

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

PHA Plans

5 Year Plan for Fiscal Years 2005 - 2009
Annual Plan for Fiscal Year 2005

**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: Taunton Housing Authority

PHA Number: MA-017

PHA Fiscal Year Beginning: 01/2005

Public Access to Information

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

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

Display Locations For PHA Plans and Supporting Documents

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

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

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

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

5-YEAR PLAN
PHA FISCAL YEARS 2005 - 2009
[24 CFR Part 903.5]

A. Mission

- 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)

B. Goals

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

- PHA Goal: Expand the supply of assisted housing
Objectives:
- Apply for additional rental vouchers:
 - Reduce public housing vacancies:
 - Leverage private or other public funds to create additional housing opportunities:
 - Acquire or build units or developments
 - Other (list below)
- PHA Goal: Improve the quality of assisted housing
Objectives:
- Improve public housing management: (PHAS score)
 - Improve voucher management: (SEMAP score)
 - Increase customer satisfaction:
 - Concentrate on efforts to improve specific management functions:
(list; e.g., public housing finance; voucher unit inspections)
 - Renovate or modernize public housing units:
 - Demolish or dispose of obsolete public housing:
 - Provide replacement public housing:
 - Provide replacement vouchers:
 - Other: (list below)

Continually emphasize good management practices to improve upon overall THA management.

- 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)

Provide additional housing opportunities to individuals with special needs.

Strategic Goal: Improve community quality of life and economic vitality

- PHA Goal: Provide an improved living environment

Objectives:

- Implement measures to deconcentrate poverty by bringing higher income public housing households into lower income developments:
- Implement measures to promote income mixing in public housing by assuring access for lower income families into higher income developments:
- Implement public housing security improvements:
- Designate developments or buildings for particular resident groups (elderly, persons with disabilities)
- Other: (list below)

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

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

Objectives:

- Increase the number and percentage of employed persons in assisted families:
- Provide or attract supportive services to improve assistance recipients' employability:
- Provide or attract supportive services to increase independence for the elderly or families with disabilities.
- Other: (list below)

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)

Annual PHA Plan
PHA Fiscal Year 2005
[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)]

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Attachments

Required Attachments:

- Admissions Policy for Deconcentration
- FY 2002 Capital Fund Program Annual Statement (**Attachment Filename: ma017m02.doc**)
- Most recent board-approved operating budget (Required Attachment for PHAs that are troubled or at risk of being designated troubled ONLY)
- Resident Commissioner on the THA Board (**Attachment Filename: ma017a02.doc**)
- Federal Pet Policy (**Attachment Filename: ma017d02.doc**)
- Public Housing A&O (**Attachment Filename: ma017e01.doc**)
- Section 8 A&O (**Attachment Filename: ma017f01.doc**)
- Section 8 Homeownership Program (**Attachment Filename: ma017g02.doc**)
- Membership of Resident Advisory Boards (**Attachment Filename: ma017h02.doc**)
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- Federal Grievance Procedure (**Attachment Filename: ma017j01.doc**)
- Community Service Requirements (**Attachment Filename: ma017s02.doc**)
- Voluntary Conversion of Public Housing Development to Vouchers (**Attachment Filename: ma017p01.doc**)

Optional Attachments:

- PHA Management Organizational Chart (**Attachment Filename: ma017b02.doc**)
- FY 2002 Capital Fund Program 5 Year Action Plan (**Attachment Filename: ma017n02.doc**)
- Public Housing Drug Elimination Program (PHDEP) Plan (**Attachment Filename: ma017c01.doc**)
- Comments of Resident Advisory Board or Boards (must be attached if not included in PHA Plan text)
- Other (List below, providing each attachment name)
 - Deconcentration Exemption (**Attachment Filename: ma017l02.doc**)
 - Capital Fund Program Performance and Evaluations Reports and Revisions for Grant Numbers MA06P01750100 and MA06P01750101 (**Attachment Filename: ma017o02.doc**)
 - Capital Fund Program Performance and Evaluations Reports and Revisions for Grant Number MA06P01750103 (**Attachment Filename: ma017q02.doc**)

- Capital Fund Program Performance and Evaluations Reports and Revisions for Grant Number MA06P01750105 (**Attachment Filename: ma017t02.doc**)
- Capital Fund Program Performance and Evaluations Reports and Revisions for Grant Number MA06P01750203 (**Attachment Filename: ma017u02.doc**)

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 & On Display | Supporting Document | Applicable Plan Component |
| x | PHA Plan Certifications of Compliance with the PHA Plans and Related Regulations | 5 Year and Annual Plans |
| x | State/Local Government Certification of Consistency with the Consolidated Plan | 5 Year and Annual Plans |
| x | Fair Housing Documentation: Records reflecting that the PHA has examined its programs or proposed programs, identified any impediments to fair housing choice in those programs, addressed or is addressing those impediments in a reasonable fashion in view of the resources available, and worked or is working with local jurisdictions to implement any of the jurisdictions’ initiatives to affirmatively further fair housing that require the PHA’s involvement. | 5 Year and Annual Plans |
| x | Consolidated Plan for the jurisdiction/s in which the PHA is located (which includes the Analysis of Impediments to Fair Housing Choice (AI)) and any additional backup data to support statement of housing needs in the jurisdiction | Annual Plan: Housing Needs |
| x | Most recent board-approved operating budget for the public housing program | Annual Plan: Financial Resources; |
| x | Public Housing Admissions and (Continued) Occupancy Policy (A&O), which includes the Tenant Selection and Assignment Plan [TSAP] | Annual Plan: Eligibility, Selection, and Admissions Policies |
| x | Section 8 Administrative Plan | Annual Plan: Eligibility, Selection, and Admissions Policies |
| N/A | Public Housing Deconcentration and Income Mixing Documentation: 1. PHA board certifications of compliance with deconcentration requirements (section 16(a) of the US Housing Act of 1937, as implemented in the 2/18/99 <i>Quality Housing and Work Responsibility Act Initial Guidance; Notice</i> and any further HUD guidance) and | Annual Plan: Eligibility, Selection, and Admissions Policies |

| List of Supporting Documents Available for Review | | |
|--|--|--|
| Applicable & On Display | Supporting Document | Applicable Plan Component |
| | 2. Documentation of the required deconcentration and income mixing analysis | |
| x | Public housing rent determination policies, including the methodology for setting public housing flat rents <input checked="" type="checkbox"/> check here if included in the public housing A & O Policy | Annual Plan: Rent Determination |
| x | Schedule of flat rents offered at each public housing development <input checked="" type="checkbox"/> check here if included in the public housing A & O Policy | Annual Plan: Rent Determination |
| x | Section 8 rent determination (payment standard) policies <input checked="" type="checkbox"/> check here if included in Section 8 Administrative Plan | Annual Plan: Rent Determination |
| x | Public housing management and maintenance policy documents, including policies for the prevention or eradication of pest infestation (including cockroach infestation) | Annual Plan: Operations and Maintenance |
| x | Public housing grievance procedures <input checked="" type="checkbox"/> check here if included in the public housing A & O Policy | Annual Plan: Grievance Procedures |
| x | Section 8 informal review and hearing procedures <input checked="" type="checkbox"/> check here if included in Section 8 Administrative Plan | Annual Plan: Grievance Procedures |
| x | The HUD-approved Capital Fund/Comprehensive Grant Program Annual Statement (HUD 52837) for the active grant year | Annual Plan: Capital Needs |
| x | Most recent CIAP Budget/Progress Report (HUD 52825) for any active CIAP grant | Annual Plan: Capital Needs |
| x | Most recent, approved 5 Year Action Plan for the Capital Fund/Comprehensive Grant Program, if not included as an attachment (provided at PHA option) | Annual Plan: Capital Needs |
| N/A | Approved HOPE VI applications or, if more recent, approved or submitted HOPE VI Revitalization Plans or any other approved proposal for development of public housing | Annual Plan: Capital Needs |
| N/A | Approved or submitted applications for demolition and/or disposition of public housing | Annual Plan: Demolition and Disposition |
| N/A | Approved or submitted applications for designation of public housing (Designated Housing Plans) | Annual Plan: Designation of Public Housing |
| N/A | Approved or submitted assessments of reasonable revitalization of public housing and approved or submitted conversion plans prepared pursuant to section 202 of the 1996 HUD Appropriations Act | Annual Plan: Conversion of Public Housing |
| N/A | Approved or submitted public housing homeownership programs/plans | Annual Plan: Homeownership |
| x | Policies governing any Section 8 Homeownership program <input type="checkbox"/> check here if included in the Section 8 Administrative Plan | Annual Plan: Homeownership |

| List of Supporting Documents Available for Review | | |
|--|---|---|
| Applicable & On Display | Supporting Document | Applicable Plan Component |
| x | Any cooperative agreement between the PHA and the TANF agency | Annual Plan: Community Service & Self-Sufficiency |
| N/A | FSS Action Plan/s for public housing and/or Section 8 | Annual Plan: Community Service & Self-Sufficiency |
| N/A | Most recent self-sufficiency (ED/SS, TOP or ROSS or other resident services grant) grant program reports | Annual Plan: Community Service & Self-Sufficiency |
| x | The most recent Public Housing Drug Elimination Program (PHEDEP) semi-annual performance report for any open grant and most recently submitted PHDEP application (PHDEP Plan) | Annual Plan: Safety and Crime Prevention |
| x | The most recent fiscal year audit of the PHA conducted under section 5(h)(2) of the U.S. Housing Act of 1937 (42 U.S.C. 1437c(h)), the results of that audit and the PHA's response to any findings | Annual Plan: Annual Audit |
| N/A | Troubled PHAs: MOA/Recovery Plan | Troubled PHAs |
| | Other supporting documents (optional) (list individually; use as many lines as necessary) | (specify as needed) |
| | | |

1. Statement of Housing Needs

[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 Type | | | | | | | |
|---|----------------|----------------------------|---------------|----------------|----------------------------|-------------|-----------------------|
| Family Type | Overall | Afford- ability | Supply | Quality | Access- ibility | Size | Loca- tion |
| Income <= 30% of AMI | N/A | 5 | 4 | 3 | 2 | 3 | 2 |
| Income >30% but <=50% of AMI | N/A | 5 | 4 | 3 | 2 | 3 | 2 |
| Income >50% but <80% of AMI | N/A | 5 | 4 | 3 | 2 | 3 | 2 |

| Housing Needs of Families in the Jurisdiction by Family Type | | | | | | | |
|---|---------|----------------|--------|---------|----------------|------|-----------|
| Family Type | Overall | Afford-ability | Supply | Quality | Access-ibility | Size | Loca-tion |
| Elderly | 7017 | 5 | 4 | 3 | 2 | 3 | 2 |
| Families with Disabilities | 125 | 5 | 5 | 3 | 5 | 3 | 2 |
| Race/Ethnicity Black | 645 | 5 | 4 | 3 | 2 | 3 | 2 |
| Race/Ethnicity Asian | 976 | 5 | 4 | 3 | 2 | 3 | 2 |
| Race/Ethnicity Hispanic | 1292 | 5 | 4 | 3 | 2 | 3 | 2 |
| Race/Ethnicity | | | | | | | |

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.)

- Consolidated Plan of the Jurisdiction/s
Indicate year:
- U.S. Census data: the Comprehensive Housing Affordability Strategy (“CHAS”) dataset
- American Housing Survey data
Indicate year:
- Other housing market study
Indicate year:
- Other sources: (list and indicate year of information) **City of Taunton
Comprehensive Master Plan, 1998**

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) | | | |
| <input type="checkbox"/> | Section 8 tenant-based assistance | | |
| <input checked="" type="checkbox"/> | Public Housing | | |
| <input type="checkbox"/> | Combined Section 8 and Public Housing | | |
| <input type="checkbox"/> | Public Housing Site-Based or sub-jurisdictional waiting list (optional) | | |
| If used, identify which development/subjurisdiction: | | | |
| | # of families | % of total families | Annual Turnover |

| Housing Needs of Families on the Waiting List | | | |
|---|----------------|------|--|
| Waiting list total | 521 | 100 | |
| Extremely low income <=30% AMI | 421 | 80 | |
| Very low income (>30% but <=50% AMI) | 100 | 19 | |
| Low income (>50% but <80% AMI) | 0 | 0 | |
| Families with children | 334 | 64 | |
| Elderly families | 122 | 23 | |
| Families with Disabilities | 45 | 8 | |
| Race/ethnicity | 113 – Hispanic | 21.7 | |
| Race/ethnicity | 91 – Black | 17.5 | |
| Race/ethnicity | 312 – Other | 59.9 | |
| Race/ethnicity | 5 – Asian | 0.9 | |
| Characteristics by Bedroom Size (Public Housing Only) | | | |
| 1BR | 183 | 35 | |
| 2 BR | 261 | 50 | |
| 3 BR | 61 | 12 | |
| 4 BR | 9 | 1 | |
| 5 BR | 7 | 1 | |
| 5+ BR | 0 | | |
| Is the waiting list closed (select one)? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | | | |
| If yes: | | | |
| How long has it been closed (# of months)? | | | |
| Does the PHA expect to reopen the list in the PHA Plan year? <input type="checkbox"/> No <input type="checkbox"/> Yes | | | |
| Does the PHA permit specific categories of families onto the waiting list, even if generally closed? <input type="checkbox"/> No <input type="checkbox"/> Yes | | | |

| |
|--|
| Housing Needs of Families on the Waiting List |
|--|

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 | 1,020 | 100 | |
| Extremely low income <=30% AMI | 867 | 85 | |
| Very low income (>30% but <=50% AMI) | 132 | 13 | |
| Low income (>50% but <80% AMI) | 21 | 2 | |
| Families with children | 643 | 63 | |
| Elderly families | 61 | 6 | |
| Families with Disabilities | 337 | 33 | |
| Race/ethnicity | 108 - Black | 10.6 | |
| Race/ethnicity | 275 - Hispanic | 27 | |
| Race/ethnicity | 631 - Other | 61.8 | |
| Race/ethnicity | 6 - Asian | 0.6 | |
| Characteristics by Bedroom Size (Public Housing Only) | | | |
| 1BR | | | |
| 2 BR | | | |
| 3 BR | | | |
| 4 BR | | | |
| 5 BR | | | |
| 5+ BR | | | |

