

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: Hickory Public Housing Authority

PHA Number: NC056

PHA Fiscal Year Beginning: (mm/yyyy) 10/2005

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

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

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

B. Goals

The goals and objectives listed below are derived from HUD's strategic Goals and Objectives and those emphasized in recent legislation. PHAs may select any of these goals and objectives as their own, or identify other goals and/or objectives. Whether selecting the HUD-suggested objectives or their own, **PHAS ARE STRONGLY ENCOURAGED TO IDENTIFY QUANTIFIABLE MEASURES OF SUCCESS IN REACHING THEIR OBJECTIVES OVER THE COURSE OF THE 5 YEARS.** (Quantifiable measures would include targets such as: numbers of families served or PHAS scores achieved.) PHAs should identify these measures in the spaces to the right of or below the stated objectives.

HUD 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)

Progress statement for FYE ending 09/04 the authority expended all HAP monies and leased and maintained and occupancy rate of 99%.

- 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)

1. Progress Statement: During 2004, the PHA has been able to successfully modernize one-third of its public housing stock with new cabinets, floor tile and new stoves and refrigerators and handicap ramps. In addition the PHA has undertaken a major landscaping initiative. The PHA is designated a high performer PHA as well as SEMAP. The PHA has continued to conduct regular resident meetings, publish and distribute a monthly news brief, establishing a relationship with the newly developed a resident counsel, implemented new policies and modernized units as needed. The PHA continued to research the possibility for plans to demolish obsolete public housing units and providing replacement vouchers and or add additional units as part of a partnership with a non profit organization.

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)

2. Progress Statement: For FYE 9/30/04 the PHA administered the Section 8 Homeownership Program and successfully had twelve (12) Section 8 residents in homeownership.

HUD 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)

3. Progress Statement: During 2004, the PHA successfully met the objectives in this section through the implementation of its Tenant Selection Policy and will continue to do so.

HUD 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)

Progressive Statement: During FYE 09/30/2004 the PHA implemented an FFS program which had an enrollment of 20-25 families. The Elderly/Disabled service Coordinator also coordinated a Broad range of services for the targeted population.

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

PHA Goal: Ensure equal opportunity and affirmatively further fair housing

Objectives:

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

The PHA continues to access screening and housing criteria to ensure affirmative measures are being implemented.

Other PHA Goals and Objectives: (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.

The Housing Authority of the City of Hickory has prepared this Annual Plan in compliance with Section 511 of Quality Housing and Work Responsibility Act of 1998 and the ensuing HUD requirements.

The purpose of the Annual Plan is to provide a framework for local accountability and an easily identifiable source by which public housing residents, participants in the tenant-based assistance program and other members of the public may locate basic PHA policies, rules and requirements related to the operations, Programs and services of the agency.

The Mission Statement and the Goals and Objectives were based on information contained in our jurisdiction's Consolidated Plan and will assure that our residents will receive the best customer service.

Excellent customer service and fulfillment of the Mission Statement and Goals and Objectives is ensured by implementation of a series of policies that are on display with this Plan. The Admissions and Occupancy Policy and Section 8 Administrative Plan are the two primary policies on display. These important documents cover the public housing tenant selection and assignment plan, outreach services, PHA's responsibility to Section 8 owners/landlords, grievance procedures, etc.

The most important challenges to be met by the Housing Authority of the City of Hickory during FY 2005 include:

- ▶ *Preserve and improve the public housing stock through the Capital Funds Activities;*
- ▶ *Implementation of the Fannie Mae Modernization Loan Program to leverage the Capital Fund to install new furnaces and air condition in all 311 apartments*
- ▶ *Involve the public housing residents and the Section 8 participants through the Annual Plan Resident Advisory Board; and*
- ▶ *Train staff and commissioners to fully understand and take advantage of opportunities in new laws and regulations to better serve our residents and the community;*
- ▶ *Identify, develop and leverage services to enable low-income families to obtain self-sufficiency and economic empowerment activities for residents;*
- ▶ *Increase affordable housing through the implementation of Section 8 Housing Choice Voucher Program.*

In closing this Annual Plan exemplifies the commitment of the Housing Authority of the City of Hickory to meet the housing needs of the full range of low-income residents. The Housing Authority of the City of Hickory, in partnership with agencies from all levels of government, the business community, non-profit community groups, and residents will use this plan as a road map to reach the “higher quality of life” destination for the City of Hickory.

iii. Annual Plan Table of Contents

[24 CFR Part 903.7 9 (r)]

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

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Attachments

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

Required Attachments:

- Admissions Policy for Deconcentration - **Attachment (1)**
- FY 2005 Capital Fund Program Annual Statement – **Attachment (2)**
- Most recent board-approved operating budget (Required Attachment for PHAs that are troubled or at risk of being designated troubled ONLY)
- Other (List below, providing each attachment name)
 - Deconcentration and Income Mixing Analysis Results **Attachment (3)**
 - Substantial Deviation and Significant Amendment of Modification **Attachment (4)**
 - Initial Voluntary Conversion Assessment **Attachment (5)**
 - Resident Membership on PHA Board of Governing Body **Attachment (6)**
 - Membership of Resident Advisory Board **Attachment (7)**

Progress Statement **Attachment (8)**
Section 8 Homeownership Capacity **Attachment (9)**

Optional Attachments:

- PHA Management Organizational Chart – **Attachment (10)**
- FY 2005 Capital Fund Program 5 Year Action Plan – **Attachment (11)**
- Public Housing Drug Elimination Program (PHDEP) Plan
- Comments of Resident Advisory Board or Boards (must be attached if not included in PHA Plan text)-
- Other (List below, providing each attachment name)
 - 2002 Capital Funds Performance and Evaluation Report – **Attachment (12)**
 - Admissions and Continued Occupancy Policy – **Attachment (13)**
 - Pet Policy - **Attachment (14)**
 - REAC Agency Follow-up Plan – **Attachment (15)**
 - Action Plan Community Service – **Attachment (16)**
 - Wings – **Attachment (17)**

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
X	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 2. Documentation of the required deconcentration and income mixing analysis	Annual Plan: Eligibility, Selection, and Admissions Policies
X	Public housing rent determination policies, including the methodology for setting public housing flat rents <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 type="checkbox"/> check here if included in the public housing	Annual Plan: Rent Determination

List of Supporting Documents Available for Review		
Applicable & On Display	Supporting Document	Applicable Plan Component
	A & O Policy	
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
N/A	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 checked="" type="checkbox"/> check here if included in the Section 8 Administrative Plan	Annual Plan: Homeownership
X	Any cooperative agreement between the PHA and the TANF agency	Annual Plan: Community Service & Self-Sufficiency
X	FSS Action Plan/s for public housing and/or Section 8	Annual Plan: Community Service & Self-Sufficiency
X	Most recent self-sufficiency (ED/SS, TOP or ROSS or other resident services grant) grant program reports	Annual Plan: Community Service & Self-Sufficiency
N/A	The most recent Public Housing Drug Elimination Program (PHEDEP) semi-annual performance report for any open grant and most recently submitted PHDEP application	Annual Plan: Safety and Crime Prevention

List of Supporting Documents Available for Review		
Applicable & On Display	Supporting Document	Applicable Plan Component
	(PHDEP Plan)	
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
X	Community Service	Annual Plan Self Sufficiency
X	RASS Follow-up Plan	Annual Plan - RASS

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-ability	Size	Locatio-n
Income <= 30% of AMI	2202	4	4	3	5	3	5
Income >30% but <=50% of AMI	2238	2	3	5	5	3	5
Income >50% but <80% of AMI	3458	2	2	5	5	4	5
Elderly	2108	1	4	2	4	2	5
Families with Disabilities	*	*	*	*	*	*	*
White	11291	2	2	5	4	4	5
Black	2006	2	2	5	4	4	5
Other	2039	4	5	5	4	5	5

* No data available

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)

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
Waiting list total	125		100
Extremely low income <=30% AMI	108	86%	
Very low income (>30% but <=50% AMI)	17	14%	
Low income (>50% but <80% AMI)	0		
Families with children	101	81%	
Elderly families	6	5%	
Families with Disabilities	18	14%	
Caucasian	51	41%	
African American	73	58%	
Other	1	7%	
Characteristics by Bedroom Size (Public Housing Only)			
1BR	20	16%	
2 BR	70	56%	
3 BR	25	20%	
4 BR	10	8%	
5 BR	0		
5+ BR	0		

Housing Needs of Families on the Waiting List	
Is the waiting list closed (select one)? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
If yes:	
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			
Waiting list type: (select one)			
<input checked="" type="checkbox"/> Section 8 tenant-based assistance			
<input 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
Waiting list total	216		100
Extremely low income <=30% AMI	4	2%	
Very low income (>30% but <=50% AMI)	22	10%	
Low income (>50% but <80% AMI)	190	88%	
Families with children	161	75%	
Elderly families	18	8%	
Families with Disabilities	37	17%	
Caucasian	117	54%	
African American	92	43%	
Other	7	3%	
Characteristics by Bedroom Size (Public Housing Only)			
1BR	N/A	N/A	N/A
2 BR	N/A	N/A	N/A

Housing Needs of Families on the Waiting List			
3 BR	N/A	N/A	N/A
4 BR	N/A	N/A	N/A
5 BR	N/A	N/A	N/A
5+ BR	N/A	N/A	N/A
Is the waiting list closed (select one)? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes			
If yes:			
How long has it been closed (# of months)? 4			
Does the PHA expect to reopen the list in the PHA Plan year? <input checked="" 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 checked="" type="checkbox"/> 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	870,281	
b) Public Housing Capital Fund	449,299	
c) HOPE VI Revitalization	0	
d) HOPE VI Demolition	0	
e) Annual Contributions for Section 8 Tenant-Based Assistance	2,158,990	
f) Public Housing Drug Elimination Program (including any Technical Assistance funds)	0	
g) Resident Opportunity and Self-Sufficiency Grants	41,000 83,333	
h) Community Development Block Grant	0	
i) HOME		

Financial Resources: Planned Sources and Uses		
Sources	Planned \$	Planned Uses
Other Federal Grants (list below)		
West Hickory	248,340	
2. Prior Year Federal Grants (unobligated funds only) (list below)		
3. Public Housing Dwelling Rental Income		
	444,400	
4. Other income (list below)		
Late Fees	7,500	
Tenant charges and excess utilities	150,000	
4. Non-federal sources (list below)		
Total resources	4,390,073	

3. PHA Policies Governing Eligibility, Selection, and Admissions

[24 CFR Part 903.7 9 (c)]

A. Public Housing

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

(1) Eligibility

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

- When families are within a certain number of being offered a unit: (state number)
- When families are within a certain time of being offered a unit: (state time)
- Other: (describe)
 - ▶ Upon application and at time of offer.

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? N/A

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? One list

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)
 - disability
 - To be closer to work or school
 - Victims of reprisals or hate crimes, of substantial violence

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: [None](#)

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

Other preferences: (select below)

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

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

Date and Time

Former Federal preferences: None

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)

- 1 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
- 1 Households that contribute to meeting income goals (broad range of incomes)
- 1 Households that contribute to meeting income requirements (targeting)
- Those previously enrolled in educational, training, or upward mobility programs
- 1 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)

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) **N/A**

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) **N/A**

- 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:

- ▶ *NC056-01*
- ▶ *NC056-02*

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)
 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) (changed)

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

- Criminal or drug-related activity
 Other (describe below)
▶ *Participant last known mailing address*
▶ *Landlords name and mailing address*

(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: handicapped disabled individuals/ families are given and additional 60 days if needed

(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

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.

Date and Time

Former Federal preferences

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

Other preferences (select all that apply)

- 1 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
- 1 Households that contribute to meeting income goals (broad range of incomes)
- 1 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)

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 policies 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?

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

Verified medical hardship

Death of Family member who was provider of 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: **N/A**

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

- 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) **N/A**

- 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) **N/A**

- 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)_____
- 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)

NE and NW sections of town have exception rents.

b. If the payment standard is lower than FMR, why has the PHA selected this standard? (select all that apply) [N/A](#)

- 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)

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.
- 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	Expected Turnover
Public Housing	308	20%
Section 8 Vouchers	440	7%
Section 8 Certificates	N/A	N/A
Section 8 Mod Rehab	0	0
Special Purpose Section 8 Certificates/Vouchers (list individually)	FSI FUP	6% 2%
Public Housing Drug Elimination Program (PHDEP)	N/A	N/A
Other Federal Programs(list individually)	Family Self-Sufficiency Program - 26	8%

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)

- ▶ *Work Order System*
- ▶ *Maintenance Policy*
- ▶ *Uniform Inspection System*
- ▶ *Admissions and Occupancy Policy*
- ▶ *Admissions and Occupancy Procedures Manual*
- ▶ *Fair Housing Policy*
- ▶ *Grievance Procedures*
- ▶ *Tenant Selection and Assignment Plan*
- ▶ *Termination and Eviction*
- ▶ *Transfer and Transfer Waiting List*
- ▶ *Resident Initiative*
- ▶ *Section 3 Plan*
- ▶ *Pet Policy for Families*
- ▶ *Pet Policy for Elderly*
- ▶ *Procurement Policy and Procedures*
- ▶ *Personnel Policy*

(2) Section 8 Management: (list below)

- ▶ *Section 8 Administrative Plan*
- ▶ *SEMAP Procedures*
- ▶ *Section 8 Homeownership Plan*
- ▶ *Family Self-Sufficiency Action Plan*

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)

(2) Optional 5-Year Action Plan

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

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

b. If yes to question a, select one:

The Capital Fund Program 5-Year Action Plan is provided as an attachment to the PHA Plan at Attachment (state name)

-or-

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

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: N/A
2. Development (project) number: N/A
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:

- 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 **N/A**

- 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. *N/A*

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. *N/A*

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:	

- 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 (1)]

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

A. PHA Coordination with the Welfare (TANF) Agency

1. Cooperative agreements:

- Yes No: Has the PHA 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? 05/01/03

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)
<i>Stop Program (2days a week a week) Students Trying Out Peace, targeting social skills, bullying prevention, personal safety and problem solving.</i>	16	<i>Residents of PHA</i>	<i>L.M. Clark Center</i>	<i>Both</i>
<i>Computer classes – taught to youth, ages 5-14</i>	8	<i>Residents of PHA</i>	<i>L. M. Clark Center</i>	<i>Both</i>
<i>“Teen Up” for teens 9-14 Teaching the basic fundamentals of life while having fun at the time same time.</i>	8	<i>Resident of PHA</i>	<i>L.M. Clark Center</i>	<i>Both</i>
<i>“Walk the Walk” – mentoring program providing empowerment of young males ages 10-16 in the development of self image and community pride.</i>	10	<i>Residents of PHA</i>	<i>Sunny Valley Community building</i>	<i>Both</i>
<i>After School Program–Terrace Hills–study time and help with homework</i>	6	<i>Residents of PHA</i>	<i>Hope Start Community building</i>	<i>Both</i>
<i>After School Program – Ridgecrest development. Study time and help with homework</i>	5	<i>Residents of PHA</i>	<i>L.M Clark Center</i>	<i>Both</i>
<i>“Images and Wise Guys”(Council on Adolescents –focusing on personal health, self esteem, peer pressure and life skills, ages 10-13</i>	12	<i>Residents of PHA</i>	<i>Sunny Valley Community building</i>	<i>Both</i>
<i>“Silkwood and Men Talk” – youth working with parents or mentors, focusing on life skills abstinence from alcohol, drugs and tobacco, and exploring career options.</i>	10	<i>Residents of PHA</i>	<i>Sunny Valley Community building</i>	<i>Both</i>
<i>“Active Parenting Now” – parenting skills for adults</i>	12	<i>Residents of PHA</i>	<i>Sunny Valley Community building</i>	<i>Both</i>
<i>Housekeeping</i>	6	<i>Residents of PHA</i>	<i>Sunny Valley Community building</i>	<i>Both</i>

<i>Scholarships</i>	3	<i>Residents of PHA</i>	<i>N/A</i>	<i>Public Housing</i>
<i>Summer Camp</i>	25	<i>Residents of PHA and neighborhood youth</i>	<i>Sunny Valley Community Building</i>	<i>Both</i>

(2) Family Self Sufficiency program/s REVISED /4/2005

a. Participation Description

Family Self Sufficiency (FSS) Participation		
Program	Required Number of Participants (start of FY 2005 Estimate)	Actual Number of Participants (As of: DD/MM/YY)
Public Housing	25	26 as of 4/14/2005
Section 8	0	

- 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:

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 anticrime/anti drug programs
- Other (describe below)

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

Ridgecrest, Sunny Valley, and Blue Ridge Heights

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)

Ridgecrest, Sunny Valley, and Blue Ridge Heights

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)

Ridgecrest, Sunny Valley, and Blue Ridge Heights

D. Additional information as required by PHDEP/PHDEP Plan [N/A](#)

PHAs eligible for FY 2005 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 2005 in this PHA Plan?
- Yes No: This PHDEP Plan is an Attachment. (Attachment Filename: ____)

14. RESERVED FOR PET POLICY

[24 CFR Part 903.7 9 (n)]

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? **N/A**
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 (added)
 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:

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) Mayor nominated City Council approval required
- 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) None City Council Approved

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)
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)

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 See attachment nc056b01
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 See attachment
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 **See attachment**

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)

See attachment

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>

Attachment: 1
DECONCENTRATION AND INCOME TARGETING POLICY
FOR THE
HOUSING AUTHORITY OF THE CITY OF
HICKORY, NC

DECONCENTRATION AND INCOME TARGETING POLICY
(of the Public Housing Admissions and Occupancy Policy)

Sub-Title A, Section 513 of the Quality Housing and Work Responsibility Act of 1998 (QHWRA), establishes two interrelated requirements for implementation by Public Housing Authorities: (1) Economic Deconcentration of public housing developments and (2) Income Targeting to assure that families in the "extremely low" income category are proportionately represented in public housing and that pockets of poverty are reduced or eliminated. In order to implement these new requirements the PHA must promote these provisions as policies and revise their Admission and Occupancy policies and procedures to comply.

Therefore, the Housing Authority of the City of Hickory (PHA) hereby affirms its commitment to implementation of the two requirements by adopting the following policies:

A. Economic Deconcentration:

Admission and Occupancy policies are revised to include the PHA's policy of promoting economic deconcentration. Implementation of this program will require the PHA to determine the median income of residents in each development, determine the average income of residents in all developments, compute the Established Income Range (EIR), determine developments outside the EIR, and provide adequate explanations and/or policies as needed to promote economic deconcentration.

Implementation may include one or more of the following options:









- ?? Skipping families on the waiting list based on income;
- ?? Establishing preferences for working families;
- ?? Establish preferences for families in job training programs;
- ?? Establish preferences for families in education or training programs;
- ?? Marketing campaign geared toward targeting income groups for specific developments;
- ?? Additional supportive services;
- ?? Additional amenities for all units;
- ?? Flat rents for developments and unit sizes;
- ?? Different tenant rent percentages per development;
- ?? Different tenant rent percentages per bedroom size;
- ?? Saturday and evening office hours;
- ?? Security Deposit waivers;
- ?? Revised transfer policies;

- ?? Site-based waiting lists;
- Mass Media advertising/Public service announcements; and
- ?? Giveaways.

B. Income Targeting

As public housing dwelling units become available for occupancy, responsible PHA employees will offer units to applicants on the waiting list. In accordance with the Quality Housing and Work Responsibility Act of 1998, the PHA encourages occupancy of its developments by a broad range of families with incomes up to eighty percent (80%) of the median income for the jurisdiction in which the PHA operates. Depending on the availability of applicants with proper demographics, at a minimum, 40% of all new admissions to public housing **on an annual basis** may be families with incomes at or below thirty percent (30%) (extremely low-income) of the area median income. The offer of assistance will be made without discrimination because of race, color, religion, sex, national origin, age, handicap or familial status.

In order to implement the income targeting program, the following policy is adopted:

-   The PHA may select, based on date and time of application and preferences, two (2) families in the extremely low-income category and two (2) families from the lower/very low-income category alternately until the forty percent (40%) admission requirement of extremely low-income families is achieved (2 plus 2 policy).
-   After the minimum level is reached, all selections may be made based solely on date, time and preferences. Any applicants passed over as a result of implementing this 2 plus 2 policy will retain their place on the waiting list and will be offered a unit in order of their placement on the waiting list.
-   To the maximum extent possible, the offers will also be made to effect the PHA's policy of economic deconcentration.
-   The PHA reserves the option, at any time, to reduce the targeting requirement for public housing by no more than ten percent (10%), if it increases the target figure for its Section 8 program from the required level of seventy-five percent (75%) of annual new admissions to no more than eighty-five percent (85%) of its annual new admissions. (Optional for PHAs with both Section 8 and Public Housing programs)

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

PHA Name Hickory Public Housing Authority	Grant Type and Number: Capital Fund Program No No: NC19P05650105 Replacement Housing Factor Grant No:	Federal FY of Grant 2005
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Original Annual Statement Reserved for Disasters/Emergencies Revised Annual Statement/Revision Numnber _____

Performance and Evaluation Report for Program Year Ending _____ Final Performance and Evaluation Report for Program Year Ending_____

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total Non-Capital Funds				
2	1406 Operating Expenses	30,000.00			
3	1408 Management Improvements	37,000.00			
4	1410 Administration	44,930.00			
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs				
8	1440 Site Acquisition	11,000.00			
9	1450 Site Improvement	140,916.00			
10	1460 Dwelling Structures	53,635.00			
11	1465.1 Dwelling Equipment Nonexpendable	10,000.00			
12	1470 Nondwelling Structures				
13	1475 Nondwelling Equipment	5,000.00			
14	1485 Demolition				
15	1490 Replacement Reservve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Cost				
18	1499 Development Activities				
19	1501 Collateralization or Debt Service	116,818.00			
20	1502 Contingency				
21	Amount of Annual Grant (sums of lines 2-20)	449,299.00	0.00	0.00	0.00
22	Ammount of Line 21 Related to LBP Activities				
23	Amount of Line 21 Related to Section 504 Compliance				
24	Amount of Line 21 Related to Security - Soft Costs				
25	Amount of line 21 Related to Security - Hard Costs				
26	Amount of Line 21 Related to Energy Conservation Measures				

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

PHA Name Hickory Public Housing Authority		Grant Type and Number: Capital Fund Program No No: NC19P05650105 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	
HA-Wide								
	Operations:	1406		30,000.00				
	Management Improvements:							
	Executive Director - Salary	1408		12,000.00				
	Employee training	1408		1,000.00				
	Resident Services	1408		15,000.00				
	Police patrol (1) x 15hr. Wk x52	1408		9,000.00				
	Total 1408			37,000.00				
	Administration:							
	Director of Technical Services - Salary	1410		44,930.00				
	Total 1410			44,930.00				
	Fees & Costs:							
	Hire Consultant to Update Plan	1430		1,000.00				
	A/E - 504 Needs Assessment	1430		10,000.00				
	Total 1430			11,000.00				
	Site Improvements:	1450						
PHA Wide	504 Improvements to Site			3,000.00				
NC 56-1	Provide additional parking for residents			5,000.00				
Hillside & Sunny								
NC 56-1	Repave Parking			75,000.00				
NC 56-2	Repave Parking			30,801.00				

NC56-1 A&B Erosion Control and Landscaping			12,115.00				
Blue Ridge &							
Terrace Hills							
NC 56-2 Erosion Control and Landscaping			15,000.00				
Ridgecrest							
Total 1450			140,916.00				

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

PHA Name Hickory Public Housing Authority		Grant Type and Number: Capital Fund Program No No: NC19P05650105 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	
	Dwelling Structures	1460						
PHA Wide	Replace Waters Heaters		20	9,000.00				
NC 56-1	Replace screen doors as needed		15	\$3,510.00				
nc 56-2	Replace screen doors as needed		5	1,125.00				
PHA Wide	Units Improvements		LS	40,000.00				
	Total 1460			53,635.00				
HA Wide	Dwelling Equipment:	1465						
	Replace Stoves		LS	4,400.00				
	Replace Refrigerators		LS	5,600.00				
	Total 1465			10,000.00				
HA Wide	Non- Dwelling Equipment:	1475						
	Upgrade Computer Equipment			5,000.00				
	Total 1475			5,000.00				
	Collateralization or Debt Service Total 1501			116,818.00				
	Total CFP			449,229.00				

