unit. The identification of an alternate custodian must occur prior to the Authority issuing a pet registration permit.
- 3.1 Visitors are not allowed to bring pets and the residents shall not engage in "pet-sitting".
- 3.2 No animal shall be tied up on the outside or left unattended. No doghouses animal runs, etc., will be permitted.
- 3.3 These rules may be amended from time to time, as necessary, by Springfield Housing Authority and such amendments shall be binding on the residents upon notice thereof.

## Residents who violate these rules are subject to:

4.0 Being required to get rid of the pet within 14 days of written notice by the Springfield Housing Authority and/or;

- 4.1 Evictions.
- 5.0 The privilege of maintaining a pet in a facility owned and/or operated by Springfield Housing Authority shall be subject to the rules set forth above. This privilege may be revoked at any time, subject to Springfield Housing Authority's Hearing Procedures, if the animal should be come destructive, create a nuisance, represent a threat to the safety, health and security of other residents, or create a problem in the area of cleanliness and sanitation.

5.1 A breach of any of the foregoing rules constitutes a breach of the resident's lease and can result in not only in the revocation of the privilege of keeping a pet, but may result in any of the sanctions set forth in the resident's lease for breach thereof, including forfeiture of further lease holder rights and termination of the lease. Further, the resident is subject to the Animal Control Act, Section 351 et. seq. of Chapter 8 of the Illinois **Revised Statutes.** The election of a remedy by Springfield Housing Authority for a resident's breach of the forgoing rules is not exclusive and Springfield Housing Authority may thereafter pursue any of the various remedies set forth in the lease as Springfield Housing Authority may, in its discretion. decide.

**RESIDENT'S SIGNATURE** 

DATE

STAFF MEMBER'S SIGNATURE

DATE