Housing Needs of Families on the Waiting List

Is the waiting list closed (select one)? No Yes

Section 8 Housing Choice Vouchers – OPEN, this is a Centralized Waiting List in which 49 Massachusetts housing authorities participate

Section 8 Mainstream – OPEN

If yes: - **Section 8 Housing Choice Vouchers**

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

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

Other (list below)

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

Select all that apply

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

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

- 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

- 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

- 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

- 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)]

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.

| Financial Resources: Planned Sources and Uses | | |
|---|-------------------|---------------------|
| Sources | Planned \$ | Planned Uses |
| 1. Federal Grants (FY 2005 grants) | | |
| a) Public Housing Operating Fund | 860,866 | |
| b) Public Housing Capital Fund | 535,754 | |
| c) HOPE VI Revitalization | | |
| d) HOPE VI Demolition | | |
| e) Annual Contributions for Section 8 Tenant-Based Assistance | 8,200,000 | |
| f) Public Housing Drug Elimination Program (including any Technical Assistance funds) | | |
| g) Resident Opportunity and Self-Sufficiency Grants | | |

| Financial Resources: Planned Sources and Uses | | |
|---|-------------------|---------------------|
| Sources | Planned \$ | Planned Uses |
| h) Community Development Block Grant | | |
| i) HOME | | |
| Other Federal Grants (list below) | | |
| Homeless Assistance: Continuum of Care | | |
| 2. Prior Year Federal Grants (unobligated funds only) (list below) | | |
| MA06P017501-04 CFP | 196,600 | PHA Operations |
| | | |
| | | |
| 3. Public Housing Dwelling Rental Income | 864,317 | PHA Operations |
| | | |
| 4. Other income (list below) | 5,000 | PHA Operations, S8 |
| Interest Income | 1,500 | PHA Operations, S8 |
| | | |
| 4. Non-federal sources (list below) | | |
| State/Local | 1,943,225 | |
| | | |
| | | |
| Total resources | 12,607,262 | |
| | | |
| | | |

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) #20
- When families are within a certain time of being offered a unit: (state time)
- Other: (describe)

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

- Criminal or Drug-related activity
- Rental history
- Housekeeping
- Other (describe)

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

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

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

(2)Waiting List Organization

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

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

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

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

c. If the PHA 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?

2. Yes No: Are any or all of the PHA's site-based waiting lists new for the upcoming year (that is, they are not part of a previously-HUD-approved site based waiting list plan)?
If yes, how many lists?
3. Yes No: May families be on more than one list simultaneously
If yes, how many lists?
4. Where can interested persons obtain more information about and sign up to be on the site-based waiting lists (select all that apply)?
- PHA main administrative office
 - All PHA development management offices
 - Management offices at developments with site-based waiting lists
 - At the development to which they would like to apply
 - Other (list below)

(3) Assignment

- a. How many vacant unit choices are applicants ordinarily given before they fall to the bottom of or are removed from the waiting list? (select one)
- One
 - Two
 - Three or More
- b. Yes No: Is this policy consistent across all waiting list types?
- c. If answer to b is no, list variations for any other than the primary public housing waiting list/s for the PHA:

(4) Admissions Preferences

- a. Income targeting:
- Yes No: Does the PHA plan to exceed the federal targeting requirements by targeting more than 40% of all new admissions to public housing to families at or below 30% of median area income?
- b. Transfer policies:
In what circumstances will 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 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.

1 Date and Time

2 Residents who live and/or work in the jurisdiction

3 Veteran's Preference

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)

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

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

- 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. 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 **admissions policies** based on the results of the required analysis of the need to promote deconcentration of poverty or to assure income mixing?
- c. If the answer to b was yes, what changes were adopted? (select all that apply)
- Adoption of site based waiting lists
If selected, list targeted developments below:
- Employing waiting list "skipping" to achieve deconcentration of poverty or income mixing goals at targeted developments
If selected, list targeted developments below:
- Employing new admission preferences at targeted developments
If selected, list targeted developments below:
- Other (list policies and developments targeted below)
- d. Yes No: Did the PHA adopt any changes to **other** policies based on the results of the required analysis of the need for deconcentration of poverty and income mixing?
- e. If the answer to d was yes, how would you describe these changes? (select all that apply)
- Additional affirmative marketing
- Actions to improve the marketability of certain developments
- Adoption or adjustment of ceiling rents for certain developments
- Adoption of rent incentives to encourage deconcentration of poverty and income-mixing
- Other (list below)

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

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

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

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

B. Section 8

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

(1) Eligibility

a. What is the extent of screening conducted by the PHA? (select all that apply)

- Criminal or drug-related activity only to the extent required by law or regulation
 Criminal and drug-related activity, more extensively than required by law or regulation
 More general screening than criminal and drug-related activity (list factors below)
1. Owe money to another PHA or the Taunton Housing Authority.
 Other (list below)

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

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

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

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

- Criminal or drug-related activity
- Other (describe below)
Previous landlord names, if 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)

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

- PHA main administrative office
- Other (list below)

(3) Search Time

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

If yes, state circumstances below:

Reasonable request supported by documentation for a maximum of 120 days.

(4) Admissions Preferences

a. Income targeting

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

b. Preferences

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

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

Former Federal preferences

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

Other preferences (select all that apply)

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

- 1 Date and Time
- 2 Residents who live and/or work in your jurisdiction
- 3 Veteran's Preference

Former Federal preferences

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

Other preferences (select all that apply)

- Working families and those unable to work because of age or disability
- Veterans and veterans' families
- Residents who live and/or work in your jurisdiction

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

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

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

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

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

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

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

(5) Special Purpose Section 8 Assistance Programs

a. In which documents or other reference materials are the policies governing eligibility, selection, and 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)

Newspaper

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)

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

---or---

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

b. Minimum Rent

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

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

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

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

- Loss of employment
- Death in the family

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 household heads

For other family members

For transportation expenses

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

Other (describe below)

e. Ceiling rents

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

Yes for all developments

Yes but only for some developments

No

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

For all developments

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

For specified general occupancy developments

For certain parts of developments; e.g., the high-rise portion

For certain size units; e.g., larger bedroom sizes

Other (list below)

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

- Market comparability study
- Fair market rents (FMR)
- 95th 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) 10%
- Other (list below)

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

(2) Flat Rents

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

- 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)

B. Section 8 Tenant-Based Assistance

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

(1) Payment Standards

Describe the voucher payment standards and policies.

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

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

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

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

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

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

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
 \$26-\$50

b. Yes 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. (**Attachment File Name: ma017b02.doc**)
 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 Served at Year Beginning 01/2002 | Expected Turnover |
|---|---|--------------------------|
| Public Housing | 321 | 60 |
| Section 8 Vouchers | 431 | 30 |
| Section 8 Certificates | 0 | 0 |
| Section 8 Mod Rehab | 22 | 8 |
| Special Purpose Section 8 Certificates/Vouchers | 300 | 30 |

| | | |
|---|---|-----|
| (list individually) Mainstream | | |
| Public Housing Drug Elimination Program (PHDEP) | 0 | N/A |
| | | |
| | | |
| Other Federal Programs(list individually) | | |
| McKinney Grant 6 SRO units | 6 | 1 |
| | | |

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)

Contained in Public Housing Admission & Occupancy Policy.

(Attachment Filename: ma017e01.doc)

- (2) Section 8 Management: (list below)

Contained in Section 8 Admission & Occupancy Policy.

(Attachment Filename: ma017f01.doc)

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

1. Yes 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 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 Attachment (state name)

-or-

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

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

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.

- 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:
2. Development (project) number:
3. Status of grant: (select the statement that best describes the current status)

- Revitalization Plan under development
 Revitalization Plan submitted, pending approval
 Revitalization Plan approved
 Activities pursuant to an approved Revitalization Plan underway

- Yes No: c) Does the PHA plan to apply for a HOPE VI Revitalization grant in the Plan year?
If yes, list development name/s below:
Fairfax Gardens, 17-1

- 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:

- 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

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

| Demolition/Disposition Activity Description |
|---|
| 1a. Development name: 1b. Development (project) number: |
| 2. Activity type: Demolition <input type="checkbox"/> Disposition <input type="checkbox"/> |
| 3. Application status (select one) Approved <input type="checkbox"/> Submitted, pending approval <input type="checkbox"/> Planned application <input type="checkbox"/> |
| 4. Date application approved, submitted, or planned for submission: <u>(DD/MM/YY)</u> |
| 5. Number of units affected: 6. Coverage of action (select one) <input type="checkbox"/> Part of the development <input type="checkbox"/> Total development |
| 7. 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. Yes No: Has the PHA designated or applied for approval to designate or does the PHA plan to apply to designate any public housing for occupancy only by the elderly families or only by families with disabilities, or by elderly families and families with disabilities or will apply for designation for occupancy by only elderly families or only families with disabilities, or by elderly families and families with disabilities as provided by section 7 of the U.S. Housing Act of 1937 (42 U.S.C. 1437e) in the upcoming fiscal year? (If “No”, skip to component 10. If “yes”, complete one activity description for each development, unless the PHA is eligible to complete a streamlined submission; PHAs completing streamlined submissions may skip to component 10.)

2. Activity Description

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

| Designation of Public Housing Activity Description | |
|--|--|
| 1a. Development name: | |
| 1b. Development (project) number: | |
| 2. Designation type: | |
| Occupancy by only the elderly <input type="checkbox"/> | |
| Occupancy by families with disabilities <input type="checkbox"/> | |
| Occupancy by only elderly families and families with disabilities <input type="checkbox"/> | |
| 3. Application status (select one) | |
| Approved; included in the PHA’s Designation Plan <input type="checkbox"/> | |
| Submitted, pending approval <input type="checkbox"/> | |
| Planned application <input type="checkbox"/> | |
| 4. Date this designation approved, submitted, or planned for submission: <u>(DD/MM/YY)</u> | |
| 5. If approved, will this designation constitute a (select one) | |
| <input type="checkbox"/> New Designation Plan | |
| <input type="checkbox"/> Revision of a previously-approved Designation Plan? | |
| 6. Number of units affected: | |
| 7. Coverage of action (select one) | |
| <input type="checkbox"/> Part of the development | |
| <input type="checkbox"/> Total development | |

10. Conversion of Public Housing to Tenant-Based Assistance

[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? | <input type="checkbox"/> Assessment underway <input type="checkbox"/> Assessment results submitted to HUD <input type="checkbox"/> Assessment results approved by HUD (if marked, proceed to next question) <input type="checkbox"/> Other (explain below) |
| 3. <input type="checkbox"/> Yes <input type="checkbox"/> No: | Is a Conversion Plan required? (If yes, go to block 4; if no, go to block 5.) |
| 4. Status of Conversion Plan (select the statement that best describes the current status) | <input type="checkbox"/> Conversion Plan in development <input type="checkbox"/> Conversion Plan submitted to HUD on: (DD/MM/YYYY) <input type="checkbox"/> Conversion Plan approved by HUD on: (DD/MM/YYYY) <input type="checkbox"/> Activities pursuant to HUD-approved Conversion Plan underway |
| 5. Description of how requirements of Section 202 are being satisfied by means other than conversion (select one) | <input type="checkbox"/> Units addressed in a pending or approved demolition application (date submitted or approved: _____) <input type="checkbox"/> Units addressed in a pending or approved HOPE VI demolition application (date submitted or approved: _____) |

- 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

11. Homeownership Programs Administered by the PHA

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

B. Section 8 Tenant Based Assistance

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

2. Program Description:

a. Size of Program

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

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

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

b. PHA-established eligibility criteria

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

If yes, list criteria below:

12. PHA Community Service and Self-sufficiency Programs

[24 CFR Part 903.7 9 (l)]

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? DD/MM/YY

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

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

B. Services and programs offered to residents and participants

(1) General

a. Self-Sufficiency Policies

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

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

b. Economic and Social self-sufficiency programs

- Yes 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 (including location, if appropriate) | Estimated Size | Allocation Method (waiting list/random selection/specific criteria/other) | Access (development office / PHA main office / other provider name) | Eligibility (public housing or section 8 participants or both) |
| Resident Training Program | 0 – 4 People | Waiting List | PHA Wide | Both |
| Families Forward Program – Assists in developing appropriate support systems and enhancing access to community resources | 15+ People | Specific Criteria | Fairfax Gardens Community Center | Both |
| Boys & Girls Club – Recreational program | 30+ Children | Specific Criteria | Offsite at Boys & Girls Club | Both – Children ages 6 - 16 |
| YMCA – After school recreational and educational program | 30+ Children | Specific Criteria | Fairfax Gardens Community Center | Public Housing children ages 6 – 14 living at Fairfax Gardens |
| Workforce Development Training – School to career program | 25 High Schoolers | Specific Criteria | Fairfax Gardens Community Center | Both – High School students |

| | | | | |
|--|--------------|-------------------|----------------------------------|--|
| | | | | who have been unable to pass the 10 th grade MCAS |
| Parent/Child Home Program – Assists families who are at risk of educational disadvantage | 10 Children | Specific Criteria | Fairfax Gardens Community Center | Public Housing families with children ages 18 months -4 |
| Community Safety – Establishes a police presence to deter crime | 150 Families | Specific Criteria | Fairfax Gardens Community Center | Public Housing families living at Fairfax Gardens |
| | | | | |
| | | | | |
| | | | | |