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

PHA Name Hickory Public Housing Authority	Grant Type and Number: Capital Fund Program No No: NC19P05650105 Replacement Housing Factor Grant No:	Federal FY of Grant 2005
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Development Number Name/HA- Wide Activities	All Funds Obligated (Quarter Ending Date)			All Funds Expended (Quarter Ending Date)			Resons for Revised Targe Dates
	Original	Revised	Actual	Original	Revised	Actual	
HA - Wide	6/30/2007			6/30/2009			
NC 56-1	6/30/2007			6/30/2009			
NC 56-2	6/30/2007			6/30/2009			

Annual Statement/Performance and Evaluation Report

Capital Funds Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHf) Part 1: Summary

PHA Name Hickory Public Housing Authority	Grant Type and Number: Capital Fund Program No No: NC19P05650105 Replacement Housing Factor Grant No:	Federal FY of Grant 2005
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Original Annual Statement Reserved for Disasters/Emergencies Revised Annual Statement/Revision Number _____

Performance and Evaluation Report for Program Year Ending _____ Final Performance and Evaluation Report for Program Year Ending _____

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total Non-Capital Funds	30,000.00			
2	1406 Operating Expenses	37,000.00			
3	1408 Management Improvements	44,930.00			
4	1410 Administration				
5	1411 Audit				
6	1415 Liquidated Damages	11,000.00			
7	1430 Fees and Costs				
8	1440 Site Acquisition	140,916.00			
9	1450 Site Improvement	53,635.00			
10	1460 Dwelling Structures	10,000.00			
11	1465.1 Dwelling Equipment Nonexpendable				
12	1470 Nondwelling Structures	5,000.00			
13	1475 Nondwelling Equipment				
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Cost				
18	1499 Development Activities				
19	1501 Collateralization or Debt Service	116,818.00			
20	1502 Contingency				
21	Amount of Annual Grant (sums of lines 2-20)	449,299.00	0.00	0.00	0.00
22	Amount of Line 21 Related to LBP Activities				
23	Amount of Line 21 Related to Section 504 Compliance				
24	Amount of Line 21 Related to Security - Soft Costs				
25	Amount of line 21 Related to Security - Hard Costs				
26	Amount of Line 21 Related to Energy Conservation Measures				

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

PHA Name Hickory Public Housing Authority	Grant Type and Number: Capital Fund Program No No: Loan Budget Replacement Housing Factor Grant No:	Federal FY of Grant 2005
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- Original Annual Statement
 Reserved for Disasters/Emergencies
 Revised Annual Statement/Revision Number _____
 Performance and Evaluation Report for Program Year Ending _____
 Final Performance and Evaluation Report for Program Year Ending _____

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total Non-Capital Funds				
2	1406 Operating Expenses				
3	1408 Management Improvements				
4	1410 Administration				
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	293,501.00			
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	1,218,099.00			
11	1465.1 Dwelling Equipment Non-expendable				
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 Cost				
18	1499 Development Activities				
19	1501 Collateralization or Debt Service				
20	1502 Contingency				
21	Amount of Annual Grant (sums of lines 2-20)	1,511,600.00	0.00	0.00	0.00
22	Amount of Line 21 Related to LBP Activities				
23	Amount of Line 21 Related to Section 504 Compliance				
24	Amount of Line 21 Related to Security - Soft Costs				
25	Amount of line 21 Related to Security - Hard Costs				
26	Amount of Line 21 Related to Energy Conservation Measures				

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

PHA Name Hickory Public Housing Authority		Grant Type and Number: Capital Fund Program No No: Loan Budget 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	
HA-Wide	Fees & Costs:							
	A/E	1430		120,000.00				
	Loan Expenses	1430		173,501.00				
	Total 1430			293,501.00				
	Dwelling Structures:	1460						
NC 56-1								
Sunny Valley	HVAC replacement and adding of A/C 1200 x39		39 units	46,800.00				
NC 56-1								
Hillside Gar.	HVAC replacement and adding of A/C 4479 x 71		71 units	318,009.00				
NC 56-1								
	HVAC replacement and adding of A/C 44 4479x68		68 units	304,572.00				
Blue Ridge Heights								
NC 56-1								
	Electric work related HVAC		LS	30,042.00				
NC 56-2								
Ridgecrest	HVAC replacement and adding of A/C 4479 x 89		89 units	398,631.00				
NC 56-2								
	Electric work related to HVAC		LS	12,045.00				
NC 56-1								
	Begin Roof Replacement		54 units	108,000.00				
Hillside Gar.	71 units Total - 54 units leaves 17 units for 2006							
	\$2,000 x54							
	Total 1460			1,218,099.00				
	Total Loan			1,511,600.00				

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

PHA Name Hickory Public Housing Authority		Grant Type and Number: Capital Fund Program No No: Loan Budget Replacement Housing Factor Grant No:					Federal FY of Grant 2005
Development Number Name/HA- Wide Activities	All Funds Obligated (Quarter Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates
	Original	Revised	Actual	Original	Revised	Actual	
HA - Wide	6/30/2007			6/30/2009			
NC 56-1	6/30/2007			6/30/2009			
NC 56-2	6/30/2007			6/30/2009			

Attachment: 3
City of Hickory Public Housing Authority

Component 3, (6) Deconcentration and Income Mixing

a. Yes No: Does the PHA have any general occupancy (family) developments covered by the deconcentration rule? If is complete. If yes, continue to the next question.

b. Yes No: Do any of these covered developments have average incomes 85% to 115% of the average incomes of all such d no, this section is complete.

If yes, list these developments as follows:

Deconcentration Policy for Covered Developments

Development Name:	Number of Units	Explanation (if any) {see step 4 at §903.2(c)(1)((iv)}	Dec (if r step §90
Terrace Hills	44	To increase the average income at each development we will adhere to the following: <ul style="list-style-type: none"> * Skip families on the waiting list based on income. * Establish preferences for families in education or training programs. * Implement additional supportive services. * Establish preferences for working families. * Implement a giveaway program by developments. 	E. P stra by s dete in c resi com PHA proc resp com stra
Ridgecrest	89	Same as above	E. s

Attachment: 4
City of Hickory Public Housing Authority

A. Substantial Deviation from the 5 Year Plan

- Any change to the Mission Statement;
- 50% deletion from or addition to the goals and objectives as a whole; and
- 50% or more decrease in the quantifiable measurement of any individual goal or objective.

B. Significant Amendment or Modification to the Annual Plan:

- Any increase or decrease over 50% in the funds projected in the in the Financial Resource Statement and/or the Capital Fund Program Annual Statement;
- Any **change being submitted** to HUD that requires a separate notification to residents, such as **changes in the** Hope VI, Public Housing Conversion, Demolition/Disposition, Designated Housing or **Public Housing** Homeownership programs; and
- Any change **in policy or operation that is** inconsistent with the **applicable** Consolidated Plan.

Attachment: 5
City of Hickory Public Housing Authority

Agency Plan Component 10 (B) Voluntary Conversion Initial Assessments

- A. How many of the PHA's developments are subject to the Required Initial Assessments?

Four developments are subject to the required initial assessment:
Hillside Gardens
Blue Ridge Heights
Terrace Hills
Ridgecrest

- B. How many of the PHA's developments are not subject to the Required Initial Assessments based on exemptions (e.g., elderly and/or disabled developments not general occupancy projects)?

One development is not subject to the Required Initial Assessment based on exemption – not general occupancy:

Sunny Valley

- C. How many Assessments were conducted for the PHA covered developments?

One assessment was conducted for the PHA covered developments addressing feasibility, marketing, operating cost, and modernization cost.

- D. Identify PHA developments that may be appropriate for conversion based on the Required Initial Assessments:

None of the developments would be appropriate for conversion at this time because funding does not adequately permit at this time.

- E. If the PHA has not completed the Required Initial Assessment, describe the status of these assessments.

Not applicable – required initial assessment completed.

Attachment: 6
City of Hickory Public Housing Authority

Resident Member on the PHA Governing Board

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

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

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

- Elected
 Appointed

C. The term of appointment is (include the date term expires):

July 2004- July 2009

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

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

B. Date of next term expiration of a governing board member: *July 2009 or when ceases to become a tenant.*

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

Attachment: 7
City of Hickory Public Housing Authority

Membership of the Resident Advisory Board or Boards

List members of the Resident Advisory Board or Boards: (If the list would be unreasonably long, list organizations represented or otherwise provide a description,)

Lester Mae Clark

Cynthia Bunch

Walter Johnson

Nancy Flood

Betty Scott

Winnie Thomas

Deborah Gray

Johnny Cowan

Attachment: 8
City of Hickory Public Housing Authority

Statement of Progress

The Hickory Public Housing Authority (HPHA) has been successful in achieving its mission and goals in the fiscal year ending 2004. Goals are either completed or on target for completion by the end of the fiscal year.

Concerning modernization approximately \$316,684 has either been spent or obligated. HPHA has done substantial renovation of the public housing units with the replacement of cabinets, tile, windows, and sidewalks. The authority also began plans to upgrade all public housing units with the installation of new heat/ac pumps.

Concerning self-sufficiency and crime and safety, PHA efforts reduced crime in the communities through increased police patrols the hiring of off duty police officers for additional patrols, increased lighting and the removal of tree barriers, and landscaping.

Concerning improving the quality of life, PHA has expanded the Resident Services Department to include a part-time Special Needs Coordinator and a part-time Family Services Coordinator. The PHA also applied for ROSS Family and ROSS FSS Grants to supplement activities.

To ensure compliance with the Public Housing Reform Act of 1998 and the HUD Rental Housing Integrity Improvement Program (RHIP), every policy was reviewed and updated as needed. Most significant was to the update to the Admissions and Occupancy Policy and the Section Administrative Plan.

Concerning ensuring equal opportunity outreach efforts have been made by making renewed partnerships with community groups and expanding the availability of re source services.

City of Housing Authority of the City of Hickory

Section 8 Homeownership Program Capacity Statement Attachment: 9

The Housing Authority has demonstrated its capacity to administer the Section 8 Homeownership program which became operational in 2001. The program requires the following:

1. A minimum down payment of 3% is required. At least 1% must come for the family resources. Must qualify as 1st time home buyer and must be able to obtain a loan and complete the Homeownership counseling component.
2. Housing Authority Section 8 staff administers the program application processing, initial assessment, monitoring, participation in counseling component, loan review, and approval. The classroom training is coordinated in the Western Piedmont Council of governments, Habitat for humanity, and Rural Development.

Attachment 10

On Display
In Annual Plan
At Housing Authority

Organizational Chart

**Capital Fund Program Five Year Action Plan
Part I: Summary**

HA Name: City of Hickory Public Housing Authority		<input checked="" type="checkbox"/> Original <input type="checkbox"/> Revision No. ____			
Development Number/Name /HA- Wide	Year 1 2005	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
HA Wide	Annual	197,965.00	202,355.00	199,200.00	254,503.00
NC 56-1A Sunny Valley	Statement			36,354.00	72,597.00
NC 56-1B Hillside Gardens		34,133.50			
NC 56-1C Blue Ridge			70,817.00	66,000.00	
NC56-1D Terrace Hills		34,133.50	54,000.00		
NC 56-2 Ridgecrest		66,249.00	5,309.00	30,927.00	5,381.00
Collateralization or Debt Service		116,818.00	116,818.00	116,818.00	116,818.00
Totals		449,299.00	449,299.00	449,299.00	449,299.00
Physical Improvements		198,901.00	201,746.00	201,587.00	193,423.00
Management Improvements		37,000.00	37,000.00	37,000.00	37,000.00
HA Wide Non-Dwelling Structures & Equipment		5,150.00	5,305.00	5,464.00	5,628.00
Administration		44,930.00	44,930.00	44,930.00	44,930.00
Other		16,500.00	13,500.00	13,500.00	21,500.00
Operations		30,000.00	30,000.00	30,000.00	30,000.00
Collateralization or Debt Service		116,818.00	116,818.00	116,818.00	116,818.00
CFP Funds Listed For		\$449,299.00	\$449,299.00	\$449,299.00	\$449,299.00
5-Year planning					
Replacement Housing					
Factor Funds					

Capital Funds Program Five Year Action Plan
Part II: Supporting Pages -- Work Activities

Activities For Year 1	Activities For Year: 2 Grant: 2006 2006			FFY PHA FY :	Activities for Year: 2 FFY Grant: 2006 PHA FY 2006		
2005	Development Name/ Number	Major Work Categories	Estimated Cost	Development Name/ Number	Major Work Categories	Estimated Cost	
See	HA-Wide	Operations			Dwelling Equipment:		
		Total 1406	\$30,000.00	HA Wide	Replace Stoves	4,532.00	
		Management Improvements:			Replace Refrigerators	\$5,768.00	
		Executive Salary			Total 1465	10,300.00	
		Employee Training	12,000.00				
Annual		Resident Services	1,000.00				
		Police Patrol (1) x 15hr. Wk x52	15,000.00				
			9,000.00				
		Total 1408	\$37,000.00				
		Administration					
		Director of Technical Services			Non-Dwelling Equipment:		
Statement		Total 1410	\$44,930.00	HA Wide	Upgrade Computer Hardware	\$5,150.00	
		Fees & Costs			Total 1475	\$5,150.00	
		Consultant for Needs Assessment	1,500.00				
		A/E	15,000.00				
		Total 1430	\$16,500.00				
		Site Improvements					
	NC 56-2	Repave Parking	\$60,975.00				
		Total 1460	60,975.00				
		Dwelling Structures					
	HA Wide	Unit Improvements	\$41,200.00				
		Replace Water Heaters	9,270.00				
	NC 56-1	Replace screen doors as needed	3,615.00		Collateralization or Debt Service 1501	\$116,818.00	
	Hillside Gardens	Continue Roof Replacement - 17units	34,133.50				
	Terrace Hills	Begin Roof Replacement - 17 units continue 2007	34,133.50				
	NC 56-2	Replace screen doors as needed	5,274				
		Total 1460	127,626.00				
					TOTAL ESTIMATED CFP COST - 2006	\$449,299.00	

Capital Funds Program Five Year Action Plan
Part II: Supporting Pages -- Work Activities

Activities For Year 1	Activities for Year: 3 Grant: 2007 2007			FFY PHA FY:	Activities for Year: 3 Grant: 2007 2007			FFY PHA FY:
2005	Development Name/ Number	Major Work Categories	Estimated Cost	Development Name/ Number	Major Work Categories	Estimated Cost		
See	HA-Wide	Operations			Dwelling Equipment:			
		Total 1406	\$30,000.00	HA Wide	Replace Stoves	4,668.00		
		Management Improvements:			Replace Refrigerators	\$5,940.00		
		Executive Salary			Total 1465	10,608.00		
		Employee Training	12,000.00					
Annual		Resident Services	1,000.00					
		Police Patrols	15,000.00					
			9,000.00					
		Total 1408	\$37,000.00					
		Administration						
		Director of Technical Services			Non-Dwelling Equipment:			
Statement		Total 1410	\$44,930.00	HA Wide	Upgrade Computer Hardware	\$5,305.00		
		Fees& Costs			Total 1475	\$5,305.00		
		Consultant for Needs Assessment	1,500.00					
		A/E	12,000.00					
		Total 1430	\$13,500.00					
		Dwelling Structures						
	HA Wide	Unit Improvements	\$42,435.00					
		Replace Water Heaters	9,548.00					
	NC 56-1	Replace screen doors a needed	3,724.00		Collateralization or Debt Service 1501	\$116,818.00		
	Terrace Hills	Continue Roof Replacement - 27units	54,000.00					
	Blue Ridge	Begin Roof Replacement - 35 units	70,817.00					
		Gutters as needed	5,305					
	NC 56-2	Replace screen doors a needed	5,309.00					
		Total 1460	\$191,138.00					
					TOTAL ESTIMATED CFP COST - 2007	\$449,299.00		

**Capital Funds Program Five Year Action Plan
Part II: Supporting Pages -- Work Activities**

Activities For Year 1	Activities for Year: 4 Grant: 2008 2008			FFY PHA FY:	Activities for Year: 4 Grant: 2008 2008			FFY PHA FY:
2005	Development Name/ Number	Major Work Categories	Estimated Cost	Development Name/ Number	Major Work Categories	Estimated Cost		
See	HA-Wide	Operations						
		Total 1406	\$30,000.00		Dwelling Structures			
		Management Improvements:		HA Wide	Unit Improvements	\$43,709.00		
		Executive Salary			Replace Water Heaters	9,835.00		
		Employee Training	12,000.00	NC 56-1	Replace screen doors a needed	3,835.00		
Annual		Resident Services	1,000.00	Hillside Gardens	Continue Roof Replacement - 33units	66,000.00		
		Police Patrol (1) x 15hr. Wk x52	15,000.00	Terrace Hills	Begin Roof Replacement - 18 units	36,354.00		
			9,000.00	NC 56-2	Replace screen doors as needed	5,274		
		Total 1408	\$37,000.00		Replace wood Columns as needed	2,000.00		
		Administration			Correct building settlement	\$21,855.00		
		Director of Technical Services	44,930.00		Total 1460	\$188,932.00		
Statement		Total 1410	\$44,930.00					
		Fees & Costs						
		Consultant for Needs Assessment	1,500.00					
		A/E	12,000.00		Dwelling Equipment:			
		Total 1430	\$13,500.00	HA Wide	Replace Stoves	4,808.00		
		Site Improvements			Replace Refrigerators	6,119.00		
	NC 56-2	Provide site improvements	\$1,728.00		Total 1465	\$10,927.00		
		Total 1450	1,728.00					
					Non-Dwelling Equipment:			
				HA Wide	Upgrade Computer Equipment	5,464.00		
					Total 1475	\$5,464.00		
					Collateralization or Debt Service 1501	\$116,818.00		
					TOTAL ESTIMATED CFP COST - 2008	\$449,299.00		

Capital Funds Program Five Year Action Plan
Part II: Supporting Pages -- Work Activities

Activities For Year 1	Activities for Year: 5 Grant: 2009 2009			FFY PHA FY:	Activities for Year: 5 Grant: 2009 2009			FFY PHA FY:
2005	Development Name/ Number	Major Work Categories	Estimated Cost	Development Name/ Number	Major Work Categories	Estimated Cost		
See	HA-Wide	Operations			Dwelling Equipment:			
		Total 1406	\$30,000.00					
		Management Improvements:		HA Wide	Replace Stoves	4,952.00		
		Executive Salary			Replace Refrigerators	\$6,303.00		
		Employee Training	12,000.00		Total 1465	11,255.00		
Annual		Resident Services	1,000.00					
		Police Patrol (1) x 15hr. Wk x52	15,000.00					
			9,000.00					
		Total 1408	\$37,000.00					
		Administration						
		Director of Technical Services	44,930.00		Non-Dwelling Equipment:			
Statement		Total 1410	\$44,930.00	HA Wide	Upgrade Computer Hardware	\$5,628.00		
		Fees& Costs			Total 1475	\$5,628.00		
		Consultant for Needs Assessment	1,500.00					
		A/E	15,000.00					
		Total 1430	\$16,500.00					
		Dwelling Structures						
	HA Wide	Unit Improvements	\$45,020.00					
		Replace Water Heaters	10,130.00					
		504 Upgrades	45,089.00		Collateralization or Debt Service 1501	\$116,818.00		
	NC56-1	Replace screen doors a needed	3,951.00					
	Sunny Valley	Complete Roof Replacement - 21 units	72,597.00					
	NC 56-2	Replace screen doors as needed	5,381.00					
		Total 1460	182,168.00					
					TOTAL ESTIMATED CFP COST - 2009	\$449,299.00		

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

PHA Name Hickory Public Housing Authority	Grant Type and Number: Capital Fund Program No No: NC19P05650104 Replacement Housing Factor Grant No:	Federal FY of Grant 2004
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Original Annual Statement Reserved for Disasters/Emergencies Revised Annual Statement/Revision Number ____ #1

Performance and Evaluation Report for Program Year Ending 3/31/2005 Final Performance and Evaluation Report for Program Year Ending ____

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total Non-Capital Funds				
2	1406 Operating Expenses	30,000.00	30,000.00	30,000.00	30,000.00
3	1408 Management Improvements	66,000.00	66,000.00	66,000.00	40,496.98
4	1410 Administration	44,930.00	44,930.00	44,930.00	32,263.01
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	26,000.00	26,000.00	26,000.00	6,759.00
8	1440 Site Acquisition				
9	1450 Site Improvement	21,000.00	21,000.00	2,170.00	2,170.00
10	1460 Dwelling Structures	251,369.00	251,369.00	91,369.00	47,738.10
11	1465.1 Dwelling Equipment Nonexpendable	5,000.00	5,000.00	5,000.00	4,157.22
12	1470 Nondwelling Structures				
13	1475 Nondwelling Equipment	5,000.00	5,000.00	1,200.00	1,041.62
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Cost				
18	1499 Development Activities				
19	1501 Collateralization or Debt Service				
20	1502 Contingency				
21	Amount of Annual Grant (sums of lines 2-20)	449,299.00	449,299.00	266,669.00	164,625.93
22	Amount of Line 21 Related to LBP Activities				
23	Amount of Line 21 Related to Section 504 Compliance				
24	Amount of Line 21 Related to Security - Soft Costs				
25	Amount of line 21 Related to Security - Hard Costs				
26	Amount of Line 21 Related to Energy Conservation Measures				

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

PHA Name		Grant Type and Number:					Federal FY of Grant	
Hickory Public Housing Authority		Capital Fund Program No No: NC19PO5650104					2004	
		Replacement Housing Factor Grant No:						
Development Number	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	
Name/HA-Wide Activities								
HA-Wide								
Operations:		1406		30,000.00	30,000.00	30,000.00	30,000.00	Complete
Management Improvements:								
Executive Director - Salary		1408		12,000.00	12,000.00	12,000.00	12,000.00	Complete
Employee training		1408		4,000.00	4,000.00	4,000.00	3,989.81	Obligated
Resident Services		1408		35,000.00	35,000.00	35,000.00	20,899.67	Obligated
Police patrol (1) x 15hr. Wk x52		1408		15,000.00	15,000.00	15,000.00	3,607.50	Obligated
	Total 1408			66,000.00	66,000.00	66,000.00	40,496.98	
Administration:								
Director of Technical Services - Salary		1410		44,930.00	44,930.00	44,930.00	32,263.01	Obligated
	Total 1410			44,930.00	44,930.00	44,930.00	32,263.01	
Fees & Costs:								
Hire Consultant for Needs Assessment		1430		4,000.00	4,000.00	4,000.00		Obligated
A/E		1430		22,000.00	22,000.00	22,000.00	6,759.00	Obligated
	Total 1430			26,000.00	26,000.00	26,000.00	6,759.00	
Site Improvements:		1450						
NC 561	Site Improvements			8,000.00	8,000.00	0.00		Out for Bid
Sunny Valley	Site Improvements			6,900.00	6,900.00	1,180.00	1,180.00	
Hillside	Rework dumpster screen pads, benches, loose siding, additional handrails at steps, clean out ditches, sidewalks, landscaping, tree removal (and going thru fence) misc. paint of columns & doors, etc. - fence repair							
NC 561	Site Improvements			6,100.00	6,100.00	990.00	990.00	
Ridgecrest	Total 1450			21,000.00	21,000.00	2,170.00	2,170.00	

HOUSING AUTHORITY OF HICKORY
ADMISSIONS AND CONTINUED OCCUPANCY POLICY

APPROVED AND ADOPTED
BY THE
BOARD OF COMMISSIONERS JUNE 23, 2005

This Admissions and Continued Occupancy Policy defines the Housing Authority of Hickory's policies for the operation of the Public Housing Program, incorporating Federal, State and local law. If there is any conflict between this policy and laws or regulations, the laws and regulations will prevail.