(2) Family Self Sufficiency program/s

a. Participation Description

| Family Self Sufficiency (FSS) Participation | | |
|---|---|---|
| Program | Required Number of Participants (start of FY 2002 Estimate) | Actual Number of Participants (As of: DD/MM/YY) |
| Public Housing | | |
| Section 8 | 25 | 25 - As of 10/07/04 |

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

Not Applicable

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 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
- 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
- Analysis of crime statistics over time for crimes committed "in and around" public housing authority
- Analysis of cost trends over time for repair of vandalism and removal of graffiti
- Resident reports
- PHA employee reports
- Police reports
- Demonstrable, quantifiable success with previous or ongoing anti-crime/ anti-drug programs
- Other (describe below)

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

Fairfax Gardens

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)

- Contracting with outside and/or resident organizations for the provision of crime- and/or drug-prevention activities
- Crime Prevention Through Environmental Design
- Activities targeted to at-risk youth, adults, or seniors
- Volunteer Resident Patrol/Block Watchers Program
- Other (describe below)

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

Fairfax Gardens

C. Coordination between PHA and the police

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

- Police involvement in development, implementation, and/or ongoing evaluation of drug-elimination plan
- Police provide crime data to housing authority staff for analysis and action
- Police have established a physical presence on housing authority property (e.g., community policing office, officer in residence)
- Police regularly testify in and otherwise support eviction cases
- Police regularly meet with the PHA management and residents
- Agreement between PHA and local law enforcement agency for provision of above-baseline law enforcement services
- Other activities (list below)

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

Fairfax Gardens

D. Additional information as required by PHDEP/PHDEP Plan

PHAs eligible for FY 2003 PHDEP funds must provide a PHDEP Plan meeting specified requirements prior to receipt of PHDEP funds.

- Yes No: Is the PHA eligible to participate in the PHDEP in the fiscal year covered by this PHA Plan?
- Yes No: Has the PHA included the PHDEP Plan for FY 2003 in this PHA Plan?
- Yes No: This PHDEP Plan is an Attachment.

14. RESERVED FOR PET POLICY

[24 CFR Part 903.7 9 (n)]

See Federal Pet Policy. (Attachment Filename: ma017d02.doc)

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

17. PHA Asset Management

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

2. What 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)

3. Yes 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 Advisory Board Recommendations

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:

The RAB was very supportive of the PHA Plan in the meeting held on October 12, 2004. The RAB complemented the THA on Modernization projects completed at various developments, stating that the projects have greatly enhanced their quality of living. Meetings are also held monthly with RAB members to obtain comments and address resident concerns.

3. In what manner did the PHA address those comments? (select all that apply)
 - Considered comments, but determined that no changes to the PHA Plan were necessary.
 - The PHA changed portions of the PHA Plan in response to comments
List changes below:

Other: (list below)

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

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

3. Description of Resident Election Process

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

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

b. Eligible candidates: (select one)

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

c. Eligible voters: (select all that apply)

- All adult recipients of PHA assistance (public housing and section 8 tenant-based assistance)
- Representatives of all PHA resident and assisted family organizations
- Other (list) - Per Massachusetts General Laws, resident board members are appointed by the Mayor of the City of Taunton.

C. Statement of Consistency with the Consolidated Plan

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

1. Consolidated Plan jurisdiction: (provide name here) City of Taunton, Massachusetts

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

- The PHA has based its statement of needs of families in the jurisdiction on the needs expressed in the Consolidated Plan/s.
- The PHA has participated in any consultation process organized and offered by the Consolidated Plan agency in the development of the Consolidated Plan.
- The PHA has consulted with the Consolidated Plan agency during the development of this PHA Plan.
- Activities to be undertaken by the PHA in the coming year are consistent with the initiatives contained in the Consolidated Plan. (list below)

- Other: (list below)

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

Both plans are consistent in their goals in addressing the City of Taunton's housing needs.

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.

PHA Plan Table Library

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

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

Capital Fund Grant Number FFY of Grant Approval: (MM/YYYY)

Original Annual Statement

| Line No. | Summary by Development Account | Total Estimated Cost |
|----------|---|----------------------|
| 1 | Total Non-CGP Funds | |
| 2 | 1406 Operations | |
| 3 | 1408 Management Improvements | |
| 4 | 1410 Administration | |
| 5 | 1411 Audit | |
| 6 | 1415 Liquidated Damages | |
| 7 | 1430 Fees and Costs | |
| 8 | 1440 Site Acquisition | |
| 9 | 1450 Site Improvement | |
| 10 | 1460 Dwelling Structures | |
| 11 | 1465.1 Dwelling Equipment-Nonexpendable | |
| 12 | 1470 Nondwelling Structures | |
| 13 | 1475 Nondwelling Equipment | |
| 14 | 1485 Demolition | |
| 15 | 1490 Replacement Reserve | |
| 16 | 1492 Moving to Work Demonstration | |
| 17 | 1495.1 Relocation Costs | |
| 18 | 1498 Mod Used for Development | |
| 19 | 1502 Contingency | |
| 20 | Amount of Annual Grant (Sum of lines 2-19) | |
| 21 | Amount of line 20 Related to LBP Activities | |
| 22 | Amount of line 20 Related to Section 504 Compliance | |
| 23 | Amount of line 20 Related to Security | |
| 24 | Amount of line 20 Related to Energy Conservation Measures | |

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

| Development Number/Name HA-Wide Activities | General Description of Major Work Categories | Development Account Number | Total Estimated Cost |
|--|---|----------------------------------|----------------------------|
| | | | |

Annual Statement

Capital Fund Program (CFP) Part III: Implementation Schedule

| Development Number/Name HA-Wide Activities | All Funds Obligated (Quarter Ending Date) | All Funds Expended (Quarter Ending Date) |
|--|--|---|
| | | |

Optional Table for 5-Year Action Plan for Capital Fund (Component 7)

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

| Optional 5-Year Action Plan Tables | | | | |
|--|---|---------------------|----------------------------|-------------------------------------|
| Development Number | Development Name (or indicate PHA wide) | Number Vacant Units | % Vacancies in Development | |
| | | | | |
| Description of Needed Physical Improvements or Management Improvements | | | Estimated Cost | Planned Start Date (HA Fiscal Year) |
| | | | | |
| Total estimated cost over next 5 years | | | | |

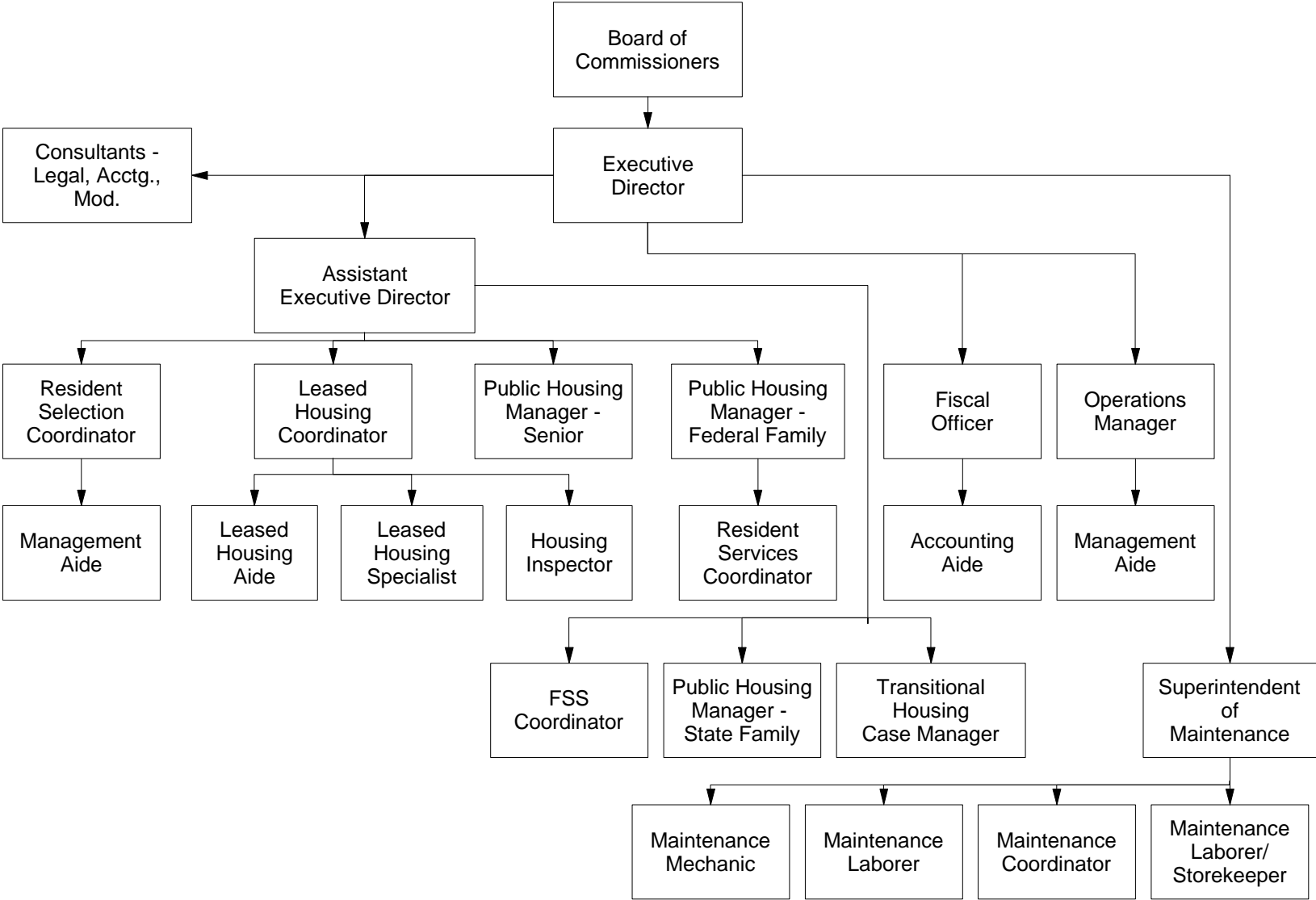
Optional Public Housing Asset Management Table

See Technical Guidance for instructions on the use of this table, including information to be provided.

| Public Housing Asset Management | | | | | | | | |
|--|--------------------------|--|---|--|--|-----------------------------------|--|---|
| Development Identification | | Activity Description | | | | | | |
| Name, Number, and Location | Number and Type of units | Capital Fund Program Parts II and III <i>Component 7a</i> | Development Activities <i>Component 7b</i> | Demolition / disposition <i>Component 8</i> | Designated housing <i>Component 9</i> | Conversion <i>Component 10</i> | Home-ownership <i>Component 11a</i> | Other (describe) <i>Component 17</i> |
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The Taunton Housing Authority has had a Resident Commissioner on its Board since its inception in 1948. The current Resident Commissioner is Lorraine McCormack, a resident of the THA-owned Cedarvale Homes development on Lee Terrace. Ms. McCormack was appointed to the Board on August 15, 2000. Each Resident Commissioner is appointed by the Mayor of the City of Taunton to serve a five-year term. The Mayor receives input from individual Resident Councils, who each submits a list of possible candidates for the position.

TAUNTON HOUSING AUTHORITY ORGANIZATIONAL CHART



TAUNTON HOUSING AUTHORITY FEDERAL PET POLICY

Residents of units owned and managed by the Taunton Housing Authority (the "Authority") may own and keep common household pets, provided, that they manage such pets responsibly and otherwise comply with those city ordinances applicable to the ownership and care of a pet and with the guidelines set out herein. Violation of any of these ordinances or guidelines may be grounds for removal of the pet or termination of a resident's tenancy (or both), in accordance with applicable rules and regulations. The Taunton Police Department and Taunton Animal Control Officer shall have responsibility for enforcement of applicable city ordinances. The Manager of each of the Authority's Developments, along with designated Pet Boards shall have primary responsibility for enforcing the guidelines in this pet policy.

Any resident desiring to keep a pet in his/her unit must first obtain the written approval of the Authority. Such approval will be based on, among other things, the resident's demonstration that he/she has the capability to care for the pet and certification that he/she will abide by the following guidelines concerning pet ownership and pet maintenance:

I. Applicability of Pet Policy

This pet policy shall apply to all residents of the Authority's family and elderly units wishing to own and/or maintain a pet in their unit as of _____, the effective date of this Pet Policy. Any resident who owns or maintains a pet in a family or elderly unit as of this date must submit an application to the Authority within fourteen (14) days of this effective date requesting written approval for the pet. Failure to submit an application within this time limit or to obtain the Authority's written approval upon submission of a timely application may be grounds for removal of the pet or termination of a resident's tenancy (or both).

II. General Guidelines

1. Any resident of one of the Authority's family or elderly units who wishes to obtain and/or keep a common household pet must first submit a written request for approval with his/her public housing manager and must receive authorization from the Authority in writing. The Authority reserves the right to check references, such as prior landlords and neighbors, regarding the resident's previous pet ownership history and the pet's behavioral history. If the Authority concludes that maintenance of the pet by the resident in the Authority's housing unit, would in the Authority's opinion, be inappropriate or ill-advised, the Authority will inform the tenant in writing, stating the specific reason for the denial. Permission to own and keep a specific pet will not be unreasonably withheld.

A tenant has the right to bring complaints and concerns regarding pet ownership to the Pet Management Board (the "Pet Board"). The Pet Board will be comprised of four residents from each development, appointed by the Executive Director. The Pet Board will be made up of one pet owner, one non-pet owner, one pet owner alternate, and one non-pet owner alternate and local interested humane groups, veterinarians, and volunteers. The Pet Board will be made up of

residents in "good standing" only, good standing to mean rent paid, no eviction proceedings pending with the Authority. The Authority has the right to remove any resident from the "Pet Management Board" or to deny a resident from serving on the Pet Board, if the Authority feels that they are not a resident in "good standing". In the event that complaints go to the Pet Board regarding a Pet Board Member's pet ownership capabilities, the alternate will replace that Pet Board Member until those complaints are resolved.

If a family development wishes to house pets in their units but does not have four residents, in "good standing", interested in serving on the Pet Board, that development will not be allowed to house pets. Pet Boards in the elderly developments are strongly suggested but not mandatory in order for an elderly development to house pets. In the absence of a Pet Board the Authority may elect to utilize a Pet Board from another development to resolve complaints. If no Pet Boards are available the Authority may encourage residents to form one Pet Board to oversee pet complaints for all elderly developments. If no Pet Boards are formed Authority staff will be responsible for resolving complaints.

All complaints to the Pet Board must be in writing and referred to the Pet Board for resolution. No Credence shall be given by the Pet Board to verbal or unsigned complaints. Management will also inform the resident of any other rule infractions and will duly notify the Pet Board for attempted resolution.

The Board may meet on an as needed basis to address written complaints regarding pet ownership and may address these concerns in writing to any resident. The Pet Board has the power to request the Authority that pet be removed for good cause. The Pet Board may schedule a hearing with one or more residents to discuss complaints and may set guidelines upon resident regarding pet ownership to resolve complaints. Upon second notice of a written legitimate complaint from the Pet Board to the tenant, the resident shall be advised that further notice shall be cause for termination of the pet rider provision; except that in the case of a serious problem, e.g. a vicious dog, this procedure may be shortened in the interest of public safety.

The Authority may speak with the Pet Board regarding pet ownership, the Authority will provide direction and supervision to the Pet Board. All resident complaints will go directly to the Pet Board and not to the Authority. The Taunton Animal Control Officer, if unable to serve on the Pet Board, will be an advisor to the Board on all aspects of pet ownership and responsibilities.

2. Only common household pets will be approved by the Authority for ownership and maintenance. Common household pets are defined for purposes of the Authority's Pet Policy as follows: Dogs, Cats, Birds, Fish, Guinea Pigs, Gerbils, Hamsters and other small domesticated animals which are approved at the discretion of the Authority. Notwithstanding this list, birds of prey (e.g. eagles, hawks, falcons), pigeons, chickens, roosters, rabbits, and reptiles of all kinds shall not qualify as common household pets under this policy. The mature size of dogs is limited to a weight not to exceed forty (40) pounds. Regardless of size, dogs of a vicious or aggressive disposition will not be permitted. Due to the social and behavioral needs and activities of puppies and kittens, applications for ownership of such young animals shall be more closely reviewed prior to approval.

3. No resident, or apartment unit shall have more than one pet. Notwithstanding this limitation, a maximum of two birds in a cage and two aquariums not to exceed twenty gallons combined. Birds must be kept in cages; guinea pigs, gerbils and hamsters in cages or aquariums; and fish in aquariums.

4. All female dogs over the age of six (6) months and all female cats over the age of five (5) months shall be spayed. All male dogs over the age of eight (8) months and all male cats over the age of ten (10) months must be neutered. Pet Owners will sign a written agreement that their pet will undergo the above mentioned procedure and provided documentation of the same. All pets shall be inoculated in accordance with state and local laws. All medical documentation must be given to the Authority and placed in a file. Failure to submit documentation may result in the removal of the pet and/or termination of tenancy.

III. Application for Pet Approval

1. Any resident interested in owning a pet must obtain written approval from the Authority prior to housing the pet. The Resident must first read and understand all regulations surrounding Pet Ownership, and discuss all aspects of housing a specific pet with the Authority. Upon reviewing the policy, the resident will sign the application for a pet permit certifying that they understand all regulations and requirements for Pet Ownership, and agree to abide by all of the rules listed in this policy and all city ordinances applicable to pet ownership.

2. As part of the process for reviewing applications for pet ownership, the applicant must be a tenant in "good standing", all rent and/or maintenance charges must be paid to date, the apartment must pass inspection for housekeeping and the availability of facilities to house a pet, no eviction proceedings may be pending.

3. If the Authority concludes that pet ownership is warranted, a temporary, conditional approval may be issued, authorizing the housing of a specific pet, conditional on the Authority's receipt of the following documentation before the pet moves into the unit with the exception of the Veterinarians certificate and color photo, which may be obtained one week after the pet is housed.

a. Veterinary certificates of spaying or neutering and of rabies, distemper, parvovirus, feline leukemia testing and feline VRC and other inoculations if applicable.

b. Dog licensing certificates in accordance with state and local laws.

c. A color photo and identifying description and name of the pet to be housed.

d. Names, addresses and phone numbers of both a primary and alternate caretaker, in the event the owner becomes incapacitated or not immediately available in the case of an emergency. These caretakers must provide a signed verification of their knowledge and willingness to assume the responsibility for

the pet. In the event where a caretaker cannot be found, a veterinarian's name will be provided who will house the pet at the owner's expense.

e. A Pet Rider or addendum to the resident's current lease executed by the resident.

f. A pet deposit of \$160.00 or one months rent, whichever is less is required of each resident pet owner desiring to house a pet. The resident pet owner may pay this over a period of time by signing a rental agreement with the Taunton Housing Authority. If this rental agreement is broken at any time, the Authority will commence eviction proceedings. This deposit is only to be returned at the time the pet is no longer living in the unit or the resident moves, and will only be refunded if no damage has been caused to the common area, resident's apartment, and any apartment the pet may have visited. Any damages caused during the pets stay to any property owned and maintained by the Authority will be paid for by the pet owner (this will not come out of the deposit), this includes the cost of exterminating for fleas or other insects, due to the pet, and/or neglect by the owner. Failure to pay any charges may result in eviction.

IV. Resident's Responsibilities

1. Resident is responsible for notifying the Authority in writing of any change in the information initially provided in the application for pet ownership within fourteen (14) days of the change.
2. Resident pet owners will be responsible for proper pet care, good nutrition, grooming, exercise, flea control, routine veterinary care and yearly inoculations. Dogs and cats must wear identification tags and collars when outside of the apartment unit.
3. Resident pet owner is responsible for cleaning up after the pet inside the apartment, all common areas and any apartment the pet may visit. A "pooper scooper" and disposable plastic bag is required to be carried by the pet owner while outside of the apartment, and all waste shall be bagged and disposed of in a trash receptacle. Under no circumstances should any pet debris be deposited in a toilet, as blockage may occur.
4. Pet blankets and bedding are not to be cleaned or washed in the Authority's laundry room for hygienic purposes.
5. Resident pet owners will keep the unit and general area (including the patio, if applicable) clear and free of pet odors, insect infestation, waste and litter and must maintain the unit and general area in a sanitary condition.
6. Resident pet owners will restrain and prevent the pet from gnawing, chewing, scratching, or otherwise defacing doors, walls, windows, fixture, appliances, and floor coverings of the unit, other units and common areas including shrubs and landscaping.
7. Pets are not to be tied outside to doorways, patios, decks or any common area. Any pet

outside or in hallways must be accompanied by a resident and restrained on a leash. All cats should be indoor cats.

8. Resident pet owners will not alter their unit, patio, deck, or other outside areas to create an enclosure for a pet.
9. Pets are not permitted in Community Centers or Laundry Rooms.
10. Pets will not be allowed to disturb the health, safety, comfort or quiet enjoyment of other tenants. A pet should not create a nuisance to neighbors with excessive barking, whining, chirping or other unruly behavior.
11. Resident pet owners hereby agree to apartment inspections by the Authority when, in the opinion of the Authority, there is cause to believe a pet and or unit is not being cared for properly and damage may be caused by the pet.
12. Resident pet owners must provide litter boxes for cat wastes, which must be kept in the owners unit, and be cleaned often and kept odor free.
13. Residents are prohibited from feeding or harboring stray animals. The feeding or harboring of a stray animal shall constitute having a pet without the approval of the Authority.
14. Identification cards, carried in purse or wallet, naming veterinarian and caretaker should be with the pet owner at all times. In the event of a sudden illness or accident, attending authorities would notify management to assist the pet and avoid a delay in proper care of the animal.
15. No pet is to remain unattended for more than twenty-four hours at a time, with the exception of a dog, not more than ten hours. Should the Authority have good cause to believe that a pet has been left longer than the designated time, or the health or safety of the animal is threatened by incapacity or death of the owner, the Authority will contact the listed caretakers to assume responsibility for the pet.

If the caretakers are unable or unwilling to take responsibility for the pet and the tenant is not able or unwilling to find alternate caretakers, the Authority will enter the unit and remove the pet. The Authority will contact the Massachusetts Society for the Prevention of Cruelty to Animals or other suitable humane societies for assistance in providing alternate arrangements for the care of the pet. The funds for such area will be taken from the tenant's pet deposit.

16. Termination of Lease proceedings may be instituted if the pet owner is in violation of these guidelines which the pet owner has agreed to abide by in signing the pet rider attached to the lease. Termination of Lease proceedings may also be instituted if the pet owner has been warned three times by the Pet Board.

VI. Liability of Pet Owner for Damage or Injury

1. Charges for such damages caused by pets shall include the costs of materials, labor,

supplies, and contract costs. Payment plans may be set up with the Authority and the pet owner, at the Authority's discretion, no more than one payment plan may be issued per year. Should the payment plan be broken, the pet owner will remove the pet from the premises and will lose the privilege to house a pet with the Authority.

2. The pet owner will hold the Taunton Housing Authority harmless and indemnify the Taunton Housing Authority from any and all claims, liabilities, or penalties asserted by or on behalf of any person, corporation or public entity. Due to the result of the pet owner's failure to carry out his or her responsibilities and obligations under this policy.

I have read and understand the above rules and regulations concerning pet ownership, and will abide by this Pet Policy throughout my tenancy with the Taunton Housing Authority.

Resident Signature

Date

Taunton Housing Site Manager

Date

Revised 10/17/94
Adopted 10/19/94

SECTION 8 HOMEOWNERSHIP PROGRAM CAPACITY STATEMENT

The Taunton Housing Authority has secured a partnership with Pro Home, a non-profit agency assisting with first time homebuyers, in the City of Taunton. The authority will demonstrate its capacity to administer the program by employing the following provisions:

- a) Establishing a minimum homeowner down payment requirement of at least 3 percent of the purchase price for participation in its Section 8 homeownership program, and requiring that at least 1 percent of the down payment come from the family's personal resources;

- b) Requiring that financing for purchase of a home under its Section 8 homeownership program be provided, insured or guaranteed by the state or Federal government; comply with secondary mortgage market underwriting requirements; or comply with generally accepted private sector underwriting standards.

TENANT ADVISORY GROUP

Residents of the group consist of volunteers and presidents of the tenant associations. Members of the group are as follows:

1. Christine F. Allen
2. Rosalinda De Escobar
3. William Albohn
4. Madeline Field
5. Mary Vieira
6. Isabel Majkut
7. Irene Fernandes
8. Hilda Proulx
9. Lydia Padua
10. Arlene Rodriguez
11. Catherine Randolph

These members meet on the third Wednesday of every month with staff of the Taunton Housing Authority.

PROGRESS IN MEETING 5-YEAR PLAN MISSION AND GOALS

The Taunton Housing Authority is currently 97% utilized on all of our Section 8 programs. We are confident that we will be able to maintain this very aggressive leasing rate over the next few years.

The THA purchased property at 17-19 Fayette Place in the City of Taunton. The development consists of six one-bedroom units serving the homeless population. As of this date the units are fully occupied.

The Taunton Housing Authorities resident training program continues to be successful and a very worthwhile endeavor. The THA hired our third resident trainee for a full-time benefited position with the THA. We will be entering our sixth year of this program and we anticipate more success stories over the next few years. The program has been a tool in assisting residents to reach self-sufficiency.

Our Computer Learning Center has grown over the last five years. Participants have increased along with computer systems and services. Residents have been very responsive to the programs. Our after school homework clinic is now being integrated into the school system, initiated by our community police officers working with the school principals.

The THA signed an MOA with Pro-Home, Inc. Pro-Home, Inc. is a non-profit agency for the production and preservation of affordable housing. This collaboration affords Section 8 participants the option of homeownership.

The THA applied for 20 Mainstream vouchers in fiscal year 2004.