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1.0 FAIR HOUSING

It is the policy of the Hickory Public Housing Authority to fully comply with all Federal, State and local nondiscrimination laws; the Americans with Disabilities Act; and the U.S. Department of Housing and Urban Development regulations governing Fair Housing and Equal Opportunity.

No person shall, on the grounds of race, color, sex, sexual orientation, marital status, age, religion, national or ethnic origin, familial status, or disability be excluded from participation in, be denied the benefits of, or be otherwise subjected to discrimination under the Hickory Public Housing Authority's programs.

To further its commitment to full compliance with applicable Civil Rights laws, the Housing Authority will provide Federal/State/Local information to applicants/residents of the Public Housing Program regarding discrimination and any recourse available to them if they believe they may be victims of discrimination. Such information will be made available with the application, and all applicable Fair Housing Information and Discrimination Complaint Forms will be made available at the Housing Authority office. In addition, all written information and advertisements will contain the appropriate Equal Opportunity language and logo.

The Hickory Public Housing Authority will assist any family that believes they have suffered illegal discrimination by providing them copies of the appropriate housing discrimination forms. The Housing Authority will also assist them in completing the forms if requested, and will provide them with the address of the nearest HUD office of Fair Housing and Equal Opportunity.

2.0 REASONABLE ACCOMMODATION

Sometimes people with disabilities may need a reasonable accommodation in order to take full advantage of the Housing Authority housing programs and related services. When such accommodations are granted, they do not confer special treatment or advantage for the person with a disability; rather, they make the program accessible to them in a way that would otherwise not be possible due to their disability. This policy clarifies how people can request accommodations and the guidelines the Hickory Public Housing Authority will follow in determining whether it is reasonable to provide a requested accommodation. Because disabilities are not always apparent, the Housing Authority will ensure that all applicants/residents are aware of the opportunity to request reasonable accommodations.

2.1 COMMUNICATION

Any request for Reasonable Accommodation must be in writing and must specify the accommodation desired.

All decisions granting or denying requests for reasonable accommodations will be in writing.

2.2 QUESTIONS TO ASK IN GRANTING THE ACCOMMODATION

- A. Is the requestor a person with disabilities? For this purpose the definition of a person with disabilities is different than the definition used for admission. The Fair Housing definition used for this purpose is:

A person with a physical or mental impairment that substantially limits one or more major life activities, has a record of such impairment, or is regarded as having such impairment. (The disability may not be apparent to others, e.g., heart condition.)

If the disability is apparent or already documented, the answer to this question is yes. It is possible that the disability for which the accommodation is being requested is a disability other than the apparent disability. If the disability is not apparent or documented, the Housing Authority will obtain verification that the person is a person with a disability.

- B. Is the requested accommodation related to the disability? If it is apparent that the request is related to the apparent or documented disability, the answer to this question is yes. If it is not apparent, the Housing Authority will obtain documentation that the requested accommodation is needed due to the disability.

The Hickory Public Housing Authority will not inquire as to the nature of the disability.

- C. Is the requested accommodation reasonable? In order to be determined reasonable, the accommodation must meet two criteria:
1. Would the accommodation constitute a fundamental alteration? The Housing Authority's business is housing.
 2. If the request would alter the fundamental business that the Housing Authority conducts, that would not be reasonable. For instance, the Housing Authority would deny a request to have the Hickory Public Housing Authority do grocery shopping for a person with disabilities.
 3. Would the requested accommodation create an undue financial hardship or administrative burden? Frequently the requested accommodation costs little or nothing. If the cost would be an undue burden, the Housing Authority may request a meeting with the individual to investigate and consider equally effective alternatives.

- D. Generally the individual knows best what it is he/she needs; however, the Housing Authority retains the right to be shown how the requested accommodation enables the individual to access or use the Housing Authority's programs or services.

If more than one accommodation is equally effective in providing access to the Hickory Public Housing Authority's programs and services, the Housing Authority retains the right to select the most efficient or economic choice.

The cost necessary to carry out approved requests, including requests for physical modifications, will be borne by the Housing Authority if there is no one else willing to pay for the modifications. If another party pays for the modification, the Hickory Public Housing Authority will seek to have the same entity pay for any restoration costs.

Any request for an accommodation that would enable a resident to materially violate essential lease terms will not be approved, e.g., allowing nonpayment of rent, destruction of property, disturbing the peaceful enjoyment of others, etc.

3.0 RIGHT TO PRIVACY

All adult members of both applicant and resident households are required to sign HUD Form 9886, Authorization for Release of Information and Privacy Act Notice. The Authorization for Release of Information and Privacy Act Notice states how family information will be released and includes the Federal Privacy Act Statement.

Any request for applicant or resident information will not be released unless there is a signed release of information request from the applicant or resident.

4.0 REQUIRED POSTINGS

In each of its offices, the Housing Authority will post, in a conspicuous place and at a height easily read by all persons including persons with mobility disabilities, the following information:

- A. Statement of Policies and Procedures governing Admission and Continued Occupancy
- B. A listing of all the developments by name, address, number of units, address of all project offices, office hours, telephone numbers, TDD numbers, and Resident Facilities and operation hours
- C. Income Limits for Admission
- D. Utility Allowance Schedule
- E. Current Schedule of Routine Maintenance Charges
- F. Dwelling Lease

- G. Grievance Procedure
- H. Fair Housing Poster
- I. Equal Opportunity in Employment Poster
- J. Any current Housing Authority Notices

5.0 TAKING APPLICATIONS

Families wishing to apply for the Public Housing Program will be required to complete an application for housing assistance. Applications will be accepted on Tuesday, Wednesday and Thursday of each week from 9:00 AM to 11:30 AM and 1:00 to 3:00 PM at: Hickory Public Housing Authority, 841 South Center Street, Hickory, North Carolina 28602.

All admissions to public housing shall be made on the basis of a written application in such form, as the Authority shall prescribe. The Application for Admission shall constitute the basic legal record of each family applying for admission and shall support the Authority's determinations of eligibility status, priority status, rent, and size of unit for which the applicant is qualified. All supplemental materials pertaining to eligibility shall be considered a part of the application record and carefully recorded.

This includes verifications of income and family composition and such other data as may be required. The following conditions shall govern the taking and processing of applications.

1. The Authority shall not discriminate based upon race, color, creed, religion, national origin, sex, sexual orientation, marital status, age, handicap or disability, familial status, or recipients of public assistance and shall comply with all nondiscrimination requirements of Federal, State and Local law.
2. Applications for public housing will be in writing on a form provided by the Housing Authority. Authority staff will complete the application and all related forms based on information provided by the applicant. The applicant shall sign and certify, subject to civil and criminal penalties, to the accuracy of all statements made therein. The Authority reserves the right to require the signature of any or all-adult members of the applicant household.
3. Any changes to the application are to be made by drawing a single line through the original entries and entering the correct data. The reason and authority for each change shall be noted in the record, which shall be dated and initialed by the person making the change.

4. Applicants will be required to submit verification documentation as part of the application process. Applicants will be given a list of required verifications at the time of their interview with Housing Authority personnel for the purpose of determining eligibility.
5. Applicants who provide all required verification documentation will be placed on the waiting list based on the family's verified preference and the date and time all verifications and completed application were received by the Housing Authority. Application shall be considered complete when all required verifications are received and all application questions are completed. No blanks shall be left on the application. The application shall be signed by the applicant and designated Housing Authority staff person.
6. The Authority reserves the right to establish times for taking applications, including by appointment. The Authority staff may at its discretion provide for application interviews outside normal hours when necessary.
7. Applications shall be updated as applicants report changes in income and family circumstances. All modifications to applications shall be properly documented and the transaction initialed by the staff member making the change.
8. The Authority shall, on a continuous basis, purge the application pool of applicants no longer actively seeking housing. Normally, this shall be performed by removing applicants who fail to notify the office of continued interest in a housing assignment. It shall be the sole responsibility of the applicant to contact the Authority by phone or in person to update the information contained in the application for admission every three months. All contacts by applicants will be noted on a log attached to the application, and changes if any will be noted as stated in Section 3 above. Applications with no contact noted for a period of over three months will be removed to the inactive file.
9. The Authority shall maintain such records as are necessary to document the disposition of all applications and to meet Department of Housing and Urban Development audit requirements.

6.0 ELIGIBILITY FOR ADMISSION

6.1 INTRODUCTION

There are five eligibility requirements for admission to public housing:

- A. Qualifies as a family.
- B. Has an income within the income limits.
- C. Meets citizenship/eligible immigrant criteria.
- D. Provides documentation of Social Security numbers.
- E. Sign consent authorization documents.

In addition to the eligibility criteria, families must also meet the Hickory Public Housing Authority screening criteria in order to be admitted to public housing.

6.2 ELIGIBILITY CRITERIA

A. Family status:

1. A family with or without children. Such a family is defined as a group of people related by blood, marriage, adoption, or affinity that live together in a stable family relationship.
 - a. Children temporarily absent from the home due to placement in foster care are considered family members.
 - b. Unborn children and children in the process of being adopted are considered family members for the purpose of determining bedroom size but are not considered family members for determining income limit.
2. An **elderly family**, which is:
 - a. A family whose head, spouse, or sole member is a person who is at least 62 years of age;
 - b. Two or more persons who are at least 62 years of age living together; or
 - c. One or more persons who are at least 62 years of age living with one or more live-in aides.
3. A **near-elderly family**, which is:
 - a. A family whose head, spouse, or sole member is a person who is at least 50 years of age but below the age of 62;

- b. Two or more persons, who are at least 50 years of age but below the age of 62, living together; or
 - c. One or more persons, who are at least 50 years of age but below the age of 62, living with one or more live-in aides.
 - 4. **Adisabled family** , which is:
 - a. A family whose head, spouse, or sole member is a person with disabilities;
 - b. Two or more persons with disabilities living together; or
 - c. One or more persons with disabilities living with one or more live-in aides.
 - 5. **Adisplaced family** , which is a family in which each member, or whose sole member, has been displaced by governmental action, or whose dwelling has been extensively damaged or destroyed as a result of a disaster declared or otherwise formally recognized pursuant to Federal disaster relief laws.
 - 6. **Aremaining member of a resident family** .
 - 7. **As ingle person** who is not an elderly or displaced person, a person with disabilities, or the remaining member of a resident family.
- B. Income eligibility
- 1. To be eligible for admission to developments or scattered-site units that were available for occupancy before 10/1/81, the family's annual income must be within the low-income limit set by HUD. This means the family income cannot exceed 80 percent of the median income for the area.
 - 2. Income limits apply only at admission and are not applicable for continued occupancy.
 - 3. A family may not be admitted to the public housing program from another assisted housing program (e.g., resident-based Section 8) or from a public housing program operated by another housing authority without meeting the income requirements of the Housing Authority.
 - 4. Income limit restrictions do not apply to families transferring within our Public Housing Program.
- C. Citizenship/Eligibility Status
- 1. To be eligible each member of the family must be a citizen, national, or a non-citizen who has eligible immigration status under one of the

categories set forth in Section 214 of the Housing and Community Development Act of 1980 (see 42 U.S.C. 1436a(a)).

2. Family eligibility for assistance.
 - a. A family shall not be eligible for assistance unless every member of the family residing in the unit is determined to have eligible status, with the exceptions noted below.
 - b. Despite the ineligibility of one or more family members, a mixed family may be eligible for one of three types of assistance. (See Section 13.6 for calculating rents under the non-citizen rule.)
 - c. A family without any eligible members and receiving assistance on June 19, 1995, may be eligible for temporary deferral of termination of assistance.

D. Social Security Number Documentation

To be eligible, all family members 6 years of age and older must provide a Social Security card or documentation they have applied for one.

E. Signing Consent Forms

1. In order to be eligible, each member of the family who is at least 18 years of age, and each family head and spouse regardless of age, shall sign one or more consent forms.
2. The consent form must contain, at a minimum, the following:
 - a. A provision authorizing HUD or the Housing Authority to obtain from State Wage Information Collection Agencies (SWICAs) any information or materials necessary to complete or verify the application for participation or for eligibility for continued occupancy; and
 - b. A provision authorizing HUD or the Housing Authority to verify with previous or current employers income information pertinent to the family's eligibility for or level of assistance;
 - c. A provision authorizing HUD to request income information from the IRS and the SSA for the sole purpose of verifying income
 - d. A statement that the authorization to release the information requested by the consent form expires 15 months after the date the consent form is signed.

3. Conducting Background Checks

The PHA will obtain criminal background information concerning a "household member" for applicant screening, lease enforcement, or eviction. Prior to performing or requesting a background check. The PHA must obtain signed written consent forms from the applicant or household member. All criminal background checks conducted must be done consistently for every applicant and/or resident.

If, after a criminal background check has been conducted, it is discovered that the applicant or tenant provided false information, the PHA may deny admissions to the applicant or may evict the tenant in accordance with its standards for admissions screening or for termination of tenancy. However, the household must be notified by the PHA of the proposed action to be based on the information and must provide the subject of the record, and the applicant or tenant, with a copy of such information, and an opportunity to dispute the accuracy and relevance of the information obtained from any law enforcement agency.

6.3 *SUITABILITY*

- A. Applicant families will be evaluated to determine whether, based on their recent behavior, such behavior could reasonably be expected to result in noncompliance with the public housing lease. The Housing Authority will look at past conduct as an indicator of future conduct. Emphasis will be placed on whether a family's admission could reasonably be expected to have a detrimental effect on the development environment, other residents, Housing Authority employees, or other people residing in the immediate vicinity of the property. Otherwise eligible families will be denied admission if they fail to meet the suitability criteria.

The Housing Authority Has adopted the Intensified Tenant Screening Policy and One Strike/Zero Tolerance Policy which allows denial of applicants and eviction of residents for drug related criminal activity, alcohol abuse or any criminal activity which threatens the well being of pha residents, staff and/or surrounding communities.(See Attached One Strike Policy)

- B. The Housing Authority will consider objective and reasonable aspects of the family's background, including the following:
1. History of meeting financial obligations, especially rent;
 2. Ability to maintain (or with assistance would have the ability to maintain) their housing in a decent and safe condition based on living or housekeeping habits and whether such habits could adversely affect the health, safety, or welfare of other residents;

3. History of criminal activity by any household member involving crimes of physical violence against persons or property and any other criminal activity including drug-related criminal activity that would adversely affect the health, safety, or well-being of other residents or staff or cause damage to the property;
 4. History of disturbing neighbors or destruction of property;
 5. Having committed fraud in connection with any Federal housing assistance program, including the intentional misrepresentation of information related to their housing application or benefits derived there from; and
 6. History of abusing alcohol in a way that may interfere with the health, safety, or right to peaceful enjoyment by others.
- C. The Housing Authority will ask applicants to provide information demonstrating their ability to comply with the essential elements of the lease. The Housing Authority will verify the information provided. Such verification may include but may not be limited to the following:
1. A credit check of all adult household members;
 2. A rental history check of all adult family members;
 3. Criminal backgrounds check on all adult household members, including live-in aides. This check will be made through State or Local law enforcement or court records in those cases where the household member has lived in the local jurisdiction for the last three years. Where the individual has lived outside the local area, the Housing Authority may require the applicant and other household members to contact law enforcement agencies where the individual had lived or request a check through the FBI's National Crime Information Center (NCIC);
 4. Home visit. The home visit provides the opportunity for the family to demonstrate their ability to maintain their home in a safe and sanitary manner. This inspection considers cleanliness and care of rooms, appliances, and appurtenances. The inspection may also consider any evidence of criminal activity; and
 5. A check of the State's lifetime sex offender registration program for each adult household member, including live-in aides. No individual registered with this program will be admitted to public housing.

6.4 *GROUNDS FOR DENIAL*

The Housing Authority is not required or obligated to assist applicants who:

- A. Do not meet all of the eligibility criteria;
- B. Do not supply information or documentation required by the application process;
- C. Have failed to respond to a written request for information or fails to declare their continued interest in the program;
- D. Have a history of not meeting financial obligations, i.e., current and/or back rent owed to landlord/agency, outstanding delinquent credit card payments including phone bills and outstanding balances owed to utility providers.

Exclusions

The following are excluded from the credit ranking process:

- Student loans
- Medical bills
- Child Support
- Tax Liens

Bankruptcy/Repossessions

If a bankruptcy or repossession was due to job loss, death in the family, or family separation, and the family did not have outstanding delinquent credit card payments/ loans, etc. in excess of \$1,500 prior to the above mentioned event they may still be eligible in the credit category. (Proof will be required)

- E. Do not have the ability to maintain (with assistance) their housing in a decent and safe condition where such habits could adversely affect the health, safety, or welfare of other residents;
- F. Have a history of criminal activity by any household member involving crimes of physical violence against persons or property and any other criminal activity including drug-related criminal activity that would adversely affect the health, safety, or well-being of other residents or staff or cause damage to the property;
- G. Have a history of disturbing neighbors or destruction of property;

- H. Currently owe rent or other amounts to any housing authority in connection with their public housing or Section 8 programs;
- I. Have committed fraud, bribery, or any other corruption in connection with any Federal housing assistance program, including the intentional misrepresentation of information related to their housing application or benefits derived there from;
- J. Were evicted from assisted housing within three years of the projected date of admission because of drug-related criminal activity involving the personal use or possession for personal use;
- K. Were evicted from assisted housing within five years of the projected date of admission because of drug-related criminal activity involving the illegal manufacture, sale, distribution, or possession with the intent to manufacture, sell, or distribute a controlled substance as defined in Section 102 of the Controlled Substances Act, 21 U.S.C. 802;
- L. Are illegally using a controlled substance or are abusing alcohol in a way that may interfere with the health, safety, or right to peaceful enjoyment of the premises by other residents. The Housing Authority may waive this requirement if:
 - 1. The person demonstrates to the Housing Authority's satisfaction that the person is no longer engaging in drug-related criminal activity or abuse of alcohol;
 - 2. Has successfully completed a supervised drug or alcohol rehabilitation program;
 - 3. Has otherwise been rehabilitated successfully; or
 - 4. Is participating in a supervised drug or alcohol rehabilitation program,
- M. Have engaged in or threatened abusive or violent behavior towards any Housing Authority staff or residents;
- N. Violent criminal activity;
- O. Other criminal activity that would threaten the health or safety of the PHA or Owner or any employee, contractor, subcontractor or agent of the PHA or Owner who is involved in the housing operations.
- P. Have a household member who has ever been evicted from public housing;
- Q. Have a family household member who has been terminated under an assisted housing program (Section 8, New Construction etc.,)

- R. Denied for Life: If any family member has been convicted of manufacturing or producing methamphetamine (speed) in a public housing development or in a Section 8 assisted property;
- S. Denied for Life: Has a lifetime registration under a State sex offender registration program.

6.5 *INFORMAL REVIEW*

- A. If the Housing Authority determines that an applicant does not meet the criteria for receiving public housing assistance, the Housing Authority will promptly provide the applicant with written notice of the determination.

The notice must contain a brief statement of the reason(s) for the decision and State that the applicant may request an informal review of the decision within 10 business days of the denial. The Housing Authority will describe how to obtain the informal review.

Any person designated by the Housing Authority, other than a person who made or approved the decision under review or subordinate of this person may conduct the informal review. The applicant must be given the opportunity to present written or oral objections to the Housing Authority's decision. The Housing Authority must notify the applicant of the final decision within 14 calendar days after the informal review, including a brief statement of the reason for the final decision.

- B. The participant family may request that the Housing Authority provide for an Informal Hearing after the family has notification of an INS decision on their citizenship status on appeal, or in lieu of request of appeal to the INS. The participant family must make this request within 30 days of receipt of the Notice of Denial or Termination of Assistance, or within 30 days of receipt of the INS appeal decision.

For the participant families, the Informal Hearing Process above will be utilized with the exception that the participant family will have up to 30 days of receipt of the Notice of Denial or Termination of Assistance, or of the INS appeal decision.

7.0 WAITING LIST

7.1 *ORGANIZATION OF THE WAITING LIST*

The waiting list will be maintained in accordance with the following guidelines:

- A. The Authority shall maintain such records as are necessary to document the disposition of all applications and to meet Department of Housing and Urban Development audit requirements;
- B. All applications will be maintained in order of bedroom size, preference, and then in order of date and time of application; and

- C. Any contacts between the Housing Authority and the applicant will be documented in the applicant file.

7.2 *PURGING THE WAITING LIST*

The Housing Authority will update and purge its waiting list on a continuous basis to ensure that the pool of applicants reasonably represents the interested families for whom the Housing Authority has current information, i.e., applicant's address, family composition, income category, and preferences.

7.3 *REMOVAL OF APPLICANTS FROM THE WAITING LIST*

The Housing Authority will not remove an applicant's name from the waiting list unless:

- A. The applicant requests that the application be removed;
- B. The applicant fails to respond to written request for information or fails to declare their continued interest in the program; or
- C. The applicant does not meet either the eligibility or suitability criteria for the program.

7.4 *MISSED APPOINTMENTS*

The Housing Authority will allow applicants who fail to keep a scheduled appointment for good cause to reschedule. Generally, no more than one opportunity will be given to reschedule without good cause, and no more than two opportunities will be given for good cause. When good cause exists for missing an appointment, the Housing Authority will work closely with the family to find a more suitable time.

7.5 *NOTIFICATION OF NEGATIVE ACTIONS*

If an applicant claims that their failure to respond to a request for information or updates was caused by a disability, the Housing Authority will verify that there is in fact a disability and the disability caused the failure to respond, and provide a reasonable accommodation. An example of a reasonable accommodation would be to reinstate the applicant on the waiting list based on the date and time of the original application.

8.0 RESIDENT SELECTION AND ASSIGNMENT PLAN

8.1 PREFERENCES

- A. Working Family Preference. A working family is defined as a family whose head or spouse has been regularly employed for the last ninety-(90) days. Regularly employed means full-time or part-time employment, which required the employee to work on a regular basis, which is not considered as temporary, non-recurring, or sporadic. A working family also includes a family whose head, spouse, or sole member is age 62 or older and/or receiving social security disability, supplemental security income disability benefits, or any other payments based on an individual's inability to work.
- B. All other applicants
- C. Victims of Reprisals, hate crimes or victims of substantial violence

The date and time of application will be noted and utilized to determine the sequence within the above-prescribed preferences.

Buildings Designed for the Elderly and Disabled: Preference will be given to elderly and disabled families. If there are no elderly or disabled families on the list, preference will then be given to near-elderly families.

8.2 ASSIGNMENT OF BEDROOM SIZES

The following guidelines will determine each family's unit size without overcrowding or overhousing:

Number of Bedrooms	Number of Persons	
	Minimum	Maximum
0	1	1
1	1	2
2	2	4
3	3	6
4	4	8
5	5	10

These occupancy standards are based on the assumption that each bedroom will accommodate no more than two (2) persons.

In determining bedroom size, the Housing Authority will include the presence of children to be born to a pregnant woman, children who are in the process of being adopted, children whose custody is being obtained, children who are temporarily away at school, or children who are temporarily in foster care.

In addition, the following considerations may be taken in determining bedroom size:

- A. Children of the same sex will share a bedroom as long as there is not a generation difference in age.
- B. Children of the opposite sex, both under the age of four (4) will share a bedroom.
- C. Adults and children may not be required to share a bedroom.
- D. Foster adults and/or foster children will not be required to share a bedroom with family members.
- E. Live-in aides will get a separate bedroom.

Exceptions to normal bedroom size standards include the following:

- A. Units smaller than assigned through the above guidelines -A family may request a smaller unit size than the guidelines allow. The Housing Authority will allow the smaller size unit so long as generally no more than two (2) people per bedroom are assigned.
- B. Units larger than assigned through the above guidelines -A family may request a larger unit size than the guidelines allow. The Housing Authority will allow the larger size unit if the family provides a verified medical need that the family be housed in a larger unit.
- C. If there are no families on the waiting list for a larger size, smaller families may be housed if they agree to transfer (at the family's own expense) to the appropriate size unit when an eligible family needing the larger unit applies.
- D. Larger units may be offered in order to improve the marketing of a development suffering a high vacancy rate.

8.3 *SELECTION FROM THE WAITING LIST*

The Housing Authority shall follow the statutory requirement that at least 40% of newly admitted families in any fiscal year be families whose annual income is at or below 30% of the area median income.