The THA currently administers a Section 8 Family Self-Sufficiency Program. We hired a full time coordinator to assist participants in meeting personal and /or professional goals. There are twenty-five families enrolled in the program and their individual needs range from basic skills training to secondary education to increase their earnings to reach the American Dream of Homeownership. We have had one closing as of this date.

DECONCENTRATION EXEMPTION

The Taunton Housing Authority is an exempt agency from the rule to deconcentrate. As stated in Subpart A Deconcentration of Poverty and Fair Housing in Program Admissions, Section 903.2, Section 2 states the following:

“Developments not subject to deconcentration of poverty and income mixing requirements. This subpart does not apply to the following public housing developments:

- (iii) Public housing developments operated by a PHA which consist of only one general occupancy, family public housing development”

Since the Taunton Housing Authority operates only one federally funded family public housing development, the above section is applicable to our agency.

CAPITAL FUND PROGRAM TABLES START HERE

| Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I: Summary | | | | | |
|--|---|---|------------|-------------------|------------------------------|
| PHA Name: Taunton | | Grant Type and Number Capital Fund Program Grant No: MA06P01750104 Replacement Housing Factor Grant No: | | | Federal FY of Grant: 2004 |
| <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input checked="" type="checkbox"/> Revised Annual Statement (revision no: 2) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 06/30/2004 <input type="checkbox"/> Final Performance and Evaluation Report | | | | | |
| Line No. | Summary by Development Account | Total Estimated Cost | | Total Actual Cost | |
| | | Original | Revised | Obligated | Expended |
| 1 | Total non-CFP Funds | | | | |
| 2 | 1406 Operations | 58,231.00 | 58,231.00 | 58,231.00 | 0.00 |
| 3 | 1408 Management Improvements | 55,923.00 | 58,923.00 | 58,923.00 | 0.00 |
| 4 | 1410 Administration | 50,000.00 | 50,000.00 | 50,000.00 | 0.00 |
| 5 | 1411 Audit | 0.00 | 0.00 | 0.00 | 0.00 |
| 6 | 1415 Liquidated Damages | 0.00 | 0.00 | 0.00 | 0.00 |
| 7 | 1430 Fees and Costs | 58,000.00 | 58,000.00 | 58,000.00 | 0.00 |
| 8 | 1440 Site Acquisition | 0.00 | 0.00 | 0.00 | 0.00 |
| 9 | 1450 Site Improvement | 143,600.00 | 120,600.00 | 0.00 | 0.00 |
| 10 | 1460 Dwelling Structures | 160,000.00 | 180,000.00 | 110,000.00 | 0.00 |
| 11 | 1465.1 Dwelling Equipment—Nonexpendable | 0.00 | 0.00 | 0.00 | 0.00 |
| 12 | 1470 Nondwelling Structures | 0.00 | 0.00 | 0.00 | 0.00 |
| 13 | 1475 Nondwelling Equipment | 10,000.00 | 10,000.00 | 10,000.00 | 0.00 |
| 14 | 1485 Demolition | 0.00 | 0.00 | 0.00 | 0.00 |
| 15 | 1490 Replacement Reserve | 0.00 | 0.00 | 0.00 | 0.00 |
| 16 | 1492 Moving to Work Demonstration | 0.00 | 0.00 | 0.00 | 0.00 |
| 17 | 1495.1 Relocation Costs | 0.00 | 0.00 | 0.00 | 0.00 |
| 18 | 1499 Development Activities | 0.00 | 0.00 | 0.00 | 0.00 |
| 19 | 1501 Collaterization or Debt Service | 0.00 | 0.00 | 0.00 | 0.00 |

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

| | | |
|-------------------|---|------------------------------|
| PHA Name: Taunton | Grant Type and Number Capital Fund Program Grant No: MA06P01750104 Replacement Housing Factor Grant No: | Federal FY of Grant: 2004 |
|-------------------|---|------------------------------|

Original Annual Statement Reserve for Disasters/ Emergencies Revised Annual Statement (revision no: 2)
 Performance and Evaluation Report for Period Ending: 06/30/2004 Final Performance and Evaluation Report

| Line No. | Summary by Development Account | Total Estimated Cost | | Total Actual Cost | |
|----------|---|----------------------|------------|-------------------|----------|
| | | Original | Revised | Obligated | Expended |
| 20 | 1502 Contingency | 0.00 | 0.00 | 0.00 | 0.00 |
| 21 | Amount of Annual Grant: (sum of lines 2 – 20) | 535,754.00 | 535,754.00 | 345,154.00 | 0.00 |
| 22 | Amount of line 21 Related to LBP Activities | 0.00 | 0.00 | 0.00 | 0.00 |
| 23 | Amount of line 21 Related to Section 504 compliance | 0.00 | 0.00 | 0.00 | 0.00 |
| 24 | Amount of line 21 Related to Security – Soft Costs | 0.00 | 0.00 | 0.00 | 0.00 |
| 25 | Amount of Line 21 Related to Security – Hard Costs | 0.00 | 0.00 | 0.00 | 0.00 |
| 26 | Amount of line 21 Related to Energy Conservation Measures | 0.00 | 0.00 | 0.00 | 0.00 |

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

| PHA Name: Taunton | | Grant Type and Number Capital Fund Program Grant No: MA06P01750104 Replacement Housing Factor Grant No: | | | | Federal FY of Grant: 2004 | | |
|---|---|---|----------|----------------------|------------|---------------------------|----------------|----------------|
| Development Number Name/HA-Wide Activities | General Description of Major Work Categories | Dev. Acct No. | Quantity | Total Estimated Cost | | Total Actual Cost | | Status of Work |
| | | | | Original | Revised | Funds Obligated | Funds Expended | |
| 17-1 Fairfax | Roof Replacement | 1460 | 29 | 160,000.00 | 110,000.00 | 110,000.00 | 0.00 | |
| 17-1 Fairfax | Playground | 1450 | 100 | 0.00 | 20,600.00 | 0.00 | 0.00 | |
| 17-3 Cedarvale | Domestic Water Pipe Replacement | 1460 | 13 | 0.00 | 70,000.00 | 0.00 | 0.00 | |
| 17-6 Thomas | Siding | 1450 | 12 | 0.00 | 100,000.00 | 0.00 | 0.00 | |
| 17-1,-3,-6 | A/E Fees & Costs | 1430 | - | 58,000.00 | 58,000.00 | 58,000.00 | 0.00 | |
| PHA Wide | Employee/Resident Training, Police, Computer Software | 1408 | - | 55,923.00 | 58,923.00 | 58,923.00 | 0.00 | |
| PHA Wide | Computer Hardware | 1475 | - | 10,000.00 | 10,000.00 | 10,000.00 | 0.00 | |
| PHA Wide | Salaries | 1410 | - | 50,000.00 | 50,000.00 | 50,000.00 | 0.00 | |
| PHA Wide | Operations | 1406 | - | 58,231.00 | 58,231.00 | 58,231.00 | 0.00 | |
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**Annual Statement/Performance and Evaluation Report
 Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)
 Part III: Implementation Schedule**

| PHA Name: Taunton | | Grant Type and Number Capital Fund Program No: MA06P01750104 Replacement Housing Factor No: | | | | | Federal FY of Grant: 2004 |
|--|---|---|--------|---|---------|--------|----------------------------------|
| Development Number Name/HA-Wide Activities | All Fund Obligated (Quarter Ending Date) | | | All Funds Expended (Quarter Ending Date) | | | Reasons for Revised Target Dates |
| | Original | Revised | Actual | Original | Revised | Actual | |
| 17-1 Fairfax | 09/06/2006 | | | 09/06/2008 | | | |
| 17-3 Cedarvale | 09/06/2006 | | | 09/06/2008 | | | |
| 17-6 Thomas | 09/06/2006 | | | 09/06/2008 | | | |
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Capital Fund Program Five-Year Action Plan
Part I: Summary

| PHA Name Taunton | | <input checked="" type="checkbox"/> Original 5-Year Plan <input type="checkbox"/> Revision No: | | | |
|---|------------------|---|--|--|--|
| Development Number/Name/HA-Wide | Year 1 | Work Statement for Year 2 FFY Grant: 2006 PHA FY: 2006 | Work Statement for Year 3 FFY Grant: 2007 PHA FY: 2007 | Work Statement for Year 4 FFY Grant: 2008 PHA FY: 2008 | Work Statement for Year 5 FFY Grant: 2009 PHA FY: 2009 |
| | Annual Statement | | | | |
| 17-1 Fairfax | | 425,000.00 | 400,000.00 | 350,000.00 | 350,000.00 |
| 17-2 Gwozdz | | 0.00 | 15,000.00 | 0.00 | 0.00 |
| 17-3 Cedarvale | | 0.00 | 0.00 | 0.00 | 70,000.00 |
| 17-4 Presbrey/ Massasoit | | 0.00 | 0.00 | 0.00 | 0.00 |
| 17-6 Thomas | | 0.00 | 0.00 | 70,000.00 | 0.00 |
| A/E Fees & Costs | | 15,000.00 | 15,000.00 | 30,000.00 | 30,000.00 |
| PHA Wide | | 95,754.00 | 105,754.00 | 85,754.00 | 85,754.00 |
| | | | | | |
| | | | | | |
| CFP Funds Listed for 5-year planning | | 535,754.00 | 535,754.00 | 535,754.00 | 535,754.00 |
| | | | | | |
| Replacement Housing Factor Funds | | | | | |

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

| | | |
|-------------------|---|------------------------------|
| PHA Name: Taunton | Grant Type and Number Capital Fund Program Grant No: MA06P01750100 Replacement Housing Factor Grant No: | Federal FY of Grant: 2000 |
|-------------------|---|------------------------------|

Original Annual Statement Reserve for Disasters/ Emergencies Revised Annual Statement (revision no: 1)
 Performance and Evaluation Report for Period Ending: 09/30/2003 Final Performance and Evaluation Report

| Line No. | Summary by Development Account | Total Estimated Cost | | Total Actual Cost | |
|----------|---|----------------------|------------|-------------------|------------|
| | | Original | Revised | Obligated | Expended |
| 1 | Total non-CFP Funds | | | | |
| 2 | 1406 Operations | 57,000.00 | 115,904.00 | 115,904.00 | 115,904.00 |
| 3 | 1408 Management Improvements | 18,452.00 | 30,475.00 | 30,475.00 | 30,475.00 |
| 4 | 1410 Administration | 57,000.00 | 40,000.00 | 40,000.00 | 40,000.00 |
| 5 | 1411 Audit | 0.00 | 0.00 | 0.00 | 0.00 |
| 6 | 1415 Liquidated Damages | 0.00 | 0.00 | 0.00 | 0.00 |
| 7 | 1430 Fees and Costs | 82,372.00 | 85,000.00 | 85,000.00 | 85,000.00 |
| 8 | 1440 Site Acquisition | 0.00 | 0.00 | 0.00 | 0.00 |
| 9 | 1450 Site Improvement | 173,000.00 | 82,144.00 | 82,144.00 | 82,144.00 |
| 10 | 1460 Dwelling Structures | 191,699.00 | 216,000.00 | 0.00 | 0.00 |
| 11 | 1465.1 Dwelling Equipment—Nonexpendable | 0.00 | 0.00 | 0.00 | 0.00 |
| 12 | 1470 Nondwelling Structures | 0.00 | 0.00 | 0.00 | 0.00 |
| 13 | 1475 Nondwelling Equipment | 0.00 | 10,000.00 | 10,000.00 | 10,000.00 |
| 14 | 1485 Demolition | 0.00 | 0.00 | 0.00 | 0.00 |
| 15 | 1490 Replacement Reserve | 0.00 | 0.00 | 0.00 | 0.00 |
| 16 | 1492 Moving to Work Demonstration | 0.00 | 0.00 | 0.00 | 0.00 |
| 17 | 1495.1 Relocation Costs | 0.00 | 0.00 | 0.00 | 0.00 |
| 18 | 1499 Development Activities | 0.00 | 0.00 | 0.00 | 0.00 |
| 19 | 1501 Collateralization or Debt Service | 0.00 | 0.00 | 0.00 | 0.00 |
| 20 | 1502 Contingency | 0.00 | 0.00 | 0.00 | 0.00 |
| 21 | Amount of Annual Grant: (sum of lines 2 – 20) | 579,523.00 | 579,523.00 | 579,523.00 | 579,523.00 |
| 22 | Amount of line 21 Related to LBP Activities | 0.00 | 0.00 | 0.00 | 0.00 |

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

| | | |
|-------------------|---|------------------------------|
| PHA Name: Taunton | Grant Type and Number Capital Fund Program Grant No: MA06P01750100 Replacement Housing Factor Grant No: | Federal FY of Grant: 2000 |
|-------------------|---|------------------------------|

Original Annual Statement Reserve for Disasters/ Emergencies Revised Annual Statement (revision no: 1)
 Performance and Evaluation Report for Period Ending: 09/30/2003 Final Performance and Evaluation Report

| Line No. | Summary by Development Account | Total Estimated Cost | | Total Actual Cost | |
|----------|---|----------------------|---------|-------------------|----------|
| | | Original | Revised | Obligated | Expended |
| 23 | Amount of line 21 Related to Section 504 compliance | 0.00 | 0.00 | 0.00 | 0.00 |
| 24 | Amount of line 21 Related to Security – Soft Costs | 0.00 | 0.00 | 0.00 | 0.00 |
| 25 | Amount of Line 21 Related to Security – Hard Costs | 0.00 | 0.00 | 0.00 | 0.00 |
| 26 | Amount of line 21 Related to Energy Conservation Measures | 0.00 | 0.00 | 0.00 | 0.00 |

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

| PHA Name: Taunton | | Grant Type and Number Capital Fund Program Grant No: MA06P01750100 Replacement Housing Factor Grant No: | | | | Federal FY of Grant: 2000 | | |
|---|---|---|----------|----------------------|------------|---------------------------|----------------|----------------|
| Development Number Name/HA-Wide Activities | General Description of Major Work Categories | Dev. Acct No. | Quantity | Total Estimated Cost | | Total Actual Cost | | Status of Work |
| | | | | Original | Revised | Funds Obligated | Funds Expended | |
| 17-2 Gwozdz | Roofs | 1460 | 6 | 60,000.00 | 60,000.00 | 60,000.00 | 60,000.00 | Complete |
| 17-2 Gwozdz | Kitchen Renovation | 1460 | 24 | 156,000.00 | 156,000.00 | 156,000.00 | 156,000.00 | Complete |
| 17-2 Gwozdz | Repair Parking & Walkways | 1450 | 1 Site | 20,000.00 | 20,000.00 | 20,000.00 | 20,000.00 | Complete |
| 17-3 Cedarvale | Repair Roadways & Walkways | 1450 | 1 Site | 57,000.00 | 57,000.00 | 57,000.00 | 57,000.00 | Complete |
| 17-4 Presbrey/ Massasoit | Repair & Redesign Entryway & Sidewalks | 1450 | 1 Site | 0.00 | 5,144.00 | 5,144.00 | 5,144.00 | Complete |
| PHA Wide | Operations | 1406 | - | 57,000.00 | 115,904.00 | 115,904.00 | 115,904.00 | |
| PHA Wide | Employee/Resident Training, Police, Computer Software | 1408 | - | 18,452.00 | 30,475.00 | 30,475.00 | 30,475.00 | Complete |
| PHA Wide | Salaries | 1410 | - | 57,000.00 | 40,000.00 | 40,000.00 | 40,000.00 | |
| PHA Wide | Computer Hardware | 1475 | - | 0.00 | 10,000.00 | 10,000.00 | 10,000.00 | |
| 17-2, 17-3 | Architectural/Engineering Fees & Costs | 1430 | - | 82,372.00 | 85,000.00 | 85,000.00 | 85,000.00 | |

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

| PHA Name: Taunton | | Grant Type and Number Capital Fund Program No: MA06P01750100 Replacement Housing Factor No: | | | | Federal FY of Grant: 2000 | |
|--|---|---|--------|---|---------|---------------------------|----------------------------------|
| Development Number Name/HA-Wide Activities | All Fund Obligated (Quarter Ending Date) | | | All Funds Expended (Quarter Ending Date) | | | Reasons for Revised Target Dates |
| | Original | Revised | Actual | Original | Revised | Actual | |
| 17-2 Gwozdz | 03/31/2002 | 09/30/2002 | | 09/30/2003 | | | |
| 17-3 Cedarvale | 03/31/2002 | 09/30/2002 | | 09/30/2003 | | | |
| 17-4 Presbrey/Massasoit | 03/31/2002 | 09/30/2002 | | 09/30/2003 | | | |
| PHA Wide | 03/31/2002 | 09/30/2002 | | 09/30/2003 | | | |
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Annual Statement/Performance and Evaluation Report
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I: Summary

| | | |
|-------------------|---|---------------------------------|
| PHA Name: Taunton | Grant Type and Number Capital Fund Program Grant No: MA06P01750101 Replacement Housing Factor Grant No: | Federal FY of Grant: 10-2001 |
|-------------------|---|---------------------------------|

Original Annual Statement Reserve for Disasters/ Emergencies Revised Annual Statement (revision no: 2)
 Performance and Evaluation Report for Period Ending: 09/30/2003 Final Performance and Evaluation Report

| Line No. | Summary by Development Account | Total Estimated Cost | | Total Actual Cost | |
|----------|---|----------------------|------------|-------------------|------------|
| | | Original | Revised | Obligated | Expended |
| 1 | Total non-CFP Funds | | | | |
| 2 | 1406 Operations | 75,385.00 | 118,256.00 | 118,256.00 | 118,256.00 |
| 3 | 1408 Management Improvements | 24,500.00 | 40,272.00 | 40,272.00 | 40,272.00 |
| 4 | 1410 Administration | 57,000.00 | 40,000.00 | 40,000.00 | 40,000.00 |
| 5 | 1411 Audit | 0.00 | 0.00 | 0.00 | 0.00 |
| 6 | 1415 Liquidated Damages | 0.00 | 0.00 | 0.00 | 0.00 |
| 7 | 1430 Fees and Costs | 95,000.00 | 25,000.00 | 25,000.00 | 25,000.00 |
| 8 | 1440 Site Acquisition | 0.00 | 0.00 | 0.00 | 0.00 |
| 9 | 1450 Site Improvement | 163,000.00 | 270,156.00 | 270,156.00 | 234,867.15 |
| 10 | 1460 Dwelling Structures | 166,399.00 | 87,600.00 | 87,600.00 | 71,398.00 |
| 11 | 1465.1 Dwelling Equipment—Nonexpendable | 0.00 | 0.00 | 0.00 | 0.00 |
| 12 | 1470 Nondwelling Structures | 0.00 | 0.00 | 0.00 | 0.00 |
| 13 | 1475 Nondwelling Equipment | 10,000.00 | 10,000.00 | 10,000.00 | 8,848.65 |
| 14 | 1485 Demolition | 0.00 | 0.00 | 0.00 | 0.00 |
| 15 | 1490 Replacement Reserve | 0.00 | 0.00 | 0.00 | 0.00 |
| 16 | 1492 Moving to Work Demonstration | 0.00 | 0.00 | 0.00 | 0.00 |
| 17 | 1495.1 Relocation Costs | 0.00 | 0.00 | 0.00 | 0.00 |
| 18 | 1499 Development Activities | 0.00 | 0.00 | 0.00 | 0.00 |
| 19 | 1501 Collateralization or Debt Service | 0.00 | 0.00 | 0.00 | 0.00 |
| 20 | 1502 Contingency | 0.00 | 0.00 | 0.00 | 0.00 |
| 21 | Amount of Annual Grant: (sum of lines 2 – 20) | 591,284.00 | 591,284.00 | 591,284.00 | 538,641.80 |
| 22 | Amount of line 21 Related to LBP Activities | 0.00 | 0.00 | 0.00 | 0.00 |

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

| | | |
|-------------------|---|---------------------------------|
| PHA Name: Taunton | Grant Type and Number Capital Fund Program Grant No: MA06P01750101 Replacement Housing Factor Grant No: | Federal FY of Grant: 10-2001 |
|-------------------|---|---------------------------------|

Original Annual Statement Reserve for Disasters/ Emergencies Revised Annual Statement (revision no: 2)
 Performance and Evaluation Report for Period Ending: 09/30/2003 Final Performance and Evaluation Report

| Line No. | Summary by Development Account | Total Estimated Cost | | Total Actual Cost | |
|----------|---|----------------------|---------|-------------------|----------|
| | | Original | Revised | Obligated | Expended |
| 23 | Amount of line 21 Related to Section 504 compliance | 0.00 | 0.00 | 0.00 | 0.00 |
| 24 | Amount of line 21 Related to Security – Soft Costs | 0.00 | 0.00 | 0.00 | 0.00 |
| 25 | Amount of Line 21 Related to Security – Hard Costs | 0.00 | 0.00 | 0.00 | 0.00 |
| 26 | Amount of line 21 Related to Energy Conservation Measures | 0.00 | 0.00 | 0.00 | 0.00 |

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

| PHA Name: Taunton | | Grant Type and Number Capital Fund Program Grant No: MA06P01750101 Replacement Housing Factor Grant No: | | | | Federal FY of Grant: 10-2001 | | |
|---|---|---|----------|----------------------|------------|------------------------------|----------------|-----------------------|
| Development Number Name/HA-Wide Activities | General Description of Major Work Categories | Dev. Acct No. | Quantity | Total Estimated Cost | | Total Actual Cost | | Status of Work |
| | | | | Original | Revised | Funds Obligated | Funds Expended | |
| 17-3 Cedarvale | Site Improvements | 1450 | 1 Site | | 77,460.00 | 77,460.00 | 42,172.15 | In Progress |
| 17-3 Cedarvale | Replace Bathrooms | 1460 | 60 | 150,000.00 | 0.00 | 0.00 | 0.00 | Moved to another year |
| 17-2 Gwozdz | Site Improvements | 1450 | 1 Site | | 192,696.00 | 192,696.00 | 192,696.00 | Complete |
| 17-2 Gwozdz | Replace Kitchens & Bathrooms | 1460 | 24 | | 108,035.00 | 108,035.00 | 91,833.00 | In Progress |
| PHA Wide | Maintenance Workshop | 1460 | 1 Site | 77,756.00 | 0.00 | 0.00 | 0.00 | Moved to another year |
| 17-2, 17-3, & PHA Wide Workshop | Architectural/Engineering Fees & Costs | 1430 | - | 95,000.00 | 9,154.00 | 9,154.00 | 9,154.00 | Complete |
| PHA Wide | Operations | 1406 | - | 75,385.00 | 118,256.00 | 118,256.00 | 118,256.00 | |
| PHA Wide | Employee/Resident Training, Police, Computer Software | 1408 | - | 24,500.00 | 40,272.00 | 40,272.00 | 40,272.00 | |
| PHA Wide | Salaries | 1410 | - | 57,000.00 | 40,000.00 | 40,000.00 | 40,000.00 | |
| PHA Wide | Computer Hardware | 1475 | - | 10,000.00 | 5,411.00 | 5,411.00 | 4,259.65 | |

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

| PHA Name: Taunton | | Grant Type and Number Capital Fund Program No: MA06P01750101 Replacement Housing Factor No: | | | | | Federal FY of Grant: 10-2001 | |
|--|---|--|--------|---|------------|------------|-------------------------------------|--|
| Development Number Name/HA-Wide Activities | All Fund Obligated (Quarter Ending Date) | | | All Funds Expended (Quarter Ending Date) | | | Reasons for Revised Target Dates | |
| | Original | Revised | Actual | Original | Revised | Actual | | |
| 17-3 Cedarvale | 03/31/2003 | | | 09/30/2004 | | | | |
| 17-2 Gwozdz | 03/31/2003 | | | 09/30/2004 | | | | |
| PHA Wide Maintenance Workshop | 03/31/2003 | | | 09/30/2004 | Not Funded | Not Funded | Not to be funded in 2001 CFP | |
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CAPITAL FUND PROGRAM TABLES START HERE

| Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I: Summary | | | | | |
|---|---|---|---------|-------------------|------------------------------|
| PHA Name: Taunton | | Grant Type and Number Capital Fund Program Grant No: MA06P01750103 Replacement Housing Factor Grant No: | | | Federal FY of Grant: 2003 |
| <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) | | | | | |
| <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 06/30/04 <input type="checkbox"/> Final Performance and Evaluation Report | | | | | |
| Line No. | Summary by Development Account | Total Estimated Cost | | Total Actual Cost | |
| | | Original | Revised | Obligated | Expended |
| 1 | Total non-CFP Funds | | | | |
| 2 | 1406 Operations | 111,761.00 | 0.00 | 111,761.00 | 111,761.00 |
| 3 | 1408 Management Improvements | 24,523.00 | 0.00 | 24,523.00 | 24,523.00 |
| 4 | 1410 Administration | 50,000.00 | 0.00 | 50,000.00 | 46,630.00 |
| 5 | 1411 Audit | 0.00 | 0.00 | 0.00 | 0.00 |
| 6 | 1415 Liquidated Damages | 0.00 | 0.00 | 0.00 | 0.00 |
| 7 | 1430 Fees and Costs | 38,000.00 | 0.00 | 38,000.00 | 20,454.00 |
| 8 | 1440 Site Acquisition | 0.00 | 0.00 | 0.00 | 0.00 |
| 9 | 1450 Site Improvement | 0.00 | 0.00 | 0.00 | 0.00 |
| 10 | 1460 Dwelling Structures | 202,237.00 | 0.00 | 203,237.00 | 0.00 |
| 11 | 1465.1 Dwelling Equipment—Nonexpendable | 0.00 | 0.00 | 0.00 | 0.00 |
| 12 | 1470 Nondwelling Structures | 0.00 | 0.00 | 0.00 | 0.00 |
| 13 | 1475 Nondwelling Equipment | 10,000.00 | 0.00 | 10,000.00 | 0.00 |
| 14 | 1485 Demolition | 0.00 | 0.00 | 0.00 | 0.00 |
| 15 | 1490 Replacement Reserve | 0.00 | 0.00 | 0.00 | 0.00 |
| 16 | 1492 Moving to Work Demonstration | 0.00 | 0.00 | 0.00 | 0.00 |
| 17 | 1495.1 Relocation Costs | 0.00 | 0.00 | 0.00 | 0.00 |
| 18 | 1499 Development Activities | 0.00 | 0.00 | 0.00 | 0.00 |
| 19 | 1501 Collaterization or Debt Service | 0.00 | 0.00 | 0.00 | 0.00 |