8.4 *DECONCENTRATION POLICY*

It is the Housing Authority's policy to provide for deconcentration of poverty and encourage income mixing by bringing higher income families into lower income developments and lower income families into higher income developments. Toward this end, we will skip families on the waiting list to reach other families with a lower or higher income. We will accomplish this in a uniform and non-discriminating manner.

The Housing Authority will affirmatively market our housing to all eligible income groups. Lower income residents will not be steered toward lower income developments and higher income people will not be steered toward higher income developments.

Prior to the beginning of each fiscal year, we will analyze the income levels of families residing in each of our developments, the income levels of census tracts in which our developments are located, and the income levels of the families on the waiting list. Based on this analysis, we will determine the level of marketing strategies and deconcentration, incentives to implement. The worksheet for the analysis can be found in Appendix I.

8.5 *OFFER OF A UNIT*

When the Housing Authority discovers that a unit will become available, we will contact the first family on the waiting list who has the highest priority for this type of unit or development and whose income category would help to meet the deconcentration goal and/or the income-targeting goal.

The family will be offered the opportunity to view the unit or a similar unit if available. After the opportunity to view the unit after receipt of notification and the unit is ready, the family will have one (1) business day to accept or reject the unit. This verbal offer and the family's decision must be documented in the resident file. If the family rejects the offer of the unit, the Housing Authority will document the offer and the rejection.

The family is given three refusals of offers in a twelve month period, three refusals in a twelve month period will result in their name being dropped from the waiting list.

8.6 *REJECTION OF UNIT*

If in making the offer to the family the Housing Authority skipped over other families on the waiting list in order to meet their deconcentration goal and the family rejects the unit, the family will not lose their place on the waiting list and will not be otherwise penalized.

If the Housing Authority did not skip over other families on the waiting list to reach this family, and the family rejects family will forfeit their application's date and time. The

family will keep their preferences, but the date and time of application will be changed to the date and time the unit was rejected.

If the family rejects with good cause any unit offered, they will not lose their place on the waiting list. Good cause includes reasons related to health, proximity to work, school, and childcare (for those working or going to school). The family will be offered the right to an informal review of the decision to alter their application status.

8.7 ACCEPTANCE OF UNIT

The family will be required to sign a lease that will become effective on the date of move-in.

The applicant will be provided copies of: the **dwelling lease, grievance procedure, a booklet on lead based paint titled "Protect your Family from Lead in Your Home", current schedule of routine maintenance charges, occupancy rules, Fire and Safety literature, move-in inspection sheet, Pet Policy, and a request for reasonable accommodation form.** These documents will be explained in detail. The applicant will sign a certification that he/she has received these documents and that he/she has reviewed them with Housing Authority personnel. The certification will be filed in the resident's file.

The signing of the lease and the review of financial information are to be privately handled. The head of household and all adult family members will be required to execute the lease prior to admission. One executed copy of the lease will be furnished to the head of household, and the Housing Authority will retain the original executed lease in the resident's file. A copy of the grievance procedure will be attached to the resident's copy of the lease.

The family will pay a security deposit at the time of lease signing. All new tenants will pay a security deposit equivalent to minimum of \$150.00 or one month's rent, whichever is greater. The exception to this is tenants with a minimum rent. In such case the security deposit will be \$100.00, or one month's rent whichever is greater.

In the case of a move within public housing, the security deposit for the first unit will be transferred to the second unit. Additionally, if the security deposit for the second unit is greater than that for the first, the difference will be collected from the family. Conversely, if the security deposit is less, the difference will be refunded to the family after an inspection of the unit transferred from is conducted.

In the event there are costs attributable to the family for bringing the first unit into condition for re-renting, the family shall be billed for these charges.

9.0 INCOME, EXCLUSIONS FROM INCOME, AND DEDUCTIONS FROM INCOME

To determine annual income, the Housing Authority counts the income of all family members, excluding the types and sources of income that are specifically excluded. Once the annual income is determined, the Housing Authority subtracts all allowable deductions (allowances) to determine the Total Resident Payment.

9.1 INCOME

Annual income means all amounts, monetary or not, that:

- A. Go to (or on behalf of) the family head or spouse (even if temporarily absent) or to any other family member; or
- B. Are anticipated to be received from a source outside the family during the 12- month period following admission or annual reexamination effective date; and
- C. Are not specifically excluded from annual income.

Annual income includes, but is not limited to:

- A. The full amount, before any payroll deductions, of wages and salaries, overtime pay, commissions, fees, tips and bonuses, and other compensation for personal services.
- B. The net income from the operation of a business or profession. Expenditures for business expansion or amortization of capital indebtedness are not used as deductions in determining net income.

An allowance for depreciation of assets used in a business or profession may be deducted, based on straight-line depreciation, as provided in Internal Revenue Service regulations. Any withdrawal of cash or assets from the operation of a business or profession is included in income, except to the extent the withdrawal is a reimbursement of cash or assets invested in the operation by the family. Current IRA form 1040 can serve as documentation for the above.

- C. Interest, dividends, and other net income of any kind from real or personal property. Expenditures for amortization of capital indebtedness are not used as deductions in determining net income. An allowance for depreciation of assets used in a business or profession may be deducted, based on straight-line depreciation, as provided in Internal Revenue Service regulations.

- D. Any withdrawal of cash or assets from an investment is included in income, except to the extent the withdrawal is reimbursement of cash or assets invested by the family. Where the family has net family assets in excess of \$5,000, annual income includes the greater of the actual income derived from all net family assets or a percentage of the value of such assets based on the current passbook savings rate, as determined by HUD.
- E. The full amount of periodic amounts received from Social Security, annuities, insurance policies, retirement funds, pensions, disability or death benefits, and other similar types of periodic receipts, including a lump-sum amount or prospective monthly amounts for the delayed start of a periodic amount. (However, deferred periodic amounts from supplemental security income and Social Security benefits that are received in a lump-sum amount or in prospective monthly amounts are excluded.)
- F. Payments in lieu of earnings, such as unemployment and disability compensation, workers' compensation, and severance pay. (However, lump-sum additions such as insurance payments from workers' compensation are excluded.)
- G. Welfare assistance.
 - 1. If the welfare assistance payment includes an amount specifically designated for shelter and utilities that is subject to adjustment by the welfare assistance agency in accordance with the actual cost of shelter and utilities, the amount of welfare assistance income to be included as income consists of:
 - a. The amount of the allowance or grant exclusive of the amount specifically designated for shelter or utilities; plus
 - b. The maximum amount that the welfare assistance agency could in fact allow the family for shelter and utilities. If the family's welfare assistance is ratably reduced from the standard of need by applying a percentage, the amount calculated under this requirement is the amount resulting from one application of the percentage.
 - 2. If the amount of welfare is reduced due to an act of fraud by a family member or because of any family member's failure to comply with requirements to participate in an economic self-sufficiency program or work activity, the amount of rent required to be paid by the family will not be decreased. In such cases, the amount of income attributable to the family will include what the family would have received had they complied with the welfare requirements and/or had not committed an act of fraud.

3. If the amount of welfare assistance is reduced as a result of a lifetime time limit, the reduced amount is the amount that shall be counted as income.
- H. Periodic and determinable allowances, such as alimony, child support payments, and regular contributions or gifts received from organizations or from persons not residing in the dwelling.
- I. All regular pay, special pay, and allowances of a member of the Armed Forces. (Special pay to a member exposed to hostile fire is excluded.)

9.2 ANNUAL INCOME

Annual income does not include the following:

- A. Income from employment of children (including foster children) under the age of 18.years;
- B. Payments received for the care of foster children or foster adults (usually persons with disabilities, unrelated to the resident family, who are unable to live alone);
- C. Lump-sum additions to family assets, such as inheritances, insurance payments (including payments under health and accident insurance and workers' compensation), capital gains, and settlement for personal or property losses;
- D. Amounts received by the family that is specifically for, or in reimbursement of, the cost of medical expenses for any family member;
- E. Income of a live-in aide;
- F. The full amount of student financial assistance paid directly to the student or to the educational institution, and amounts paid by the Government to a veteran, for use in meeting the cost of tuition, food, books, equipment, materials, supplies, transportation, and miscellaneous personal expenses of the student. Any amount of such scholarship or payment to a veteran not used for the above purposes that are available for subsistence is to be included in income.
- G. The special pay to a family member serving in the Armed Forces who is exposed to hostile fire;
- H. The amounts received from the following programs:
 1. Amounts received under training programs funded by HUD;
 2. Amounts received by a person with a disability that are disregarded for a limited time for purposes of Supplemental

Security Income eligibility and benefits because they are set aside for use under a Plan to Attain Self-Sufficiency (PASS);

3. Amounts received by a participant in other publicly assisted programs that are specifically for or in reimbursement of out-of-pocket expenses incurred (special equipment, clothing, transportation, child care, etc.) and that are made solely to allow participation in a specific program;
4. Amounts received under a resident service stipend. A resident service stipend is a modest amount (not to exceed \$200 per month) received by a resident for performing a service for the Housing Authority or owner, on a part-time basis, that enhances the quality of life in the development. Such services may include, but are not limited to, lawn maintenance, and resident initiatives coordination. No resident may receive more than one such stipend during the same period of time;
5. Incremental earnings and benefits resulting to any family member from participation in qualifying State or Local employment training programs (including training programs not affiliated with a local government). Amounts excluded by this provision must be received under employment training programs with clearly defined goals and objectives and are excluded only for the period during which the family member participates in the employment training program;
6. Temporary, nonrecurring, or sporadic income (including gifts);
7. Reparation payments paid by a foreign government pursuant to claims filed under the laws of that government by persons who were persecuted during the Nazi era;
8. **All earnings in excess of the first \$480 of full time students 18 or over, other than the head, spouse or co-head, **will not** be counted towards family income. Financial aid, scholarships, and grants received by full time students are not counted as income. Verification of full time student status includes:**
 - **Written verification from the registrar's office or other school official.**
 - **Enrollment record indicating enrollment for sufficient number of credits to be considered full time by the educational institution.**

Income and source of income will be verified to document exclusion.

9. Adoption assistance payments in excess of \$480 per adopted child;

Qualified family. A family residing in public housing: (The Nelrod Consortium 2002)

- (i) Whose annual income increases as a result of employment of a family member who was unemployed for one or more years previous to employment;
- (ii) Whose annual income increases as a result of increased earnings by a family member during participation in any economic self-sufficiency or other job training program; or
- (iii) Whose annual income increases, as a result of new employment or increased earnings of a family member, during or within six months after receiving assistance, benefits or services under any state program for temporary assistance for needy families funded under Part A of Title IV of the Social Security Act, as determined by the PHA in consultation with the local agencies administering temporary assistance for needy families (TANF) and Welfare-to-Work (WTW) programs. The TANF program is not limited to monthly income maintenance, but also includes such benefits and services as one-time payments, wage subsidies and transportation assistance—provided that the total amount over a six-month period is at least \$500.

(b) Disallowance of increase in annual income.

(1) Initial twelve month exclusion. During the cumulative twelve month period beginning on the date a member of a qualified family is first employed or the family first experiences an increase in annual income attributable to employment, the PHA must exclude from annual income (as defined in Sec.5.609 of this title) of a qualified family any increase income of the family member as a result of employment over prior income of that family member.

(2) Second twelve month exclusion and phase-in. During the second cumulative twelve month period after the date a member of a qualified family is first employed or the family first experiences an increase in annual income attributable to employment, the PHA must exclude from annual income of a qualified family fifty percent of any increase in income of such family member as a result of employment over income of that family member prior to the beginning of such employment.

(3) Maximum four year disallowance. The disallowance of increased income of an individual family member as provided in paragraph (b) (1) or (b) (2) of this section is limited to a lifetime 48 month period. It only applies for a maximum of twelve months for disallowance under paragraph (b) (1) and a maximum of twelve months for disallowance under paragraph (b) (2), during the 48 month period starting from the initial exclusion under paragraph (b) (1) of this section.

Note: While HUD regulations allow for the Housing Authority to offer an escrow account in lieu of having a portion of their income excluded under this paragraph, it is the policy of this housing authority to provide the exclusion in all cases.

10. Deferred periodic amounts from Supplemental Security Income and Social Security benefits that are received in a lump-sum amount or in prospective monthly amounts;
11. Amounts received by the family in the form of refunds or rebates under State or local law for property taxes paid on the dwelling unit;
12. Amounts paid by a State agency to a family with a member who has a developmental disability and is living at home to offset the cost of services and equipment needed to keep the developmentally disabled family member at home; or
13. Amounts specifically excluded by any other Federal statute from consideration as income for purposes of determining eligibility or benefits. These exclusions include:
 - a. The value of the allotment of food stamps.
 - b. Payments to volunteers under the Domestic Volunteer Services Act of 1973.
 - c. Payments received under the Alaska Native Claims Settlement Act.
 - d. Income from sub-marginal land of the U.S. that is held in trust for certain Indian tribes.
 - e. Payments made under HHS's Low-income Energy Assistance Program.
 - f. Payments received under the Job Training Partnership Act.
 - g. Income from the disposition of funds of the Grand River Band of Ottawa Indians.
 - h. The first \$2000 per capita received from judgment funds awarded for certain Indian claims.
 - i. Amount of scholarships awarded under Title IV including Work-Study.
 - j. Payments received under the Older Americans Act of 1965. k. Payments from Agent Orange Settlement.
 - k. Payments received under the Maine Indian Claims Act.

- l. The value of childcare under the Childcare and Development Block Grant Act of 1990.
- m. Earned income tax credit refund payments.
- n. Payments for living expenses under the Americorps Program.
- o. The earned income of a person under 18 years old (including foster children) who is not the head of household or the spouse of the head of the household.

Note: The Housing Authority will not provide exclusions from income in addition to those already provided for by HUD.

9.3 DEDUCTIONS FROM ANNUAL INCOME

The following deductions will be made from annual income:

- A. \$480 for each dependent.
- B. \$400 for any elderly family or disabled family.
- C. For any family that is not an elderly or disabled family but has a member (other than the head or spouse) who is a person with a disability, disability assistance expenses in excess of 3% of annual income. This allowance may not exceed the employment income received by family members who are 18 years of age or older as a result of the assistance to the person with disabilities.
- D. For any elderly or disabled family:
 - 1. That has no disability assistance expenses, an allowance for medical expenses equal to the amount by which the medical expenses exceed 3% of annual Income;
 - 2. That has disability expenses greater than or equal to 3% of annual income, an allowance for disability assistance expenses computed in accordance with paragraph C, plus an allowance for medical expenses that equal the family's medical expenses;
 - 3. That has disability assistance expenses that are less than 3% of annual income, an allowance for combined disability assistance expenses and medical expenses that is equal to the total of these expenses less 3% of annual income.

Families are entitled to a deduction for unreimbursed medical expenses to cover care attendants and auxiliary apparatus expenses for each member of the family who is a person with disabilities, to the extent necessary to enable any member of the family (including the member who is a person with disabilities) to be

employed. This deduction may not exceed the earned income received by family members who are 18 years of age or older, and who are able to work because of such attendant care or auxiliary apparatus. The allowable disability assistance expense is that portion that exceeds three percent of annual income.

Examples of Auxiliary Apparatus Items:

- Wheelchairs
 - Ramps
 - Adaptations to vehicles
 - Special equipment to enable a blind person to read or type
- E. Medical expenses. Disallowed or elderly families are entitled to a deduction for unreimbursed medical expenses. The allowable medical expense is that portion that exceeds three percent of annual income. A disabled family is defined as a family whose head, spouse or sole member is a person with disabilities. It may include two or more persons with disabilities living with one or more live-in aides. An elderly family is defined as a family whose head, spouse, or sole member is a person who is at least 62 years of age. The medical expense deduction is permitted only for households in which the head or spouse is at least 62 years of age or disabled. If the household is eligible for the medical expense deduction, the medical expenses of all family members may be counted.

Examples of allowable medical expenses:

- Acupuncture
- Artificial Limbs
- Braille Books and Magazines
- Chiropractor
- Crutches
- Dental Treatment
- Hearing Aids
- Health Insurance Premiums
- Home Care
- Hospital Services

- Laboratory Fees
- Long Term Care
- Monthly Payment on Medical Bills
- Prescription Medicines
- Nursing Home
- Optometrist
- Oxygen
- Surgery
- Therapy
- Transportation

F. Income calculation regarding Medicare Prescription Drug Cards and Transitional Assistance

On December 8, 2003, President Bush signed into law the Medicare Prescription Drug, Improvement and Modernization Act (MMA) of 2003. Until the new Medicare drug benefit becomes available in 2006, the MMA provides for the issuance of prescription drug discount cards and transitional prescription drug assistance for Medicare beneficiaries who meet the eligibility criteria.

In addition to the prescription drug discount card, from June through December 2004, Medicare is providing, through the drug discount cards, a \$600 subsidy (Transitional Assistance) to Medicare beneficiaries whose incomes are not more than 135 percent of the poverty line and who do not have certain other drug coverage. The unused portion of the \$600 credit in 2004 will rollover to 2005. There will be a subsidy of up to \$600 in 2005, in addition to any rollover.

Statutory Requirement

Upon implementation of this statutory requirement, public and assisted housing income determinations, assistance or rents must not be affected in any way by this medicare benefit.

Coverage

This statutory requirement will only apply to those HUD program participants and applicants who are (1) receiving Medicare, and (2) have enrolled in the Medicare Prescription Drug Discount Card and Transitional Assistance programs.

Generally, family members are eligible for Medicare if they or their spouse worked for at least 10 years in Medicare-covered employment, are 65 years old, and are a citizen or permanent resident of the United States. A person might also qualify for coverage if he or she is a younger person with a disability or with End-Stage Renal disease (permanent kidney failure requiring dialysis or transplant).

Rent Calculations Covered By This Statutory Requirement

A. Annual Income

In calculating annual income for a family, any assistance or benefit received from the Medicare prescription discount card or the transitional assistance must be excluded as annual income for the purpose of calculating any rent or assistance.

B. Adjusted Income

The Medicare prescription drug discount cards and transitional assistance received by a family must be treated as a standard medical deduction when determining the family's medical expense deduction.——PHAs and Owners and Management Agents must verify the cost of the drugs without the Medicare negotiated price benefit for eligible drugs rather than verifying the out-of-pocket cost of the drugs to the tenant.

The standard medical deduction as described at 24 CFR 5.61 I(a)(3) continues to be the sum of allowable medical expenses that exceed three percent of annual income. Where all or part of the cost for prescription drugs is covered by the Medicare prescription drug discount or transitional assistance, neither the drug discount nor the transitional assistance should be considered a reimbursement for the purpose of calculating the medical expense deduction.

The prescription drug discount card program may have an enrollment fee as high as \$30. Any person who receives transitional assistance will have the enrollment fee paid by Medicare. However, any person for whom Medicare does not pay the enrollment fee may claim such fees as a medical deduction.

Who Is Eligible For The Discount Drug Cards And Transitional Assistance?

Family members are eligible for a discount drug card if they are enrolled under Medicare Part A or B, as long as they are not receiving outpatient drug benefits through Medicaid, including waivers under Section 1115 of the Social Security Act.

Medicare will provide a \$600 credit subsidy for the purchase of drugs in 2004, and up to an additional \$600 credit subsidy in 2005 if (1) a person is eligible for a Medicare drug discount card and (2) if their income is not more than 135 percent of the poverty line (\$12,569 for single individuals or \$16,862 for married individuals in 2004). To qualify, persons must not receive outpatient drug coverage from other sources, including Medicaid, TRICARE, group health insurance, or Federal Employee Health Benefit Plans (FEHBP) - except if the drug coverage is through a Part C Medicare+ Choice plan or a Medigap plan.

Implementation

The Medicare Prescription Drug Discount Card and Transitional Assistance programs began June 1, 2004. As of June 1, 2004, to limit the number of retroactive adjustments when calculating rent or assistance, PHAs and Owners and Management Agents must:

- Exclude from annual income the \$600 transitional assistance subsidy, for applicants and tenants enrolled in the Medicare transitional assistance program, effective the date of receiving the benefits.
- Exclude from annual income any negotiated drug discount pursuant to the Medicare prescription drug discount card.
- In cases where medical expenses are normally deducted from a HUD participant's income, include as a medical deduction the Medicare assistance provided for the -cost of drugs pursuant to prescription drug discount cards, negotiated drug price, or transitional assistance subsidies.

G. Child care expenses. Amounts to be paid by the Family for the care of children under 13 years of age during the period for which Annual Income is computed, but only where such care is necessary to enable a Family member to **actively seek employment**, be gainfully employed or to further his or her education and only to the extent such amounts are not reimbursed. The amount deducted shall reflect reasonable charges for childcare, and, in the case of childcare necessary to permit employment, the amount deducted shall not exceed the amount of income received from such employment. The reasonable amount of charges is determined by the PHA, by conducting surveys of local child care providers. The results are posted in the PHA office(s).

10.0 VERIFICATION

The Housing Authority will verify information related to waiting list preferences, eligibility, admission, and level of benefits prior to admission. Periodically during occupancy, items related to eligibility and rent determination shall also be reviewed and verified. Income, assets, and expenses will be verified, as well as disability status, need for a live-in aide and other reasonable accommodations; full time student status of family members 18 years of age and older; Social Security numbers; and citizenship/eligible non-citizen status. Age and relationship will only be verified in those instances where needed to make a determination of level of assistance.

10.1 ACCEPTABLE METHODS OF VERIFICATION

Age, relationship, U.S. citizenship, and Social Security numbers will generally be verified with documentation provided by the family. For citizenship, the family's certification will be accepted. (Or for citizenship, documentation such as listed below will be required.) Verification of these items will include photocopies of the Social Security cards and other documents presented by the family, the INS SAVE approval code, and forms signed by the family.

Other information will be verified by third party verification. This type of verification includes written documentation with forms sent directly to and received directly by a source, not passed through the hands of the family. This verification may also be direct contact with the source, in person or by telephone. It may also be a report generated by a request from the Housing

Authority or automatically by another government agency, e.g., the Social Security Administration. Verification forms and reports received will be contained in the applicant/resident file. Oral third party documentation will include the same information as if the documentation had been written, i.e., name, date of contact, amount received, etc. Documents provided by the family will be maintained in the file.

When third party verification cannot be obtained, the Housing Authority will accept documentation received from the applicant/resident. Hand-carried documentation will be accepted if the Housing Authority has been unable to obtain third party verification in a 4-week period of time. Photocopies of the documents provided by the family will be maintained in the file.

10.2 TYPES OF VERIFICATION

Third Party Verification is defined as independent verification of income and/or expenses by contacting the individual income/expense source(s) supplied by the family. The verification documents must be supplied directly to the independent source by the HPHA and returned directly to HPHA from the independent source.

The tenant shall not hand carry documents to or from the independent source. The HPHA may elect to mail, fax, or e-mail the verification request form to the independent source.

In the event that the independent source does not respond to the HPHA faxed, mailed, or e-mailed request for information, the HPHA may pursue oral third party verification.

Written Third Party Verification is defined as independent verification of income and/or expenses source(s) supplied by the family. The verification documents must be supplied directly to the independent source by the HPHA and be returned directly to the HPHA from the independent source.

Oral Third Party Verification is defined as independent verification of income and /or expenses by contacting the individual income/expense source(s) supplied by the family, via telephone or in-person visit. HPHA staff should document in the tenant file, the date and time of the telephone call, the name of the person contacted and telephone number, along with the confirmed verified information.

This verification method is commonly used in the event that the independent source does not respond to the HPHA faxed, mailed, or e-mailed request for information in a reasonable time frame.

Upfront Income Verification is used to prevent fraud and abuse in HUD programs, the United States Code (USC) and Code of Federal Regulations (CFR) allow HUD and HPHA to obtain information about applicants and participants to determine their eligibility or level of benefits. Most importantly, the USC authorizes computer-matching agreements of income information.

LEVELS OF VERIFICATION METHODS

PHAs should begin with the highest level of verification methods. The use of lower level verification methods will place a higher burden on the PHA to justify its use of that particular verification method rather than a higher level of verification methods. PHAs may be required to provide documentation for each case.

Upfront (UIV) Written 3rd Party	Highest (Highly Recommended, highest level of third party verification) High (Mandatory if upfront income verification is not available or if UIV data differs substantially from tenant-reported information)
Oral 3rd Party	Medium (Mandatory if written third party verification is not available)
Document Review	Medium-Low (Use on provisional basis)
Tenant Declaration	Low (Use as a last resort)

Income Type	Upfront	Written Third Party	Oral Third Party	Document Review	Tenant Declaration
	(LEVEL 5)	(LEVEL 4)	(LEVEL 3)	(LEVEL 2)	(LEVEL 1)
Wages/Salaries	Use of computer matching agreements with a State Wage Information Collection Agency (SWICA) to obtain wage information electronically, by mail or fax or in person.	The PHA mails, faxes, or e-mails a verification form directly to the independent sources to obtain wage information.	In the event the independent source does not respond to the PHA's written request for information, the PHA may contact the independent source by phone or make an in person visit to obtain the requested information.	When neither form of third party verification can be obtained, the PHA may accept original documents such as consecutive pay stubs (HUD recommends the PHA review at least three months of pay stubs, if employed by the same employer for three months or more), W-2 forms, etc. from the tenant. Note: The PHA must document in the tenant file, the reason third party verification was not available.	The PHA may accept a notarized statement or affidavit from the tenant that declares the family's total annual income from earnings. Note: The PHA must document in the tenant file, the reason third party verification was not available.
	Agreements with private vendor agencies, such as The Work Number or ChoicePoint to obtain wage and salary information.	The PHA may have the tenant sign a Request for Earnings Statement from the SSA to confirm past earnings. The PHAs mails the form to SSA and the statement will be sent to the address the PHA specifies on the form.			
	Use of HUD systems, when available.				

Verification of Employment Income: The PHA should always obtain as much information as possible about the employment, such as start date (new employment), termination date (previous employment), pay frequency, pay rate, anticipated pay increases in the next twelve months, year- to-date earnings, bonuses, overtime, company name, address and telephone number, name and position of the person completing the employment verification form.

Effective Date of Employment: The PHA should always confirm start and termination dates of employment.

Self-Employment	Not Available	The PHA mails or faxes a verification form directly to sources identified by the family to obtain income information.	The PHA may call the source to obtain income information.	The PHA may accept any documents (i.e. tax returns, invoices and letters from customers) provided by the tenant to verify self-employment income. Note: The PHA must document in the tenant file, the reason third party verification was not obtained.	The PHA may accept a notarized statement or affidavit from the tenant that declares the family's total annual income from self-employment. Note: The PHA must document in the tenant file, the reason third party verification was not available.
<p>Verification of Self-Employment Income: Typically, it is a challenge for PHAs to obtain third party verification of self-employment income. When third party verification is not available, the PHA should always request a notarized tenant declaration that includes a perjury statement.</p>					
Social Security Benefits	Use of HUD Tenant Assessment System (TASS) to obtain current benefit history and discrepancy reports.	The PHA mails or faxes a verification form directly to the local SSA office to obtain social security benefit information. (Not Available in some areas because SSA makes this data available through TASS. SSA encourages PHAs to use TASS.)	The PHA may call SSA, with the tenant on the line, to confirm obtain current benefit amount. (Not Available in some areas because SSA makes this data available through TASS. SSA encourages PHAs to use TASS.)	The PHA may accept an original SSA Notice from the tenant. Note: The PHA must document in the tenant file, the reason third party verification was not available.	The PHA may accept a notarized statement or affidavit from the tenant that declares monthly social security benefits. Note: The PHA must document in the tenant file, the reason third party verification was not available.
Welfare Benefits	Use of computer matching agreements with the local Social Services Agency to obtain current benefit amount electronically, by mail or fax or in person.	The PHA mails, faxes, or e-mails a verification form directly to the local Social Services Agency to obtain welfare benefit information.	The PHA may call the local Social Services Agency to confirm obtain current benefit amount.	The PHA may review an original award notice or printout from the local Social Services Agency provided by the tenant. Note: The PHA must document in the tenant file, the reason third party verification was not available.	The PHA may accept a notarized statement or affidavit from the tenant that declares monthly welfare benefits. Note: The PHA must document in the tenant file, the reason third party verification was not available.

Child Support	Use of agreement with the local Child Support Enforcement Agency to obtain current child support amount and payment status electronically, by mail or fax or in person.	The PHA mails, faxes, or e-mails a verification form directly to the local Social Services Child Support Enforcement Agency or child support payer to obtain current child support amount and payment status welfare benefit information.	The PHA may call the local Child Support Enforcement Agency or child support payer to confirm obtain current child support amount and amount payment status.	The PHA may review an original court order, notice or printout from the local Child Support Enforcement Agency provided by the tenant to verify current child support amount and payment status. Note: The PHA must document in the tenant file, the reason third party verification was not available.	The PHA may accept a notarized statement or affidavit from the tenant that declares current child support amount and amounts payment status. Note: The PHA must document in the tenant file, the reason third party verification was not available.
Unemployment Benefits	Use of computer matching agreements with a State Wage Information Collection Agency to obtain unemployment compensation electronically, by mail or fax or in person.	The PHA mails, faxes, or e-mails a verification form directly to the State Wage Information Collection Agency to obtain unemployment compensation information.	The PHA may call the State Wage Information Collection Agency to confirm obtain current benefit amount.	The PHA may review an original benefit notice or unemployment check stub, or printout from the local State Wage Information Collection Agency provided by the tenant. Note: The PHA must document in the tenant file, the reason third party verification was not available.	The PHA may accept a notarized statement or affidavit from the tenant that declares unemployment benefits. Note: The PHA must document in the tenant file, the reason third party verification was not available.
	Use of HUD systems, when available.				
Pensions	Use of computer matching agreements with a Federal, State, or Local Government Agency to obtain pension information electronically, by mail or fax or in person.	The PHA mails, faxes, or e-mails a verification form directly to the pension provider to obtain pension information.	The PHA may call the pension provider to confirm obtain current benefit amount.	The PHA may review an original benefit notice from the pension provider provided by the tenant. Note: The PHA must document in the tenant file, the reason third party verification was not available.	The PHA may accept a notarized statement or affidavit from the tenant that declares monthly pension amounts. Note: The PHA must document in the tenant file, the reason third party verification was not available.

Assets	Use of cooperative agreements with sources to obtain asset and asset income information electronically, by mail or fax or in person.	The PHA mails, faxes, or emails a verification form directly to the source to obtain asset and asset income information.	The PHA may call the source to obtain asset and asset income information.	The PHA may review original documents provided by the tenant. Note: The PHA must document in the tenant file, the reason third party verification was not available.	The PHA may accept a notarized statement or affidavit from the tenant that declares assets and asset income. Note: The PHA must document in the tenant file, the reason third party verification was not available.
Comments	Whenever HUD makes available wage, unemployment and SSA information, the PHA should use the information as part of the reexamination process. Failure to do so may result in disallowed costs during a RIM review.	Note: The independent source completes the form and returns the form directly to the PHA. Agency. The tenant should not hand carry documents to or from the independent source.	The PHA should document in the tenant file, the date and time of the telephone call or in person visit, along with the name and title of the person that verified the current income amount.		The PHA should use this verification method as a last resort, when all other verification methods are not possible or have been unsuccessful. Notarized statement should include a perjury penalty statement.
Note: The PHA must not pass verification costs along to the participant.					
Note: In cases where the PHA cannot reliably project annual income, the PHA may elect to complete regular interim reexaminations (this policy should be apart of the PHA's written policies.)					

10.3 *VERIFICATION OF CITIZENSHIP OR ELIGIBLE NON-CITIZEN STATUS*

The citizenship/eligible non-citizen status of each family member regardless of age must be determined.

Prior to being admitted, or at the first reexamination, all citizens and nationals will be required to sign a declaration under penalty of perjury. They will be required to show proof of their status by such means as a Social Security card, birth certificate, military ID, or military DD 214 Form.

Prior to being admitted or at the first reexamination, all eligible non-citizens who are 62 years of age or older will be required to sign a declaration under penalty of perjury. They will be required also to show proof of age.

Prior to being admitted or at the first reexamination, all eligible non-citizens must sign a declaration of their status and a verification consent form and provide their original INS documentation. The Housing Authority will make a copy of the individual's INS documentation and place the copy in the file.

The Housing Authority will also verify their status through the INS SAVE system. If the INS SAVE system cannot confirm eligibility, the Housing Authority will mail information to the INS in order that a manual check can be made of INS records.

Family members who do not claim to be citizens, nationals, or eligible non-citizens must be listed on a statement of non-eligible members and the head of the household must sign the list.

Non-citizen students on student visas, though in the country legally, are not eligible to be admitted to public housing.

Any family member who does not choose to declare their status must be listed on the statement of non-eligible members.

If no family member is determined to be eligible under this section, the family's eligibility will be denied.

The family's assistance will not be denied, delayed, reduced, or terminated because of a delay in the process of determining eligible status under this section, except to the extent that the delay is caused by the family.

If the Housing Authority determines that a family member has knowingly permitted an ineligible non-citizen (other than any ineligible non-citizens listed on the lease) to permanently reside in their public housing unit, the family will be evicted. Such family will not be eligible to be readmitted to public housing for a period of 24 months from the date of eviction or termination.

10.4 VERIFICATION OF SOCIAL SECURITY NUMBERS

Prior to admission, each family member who has a Social Security number and who is at least 6 years of age must provide verification of his or her Social Security number. New family members at least 6 years of age must provide this verification prior to being added to the lease.

The best verification of the Social Security number is the original Social Security card. If the card is not available, the Housing Authority will accept letters from the Social Security Agency that establishes and states the number.

If a member of an applicant family indicates they have a Social Security number, but cannot readily verify it, the family cannot be housed until verification is provided.

If a member of a resident family indicates they have a Social Security number, but cannot readily verify it, they shall be asked to certify to this fact and shall have up to ten (10) days to provide the verification. If the individual fails to provide the verification within the time allowed, the family will be evicted.

10.5 TIMING OF VERIFICATION

Verification information must be dated within ninety (90) days of certification or reexamination. If the verification is older than this, the source will be contacted and asked to provide information regarding any changes.

When an interim reexamination is conducted, the Housing Authority will verify and update all information related to family circumstances and level of assistance. (Or, the Housing Authority will only verify and update those elements reported to have changed.)

10.6 FREQUENCY OF OBTAINING VERIFICATION

For each family member, citizenship/eligible non-citizen status will be verified only once. This verification will be obtained prior to admission. If the status of any family member was not determined prior to admission, verification of his/her status will be obtained at the next regular reexamination. Prior to a new member joining the family, his/her citizenship/eligible non-citizen status will be verified.

For each family member age 3 months and above, verification of the Social Security number will be obtained only once. This verification will be accomplished prior to admission. When a family member who did not have a Social Security number at admission receives a Social Security number, that number will be verified at the next regular reexamination.

11.0 DETERMINATION OF TOTAL RESIDENT PAYMENT AND RESIDENT RENT

11.1 FAMILY CHOICE

At admission and each year in preparation for their annual reexamination, each family is given the choice of having their rent determined under the formula method or having their rent set at the flat rent amount.

- A. Families who opt for the flat rent will ~ be required to submit all income verifications on an annual basis. However, the Housing Authority will provide information (forms and methodology) sufficient for the family to determine whether they need to return to the income-based rent.
- B. Families who opt for the flat rent may request to have a reexamination and return to the formula based method at any time for any of the following reasons:
 - I. The family's income has decreased.
 - 2. The family's circumstances have changed increasing their expenses for childcare, medical care, etc.
 - 3. Other circumstances creating a hardship on the family such that the formula method would be more financially feasible for the family.

11.2 THE FORMULA METHOD

The total resident payment is equal to the highest of:

- A. 10% of monthly income;
- B. 30% of adjusted monthly income; or
- C. The welfare rent.

The family will pay the greater of the total resident payment or the minimum rent of \$50 but never more than the flat rent.

Note: In the case of a family who has qualified for the income exclusion at Section 9.2(H)(11), upon the expiration of the 12-month period described in that section, an additional rent benefit accrues to the family. If the family member's employment continues, then for the 12-month period following the 12-month period of disallowance, the resulting rent increase will be capped at 50 percent of the rent increase the family would have otherwise received. In the third year, all income is included in rent calculations.

11.3 *MINIMUM RENT- HARDSHIP EXEMPTION*

The Housing Authority has set the minimum rent at \$50. However if the family requests a hardship exemption, the Housing Authority will immediately suspend the minimum rent for the family until the Housing Authority can determine whether the hardship exists and whether the hardship is of a temporary or long-term nature.

- A. A hardship exists in the following circumstances:
 - 1. When the family has lost eligibility for or is waiting an eligibility determination for a Federal, State, or Local assistance program;
 - 2. When the family would be evicted as a result of the imposition of the minimum rent requirement;
 - 3. When the income of the family has decreased because of changed circumstances, including loss of employment;
 - 4. When the family has an increase in expenses because of changed circumstances, for medical costs, childcare, transportation, education, or similar items;
 - 5. When a death has occurred in the family.
- B. No hardship. If the Housing Authority determines there is no qualifying hardship, the minimum rent will be reinstated, including requiring back payment of minimum rent for the time of suspension.
- c. Temporary hardship. If the Housing Authority reasonably determines that there is a qualifying hardship but that it is of a temporary nature, the minimum rent will not be imposed for a period of 90 days from the date of the family's request. At the end of the 90-day period, the minimum rent will be imposed retroactively to the time of suspension. The Housing Authority will offer a repayment agreement in accordance with Section 17 of this policy for any rent not paid during the period of suspension. During the suspension period the Housing Authority will not evict the family for nonpayment of the amount of resident rent owed for the suspension period.
- D. Long term hardship. If the Housing Authority determines there is a long-term hardship, the family will be exempt from the minimum rent requirement until the hardship no longer exists.
- E. Appeals. The family may use the grievance procedure to appeal the Housing Authority's determination regarding the hardship. No escrow deposit will be required in order to access the grievance procedure.

11.4 THE FLAT RENT

The Housing Authority has set a flat rent for each public housing unit. In doing so, it considered the size and type of the unit, as well as its condition, amenities, services, and neighborhood. The Housing Authority determined the market value of the unit and set the rent at near market value. The amount of the flat rent will be reevaluated annually and adjustments applied. Affected families will be given a 30-day notice of any rent change. Adjustments are applied on the anniversary date for each affected family (for more information on flat rents, see Section 13.3). The following flat rates are as follows:

2 Bedroom-\$450.00

3 Bedroom-\$550.00

4 Bedroom-\$650.00

The Housing Authority will post the flat rents at the Housing Authority office and are incorporated in this policy upon approval by the Board of Commissioners.

11.5 UTILITY ALLOWANCE

The Housing Authority shall establish a utility allowance for all check-metered utilities. The allowance will be based on a reasonable consumption of utilities by an energy- conservative household of modest circumstances consistent with the requirements of a safe, sanitary, and healthful environment.

In setting the allowance, the Housing Authority will review the actual consumption of resident families as well as changes made or anticipated due to modernization (weatherization efforts, installation of energy-efficient appliances, etc.). Allowances will be evaluated at least annually as well as any time the utility rates change since the last revision to the allowances.

For Housing Authority paid utilities, the Housing Authority will monitor the utility consumption of each household. Any consumption in excess of the allowance established by the Housing Authority will be billed to the resident monthly.

Utility allowance revisions based on rate changes shall be effective retroactively to the first day of the month following the month in which the last rate change took place. Revisions based on changes in consumption or other reasons shall become effective at each family's next annual reexamination.

Families with high utility costs are encouraged to contact the Housing Authority for an energy analysis. The analysis may identify problems with the dwelling unit that once corrected will reduce energy costs. The analysis can also assist the family in identifying ways they can reduce their costs.

11.6 RENT COLLECTION POLICY

Rent and other charges are due and payable on the first day of the month. All rents should be paid at First Citizens Bank. However payments made after the fifteenth of each month must be paid in full at the HPHA main office located at 841 South Center Street, Hickory, North Carolina 28603.

A rent payment is considered late if not paid by the 15th of the month. If the 15th of the month falls on a Saturday, Sunday or an observed holiday, the tenant shall have until the close of business the next scheduled work day before the rent and other charges are delinquent. **Payment of the monthly rent after the delinquency date will be accepted by the PHA only four times in any 12-month period,** and then no later than the date stated in the lease. Failure to pay the monthly rent as specified in the lease or a second failure to pay the monthly rent on or before the delinquency date will result in written notification to the tenant of the cancellation of the lease as provided by the terms of the lease. If rent is paid by a personal check and the check is returned for insufficient funds, this shall be considered a non-payment of rent.

No payments will be accepted after the issuance of a termination notice unless the tenant has made a written request for late payment and delay of court action and such request has been determined and approved for only those reasons which are genuine emergencies as determined by the PHA management. A tenant will be allowed to tender rent and other charges then due in full after termination of the dwelling lease only once. Failure to make payments when due shall result in an issuance of a dispossessory warrant upon expiration of all legal notices.

12.0 CONTINUED OCCUPANCY AND COMMUNITY SERVICE

12.1 GENERAL

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

12.2 EXEMPTIONS

The following adult family members of resident families are exempt from this requirement.

- Age 62 years or older
- Blind or disabled (as defined under 216(i) (1) of the Social Security Act (42 U.S.C. 416 (i) (1); 1382c) and who certify that because of this disability they are unable to comply with the service provisions; or primary caretakers of such individuals.
- Engaged in work activities as defined in section 407(d) of the Social Security Act (42 U.S.C. 607(d)), specified below:
 1. Unsubsidized employment;
 2. Subsidized private-sector employment;
 3. Subsidized public-sector employment;
 4. Work experience (including work associated with the refurbishing of publicly assisted housing) if sufficient private sector employment is not available;
 5. On-the-job training;
 6. Job-search and job-readiness assistance;
 7. Community service programs;
 8. Vocational educational training (not to exceed 12 months with respect to any individual);
 9. Job-skills training directly related to employment;
 10. Education directly related to employment in the case of a recipient who has not received a high school diploma or a certificate of high school equivalency;
 11. Satisfactory attendance at secondary school or in a course of study leading to a certificate of general equivalence, in the case of a recipient who has not completed secondary school or received such a certificate; and
 12. The provision of childcare services to an individual who is participating in a community service program.

Public housing agencies (PHAs) are encouraged to consider 30 hours per week as the minimum number of hours for a week activity exemption as described in Section 407(d) of the Social Security Act, and implementing regulations 45 CFR Section 261.31 (a) (1)).

12.3 *NOTIFICATION OF THE REQUIREMENT*

The Housing Authority shall identify all adult family members who are apparently not exempt from the community service requirement.

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

The notification will advise families that their community service obligation will begin upon the effective date of their first annual reexamination on or after 10/1/99. For families paying a flat rent, the obligation begins on the date their annual reexamination would have been effective had an annual reexamination taken place. It will also advise them that failure to comply with the community service requirement will result in ineligibility for continued occupancy at the time of any subsequent annual reexamination.

12.4 *VOLUNTEER OPPORTUNITIES*

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

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

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

12.5 THE PROCESS

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

- A. Provide a list of volunteer opportunities to the family members.
- B. Provide information about obtaining suitable volunteer positions.
- C. Provide a volunteer time sheet to the family member. Instructions for the time sheet require the individual to complete the form and have a supervisor date and sign for each period of work.

12.6 NOTIFICATION OF NONCOMPLIANCE WITH COMMUNITY SERVICE REQUIREMENT

The Housing Authority will notify any family found to be in noncompliance of the following:

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

12.7 OPPORTUNITY FOR CURE

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

If any applicable family member does not accept the terms of the agreement, does not fulfill his/her obligation to participate in an economic self-sufficiency program, or falls behind in his/her obligation under the agreement to perform community service by more than three (3) hours after three (3) months, the Housing Authority shall take action to terminate the lease.

13.0 REEXAMINATIONS

At least annually (except for those tenants paying flat rents), the Housing Authority will conduct a reexamination of family income and circumstances. The results of the reexamination determine (1) the rent the family will pay, and (2) whether the family is housed in the correct unit size. The schedule of the lease will be based on the anniversary date.

13.1 *GENERAL*

The Housing Authority will send a notification letter to the family letting them know that it is time for their annual reexamination, giving them the option of selecting either the flat rent or formula method. If the family opts to accept the flat rent, a certification letter must be signed. If the family thinks they may want to switch from a flat rent to a formula rent, they should request a change. The letter also includes, for those families paying the formula method, forms for the family to complete in preparation for the reexamination. The letter tells families who may need to make alternate arrangements due to a disability that they may contact staff to request an accommodation of their needs.

During the appointment, the Housing Authority will determine whether family composition may require a transfer to a different bedroom size unit, and if so, the family's name will be placed on the transfer list.

13.2 *FAILURE TO RESPOND*

If the family fails to respond to the letter, a second letter will be sent. The second notice will advise of a new date for the re-certification. The letter will also advise that failure by the family to respond will result in the Housing Authority taking eviction actions against the family.

13.3 *FLAT RENTS*

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

- A. At the time of the annual reexamination, the family has the option of selecting a flat rent amount in lieu of having their rent based on the formula amount.
- B. A fact sheet about formula rents that explains the types of income counted, the most common types of income excluded, and the categories allowances that can be deducted from income.
- D. Families who opt for the flat rent will be required to go through the income reexamination process annually.

- E. Families who opt for the flat rent may request to have a reexamination and return to the formula-based method at any time for any of the following reasons:
 - 1. The family's income has decreased.
 - 2. The family's circumstances have changed increasing their expenses for childcare, medical care, etc.
 - 3. Other circumstances creating a hardship on the family such that the formula method would be more financially feasible for the family.
- F. The dates upon which the Housing Authority expects to review the amount of the flat rent.

13.4 *THE FORMULA METHOD*

During the reexamination, the family will provide all information regarding income, assets, expenses, and other information necessary to determine the family's share of rent. The family will sign the HUD consent form and other consent forms that later will be mailed to the sources that will verify the family circumstances. Upon receipt of verification, the Housing Authority will determine the family's annual income and will calculate their rent as follows. The total resident payment is equal to the highest of:

- A. 10% of monthly income;
- B. 30% of adjusted monthly income; or
- C. The welfare rent.

Note: The family will pay the greater of the total resident payment or the minimum rent of \$50, but never more than the flat rent.

13.5 *EFFECTIVE DATE OF RENT CHANGES FOR ANNUAL REEXAMINATIONS*

The new rent will generally be effective upon the anniversary date with a 30 (thirty) day notice of any rent increase to the family.

If the rent determination is delayed due to a reason beyond the control of the family, then any rent increase will be effective the first of the month after the month in which the family receives a thirty (30) day notice of the amount.

If the new rent is a reduction and the delay is beyond the control of the family, the reduction will be effective as scheduled on the anniversary date.

If the family caused the delay, then any increase will be effective on the anniversary date. Any reduction will be effective the first of the month after the Tent amount is determined.

13.6 INTERIM REEXAMINATIONS

During an interim reexamination, only the information affected by the changes being reported will be reviewed and verified.

Families are not required to, but may at any time, request an interim reexamination based on a decrease in income, an increase in allowable expenses, or other changes in family circumstances. Upon such request, the Housing Authority will process the interim reexamination and recalculate the resident's rent.

Families are required to report the following changes to the Housing Authority between regular reexaminations. If the family's rent is being determined under the formula method, these changes will trigger an interim reexamination. The family shall report these changes within ten (10) days of their occurrence.

- A. A member has been added to the family through birth or adoption or court- awarded custody.
- B. A household member is leaving or has left the family unit. In order to add a household member other than through birth or adoption (including a live-in aide), the family must request that the new member be added to the lease. Before adding the new member to the lease, the individual must complete an application form stating his/her income, assets, and all other information required of an applicant. The individual must provide his/her Social Security number if he/she has one and must verify his/her citizenship/eligible immigrant status. (Housing will not be delayed due to delays in verifying eligible immigrant status other than delays caused by the family.) The family member will go through the screening process similar to the process for applicants. The Housing Authority will determine the eligibility of the individual before adding him/her to the lease. If the individual is found to be ineligible or does not pass the screening criteria, the family's annual income will be recalculated taking into account the circumstances of the new family member. The effective date of the new rent will be in accordance with paragraph 13.8 below.