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

| | | |
|-------------------|---|------------------------------|
| PHA Name: Taunton | Grant Type and Number Capital Fund Program Grant No: MA06P01750103 Replacement Housing Factor Grant No: | Federal FY of Grant: 2003 |
|-------------------|---|------------------------------|

Original Annual Statement Reserve for Disasters/ Emergencies Revised Annual Statement (revision no:)
 Performance and Evaluation Report for Period Ending: 06/30/04 Final Performance and Evaluation Report

| Line No. | Summary by Development Account | Total Estimated Cost | | Total Actual Cost | |
|----------|---|----------------------|---------|-------------------|------------|
| | | Original | Revised | Obligated | Expended |
| 20 | 1502 Contingency | 0.00 | 0.00 | 0.00 | 0.00 |
| 21 | Amount of Annual Grant: (sum of lines 2 – 20) | 436,521.00 | 0.00 | 436,521.00 | 203,368.00 |
| 22 | Amount of line 21 Related to LBP Activities | 0.00 | 0.00 | 0.00 | 0.00 |
| 23 | Amount of line 21 Related to Section 504 compliance | 0.00 | 0.00 | 0.00 | 0.00 |
| 24 | Amount of line 21 Related to Security – Soft Costs | 0.00 | 0.00 | 0.00 | 0.00 |
| 25 | Amount of Line 21 Related to Security – Hard Costs | 0.00 | 0.00 | 0.00 | 0.00 |
| 26 | Amount of line 21 Related to Energy Conservation Measures | 0.00 | 0.00 | 0.00 | 0.00 |

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

| PHA Name: Taunton | | Grant Type and Number Capital Fund Program Grant No: MA06P01750103 Replacement Housing Factor Grant No: | | | | Federal FY of Grant: 2003 | | |
|---|---|---|-----------|----------------------|------------|---------------------------|----------------|----------------|
| Development Number Name/HA-Wide Activities | General Description of Major Work Categories | Dev. Acct No. | Quantity | Total Estimated Cost | | Total Actual Cost | | Status of Work |
| | | | | Original | Revised | Funds Obligated | Funds Expended | |
| 17-3 Cedarvale | Kitchen & Bathroom Renovations | 1460 | 60 | 422,254.00 | 0.00 | 0.00 | 0.00 | |
| PHA Wide | Operations | 1406 | - | 0.00 | 111,761.00 | 111,761.00 | 111,761.00 | |
| PHA Wide | Employee/Resident Training, Police, Computer Software | 1408 | - | 50,000.00 | 24,523.00 | 24,523.00 | 24,523.00 | |
| PHA Wide | Salaries | 1410 | - | 40,000.00 | 50,000.00 | 50,000.00 | 46,630.00 | |
| 17-1 Fairfax, 17-3 Cedarvale | Architectural & Engineering Fees & Costs | 1430 | - | 50,000.00 | 38,000.00 | 38,000.00 | 20,454.00 | |
| PHA Wide | Computer Hardware | 1475 | - | 10,000.00 | 10,000.00 | 0.00 | 0.00 | |
| 17-1 Fairfax | New Roofs | 1460 | 29 | 65,237.00 | 202,237.00 | 0.00 | 0.00 | In Process |
| 17-1 Fairfax | New Steps & Landings | 1460 | 150 | 0.00 | 0.00 | 0.00 | 0.00 | |
| 17-1 Fairfax | Site Lighting Improvements | 1460 | Site Wide | 0.00 | 0.00 | 0.00 | 0.00 | |

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

| PHA Name: Taunton | | Grant Type and Number Capital Fund Program No: MA06P01750103 Replacement Housing Factor No: | | | | | Federal FY of Grant: 2003 | |
|--|---|--|--------|---|---------|--------|----------------------------------|--|
| Development Number Name/HA-Wide Activities | All Fund Obligated (Quarter Ending Date) | | | All Funds Expended (Quarter Ending Date) | | | Reasons for Revised Target Dates | |
| | Original | Revised | Actual | Original | Revised | Actual | | |
| 17-1 Fairfax | 05/30/2005 | | | 05/30/2006 | | | | |
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CAPITAL FUND PROGRAM TABLES START HERE

| Annual Statement/Performance and Evaluation Report | | | | | |
|--|---|---|------------|-------------------|------------------------------|
| Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I: Summary | | | | | |
| PHA Name: Taunton | | Grant Type and Number Capital Fund Program Grant No: MA06P01750102 Replacement Housing Factor Grant No: | | | Federal FY of Grant: 2002 |
| <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input checked="" type="checkbox"/> Revised Annual Statement (revision no: 1) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 09/30/2003 <input type="checkbox"/> Final Performance and Evaluation Report | | | | | |
| Line No. | Summary by Development Account | Total Estimated Cost | | Total Actual Cost | |
| | | Original | Revised | Obligated | Expended |
| 1 | Total non-CFP Funds | | | | |
| 2 | 1406 Operations | 76,784.00 | 94,450.00 | 94,450.00 | 94,450.00 |
| 3 | 1408 Management Improvements | 24,500.00 | 24,500.00 | 24,500.00 | 24,500.00 |
| 4 | 1410 Administration | 40,000.00 | 40,000.00 | 40,000.00 | 40,000.00 |
| 5 | 1411 Audit | 0.00 | 0.00 | 0.00 | 0.00 |
| 6 | 1415 Liquidated Damages | 0.00 | 0.00 | 0.00 | 0.00 |
| 7 | 1430 Fees and Costs | 50,000.00 | 58,000.00 | 58,000.00 | 0.00 |
| 8 | 1440 Site Acquisition | 0.00 | 0.00 | 0.00 | 0.00 |
| 9 | 1450 Site Improvement | 0.00 | 138,704.00 | 138,704.00 | 27,297.75 |
| 10 | 1460 Dwelling Structures | 390,000.00 | 196,600.00 | 189,600.00 | 0.00 |
| 11 | 1465.1 Dwelling Equipment—Nonexpendable | 0.00 | 0.00 | 0.00 | 0.00 |
| 12 | 1470 Nondwelling Structures | 0.00 | 0.00 | 0.00 | 0.00 |
| 13 | 1475 Nondwelling Equipment | 10,000.00 | 10,000.00 | 10,000.00 | 0.00 |
| 14 | 1485 Demolition | 0.00 | 0.00 | 0.00 | 0.00 |
| 15 | 1490 Replacement Reserve | 0.00 | 0.00 | 0.00 | 0.00 |
| 16 | 1492 Moving to Work Demonstration | 0.00 | 0.00 | 0.00 | 0.00 |
| 17 | 1495.1 Relocation Costs | 0.00 | 0.00 | 0.00 | 0.00 |
| 18 | 1499 Development Activities | 0.00 | 0.00 | 0.00 | 0.00 |
| 19 | 1501 Collaterization or Debt Service | 0.00 | 0.00 | 0.00 | 0.00 |

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

| | | |
|-------------------|---|------------------------------|
| PHA Name: Taunton | Grant Type and Number Capital Fund Program Grant No: MA06P01750102 Replacement Housing Factor Grant No: | Federal FY of Grant: 2002 |
|-------------------|---|------------------------------|

Original Annual Statement Reserve for Disasters/ Emergencies Revised Annual Statement (revision no: 1)
 Performance and Evaluation Report for Period Ending: 09/30/2003 Final Performance and Evaluation Report

| Line No. | Summary by Development Account | Total Estimated Cost | | Total Actual Cost | |
|----------|---|----------------------|------------|-------------------|------------|
| | | Original | Revised | Obligated | Expended |
| 20 | 1502 Contingency | 0.00 | 0.00 | 0.00 | 0.00 |
| 21 | Amount of Annual Grant: (sum of lines 2 – 20) | 591,284.00 | 562,254.00 | 555,254.00 | 186,247.75 |
| 22 | Amount of line 21 Related to LBP Activities | 0.00 | 0.00 | 0.00 | 0.00 |
| 23 | Amount of line 21 Related to Section 504 compliance | 0.00 | 0.00 | 0.00 | 0.00 |
| 24 | Amount of line 21 Related to Security – Soft Costs | 0.00 | 0.00 | 0.00 | 0.00 |
| 25 | Amount of Line 21 Related to Security – Hard Costs | 0.00 | 0.00 | 0.00 | 0.00 |
| 26 | Amount of line 21 Related to Energy Conservation Measures | 0.00 | 0.00 | 0.00 | 0.00 |

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

| PHA Name: Taunton | | Grant Type and Number Capital Fund Program Grant No: MA06P01750102 Replacement Housing Factor Grant No: | | | | Federal FY of Grant: 2002 | | |
|---|---|---|----------|----------------------|------------|---------------------------|----------------|----------------|
| Development Number Name/HA-Wide Activities | General Description of Major Work Categories | Dev. Acct No. | Quantity | Total Estimated Cost | | Total Actual Cost | | Status of Work |
| | | | | Original | Revised | Funds Obligated | Funds Expended | |
| 17-3 Cedarvale | Kitchen & Bathroom Renovations | 1460 | 60 | 244,600.00 | 196,600.00 | 196,600.00 | 0.00 | In Planning |
| 17-3 Cedarvale | Site Improvements | 1450 | 1 Site | 0.00 | 40,000.00 | 0.00 | 0.00 | In Planning |
| 17-2 Gwozdz | Site Improvements | 1450 | 1 Site | 83,704.00 | 91,704.00 | 91,704.00 | 27,297.75 | In Planning |
| 17-1 Fairfax | Site Improvement – Playground | 1450 | 1 Site | 0.00 | 7,000.00 | 0.00 | 0.00 | In Planning |
| PHA Wide | Operations | 1406 | - | 0.00 | 94,450.00 | 94,450.00 | 94,450.00 | |
| PHA Wide | Employee/Resident Training, Police, Computer Software | 1408 | - | 24,500.00 | 24,500.00 | 24,500.00 | 24,500.00 | |
| PHA Wide | Salaries | 1410 | - | 40,000.00 | 40,000.00 | 40,000.00 | 40,000.00 | |
| 17-3 Cedarvale | Architectural & Engineering Fees & Costs | 1430 | - | 58,000.00 | 58,000.00 | 58,800.00 | 0.00 | |
| PHA Wide | Computer Hardware | 1475 | - | 10,000.00 | 10,000.00 | 10,000.00 | 0.00 | |

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

| PHA Name: Taunton | | Grant Type and Number Capital Fund Program No: MA06P01750102 Replacement Housing Factor No: | | | | Federal FY of Grant: 2002 | |
|--|---|--|------------|---|---------|----------------------------------|----------------------------------|
| Development Number Name/HA-Wide Activities | All Fund Obligated (Quarter Ending Date) | | | All Funds Expended (Quarter Ending Date) | | | Reasons for Revised Target Dates |
| | Original | Revised | Actual | Original | Revised | Actual | |
| 17-3 Cedarvale | 05/30/2003 | | 03/31/2003 | 05/30/2005 | | | |
| 17-1 Fairfax | 05/30/2004 | | | 05/30/2005 | | | |
| 17-2 Gwozdz | 09/30/2002 | | | 05/30/2005 | | | |
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COMMUNITY SERVICE REQUIREMENTS

GENERAL REQUIREMENTS

As part of the Quality Housing and Work Responsibility Act of 1998, Congress imposed a requirement that all adult residents of federally funded public housing, unless specifically exempted, must perform community service activities or participate in an economic self-sufficiency program to remain eligible for public housing assistance. Therefore the federal public housing lease now provides that all non-exempt residents must:

- Contribute 8 hours per month of community service (not including political activity); or
- Participate in an economic self-sufficiency program for 8 hours per month; or
- Perform eight hours each month of combined community service and self-sufficiency activities.

DEFINITIONS

Community Service: For the purpose of this policy, community service is the performance of voluntary work or duties for 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 in which the resident resides. Community service is not limited to a single type of activity or a single location. Acceptable community service activities include, but are not limited to, improving the physical environment of the resident's development; volunteer work in a local school, hospital or child care center; working with youth organizations; or helping neighborhood groups on special projects. By statute, political activity is not an eligible form of community service.

Economic Self-Sufficiency Program: For the purpose of this policy, an economic self-sufficiency program is any program 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, but are not limited to: programs for job training, employment training, work placement, basic skills training, education, English language proficiency, work fare, financial or household management, apprenticeship, and any program necessary to ready a participant to work, such as substance abuse or mental health treatment.

NOTIFICATION OF RESIDENTS

The Taunton Housing Authority will notify all residents of the new community service requirement before the implementation of this policy. The notification will include an explanation of the program and will list the categories of individuals who are exempt from performing community service activities. The notification will describe the verification that will be required to establish an exemption. Definitions and examples of community service and economic self-sufficiency activities will be part of the notice. The notification will also advise families when the community service obligation will begin. Non-exempt residents will be required to begin performing community service at their first lease renewal date following the adoption of this policy.

EXEMPTIONS

The following residents over the age of eighteen are exempt from this requirement:

1. Resident household members who are 62 or older;
2. Resident household members who are blind or disabled as defined in the Social Security Act (Section 216 (i) (1) or Section 1614 of the Social Security Act (42 USC 416 (i) (1); 1382c);

The Social Security Act defines disability as the “inability to engage in any substantial gainful activity by reason of any medically determinable physical or mental impairment which can be expected to result in death or has lasted or can be expected to last for a continuous period of not less than twelve months.”

Blindness is defined as “central visual acuity of 20/200 or less in the better eye with the use of a correcting lens. An eye which is accompanied by a limitation in the fields of vision such that the widest diameter of the visual field subtends an angle no less than 20 degrees shall be considered for purposes of this paragraph as having a central visual acuity of 20/200 or less.”