13.7 SPECIAL REEXAMINATIONS

Families whose past employment has been sporadic, or who have a regular pattern of working and then quitting that is expected to continue, will be subject to a special reexamination. In this situation, a reasonable 12-month estimate of their income may be based upon past income and present income.

Residents paying rent based on income may meet with the Authority to discuss any change in rent resulting from the reexamination process; and, if the Resident

does not agree with the determination of Resident rent, the Resident may request a hearing in accordance with the Authority's grievance procedures.

13.8 EFFECTIVE DATE OF RENT CHANGES DUE TO INTERIM OR SPECIAL REEXAMINATIONS

Unless there is a delay in reexamination processing caused by the family, any rent increase will be effective the first of the second month after the month in which the family receives notice of the new rent amount. If the family causes a delay, then the rent increase will be effective on the date it would have been effective had the process not been delayed (even if this means a retroactive increase).

If the new rent is a reduction and the family caused the delay or did not report the change in a timely manner, the change will be effective the first of the month after the rent amount is determined.

14.0 TRANSFERS [966.4 (c) (3)]

1. Tenant agrees that if HPHA determines that the size or design of the dwelling unit is no longer appropriate to Tenant's needs, HPHA shall send Tenant written notice. Tenant further agrees to accept a new lease for a different dwelling unit of the appropriate size or design.
2. HPHA may move a Tenant into another unit if it is determined necessary to rehabilitate or demolish Tenant's unit.
3. If a Tenant makes a written request for special unit features in support of a documented disability, HPHA shall modify Tenant's existing unit. If the cost and extent of the modifications needed are tantamount to those required for a fully accessible unit, HPHA may transfer Tenant to another unit with the features requested at HPHA's expense.
4. A tenant without disabilities that is housed in a unit with special features must transfer to a unit without such features should a Tenant with disabilities need the unit.
5. In the case of involuntary transfers, Tenant shall be required to move into the dwelling unit made available by HPHA. Tenant shall be given 10 days time in which to move following delivery of a transfer notice. If Tenant refuses to move, HPHA may terminate the Lease. [966.4 (c)(3)]
6. Involuntary transfers are subject to the Grievance Procedure, and no such transfers may be made until either the time to request a Grievance has expired or the procedure has been completed. [966.4 (c)(4)]
7. HPHA will consider any Tenant requests for transfers in accordance with the transfer priorities established in the Admissions and Occupancy Policies.

8. HPHA will consider victims of reprisals, hate crimes or victims of substantial violence as a preference.

14.3 DOCUMENTATION

When the transfer is at the request of the family, the family may be required to provide third party verification of the need for the transfer.

14.4 INCENTIVE TRANSFERS

Transfer requests will be encouraged and approved for families who live in a development where their income category (below or above 30% of area median) predominates and wish to move to a development where their income category does not predominate.

Families approved for such transfers will meet the following eligibility criteria: A. Have been a resident for three years;

- B. For a minimum of one year, at least one adult family member is enrolled in an economic self-sufficiency program or is working at least thirty-five (35) hours per week, the adult family members are 62 years of age or older or are disabled or are the primary care givers to others with disabilities;
- C. Adult members who are required to perform community service/self-sufficiency have been current in these responsibilities since the inception of the requirement or for one year whichever is less;
- D. The family is current in the payment of all charges owed the Housing Authority and has not paid late rent for at least one year;
- E. The family passes a current housekeeping inspection and does not have any record of housekeeping problems during the last year;
- F. The family has not materially violated the lease over the past two years by disturbing the peaceful enjoyment of their neighbors, by engaging in criminal or drug-related activity, or by threatening the health or safety of residents or Housing Authority staff.

14.5 PROCESSING TRANSFERS

Transfers on the waiting list will be sorted by the above categories and within each category by date and time.

Transfers in category 1 and 2 will be housed ahead of any other families, including those on the applicant waiting list. Transfers in category 1 will be housed ahead of transfers in category 2.

Transfers in category 3 will be housed along with applicants for admission at a ratio of one transfer for every three admissions

Upon offer and acceptance of a unit, the family will execute all lease-up documents and pay any rent and/or security deposit within two (2) days of being informed the unit is ready to rent. The family will be allowed ten (10) days to complete a transfer.

The following is the policy for the rejection of an offer to transfer:

- A. If the family rejects with good cause any unit offered, they will not lose their place on the transfer waiting list.
- B. If the reason for the transfer is that the current unit is too small to meet the Housing Authority's optimum occupancy standards, the family may request in writing to stay in the unit without being transferred so long as their occupancy will not exceed two people per living/sleeping room.
- C. If the transfer is being made at the family's request, the family may, without good cause and without penalty, turn down one offer. After turning down a second such offer without good cause, the family's name will be removed from the transfer list.

14.6 *COST OF THE FAMILY'S MOVE*

The cost of the transfer (actual moving cost) generally will be borne by the family in the following circumstances:

- A. When the transfer is made at the request of the family or by others on behalf of the family;
- B. When the transfer is needed to move the family to an appropriately sized unit, either larger or smaller;
- C. When the transfer is necessitated because a family with disabilities needs the accessible unit into which the transferring family moved. (The family without disabilities signed a statement to this effect prior to accepting the accessible unit.) or
- D. When the transfer is needed because action or inaction by the family caused the unit to be unsafe or uninhabitable.

The cost of the transfer will be borne by the Housing Authority in the following circumstances:

- A. When the transfer is needed in order to carry out rehabilitation or modernization activities; or
- B. When action or inaction by the Housing Authority has caused the unit to be unsafe or uninhabitable.

The responsibility for moving costs in other circumstances will be determined on a case by case basis.

14.7 RESIDENTS IN GOOD STANDING

When the transfer is at the request of the family, it will not be approved unless the family is in good standing with the Housing Authority. This means the family must be in compliance with their lease, current in all payments to the Housing Authority, and must pass a housekeeping inspection.

14.8 TRANSFER REQUESTS

A resident may request a transfer at any time. In considering the request, the Housing Authority may request a meeting with the resident to better understand the need for transfer and to explore possible alternatives. The Housing Authority will review the request in a timely manner.

The Housing Authority will grant or deny the transfer request. If the transfer is approved, the family's name will be added to the transfer waiting list. If the transfer is denied, the family may appeal through the grievance procedure.

14.9 RIGHT OF THE HOUSING AUTHORITY IN TRANSFER POLICY

The provisions listed above are to be used as a guide to insure fair and impartial means of assigning units for transfers. It is not intended that this policy will create a property right or any other type of right for a resident to transfer or refuse to transfer.

15.0 INSPECTIONS

An adult family member should inspect the premises prior to commencement of occupancy. An authorized Housing Authority representative will inspect the premises at the time the resident vacates and will furnish a statement of any charges to be made provided the resident turns in the proper notice as required in the dwelling lease. The resident's security deposit and pet deposit, if applicable, will be used to offset against any resident damages to the unit.

15.1 MOVE-IN INSPECTIONS

An adult member of the family should inspect the unit prior to signing the lease. Any deficiencies found will be brought to the attention of a Housing Authority representative.

15.2 *ANNUAL INSPECTIONS*

The Housing Authority will inspect each public housing unit annually to ensure that each unit meets the Housing Authority's housing standards. Work orders will be submitted and completed to correct any deficiencies.

15.3 *PREVENTATIVE MAINTENANCE INSPECTIONS*

This is generally conducted along with the annual inspection. This inspection is intended to keep items in good repair. It checks weatherization; checks the condition of the smoke detectors, water heaters, furnaces, automatic thermostats, and water temperatures; checks for leaks; and provides an opportunity to change furnace filters and provide other minor servicing that extends the life of the unit and its equipment.

15.4 *SPECIAL INSPECTIONS*

A special inspection may be scheduled to enable HUD or others to inspect a sample of the housing stock maintained by the Housing Authority.

15.5 *HOUSEKEEPING INSPECTIONS*

Generally, at the time of annual reexamination, or at other times as necessary, the Housing Authority will conduct a housekeeping inspection to ensure the family is maintaining the unit in a safe and sanitary condition. This is normally done during the annual inspections.

15.6 *NOTICE OF INSPECTION*

For inspections defined as preventative maintenance inspections, special inspections, and housekeeping inspections the Housing Authority will give the resident at least two (2) days written notice. For annual inspections, a 7-day notice will be given.

15.7 *EMERGENCY INSPECTIONS*

If any employee and/or agent of the Housing Authority have reason to believe that an emergency exists within the housing unit, the unit can be entered without notice. The person(s) that enters the unit will leave a written notice to

the resident that indicates the date and time the unit was entered and the reason why it was necessary to enter the unit.

15.8 PRE-MOVE-OUT INSPECTIONS

When a resident gives notice that they intend to move, the Housing Authority will offer to schedule a pre-move-out inspection with the family. The inspection allows the Housing Authority to help the family identify any problems, which, if left uncorrected, could lead to vacate charges. This inspection is a courtesy to the family and has been found to be helpful both in reducing costs to the family and in enabling the Housing Authority to ready units more quickly for the future occupants.

15.9 MOVE-OUT INSPECTIONS

The Housing Authority conducts the move-out inspection after the resident vacates to assess the condition of the unit and determine responsibility for any needed repairs. This inspection becomes the basis for any claims that may be assessed against the security deposit.

16.0 THE PET POLICY

HPHA Pet Policy

The Pet Policy set forth herein is reasonably related to the following legitimate interests of the Hickory Public Housing Authority (PHA), including but not limited to:

- (a) The PHA's interest in providing a decent, safe and sanitary living environment for existing and prospective Residents;
- (b) Protection and preserving the physical condition of the property of the PHA and the housing located thereon; and
- (c) The PHA's financial interests in the property administered by this Housing Authority.

Residents occupying units administered by the Hickory Public Housing Authority shall be allowed to house pets on either a temporary or permanent basis. The Applicant and any Resident must also provide certification from a licensed medical reference. Only after such certification has been received by this Housing Authority in writing, will a Resident be permitted to keep and maintain a pet. The rules set forth herein specify the procedure for obtaining the necessary approval to keep and maintain a pet on this Housing Authority premises and set forth the rules which govern the keeping of such pets. Residents requesting permission to have a pet will be permitted a limit of one (1) pet per household (Dwelling Unit).

(1) SELECTION CRITERIA

A. Management Approval: Prior to a pet being accepted for keeping in a Dwelling Unit the Resident and the Authority must enter into a Pet Agreement.

In addition to executing the "*Pet Agreement*" the Resident must submit to this Housing Authority documented proof of the proposed pet's health, suitability and acceptability in accordance with provisions outlined in "Standards" below. Pets must be registered with this Housing Authority before the pet is brought onto the premises and annually thereafter.

Registration includes:

1. Certificate signed by a licensed veterinarian or designated State or local authority or agent, stating that the pet has received all inoculations required by State or local law;
2. Statement signed by a licensed veterinarian that the animal is in good health, has no communicable diseases or pests, and in the case of dogs and cats, is spayed or neutered. Cats must be declawed;
3. Name, address, and phone number of one or more responsible parties to care for the pet if the owner dies, is incapacitated or unable to care for the pet;
4. Execution of a "*Pet Agreement*" stating that the Resident accepts complete responsibility for the care and cleaning of the pet and acknowledges the applicable rules;
5. Pet must be licensed in accordance with applicable State and local laws and regulations.

Registration will be coordinated with the annual reexamination date. Approval for the keeping of pets shall not be extended until the requirements specified above have been met and in no event will approval of other than the common household pets be extended.

- B. Management Disapproval: This Housing Authority shall refuse to register the pet if:
1. The pet is not a common household pet identified more specifically in this policy'
 2. Pet owner fails to provide complete pet registration information or fails annually to update the registration;
 3. This Housing Authority reasonable determines based on the pet owner's habits and practices that the pet owner will be unable to keep the pet in compliance with pet's temperament may be considered as a factor in determining the prospective pet owner's ability to comply with the pet rules and other Dwelling Lease obligations.

C. Standards: Common household pets as outlined below will be permitted under the following guidelines:

1. Dogs:

Maximum number – one (1);

Maximum adult weight – twenty (20) pounds, however, this may be increased to twenty-five (25) pounds in the case of the Resident already owning a dog weighing 20 to 25 pounds at time of move-in;

Must be housebroken;

Must be spayed or neutered;

Must have all required inoculations;

Must be licensed as specified now or in future by State and local ordinance.

2. Cats:

Maximum number – one (1);

Maximum adult weight – ten (10) pounds, however, this may be increased to fifteen (15) pounds in the case of Resident

already owning a cat weighing between 10 and 15 pounds at time of move-in;

Must be declawed;

Must have all required inoculations;

Must be trained to use a liter box or other waste receptacle;

Must be licensed as specified now or in the future by State and local ordinance.

3. Birds:

Maximum number – two (2)

Must be enclosed in cage(s) at all times;

Must be certified from licensed veterinarian on a yearly basis that bird(s) is/ are free of diseases.

4. Fish:

Maximum aquarium size – 20 gallons;

Aquarium must be kept clean.

5. Rodents: (**ONLY** guinea pig, hamster, or gerbil)

Maximum number – four (4);

Must be enclosed in cage(s) at all times;

Cage(s) must be cleaned at least once weekly.

(2) PET DEPOSIT

- A. The resident shall be required to pay to this Housing Authority a refundable deposit as defined below:
1. Dog or Cat: A deposit of \$100.00 (in addition to the required security deposit) will be made for the purpose of defraying any/all costs directly attributable to the presence of a dog or cat.
 2. The deposit shall be paid in either a lump sum or an initial payment of \$50.00 on or prior to the date the pet is properly registered and brought into the Dwelling Unit, and the remaining \$50.00 on the immediate next rent payment date. Non compliance in payment of remaining \$50.00 will result in removal of pet and resident.

B. All other allowable pets:

1. A deposit of \$50.00 shall be made for the purpose of defraying all reasonable costs directly attributable to the presence of the pet;
2. The deposit shall be paid in full on or prior to the date the pet is properly registered and brought into the Dwelling Unit.

The Housing Authority reserves the right to change or increase the require deposit by amendment to this policy.

- C. All reasonable expenses incurred by this Housing Authority as the result of damages directly attributable to the presence of the pet in the complex shall be the responsibility of the Resident.
1. Cost of repairs and replacement to Resident's Dwelling Unit.
 2. Fumigation of Resident's Dwelling Unit. Such expense as a result of move out inspection shall be billed to the resident and subtracted from any balance due.
- D. Resident's liability for damages caused by his/her pet while the Resident is in occupancy, he/she will be required to reimburse this Housing Authority for the total cost of any/all damages caused by his/her pet;
- E. In the event that a Resident shall fail to promptly pay this Housing Authority for the cost of any/all damages caused by his/her pet after being furnished with an itemized invoice of said damages, the Resident shall pay all cost(s) and expenses, including court cost and reasonable attorney(s) fees in the event legal action is necessary to collect said damages.
- F. In the event that a Resident shall fail to promptly pay this Housing Authority for the cost of any/ all damages caused by his/her pet after being furnished with an itemized invoice of said damages, the Resident shall pay all cost(s) and expenses, including court costs and reasonable attorney(s) fees in the event legal action is necessary to collect said damages.

(3) Pet Rules:

- A. Pets must be maintained WITHIN the Resident's Dwelling Unit. When outside the Dwelling Unit dogs and cats MUST be kept on a leash or carried, and under the control of the Resident or other responsible individual AT ALL TIMES.

- B. Dogs should be walked (always on a leash) and curbed away from the buildings, sidewalks, streets, and other common walking areas. Resident must carry a scoop and plastic bag when walking a pet and clean up after pet by placing waste in tied plastic bag and placing bag in Housing Authority trash container on the grounds of the complex. Under no circumstances will pet be allowed to go near the shrubbery and/or trees located on the property.
- C. Litter Box requirements for Cats: Litter from litter boxes shall be disposed of in sealed plastic trash bags and placed on side of street for pick up on normal trash pickup days.

Litter shall be changed at least once weekly and waste will be cleaned from box daily. Litter shall NOT be disposed of by being flushed down the toilet. Charges for unclogging the toilet due to the improper disposal of pest waste shall be billed to the Resident. Litter boxes shall be kept INSIDE the Resident's Dwelling Unit at all times.

- D. Resident shall assume sole responsibility for liability arising from person sustained by any person attributable to his/her pet.
- E. Resident agrees to control the noise of his/her pet so that such noise does not constitute a nuisance to other Residents or interrupt their peaceful enjoyment of their Dwelling Units. Failure to control pet noise may result in the removal of the pet from the premises.
- F. Any pet that causes bodily injury to any Resident, guest staff member, or other authorized person on the premises, shall be ***IMMEDIATELY AND PERMANENTLY REMOVED FROM THE PREMISES WITHOUT PRIOR NOTIFICATION.***
- G. Dogs shall never be left unattended in any unit for a period in excess of four (4) hours. Cats shall never be left unattended in any Dwelling Unit for a period in excess of twenty-four (24) hours.
- H. All Residents shall be responsible for adequate care, nutrition, exercise and medical attention of his/her pet. Management will remove any animal not being cared for properly.
- I. Visiting pets, as well as pets of visitor/guests are strictly prohibited, with the exception of handicap assistance pets, which must also be certified permission of the Housing Authority.
- J. Residents are prohibited from feeding or harboring stray animals. The feeding of stray animals shall constitute having a pet without the written permission of this Housing Authority.
- K. The expense of disinfestations of fleas in the Resident's Dwelling Unit shall be the responsibility of the Resident.
- L. Resident shall not alter his/her Dwelling Unit, patio, or common areas to create an enclosure for his/her pet.

Pet Agreement

1. Resident: _____
2. Dwelling Unit#: _____ Complex Name: _____
3. Date of Current Dwelling Lease: _____
4. Is your pet needed for assistance due to handicap of you or a member of your household? () YES () NO
If yes, describe handicap and attach statement from your physician describing the handicap and how the proposed pet has been trained to assist with that specific handicap: _____
5. Description of Pet: _____

Type of Pet: _____ Breed: _____ Color: _____
Weight: _____ Estimated weight & height at maturity: _____ / _____
Aquarium size (if applicable): _____ Type of fish (if applicable): _____
6. Name and address of veterinarian: _____

License number: _____
7. If dog or cat date of neutering or spaying: _____ If cat, date of declawed: _____
8. Has your pet lived in rental housing before? () YES () NO If yes, name and phone number of landlord: _____
9. Has your pet ever bitten or injured anyone? If so, describe the incident: _____

This application must be completed and returned when application is made for housing at this Housing Authority, along with two (2) affidavits of Pet Owner's Emergency Absence Agreement. Each must be signed and witnessed by two (2) separate people who are willing to immediately care, and be responsible for, your pet in the event of your absence. The signatures must be notarized.

A Veterinarian's Certificate must also be completed by a veterinarian and returned with this application.

THIS IS TO CERTIFY THAT ALL INFORMATION IS ACCURATE TO THE BEST OF MY KNOWLEDGE AND I HAVE READ THE PET POLICY CONTAINING RULES AND REGULATIONS AND FULLY UNDERSTAND THIS CONTRACT. I ACCEPT ALL FINANCIAL RESPONSIBILITY FOR MY PET INCLUDE IN THESE RULES AND REGULATIONS AND ANY/ALL DAMAGES/ INJURIES THAT MAY OCCUR BECAUSE OF MY PET.

RESIDENTS SIGNATURE: _____ DATE: _____

APPROVED BY: _____ DATE: _____
(Housing Authority Representative)

This Pet Agreement, when executed, becomes an attachment to the Dwelling Lease between _____ and the Hickory Public Housing Authority.

I, _____, certify that; I have read and received an explanation and understand the Provisions of the Pet Policy and rules of the Hickory Public Housing Authority and agree to comply fully with stipulated provisions;

I understand that violation of these rules may constitute cause for the removal of my pet from the premises, and/or termination of my tenancy; and I accept complete responsibility for the care and cleaning of the pet and my Dwelling Unit# _____ (Resident's initials).

When required by the Hickory Public Housing Authority to remove my pet from the premises, for cause, I agree to accomplish this removal and understand that failure to do so may constitute cause for the initiation of an eviction proceeding.

In the event I want to substitute pets, or if the pet is removed from the unit, or if I add another pet, I realize I will have to reapply for approval of the new pet.

NAME OF RESIDENT (print): _____

ADDRESS (DWELLING UNIT #): _____

SIGNATURE AND DATE: _____

THE ABOVE NAMED HAS READ, UNDERSTOOD, AND SIGNED THESE RULES IN MY PRESENCE:

WITNESS: NAME: _____

ADDRESS: _____

SIGNATURE: _____

DATE: _____

EXECUTIVE DIRECTOR OR DESIGNEE: _____

17.0 FORMAL REPAYMENT AGREEMENTS

When a resident owes the Housing Authority back charges and is unable to pay the balance by the due date, the resident may request that the Housing Authority allow them to enter into a Repayment Agreement.

All Repayment Agreements must be in writing and signed by both parties. Failure to comply with the Repayment Agreement terms may subject the Resident to eviction procedures.

Residents who pay rent based on income shall reimburse the Housing Authority for the difference between the rent that was paid and the rent that should have been charged if proper notice of income change had been given and if the following circumstances occur:

- A. Resident does not submit rent review information by the date specified in the Authority's request; or
- B. Resident submits false information at Admission or at annual, special, or interim reexamination.
- C. Resident fails to properly notify the Housing Authority of any increase in income that would affect the amount of rent the Resident would be required to pay.

17.1 FORMAL REPAYMENT AGREEMENTS FOR RESIDENTS IN EVICTION/EJECTMENT PROCESS

Hickory Public Housing Authority Staff may enter into a repayment agreement with a tenant up for eviction/ejectment if one or more of the following criteria has been met:

- (1) The tenant is not currently under a Formal Repayment Agreement.
- (2) The tenant has not incurred late fees three (3) times during the current fiscal year, (unless number three applies)
- (3) The tenant has incurred a death in the family (must be substantiated), suffered an illness which prohibited them from working (must be substantiated), or lost employment within the last 30 days (must be substantiated).

If the tenant meets one or more of the situations, a formal repayment agreement must be processed and forwarded to the Executive Director with the supporting documentation attached. Tenants will still be required to have 10% down and agree to pay the remaining balance in ten (10) monthly increments, plus be current on all future payments due.

The tenant will be responsible for all fees incurred up to the point of execution of the formal repayment agreement.

During the eviction/ejectment process staff must advise tenants of this procedure as an alternative to eviction/ejectment.

18.0 TERMINATION

18.1 TERMINATION BY RESIDENT

The resident may terminate the lease at any time upon submitting a 14-day written notice and all keys to the unit are returned. If the resident vacates prior to the end of the 14 days, he/she will be responsible for rent through the end of the notice period.

18.2 TERMINATION BY THE HOUSING AUTHORITY

The Housing Authority after 10/1/1999 will not renew the lease of any family that is not in compliance with the community service/self-sufficiency requirements or an approved Agreement to Cure. If they do not voluntarily leave the property, eviction proceedings will begin.

The Housing Authority will terminate the lease for serious or repeated violations of material lease terms. Such violations include but are not limited to the following:

- A. Nonpayment of rent or other charges;
- B. A history of late rental payments;
- C. Failure to provide timely and accurate information regarding family composition, income circumstances, or other information related to eligibility or rent;
- D. Failure to allow inspection of the unit;
- E. Failure to maintain the unit in a safe and sanitary manner;
- F. Assignment or subletting of the premises;
- G. Use of the premises for purposes other than as a dwelling unit (other than for housing authority approved resident businesses);
- H. Destruction of property;
- I. Acts of destruction, defacement, or removal of any part of the premises or failure to cause guests to refrain from such acts;
- J. Any criminal activity on the property or drug-related criminal activity on or off the premises. This includes but is not limited to the manufacture of methamphetamine on the premises of the Housing Authority.
- K. On March 28, 1996, President Clinton announced a "One Strike and You're Out" Policy for public housing residents. The Housing Authority has adopted this policy which

provides for zero tolerance with respect to violations of lease terms regarding drug-related or criminal activity.