Residents who claim exemption because of disability or blindness must also certify that because of this blindness or disability they are unable to comply with the community service requirement. If a resident does not meet this definition of blindness or disability and believes that he or she is unable to perform community service or economic self-sufficiency activity, he or she may apply for an exemption from the requirement as a reasonable accommodation under the THA Reasonable Accommodation in Housing Policy (RAHP). An application for reasonable accommodation can be obtained at the development management office.

3. Resident household members who are the primary care giver of a blind or disabled individual as described in paragraph 2;

4. Resident household members who are engaged in a work activity as defined under section 407 (d) of the Social Security Act (42 USC 607 (d), as in effect on and after July 1, 1997);

Work activities are:

- Unsubsidized employment;
 - Subsidized private sector employment;
 - Subsidized public sector employment;
 - Work experience, including work associated with refurbishing; publicly assisted housing, if sufficient private sector employment is not available;
 - On-the-job training;
 - Job search and job readiness assistance;
 - Community service programs;
 - Vocational educational training not to exceed twelve months;
 - Job skills training directly related to employment;
 - Education directly related to employment for a resident who has not received a high school diploma or a certificate of high school equivalency;
 - Satisfactory attendance at a secondary school or in a course of study leading to a certificate of general equivalence for a resident who has not completed high school or received such a certificate; or
 - The provision of childcare services to an individual who is participating in a community service program.
5. Resident household members who are exempt from work activity under Part A of Title IV of the Social Security Act (42 USC Section 601 et seq.) or under any other state welfare program, including a State-administered welfare-to-work program; or
 6. Resident household member of a family receiving assistance, benefits or services under a State program funded under part A of Title IV of the Social Security Act (42 USC 601 et seq.) or under any other state welfare program, including a State-administered welfare-to-work program, and is in compliance with all provisions of that program.

In accordance with HUD guidelines, persons eligible for a disability deduction in rent are not automatically exempt from the community service requirement. A resident is exempt only to the extent the disability makes the person “unable to comply” with the community service requirement.

CAPITAL FUND PROGRAM TABLES START HERE

| Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I: Summary | | | | | |
|---|---|---|---------|-------------------|------------------------------|
| PHA Name: Taunton | | Grant Type and Number Capital Fund Program Grant No: MA06P01750105 Replacement Housing Factor Grant No: | | | Federal FY of Grant: 2005 |
| <input checked="" type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) <input type="checkbox"/> Performance and Evaluation Report for Period Ending: <input type="checkbox"/> Final Performance and Evaluation Report | | | | | |
| Line No. | Summary by Development Account | Total Estimated Cost | | Total Actual Cost | |
| | | Original | Revised | Obligated | Expended |
| 1 | Total non-CFP Funds | | | | |
| 2 | 1406 Operations | 15,754.00 | 0.00 | 0.00 | 0.00 |
| 3 | 1408 Management Improvements | 30,000.00 | 0.00 | 0.00 | 0.00 |
| 4 | 1410 Administration | 40,000.00 | 0.00 | 0.00 | 0.00 |
| 5 | 1411 Audit | 0.00 | 0.00 | 0.00 | 0.00 |
| 6 | 1415 Liquidated Damages | 0.00 | 0.00 | 0.00 | 0.00 |
| 7 | 1430 Fees and Costs | 30,000.00 | 0.00 | 0.00 | 0.00 |
| 8 | 1440 Site Acquisition | 0.00 | 0.00 | 0.00 | 0.00 |
| 9 | 1450 Site Improvement | 0.00 | 0.00 | 0.00 | 0.00 |
| 10 | 1460 Dwelling Structures | 410,000.00 | 0.00 | 0.00 | 0.00 |
| 11 | 1465.1 Dwelling Equipment—Nonexpendable | 0.00 | 0.00 | 0.00 | 0.00 |
| 12 | 1470 Nondwelling Structures | 0.00 | 0.00 | 0.00 | 0.00 |
| 13 | 1475 Nondwelling Equipment | 10,000.00 | 0.00 | 0.00 | 0.00 |
| 14 | 1485 Demolition | 0.00 | 0.00 | 0.00 | 0.00 |
| 15 | 1490 Replacement Reserve | 0.00 | 0.00 | 0.00 | 0.00 |
| 16 | 1492 Moving to Work Demonstration | 0.00 | 0.00 | 0.00 | 0.00 |
| 17 | 1495.1 Relocation Costs | 0.00 | 0.00 | 0.00 | 0.00 |
| 18 | 1499 Development Activities | 0.00 | 0.00 | 0.00 | 0.00 |
| 19 | 1501 Collaterization or Debt Service | 0.00 | 0.00 | 0.00 | 0.00 |

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

| | | |
|-------------------|---|------------------------------|
| PHA Name: Taunton | Grant Type and Number Capital Fund Program Grant No: MA06P01750105 Replacement Housing Factor Grant No: | Federal FY of Grant: 2005 |
|-------------------|---|------------------------------|

Original Annual Statement Reserve for Disasters/ Emergencies Revised Annual Statement (revision no:)
 Performance and Evaluation Report for Period Ending: Final Performance and Evaluation Report

| Line No. | Summary by Development Account | Total Estimated Cost | | Total Actual Cost | |
|----------|---|----------------------|---------|-------------------|----------|
| | | Original | Revised | Obligated | Expended |
| 20 | 1502 Contingency | 0.00 | 0.00 | 0.00 | 0.00 |
| 21 | Amount of Annual Grant: (sum of lines 2 – 20) | 535,754.00 | 0.00 | 0.00 | 0.00 |
| 22 | Amount of line 21 Related to LBP Activities | 0.00 | 0.00 | 0.00 | 0.00 |
| 23 | Amount of line 21 Related to Section 504 compliance | 0.00 | 0.00 | 0.00 | 0.00 |
| 24 | Amount of line 21 Related to Security – Soft Costs | 0.00 | 0.00 | 0.00 | 0.00 |
| 25 | Amount of Line 21 Related to Security – Hard Costs | 0.00 | 0.00 | 0.00 | 0.00 |
| 26 | Amount of line 21 Related to Energy Conservation Measures | 0.00 | 0.00 | 0.00 | 0.00 |

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

| PHA Name: Taunton | | Grant Type and Number Capital Fund Program Grant No: MA06P01750105 Replacement Housing Factor Grant No: | | | | Federal FY of Grant: 2005 | | |
|---|---|---|----------|----------------------|---------|---------------------------|----------------|----------------|
| Development Number Name/HA-Wide Activities | General Description of Major Work Categories | Dev. Acct No. | Quantity | Total Estimated Cost | | Total Actual Cost | | Status of Work |
| | | | | Original | Revised | Funds Obligated | Funds Expended | |
| 17-1 Fairfax | Replace Windows & Siding | 1460 | 29 | 410,000.00 | | | | |
| PHA Wide | Salaries | 1410 | - | 40,000.00 | | | | |
| PHA Wide | Operations | 1408 | - | 15,754.00 | | | | |
| PHA Wide | Computer Hardware | 1475 | - | 10,000.00 | | | | |
| PHA Wide | Employee/Resident Training, Police, Computer Software | 1408 | - | 30,000.00 | | | | |
| 17-1 Fairfax | A/E Fees & Costs | 1430 | - | 30,000.00 | | | | |
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**Annual Statement/Performance and Evaluation Report
 Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)
 Part III: Implementation Schedule**

| PHA Name: Taunton | | Grant Type and Number Capital Fund Program No: MA06P01750105 Replacement Housing Factor No: | | | | | Federal FY of Grant: 2005 |
|--|---|---|--------|---|---------|--------|----------------------------------|
| Development Number Name/HA-Wide Activities | All Fund Obligated (Quarter Ending Date) | | | All Funds Expended (Quarter Ending Date) | | | Reasons for Revised Target Dates |
| | Original | Revised | Actual | Original | Revised | Actual | |
| 17-1 Fairfax | 05/30/2007 | | | 05/30/2007 | | | |
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CAPITAL FUND PROGRAM TABLES START HERE

| Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I: Summary | | | | | |
|---|---|---|---------|-------------------|------------------------------|
| PHA Name: Taunton | | Grant Type and Number Capital Fund Program Grant No: MA06P01750203 Replacement Housing Factor Grant No: | | | Federal FY of Grant: 2003 |
| <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) | | | | | |
| <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 06/30/04 <input type="checkbox"/> Final Performance and Evaluation Report | | | | | |
| Line No. | Summary by Development Account | Total Estimated Cost | | Total Actual Cost | |
| | | Original | Revised | Obligated | Expended |
| 1 | Total non-CFP Funds | | | | |
| 2 | 1406 Operations | 0.00 | 0.00 | 0.00 | 0.00 |
| 3 | 1408 Management Improvements | 0.00 | 0.00 | 0.00 | 0.00 |
| 4 | 1410 Administration | 0.00 | 0.00 | 0.00 | 0.00 |
| 5 | 1411 Audit | 0.00 | 0.00 | 0.00 | 0.00 |
| 6 | 1415 Liquidated Damages | 0.00 | 0.00 | 0.00 | 0.00 |
| 7 | 1430 Fees and Costs | 0.00 | 0.00 | 0.00 | 0.00 |
| 8 | 1440 Site Acquisition | 0.00 | 0.00 | 0.00 | 0.00 |
| 9 | 1450 Site Improvement | 0.00 | 0.00 | 0.00 | 0.00 |
| 10 | 1460 Dwelling Structures | 92,197.00 | 0.00 | 92,197.00 | 0.00 |
| 11 | 1465.1 Dwelling Equipment—Nonexpendable | 0.00 | 0.00 | 0.00 | 0.00 |
| 12 | 1470 Nondwelling Structures | 0.00 | 0.00 | 0.00 | 0.00 |
| 13 | 1475 Nondwelling Equipment | 0.00 | 0.00 | 0.00 | 0.00 |
| 14 | 1485 Demolition | 0.00 | 0.00 | 0.00 | 0.00 |
| 15 | 1490 Replacement Reserve | 0.00 | 0.00 | 0.00 | 0.00 |
| 16 | 1492 Moving to Work Demonstration | 0.00 | 0.00 | 0.00 | 0.00 |
| 17 | 1495.1 Relocation Costs | 0.00 | 0.00 | 0.00 | 0.00 |
| 18 | 1499 Development Activities | 0.00 | 0.00 | 0.00 | 0.00 |
| 19 | 1501 Collaterization or Debt Service | 0.00 | 0.00 | 0.00 | 0.00 |

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

| | | |
|-------------------|---|------------------------------|
| PHA Name: Taunton | Grant Type and Number Capital Fund Program Grant No: MA06P01750203 Replacement Housing Factor Grant No: | Federal FY of Grant: 2003 |
|-------------------|---|------------------------------|

Original Annual Statement
 Reserve for Disasters/ Emergencies
 Revised Annual Statement (revision no:)
 Performance and Evaluation Report for Period Ending: 06/30/04
 Final Performance and Evaluation Report

| Line No. | Summary by Development Account | Total Estimated Cost | | Total Actual Cost | |
|----------|---|----------------------|---------|-------------------|----------|
| | | Original | Revised | Obligated | Expended |
| 20 | 1502 Contingency | 0.00 | 0.00 | 0.00 | 0.00 |
| 21 | Amount of Annual Grant: (sum of lines 2 – 20) | 92,197.00 | 0.00 | 92,197.00 | 0.00 |
| 22 | Amount of line 21 Related to LBP Activities | 0.00 | 0.00 | 0.00 | 0.00 |
| 23 | Amount of line 21 Related to Section 504 compliance | 0.00 | 0.00 | 0.00 | 0.00 |
| 24 | Amount of line 21 Related to Security – Soft Costs | 0.00 | 0.00 | 0.00 | 0.00 |
| 25 | Amount of Line 21 Related to Security – Hard Costs | 0.00 | 0.00 | 0.00 | 0.00 |
| 26 | Amount of line 21 Related to Energy Conservation Measures | 0.00 | 0.00 | 0.00 | 0.00 |

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

| PHA Name: Taunton | | Grant Type and Number Capital Fund Program Grant No: MA06P01750203 Replacement Housing Factor Grant No: | | | | Federal FY of Grant: 2003 | | |
|---|--|--|----------|----------------------|---------|----------------------------------|----------------|----------------|
| Development Number Name/HA-Wide Activities | General Description of Major Work Categories | Dev. Acct No. | Quantity | Total Estimated Cost | | Total Actual Cost | | Status of Work |
| | | | | Original | Revised | Funds Obligated | Funds Expended | |
| 17-1 Fairfax | New Roofs | 1460 | 29 | 92,197.00 | 0.00 | 92,197.00 | 0.00 | In Process |
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Annual Statement/Performance and Evaluation Report
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)
Part III: Implementation Schedule

| PHA Name: Taunton | | Grant Type and Number Capital Fund Program No: MA06P01750203 Replacement Housing Factor No: | | | | | Federal FY of Grant: 2003 |
|--|---|---|--------|---|---------|--------|----------------------------------|
| Development Number Name/HA-Wide Activities | All Fund Obligated (Quarter Ending Date) | | | All Funds Expended (Quarter Ending Date) | | | Reasons for Revised Target Dates |
| | Original | Revised | Actual | Original | Revised | Actual | |
| 17-1 Fairfax | 05/30/2005 | | | 05/30/2006 | | | |
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