- L. Non-compliance with Non-Citizen Rule requirements;
- M. Permitting persons not on the lease to reside in the unit more than fourteen (14) days each year without the prior written approval of the Housing Authority; and
- N. Act or allow household members or guest to act in a manner that will disturb the rights or comfort of neighbors;
- O. Permit any member of the household, a guest, or another person under the Resident's control to engage in any criminal activity that threatens the health, safety, or right to peaceful enjoyment of the premises by other residents or Housing Authority employees;
- P. Allow any member of the Resident's household, guest, or another person under the Resident's control to engage in alcohol-abuse while the resident is a resident of public housing or allow household members or guest to damage, destroy, deface, or remove any part of the premises or development; and
- Q. Other good cause.

Note: The Housing Authority will take immediate action to evict any household that includes an individual who is subject to a lifetime registration requirement under a state sex offender registration program.

18.3 TERMINATION OF LEASE UPON DEATH OR INCAPACITY OF RESIDENT

Upon the death of the Resident, or if there is more than one Resident, upon the death of all Residents, either the Authority or the personal representative of the Resident's estate may terminate this Lease upon 30 days written notice, to be effective on the last day of a calendar month. If full notice is not given, the Resident's estate shall be liable for rent to the end of the notice period or to the date the unit is re-rented, whichever date comes first.

The termination of a Lease under this section shall not relieve the Resident's estate from liability either for payment of rent or other amounts owed prior to or during the notice period, or for the payment of amounts necessary to restore the premises to their condition at the beginning of the Resident's occupancy, normal wear and tear excepted.

If during the term of this Lease the Resident, by reason of physical or mental impairment, is no longer able to comply with the material provisions of this Lease and the Authority cannot make a reasonable accommodation to enable the Resident to comply with the Lease; then action shall be taken. The Authority will assist the Resident or designated member(s) of the Resident's family to move the Resident to more suitable housing. If there are no family members, the Authority will work with appropriate agencies to secure suitable housing. This lease will terminate upon the Resident moving from the unit.

18.4 ABANDONMENT

The Housing Authority will consider a unit to be abandoned when a resident has both fallen behind in rent **AND** has clearly indicated by words or actions an intention not to continue living in the unit.

When a unit has been abandoned, a Housing Authority representative may enter the unit and remove any abandoned property. It will be stored in a reasonably secure place. A notice will be mailed to the resident stating where the property is being stored and when it will be sold. If the Housing Authority does not have a new address for the resident, the notice will be mailed to the unit address so it can be forwarded by the post office.

Any property left in the apartment will be held for forty-five (45) days. A letter of notification will be mailed to the resident giving notice that the property will be disposed of through sale or disposition.

Any money raised by the sale of the property goes to cover money owed by the family to the Housing Authority such as back rent and the cost of storing and selling the goods.

18.5 SECURITY DEPOSIT

The Security deposit for tenants at the Hickory Public Housing Authority will be fifty percent (50%) of the rent for the apartment.

18.6 RETURN OF SECURITY DEPOSIT

After a family moves out, the Housing Authority will return the security deposit within **thirty (30) days** or give the family a written statement of why all or part of the security deposit is being kept. The rental unit must be restored to the same conditions as when the family moved in, except for normal wear and tear. Deposits will not be used to cover normal wear and tear or damage that existed when the family moved in.

The Housing Authority will be considered in compliance with the above if the required payment, statement, or both, are deposited in the U.S. mail with first class postage paid within **thirty (30) days**.

19.0 GRIEVANCE PROCEDURES

GRIEVANCE PROCEDURE OF THE HOUSING AUTHORITY OF HICKORY NORTH CAROLINA

[24 Code of Federal Regulations (CFR) 966 Subpart B]

Revised 7/2001

To Incorporate Federal Register 5/24/2001 Final Rule

24CFR Parts 5 et al.

Screening and Eviction for Drug Abuse and Other Criminal Activity: FINAL RULE

INFORMAL REVIEW

Prior to final action being taken on the basis of criminal record information received, the tenant shall have a right to an Informal Review. The review shall afford the tenant the opportunity to dispute the accuracy and relevance of criminal record information obtained by the authority. This review shall be held prior to adverse action (eviction or lease enforcement) being taken against the tenant.

I. Definitions Applicable to the Grievance Procedure: [§966.53]

- A. Grievance: Any dispute which a Resident may have with respect to a Public Housing Authority's action or failure to act in accordance with the individual's Resident's rights, duties, welfare or status.
- B. Complainant: Any Resident (as defined below) whose grievance is presented to the Hickory Housing Authority (HPHA) at the central office in accordance with the requirements presented in this procedure.
- C. Elements of due process: An eviction action or a termination of tenancy in a State of local court in which the following procedural safeguards are required:
 - (1) Adequate notice to the Resident of the grounds for terminating the tenancy and for eviction;
 - (2) Right of the Resident to be represented by counsel;
 - (3) Opportunity for the Resident to refute the evidence presented by the HPHA, including the right to confront and cross-examine witnesses and to present any affirmative legal or equitable defense which the Resident may have;
 - (4) A decision on the merits.
- D. Hearing Officer: A person selected in accordance with established local, state, and federal regulations, and this procedure to hear grievances and render a decision with respect thereto.
- E. Resident: The adult person (or persons) (other than a Live-in aide): (1) Who resides in the unit, and who executed the lease with the HPHA as lessee of the dwelling unit, or, if no such person now resides in the unit, (2) Who resides in the unit, and who is the remaining head of the household of the Resident family residing in the dwelling unit.
- F. Resident Organization: An organization of residents, which also include resident management corporation.

II. Applicability of This Grievance Procedure [§966.51]

In accordance with the applicable Federal regulations this grievance procedure shall be applicable to all individual grievances (as defined in Section I above) between Resident and the HHA with the following exceptions:

- A. The HPHA grievance procedure shall not be applicable to disputes between tenants not involving the HPHA or to class grievances. The grievance procedure is not intended as a forum for initiating or negotiating policy changes between a group or groups of tenants and the HPHA's Board of Commissioners. [§966.51 (b)]

This grievance procedure is incorporated by reference in all Resident dwelling leases and will be furnished to each Resident and all resident organizations. [§966.52 (b) and (d)]

Any changes proposed in this grievance procedure must provide for at least 30 days notice to Residents and resident organizations, setting forth the proposed changes and providing an opportunity to present written comments which will be considered before adoption of any grievance procedure changes by the HPHA. [§966.52 (c)]

III. Grievance

Any grievance must be personally presented, either orally or in writing, to the HPHA's central office within (10) ten days after the event. Grievances received by the HPHA's central office will be referred to the person responsible for the management of the development in which the complainant resides (to the Director of Housing Operations)

As soon as the grievance is received, it will be reviewed by the management office of the development to be certain that exclusions do not apply. Should an exclusion apply, the complainant will be notified in writing that the matter raised is not subject to the HPHA's grievance procedure, with the reason therefore.

If an exclusion does not apply, the complainant will be contacted to arrange a mutually convenient time within (10) ten working days to meet so the grievance may be discussed informally and settled without a hearing. The complainant will present the grievance, and the person in charge of the management office will attempt to settle the grievance to the satisfaction of both parties.

Within (14) working days following the informal discussion, the HPHA shall prepare and either give or mail to Resident a summary of the discussion that must specify the names of the participants, the dates of meeting, the nature of the proposed disposition of the complaint, and the specific reasons therefore, and shall specify the procedures by which a formal hearing under this procedure may be obtained if the complainant is not satisfied. A copy of this summary shall also be placed in Resident's file.

IV. Formal Grievance Hearing

If the complainant is dissatisfied with the settlement arrived at in the informal hearing, the complainant must submit a written request for a hearing to the management office of the development where Resident resides no later than five working days after the summary of the informal hearing is received. A receipt signed by the complainant or a return receipt for delivery of certified mail, whether or not signed, will be sufficient proof of time of delivery for the summary of the informal discussion. [§966.55 (a)]

The written request shall specify:

- The reasons for the grievance;
- The action of relief sought from the HPHA; and
- Several dates and times in the following ten working days when the complainant can attend a grievance hearing.

If the complainant requests a hearing in a timely manner, the HPHA shall schedule a hearing on the grievance at the earliest time possible for the complainant, HPHA and the hearing officer or hearing panel, but in no case later than ten working days after the HPHA received the complainant's request.

If the complainant fails to request a hearing within five working days after receiving the summary of the informal hearing, the HPHA's decision rendered at the informal hearing becomes final, and the HPHA is not obligated to offer the complainant a formal hearing unless the complainant can show good cause why he failed to proceed in accordance with this procedure. [§966.55 (c)]

V. Selecting the Hearing Officer [966.55 (b)(2)(ii)]

A grievance hearing shall be conducted by a hearing officer appointed by the HHA after consultation with resident organizations, as described below:

- A. The HPHA shall nominate a slate of impartial persons to sit as hearing. The list may include members of the HPHA staff, other than the person who made or approved the action under review or a subordinate of such person, the list may also include Executive Directors of other PHAs or IHAs, or employees, or HPHA Board members, professional arbitrator, judges, lawyers, or others.

The HPHA will check with each nominee to determine whether there is an interest in serving as a potential hearing officer or panel member whether the nominee feels fully capable of impartiality, whether the nominee can serve without compensation, and what limitations on the nominee's time would affect such service.

Nominees will be informed that they will be expected to disqualify themselves from hearing grievances that involve personal friends, other residents of developments in which they work or reside, or grievances in which they have some personal interest.

Nominees who are not interested in serving as hearing officers or whose time is too limited to make service practical will be withdrawn.

- B. A slate of potential hearing officers nominated by the HPHA shall be submitted to the HPHA's resident organizations. Written comments from the organizations shall be considered by the HPHA before the nominees are appointed as hearing officers or panel members.

- C. When the comments from resident organizations have been received and considered, the nominees will be informed that they are the HPHA's official grievance hearing officers.

VI. Escrow Deposit Required For a Hearing Involving Rent [§966.55 (e)]

Before a hearing is scheduled in any grievance involving the amount of rent which the HPHA claims is due under this lease, the complainant shall pay to the HPHA an amount equal to the rent due and payable as of the first of the month preceding the month in which the act or failure to act took place.

The complainant shall, thereafter, deposit the same amount of the monthly rent in an escrow account monthly until the complaint is resolved by decision of the hearing officer or hearing panel. This requirement will not be waived by the HPHA.

VII. Scheduling Hearings [§966.55 (f)]

When a complainant submits a timely request for a grievance hearing, the HPHA will immediately contact a hearing officer to schedule the hearing within the following ten working days on one of the dates and times indicated by the complainant. If the hearing officer can agree on a date and time for the hearing, the complainant will be so notified.

As soon as the hearing officer has agreed upon the hearing date and time, the complainant, the manager of the development in which the complainant resides, and hearing officer shall be notified in writing. Notice to the complainant shall be in writing, either personally delivered to complainant or sent by mail, return receipt requested.

The written notice will specify the time, place and procedures governing the hearing.

VIII. Procedures Governing the Hearing [§966.56]

The hearing shall be held before a hearing officer as described above in Section VII. The complainant shall be afforded a fair hearing, which shall include:

- A. The opportunity to examine before the hearing any HPHA documents, including records and regulations, that are directly relevant to the hearing.
- The Resident shall be allowed to copy any such document at the Resident's expense. If the HPHA does not make the document available for examination upon request by the complainant, the HPHA may not rely on such document at the grievance hearing.
- B. The right to be represented by counsel or other person chosen as the Resident's representative and to have such person make statements on the Resident's behalf.
- C. The right to a private hearing unless the complainant request a public hearing. The right to present evidence and arguments in support of the Resident's complaint to controvert evidence relied on by the HPHA or project management, and to confront and cross-examine all witnesses upon whose testimony or information the HPHA or project management relies; and
- D. A decision based solely and exclusively upon the fact presented at the hearing. [§966.56 (b)]

The hearing officer may render a decision without proceeding with the hearing if they determine that the issue has been previously decided in another proceeding. [§966.56 (c)]

At the hearing the complainant must first make a showing of an entitlement to the relief sought and, thereafter, the HPHA must sustain the burden of justifying the HPHA's action or failure to act against which the complaint is directed. [§966.56 (e)]The hearing shall be conducted informally by the hearing officer.

Oral or documentary evidence pertinent to the facts and issues raised by the complaint may be received without regard to admissibility under the rules of evidence applicable to judicial proceedings. [§966.56 (f)]

The hearing officer shall require the HPHA, the complainant, counsel and other participants or spectators to conduct themselves in an orderly fashion. Failure to comply with the directions of the hearing officer to obtain order may result in exclusion from the proceedings or in a decision adverse to the interests of the disorderly party and granting or denial of the relief sought, as appropriate. [§966.56 (f)]

The complainant or the HPHA may arrange in advance, and at expense of the party making the arrangement, for a transcript of the hearing. Any interested party may purchase a copy of such transcript. [§966.56 (g)]

If a hearing officer fails to disqualify himself/herself as required in Section V. A., the HPHA will remove the hearing officer from the hearing, invalidate the results of the hearing and schedule a new hearing with a new hearing officer.

IX. Failure to Appear at the Hearing

If the complainant or the HPHA fails to appear at the scheduled hearing, the hearing officer may make a determination to postpone the hearing for not to exceed five business days, or may make a determination that the party has waived his right to a hearing. [§966.56 (d)]

Both the complainant and the HPHA shall be notified of the determination by the hearing officer: Provided, that a determination that the complainant has waived his right to a hearing shall not constitute a waiver of any right the complainant may have to contest the HPHA's disposition of the grievance in court. [§966.56 (d)]

X. Decision of the Hearing Officer [§966.57]

The hearing officer shall prepare a written decision, together with the reasons for the decision within ten working days after the hearing. A copy of the decision shall be sent to the complainant and the HPHA.

The HPHA shall retain a copy of the decision in the Resident's folder. A copy of the decision with all names and identifying references deleted, shall also be maintained on file by the HPHA and made available for inspection by a prospective complainant, his representative, or the hearing officer.

The decision of the hearing officer shall be binding on the HPHA which shall take all actions, or refrain from any actions, necessary to carry out the decision unless the HPHA's Board of Commissioners determines within ten working days, and promptly notifies the complainant of its determination that:

- A. The grievance does not concern HPHA action or failure to act in accordance with or involving the complainant's lease or HPHA regulations, which adversely affect the complainant's rights, duties, welfare or status.
- B. The decision of the hearing officer is contrary to applicable Federal, State or local law, HUD regulations, or requirements of the Annual Contributions Contract between HUD and the HPHA.
- C. A decision by the hearing officer or Board of Commissioners in favor of the HPHA or which denies the relief requested by the complainant in whole or in part shall not constitute a waiver of, nor affect in any way, the rights of the complainant to a trial or judicial review in any court proceedings which may be brought in the matter later. [§966.57]

XI. Accommodation of Persons With Disabilities [§966.56 (h)]

The Authority will provide reasonable accommodation for persons with disabilities to participate in the hearing.

Reasonable accommodation may include qualified sign language interpreters, readers, accessible locations, or attendants. If the complainant is visually impaired, any notice to the tenant which is required by this Grievance Procedure must be in an accessible format.

20.0 GLOSSARY OF TERMS

50058 Form: The HUD form that housing authorities are required to complete for each assisted household in public housing to record information used in the certification and re-certification process and, at the option of the housing authority, for interim reexaminations.

1937 Housing Act: The United States Housing Act of 1937 (42 U.S.C. 1437 et seq.) (24 CFR 5.100)

Adjusted Annual Income: The amount of household income, after deductions for specified allowances, on which resident rent is based. (24 CFR 5.611)

Adult: A household member who is 18 years or older or who is the head of the household, or spouse, or co-head.

Allowances: Amounts deducted from the household's annual income in determining adjusted annual income (the income amount used in the rent calculation). Allowances are given for elderly families, dependents, medical expenses for elderly families, disability expenses, and child care expenses for children under 13 years of age. Other allowances can be given at the discretion of the housing authority.

Annual Contributions Contract (ACC): The written contract between HUD and a housing authority under which HUD agrees to provide funding for a program under the 1937 Act, and the housing authority agrees to comply with HUD requirements for the program. (24 CFR 5.403)

Annual Income: All amounts, monetary or not, that:

A. Go to (or on behalf of) the family head or spouse (even if temporarily absent) or to any other family member; or

B. Are anticipated to be received from a source outside the family during the 12- month period following admission or annual reexamination effective date; and

C. Are not specifically excluded from annual income.

Annual Income also includes amounts derived (during the 12-month period) from assets to which any member of the family has access. (1937 Housing Act; 24 CFR 5.609)

Applicant (applicant family): A person or family that has applied for admission to a program but is not yet a participant in the program. (24 CFR 5.403)

As-Paid States: States where the welfare agency adjusts the shelter and utility component of the welfare grant in accordance with actual housing costs. Currently, the four as-paid States are New Hampshire, New York, Oregon, and Vermont.

Assets: The value of equity in savings, checking, IRA and Keogh accounts, real property, stocks, bonds, and other forms of capital investment. The value of necessary items of personal property such as furniture and automobiles are not counted as assets. (Also see "net family assets.")

Asset Income: Income received from assets held by family members. If assets total more than \$5,000, income from the assets is "imputed" and the greater of actual asset income and imputed asset income is counted in annual income. (See "imputed asset income" below.)

Certification: The examination of a household's income, expenses, and family composition to determine the family's eligibility for program participation and to calculate the family's share of rent.

Child: For purposes of citizenship regulations, a member of the family other than the family head or spouse who is under 18 years of age. (24 CFR 5.504(b))

Child Care Expenses: Amounts anticipated to be paid by the family for the care of children under 13 years of age during the period for which annual income is computed, but only where such care is necessary to enable a family member to actively seek employment, be gainfully employed, or to further his or her education and only to the extent such amounts are not reimbursed. The amount deducted shall reflect reasonable charges for childcare. In the case of childcare necessary to permit employment, the amount deducted shall not exceed the amount of employment income that is included in annual income. (24 CFR 5.603(d))

Citizen: A citizen or national of the United States. (24 CFR 5.504(b))

Consent Form: Any consent form approved by HUD to be signed by assistance applicants and participants for the purpose of obtaining income information from employers and SWICAs, return information from the Social Security Administration, and return information for unearned income from the Internal Revenue Service. The consent forms may authorize the collection of other information from assistance applicants or participant to determine eligibility or level of benefits. (24 CFR 5.214)

Decent, Safe, and Sanitary: Housing is decent, safe, and sanitary if it satisfies the applicable housing quality standards.

Department: The Department of Housing and Urban Development. (24 CFR 5.100)

Dependent: A member of the family (except foster children and foster adults), other than the family head or spouse, who is under 18 years of age or is a person with a disability or is a full-time student. (24 CFR 5.603(d))

Dependent Allowance: An amount, equal to \$480 multiplied by the number of dependents, that is deducted from the household's annual income in determining adjusted annual income.

Disability Assistance Expenses: Reasonable expenses that are anticipated, during the period for which annual income is computed, for attendant care and auxiliary apparatus for a disabled family member and that are necessary to enable a family member (including the disabled member) to be employed, provided that the expenses are neither paid to a member of the family nor reimbursed by an outside source. (24 CFR 5.603(d))

Disability Assistance Expense Allowance: In determining adjusted annual income, the amount of disability assistance expenses deducted from annual income for families with a disabled household member.

Disabled Family: A family whose head, spouse, or sole member is a person with disabilities; two or more persons with disabilities living together; or one or more persons with disabilities living with one or more live-in aides. (24 CFR 5.403(b)) (Also see "person with disabilities.")

Disabled Person: See "person with disabilities."

Displaced Family: A family in which each member, or whose sole member, is a person displaced by governmental action (such as urban renewal), or a person whose dwelling has been extensively damaged or destroyed as a result of a disaster declared or otherwise formally recognized pursuant to Federal disaster relief laws. (24 CFR 5.403(b))

Displaced Person: A person displaced by governmental action or a person whose dwelling has been extensively damaged or destroyed as a result of a disaster declared or otherwise formally recognized pursuant to Federal disaster relief laws. *{1937Act}*

Drug-Related Criminal Activity: Drug trafficking or the illegal use, or possession for personal use, of a controlled substance as defined in Section 102 of the Controlled Substances Act (21 U.S.C.802).

Elderly Family: A family whose head, spouse, or sole member is a person who is at least 62 years of age; two or more persons who are at least 62 years of age living together; or one or more persons who are at least 62 years of age living with one or more live-in aides. (24 CFR 5.403)

Elderly Family Allowance: For elderly families, an allowance of \$400 is deducted from the household's annual income in determining adjusted annual income.

Elderly Person: A person who is at least 62 years of age. (1937 Housing Act)

Extremely Low Income Family: A family whose annual income does not exceed 30 percent of the medial income for the area, as determined by HUD, with adjustments for smaller and larger families.

Fair Housing Act: Title VIII of the Civil Rights Act of 1968, as amended by the Fair Housing Amendments Act of 1988 (42 U.S.C. 3601 et seq.). (24 CFR 5.100)

Family includes but is not limited to:

- A. A family with or without children
- B. An elderly family;
- C. A near-elderly family;
- D. A disabled family;
- E. A displaced family;
- F. The remaining member of a resident family; and
- G. A single person who is not an elderly or displaced person, a person with disabilities, or the remaining member of a resident family. (24 CFR 5.403)

Family Members: All members of the household other than live-in aides, foster children, and foster adults. All family members permanently reside in the unit, though they may be temporarily absent. All family members are listed on the lease.

Family Self-Sufficiency Program (FSS Program): The program established by a housing authority to promote self-sufficiency among participating families, including the coordination of supportive services. (24 CFR 984.103(b))

Flat Rent: A rent amount the family may choose to pay in lieu of having their rent determined under the formula method. The amount determined is based on the Fair Market Rent values established by HUD and are designed to promote self-sufficiency. Families selecting the flat rent option will be required to submit to the reexamination requirement once every three years.

Formula Method: A means of calculating a family's rent based on 10% of their monthly income, 30% of their adjusted monthly income, the welfare rent, or the minimum rent. Under the formula method, rents may be capped by a ceiling rent. Under this method, the family's income is evaluated at least annually.

Full-Time Student: A person who is carrying a subject load that is considered full-time for day students under the standards and practices of the educational institution attended. An educational institution includes a vocational school with a diploma or certificate program, as well as an institution offering a college degree. (24 CFR 5.603(d))

Head of Household: The adult member of the family who is the head of the household for purposes of determining income eligibility and rent. (24 CFR 5.504(b))

Household Members: All members of the household including members of the family, live-in aides, foster children, and foster adults. All household members are listed on the lease, and no one other than household members are listed on the lease.

Housing Assistance Plan: A housing plan that is submitted by a unit of general local government and approved by HUD as being acceptable under the standards of 24 CFR 570.

Imputed Income: For households with net family assets of more than \$5,000, the amount calculated by multiplying net family assets by a HUD-specified percentage. If imputed income is more than actual income from assets, the imputed amount is used as income from assets in determining annual income.

In-Kind Payments: Contributions other than cash made to the family or to a family member in exchange for services provided or for the general support of the family (e.g., groceries provided on a weekly basis, baby-sitting provided on a regular basis).

Interim (examination): A reexamination of a family income, expenses, and household composition conducted between the regular annual re-certifications when a change in a household's circumstances warrants such a reexamination.

Live-In Aide: A person who resides with one or more elderly persons, near-elderly persons, or persons with disabilities and who:

- A. Is determined to be essential to the care and well-being of the persons;
- B. Is not obligated for the support of the persons; and
- C. Would not be living in the unit except to provide the necessary supportive services. (24 CFR 5.403(b))

Low-Income Families: Those families whose incomes do not exceed 80% of the median income for the area, as determined by the Secretary with adjustments for smaller and larger families, except that the Secretary may establish income ceilings higher or lower than 80% of the median for the area on the basis of the Secretary's findings that such variations are necessary because of prevailing levels of construction costs or unusually high or low family incomes. (1937 Act)

Medical Expenses: Medical expenses (of all family members of an elderly or disabled family), including medical insurance premiums that are anticipated during the period for which annual income is computed and that are not covered by insurance. (24 CFR 5.603(d)). These expenses include, but are not limited to, prescription and non-prescription drugs, costs for doctors, dentists, therapists, medical facilities, care for service animals, transportation for medical purposes.

Mixed Family: A family whose members include those with citizenship or eligible immigration status and those without citizenship or eligible immigration status. (24 CFR 5.504(b))

Monthly Adjusted Income: One twelfth of adjusted income. (24 CFR 5.603(d))

Monthly Income: One twelfth of annual income. (24 CFR 5.603(d))

National: A person who owes permanent allegiance to the United States, for example, as a result of birth in a United States territory or possession. (24 CFR 5.504(b))

Near-Elderly Family: A family whose head, spouse, or sole member is a person who is at least 50 years of age but below the age of 62; two or more persons, who are at least 50 years of age but below the age of 62, living together; or one or more persons who are at least 50 years of age but below the age of 62 living with one or more live-in aides. (24 CFR 5.403(b))

Net Family Assets:

- A. Net cash value after deducting reasonable costs that would be incurred in disposing of real property, savings, stocks, bonds, and other forms of capital investment, excluding interests in Indian trust land and excluding equity accounts in HUD homeownership programs. The value of necessary items of personal property such as furniture and automobiles shall be excluded.
- B. In cases where a trust fund has been established and the trust is not revocable by, or under the control of, any member of the family or household, the value of the trust fund will not be considered an asset so long as the fund continues to be held in trust. Any income distributed from the trust fund shall be counted when determining annual income.
- C. In determining net family assets, housing authorities or owners, as applicable, shall include the value of any business or family assets disposed of by an applicant or resident for less than fair market value (including a disposition in trust, but not in a foreclosure or bankruptcy sale) during the two years preceding the date of application for the program or reexamination, as applicable, in excess of the consideration received therefore. In the case of a disposition as part of a separation or divorce settlement, the disposition will not be considered to be for less than fair market value if the applicant or resident receives important consideration not measurable in dollar terms. (24 CFR 5.603(d))

Non-Citizen: A person who is neither a citizen nor national of the United States. (24 CFR 5.504(b))

Occupancy Standards: The standards that a housing authority establishes for determining the appropriate number of bedrooms needed to house families of different sizes or composition.

Person with Disabilities: A person who:

- A. Has a disability as defined in Section 223 of the Social Security Act, which states:

"Inability to engage in any substantial, gainful activity by reason of any medically determinable physical or mental impairment that can be expected to result in death or that has lasted or can be expected to last for a continuous period of not less than 12 months, or

In the case of an individual who attained the age of 55 and is blind and unable by reason of such blindness to engage in substantial, gainful activity requiring skills or ability comparable to those of any gainful activity in which he has previously engaged with some regularity and over a substantial period of time."
- B. Is determined, pursuant to regulations issued by the Secretary, to have a physical, mental, or emotional impairment that:
 - 1. Is expected to be of long-continued and indefinite duration;
 - 2. Substantially impedes his or her ability to live independently; and

3. Is of such a nature that such ability could be improved by more suitable housing conditions, or

C. Has a developmental disability as defined in Section 102(7) of the Developmental Disabilities Assistance and Bill of Rights Act, which states:

"Severe chronic disability that:

1. Is attributable to a mental or physical impairment or combination of mental and physical impairments;
2. Is manifested before the person attains age 22;
3. Is likely to continue indefinitely;
4. Results in substantial functional limitation in three or more of the following areas of major life activity: (1) self care, (2) receptive and responsive language, (3) learning, (4) mobility, (5) self-direction, (6) capacity for independent living, and (7) economic self-sufficiency; and
5. Reflects the person's need for a combination and sequence of special, interdisciplinary, or generic care, treatment, or other services that are of lifelong or extended duration and are individually planned and coordinated."

This definition does not exclude persons who have the disease of acquired immunodeficiency syndrome or any conditions arising from the etiologic agent for acquired immunodeficiency syndrome. (1937 Act)

No individual shall be considered to be a person with disabilities for purposes of eligibility solely based on any drug or alcohol dependence.

Proration of Assistance: The reduction in a family's housing assistance payment to reflect the proportion of family members in a mixed family who are eligible for assistance. (24 CFR 5.520)

Public Housing Agency (PHA): Any State, county, municipality, or other governmental entity or public body (or agency or instrumentality thereof) which is authorized to engage in or assist in the development or operation of low-income housing under the 1937 Housing Act. (24 CFR 5.100)

Reexamination: The annual re-certification of a family's income, expenses, and composition to determine the family's rent.

Remaining Member of a Resident Family: A member of the family listed on the lease who continues to live in the public housing dwelling after all other family members have left. (Handbook 7565.1 REV-2,3-5b.)

Resident: The person or family renting or occupying an assisted dwelling unit. (24 CFR 5.504(b))

Resident Rent: The amount payable monthly by the family as rent to the housing authority. Where all utilities (except telephone) and other essential housing services are supplied by the housing authority or owner, resident rent equals total resident payment. Where some or all utilities (except telephone) and other essential housing services are supplied by the housing authority and the cost thereof is not included in the amount paid as rent, resident rent equals total resident payment less the utility allowance. (24 CFR 5.603(d))

Self-Declaration: A type of verification statement by the resident as to the amount and source of income, expenses, or family composition. Self-declaration is acceptable verification only when third-party verification or documentation cannot be obtained.

Shelter Allowance: That portion of a welfare benefit (e.g., TANF) that the welfare agency designates to be used for rent and utilities.

Single Person: Someone living alone or intending to live alone who does not qualify as an elderly family, a person with disabilities, a displaced person, or the remaining member of a resident family. (Public Housing: Handbook 7465.1 REV-2, 3-5)

State Wage Information Collection Agency (SWICA): The State agency receiving quarterly wage reports from employers in the State or an alternative system that has been determined by the Secretary of Labor to be as effective and timely in providing employment-related income and eligibility information. (24 CFR 5.214)

Temporary Assistance to Needy Families (TANF): The program that replaced the Assistance to Families with Dependent Children (AFDC) that provides financial assistance to needy families who meet program eligibility criteria. Benefits are limited to a specified time period.

Third Party (verification): Written or oral confirmation of a family's income, expenses, or household composition provided by a source outside the household.

Total Resident Payment (TTP):

- A. Total resident payment for families whose initial lease is effective on or after August 1, 1982:
 - 1. Total resident payment is the amount calculated under Section 3(a)(I) of the 1937 Act which is the higher of:
 - a. 30% of the family's monthly adjusted income;
 - b. 10% of the family's monthly income; or
 - c. If the family is receiving payments for welfare assistance from a public agency and a part of such payments, adjusted in accordance with the family's actual housing costs, is specifically designated by such agency to meet the family's housing costs, the portion of such payments which is so designated.

If the family's welfare assistance is ratably reduced from the standard of need by applying a percentage, the amount calculated under section 3(a)(1) of the

Housing Act of 1937 shall be the amount resulting from one application of the percentage.

2. Total resident payment for families residing in public housing does not include charges for excess utility consumption or other miscellaneous charges.

B. Total resident payment for families residing in public housing whose initial lease was effective before August 1, 1982, will continue to be governed by paragraphs (b) and (c) of 24 CFR 913.107, as it existed immediately before November 18, 1996.

Utility Allowance: If the cost of utilities (except telephone) and other housing services for an assisted unit is not included in the resident rent but is the responsibility of the family occupying the unit, an amount equal to the estimate made by a housing authority of the monthly cost of a reasonable consumption of such utilities and other services for the unit by an energy- conservative household of modest circumstances consistent with the requirements of a safe, sanitary, and healthful living environment. (24 CFR 5.603)

Very Low-Income Families: Low-income families whose incomes do not exceed 50% of the median family income for the area, as determined by the Secretary with adjustments for smaller and larger families, except that the Secretary may establish income ceilings higher or lower than 50% of the median for the areas on the basis of the Secretary's findings that such variations are necessary because of unusually high or low family incomes. Such ceilings shall be established in consultation with the Secretary of Agriculture for any rural area, as defined in Section 520 of the Housing Act of 1949, taking into account the subsidy characteristics and types of programs to which such ceilings apply. (1937 Act)

Welfare Assistance: Welfare or other payments to families or individuals, based on need, that are made under programs funded by Federal, State, or local governments. (24 CFR 5.603(d))

Welfare Rent: In "as-paid" welfare programs, the amount of the welfare benefit designated for shelter and utilities. See term "As-Paid".

21.0 ACRONYMS

ACC	Annual Contributions Contract
CFR	Code of Federal Regulations
FSS	Family Self-Sufficiency (program)
HCDA	Housing and Community Development Act
HQS	Housing Quality Standards
HUD	Department of Housing and Urban Development
INS	(U.S.) Immigration and Naturalization Service
NAHA	(Cranston-Gonzalez) National Affordable Housing Act
NOFA	Notice of Funding availability
OMB	(U.S.) Office of Management and Budget
PHA	Public Housing Agency
QHWR	Quality Housing and Work Responsibility Act of 1998
SSA	Social Security Administration
TTP	Total Resident Payment

HPHA Pet Policy

The Pet Policy set forth herein is reasonably related to the following legitimate interests of the Hickory Public Housing Authority (HPHA), including but not limited to:

- (a) The HPHA's interest in providing a decent, safe and sanitary living environment for existing and prospective Residents;
- (b) Protection and preserving the physical condition of the property of the HPHA and the housing located thereon; and
- (c) The HPHA's financial interests in the property administered by this Housing Authority.

Residents occupying units administered by the Hickory Public Housing Authority shall be allowed to house pets on either a temporary or permanent basis. The Applicant and any Resident must also provide certification from a licensed medical reference. Only after such certification has been received by this Housing Authority in writing, will a Resident be permitted to keep and maintain a pet. The rules set forth herein specify the procedure for obtaining the necessary approval to keep and maintain a pet on this Housing Authority premises and set forth the rules which govern the keeping of such pets. Residents requesting permission to have a pet will be permitted a limit of one (1) pet per household (Dwelling Unit).

(1) SELECTION CRITERIA

- (a) Management Approval: Prior to a pet being accepted for keeping in a Dwelling Unit the Resident and the Authority must enter into a Pet Agreement.

In addition to executing the "*Pet Agreement*" the Resident must submit to this Housing Authority documented proof of the proposed pet's health suitability and acceptability in accordance with provisions outlined in "Standards" below. Pets must be registered with the Housing Authority before the pet is brought onto the premises and annually thereafter.

Registration includes:

1. Certificate signed by a licensed veterinarian or designated State or local authority or agent, stating that the pet has received all inoculations required by State or local law;
2. Statement signed by a licensed veterinarian that the animal is a good health, has no communicable diseases or pests, and in the case of dogs and cats, is spayed or neutered. Cats must be declawed.



3. Name, address, and phone number of one or more responsible parties to care for the pet if the owner dies, is incapacitated or unable to care for the pet;
4. Execution of a “*Pet Agreement*” stating that the Resident accepts complete responsibility for the care and cleaning of the pet and acknowledges the applicable rules;
5. Pet must be licensed in accordance with applicable State and local laws and regulations.

Registration will be coordinated with the annual reexamination date. Approval for the keeping of pets shall not be extended until the requirements specified above have been met and in no event will approval of other than the common household pets be extended.

b. Management Disapproval: This Housing Authority shall refuse to register the pet if:

1. The pet is not a common household pet identified more specifically in this policy.
2. Pet owner fails to provide complete pet registration information or fails annually to update the registration;
3. This Housing Authority reasonable determines based on the pet owner’s habits and practices that the pet owner will be unable to keep the pet in compliance. The pet’s temperament may be considered as a factor in determining the prospective pet owner’s ability to comply with the pet rules and other Dwelling Lease obligations.

c. Standards: Common household pets as outlined below will be permitted under the following guidelines:

1. Dogs

Maximum number – one (1);

Maximum adult weight – twenty (20) pounds, however, this may be increased to twenty-five (25) pounds in the case of the Resident already owning a dog weighing 20 to 25 pounds at time of move-in;

Must be house broken;

Must be spayed or neutered;

Must have all required inoculations;

Must be licensed as specified now or in future by State and local ordinance.

2. Cats:

Maximum number – one (1)

Maximum adult weight - ten (10) pounds, however, this may be increased to fifteen (15) pounds in the case of Resident already owning a cat weighing between 10 and 15 pounds at time of move-in;

Must be declawed;

Must have all required inoculation;

Must be trained to use a liter box or other waste receptacle;

Must be licensed as specified now or in the future by State and local ordinance.

3. Birds:

Maximum number – two (2)

Must be enclosed in cage(s) at all times;

Must have certified from licensed veterinarian on a yearly basis that bird(s) is/are free of diseases.

4. Fish:

Maximum aquarium size – 20 gallons;

Aquarium must be kept clean.

5. Rodents

Maximum number – four (4)

Must be enclosed in cage(s) at all times;

Cage(s) must be cleaned at least once weekly.

(2) Pet Deposit:

a. The Resident shall be required to pay to this Housing Authority a refundable deposit as defined below:

1. Dog or cat: A deposit of \$100.00 (in addition to the required security deposit) will be made for the purpose of defraying and/all cost directly attributable to the presence of a dog or cat.
2. The Deposit shall be paid in either a lump sum or an initial payment of \$50.00 on or prior to the date the pet is properly registered and brought into the Dwelling Unit, and the remaining \$50.00 on the immediate next rent payment date. Non compliance in payment of remaining \$ 50.00 will result in removal of pet and Resident

b. All other allowable pets:

1. A deposit of \$50.00 shall be made for the purpose of defraying all reasonable costs directly attributable to the presence of the pet:
2. The deposit shall be paid in full on or prior to the date the pet is properly registered and brought into the Dwelling Unit.

The Housing Authority reserves the right to change or increase the required deposit by amendment to this policy.

c. All reasonable expense incurred by the Housing Authority as the result of damages directly attributable to the presence of the pet in the complex shall be the responsibility of the Resident.

1. Cost of repairs and replacement to Resident's Dwelling Unit.
 2. Fumigation of Resident's Dwelling Unit. Such expense as a result of move out inspection shall be deducted from the Pet Deposit at move out and the Resident shall be billed for any balance due.
- d. The remainder of the Pet Deposit shall be refunded after the Resident moves out or when the Resident no longer keeps the pet whichever is earlier;
 - e. Resident's liability for damages caused by his/her pet is not the amount of the Pet Deposit ; and while the Resident is in occupancy he/she will be required to reimburse this Housing Authority for the total cost of any/all damages caused by his/her pet;
 - f. In the event that a Resident shall fail to promptly pay the Housing Authority for the cost of any/all damages caused by his/her pet after being furnished with an itemized invoice of said damages, the Resident shall pay all cost(s) and expenses, including court cost and reasonable attorney(s) fees in the event legal action is necessary to collect said damages.

(3) Pet Rules

- a. Pets must be maintained WITHIN the Resident's Dwelling Unit. When outside the Dwelling Unit dogs and cats MUST be kept on a leash or carried, and under the control of the Resident or other responsible individual AT ALL TIMES.
- b. Dogs should be walked (always on a leash) and curbed away from the buildings, sidewalks, streets, and other common waling areas. Resident must carry a scoop and plastic bag when waling a pet and cleanup after pet by placing waste in tied plastic bag and placing bag in Housing Authority trash container on the grounds of the complex. Under no circumstances will pet be allowed to go near the shrubbery and/or trees located on the property.
- c. Litter Box requirements for Cats: Litter from litter boxes shall be disposed of in sealed plastic trash bags and placed appropriately normal trash pickup days. Litter shall be changed at least once weekly and waste will be cleaned from box daily. Litter shall NOT be disposed of by being flushed down the toilet. Charges for unclogging the toilet due to the improper disposal of pest waste shall be billed to the Resident. Litter boxes shall be kept INSIDE the Resident's Dwelling Unit at all times.
- d. The Resident shall assume sole responsibility for liability arising from person sustained by any person attributable to his/her pet.
- e. The Resident agrees to control the noise of his/her pet so that such noise does not constitute a nuisance to other Residents or interrupt their peaceful enjoyment of their Dwelling Units. Failure to control pet noise may result in the removal of the pet from the premises.

- f. Any pet that causes bodily injury to any Resident, guest, staff member, or other authorized person on the premises, shall be IMMEDIATELY AND PERMANENTLY REMOVED FROM THE PREMISES WITHOUT PRIOR NOTIFICATION.
- g. Dogs shall never be left unattended in any unit for a period in excess of four (4) hours. Cats shall never be left unattended in any Dwelling Unit for a period in excess of twenty – four (24) hours.
- h. All Residents shall be responsible for adequate care, nutrition, exercise and medical attention of his/her pet. Any animal not being cared for properly will be removed by Management.
- i. Visiting pets, as well as pets of visitor/guests are strictly prohibited, with the exception of handicap assistance pets, which must also be certified permission of the Housing Authority.
- j. Residents are prohibited from feeding or harboring stray animals. The feeding of stray animals shall constitute having a pet without the written permission of this Housing Authority.
- k. The expense of disinfestations of fleas in the Resident's Dwelling Unit shall be the responsibility of the Resident.
- l. Resident shall not alter his/her Dwelling Unit, patio, or common areas to create an enclosure for his/her pet.

Pet Agreement

1. Resident: _____

2. Dwelling Unit#: _____ Complex Name: _____

3. Date of Current Dwelling Lease: _____

4. Is your pet needed for assistance due to handicap of you or a member of your household? () Yes () No.

If yes, describe handicap and attach statement from your physician describing the handicap and how the proposed pet has been trained to assist with that specific handicap:

5. Description of Pet: _____

Type of Pet: _____ Breed: _____ Color: _____

Weight: _____ Estimated weight & height at maturity: _____

Aquarium size (if applicable): _____, Type of fish (if applicable) _____

6. Name and address of veterinarian: _____

License Number: _____

7. If dog or cat date of neutering or spaying: _____ If cat, date of declawing: _____

8. Has your pet lived in rental housing before? () Yes () No If yes, name and phone number of landlord: _____

9. Has your pet ever bitten or injured anyone? If so, describe the incident:

This application must be completed and returned when application is made for housing at this Housing Authority, along with two (2) affidavits of Pet Owner's Emergency Absence Agreement. Each must be signed and witnessed by two (2) separate people who are willing to immediately care, and be responsible for, your pet in the event of your absence. The signatures must be notarized.

A Veterinarian's Certificate must also be completed by a veterinarian and returned with this application.

THIS IS TO CERTIFY THAT ALL INFORMATION IS ACCURATE TO THE BEST OF MY KNOWLEDGE AND I HAVE READ THE PET POLICY CONTAINING RULES AND REGULATIONS AND FULLY UNDERSTAND THIS CONTRACT. I ACCEPT ALL FINANCIAL RESPONSIBLE FOR MY PET INCLUDE IN THESE RULES AND REGULATIONS AND ANY/ALL DAMAGES/INJURIES THAT MAY OCCUR BECAUSE OF MY PET.

RESIDENTS SIGNATURE: _____ DATE: _____

APPROVED BY: _____ DATE: _____
(Housing Authority Representative)

The Pet Agreement, when executed, becomes an attachment to the Dwelling Lease between _____ and the Hickory Housing Authority.

I, _____, certify that;

I have read and received an explanation and understand the Provisions of the Pet Policy and rules of the Hickory Housing Authority and agree to comply fully with stipulated provisions;

I understand that violation of these rules may constitute cause for the removal of my pet from the premises, and/or termination of my tenancy; and I accept complete responsibility for the care and cleaning of the pet and my Dwelling Unit# _____ (Resident's initials).

When required by the Hickory Housing Authority to remove my pet from the premises, for case, I agree to accomplish this removal and understand that failure to do so may constitute cause for the initiation of an eviction proceeding.

In the event I want to substitute pets, or if the pet is removed from the unit, or if I add another pet, I realize I will have to reapply for approval of the new pet.

NAME OF RESIDENT (print): _____

ADDRESS (DWELLING UNIT#): _____

COMPLEX NAME: _____

SIGNATURE AND DATE: _____

THE ABOVE NAMED HAS READ, UNDERSTOOD, AND SIGNED THESE RULES IN MY PRESENCE:

WITNESS: NAME: _____

ADDRESS: _____

SIGNATURE: _____

DATE: _____

EXECUTIVE DIRECTOR OF DESIGNEE: _____

**ACTION PLAN
FOR THE
CITY OF HICKORY PUBLIC HOUSING
AUTHORITY
COMMUNITY SERVICES PROGRAM**

**Alanda Jackson
Executive Director**

PROGRAM

- I. Program Goals and Objectives**
- II. Family Demographics**
- III. Number of Residents Required to Participate**
- IV. Program Incentives**
- V. Outreach Efforts and Orientation**
- VI. Program Requirements**
- VII. Scope of Activities and Supportive Services**
- VIII. Program Termination and Grievance Procedures**
- IX. Assurance and Non-Interference**
- X. Implementation Timetable**
- XI. Certification of Coordination**

I. Program Goals/Objectives:

Implement a **community service program** that will:

- Provide comprehensive information to the residents in Public Housing regarding this mandate and their obligations to participate or whether they have exemption status.
- Engage residents in meaningful community service and self-sufficiency activities that will improve their socio-economic.
- Promote a sense of community inclusion and cooperation between the residents and community at large.
- Establish interagency partnerships to ensure adequate and appropriate community service and training opportunities. This will involve securing commitments from public and private resources in the community.
- Provide homeownership options for residents.
- Develop a system of accountability and compliance of participants and community service providers to promote long-term success and effectiveness.
- Provide written documentation of annually resident compliance.
- Assess overall quality of program to identify ongoing and future program needs.
- Enhance the employability of program participants by offering opportunities geared towards job placement.
- Provide guidance and support to residents participants in the program to help overcome ant identified barriers to participation.
- Establish cooperative working relationships with the local businesses in the community.

Resident Objectives:

- Achieve a greater level of self-motivation, self-esteem, self-discipline and self-sufficiency by engaging in rewarding activities that will allow them to be of service to others in the community.
- Enhance employment skills that may lead to long-tem gainful employment and self-reliance.
- Utilize occupational training offered by CVCC Junior college
- Work in cooperation with Housing Authority staff to identify and address various barriers to success.

II. Family Demographics:

The Hickory Housing Authority’s Public Housing program currently consists of 311 units. Of the 311 units, residents occupy 308 units and 2 are designated sub-stations and one is a satellite office.

The Authority’s **Community Service Program** will identify those residents in public housing who are required to participate as outlined in the statute.

The demographics of the Public Housing population is outlined below:

Units:

Total Number of Public Housing Units	308
Total Number of Occupied Units	308
Blue Ridge Heights	68
Hillside Gardens	70
Ridgecrest	88
Terrace Hills	43
Sunny Valley	39

Families:

Total Number of Families	284
Total Number of Elderly Residents	39
Total Number of Disabled Residents	1
Total	324

Age, Sex, and Race:

Number of Females	229
Number of Males	228
0-5 Years Old	128
6-12 Years Old	126
13-18 Years Old	74
18 Years and Older	276
Total	1061

Income:

TANF	17
SSI	55
SS	66
VA Retirement	1
Wage Earners	70
Voluntary Child Support	29
Involuntary Child Support	29
Unemployment Benefits	4
Other	22
Other Non-Wage	43
No Income	26

III. Number of Residents Required to Participate

Based on the criteria of the statute and the recorded demographics, there are 85 (eighty-five) residents who are required to participate in the community service program.

IV. Program Incentives

This is an unfunded, mandated program, so therefore participation is not optional. While there will be no tangible program incentives, the consequences of non-compliance and the intrinsic value of self-improvement and economic success will be highlighted in an effort to motivate the resident to take advantage of an opportunity towards self-sufficiency. In many instances, community/volunteer service can lead to gainful employment.

V. Outreach Efforts and Orientation

To keep all of our residents abreast of the laws that affect them, a written summary of this statute will be mailed to each of the 308 units. This summary will include a synopsis of the law, consequences for non-compliance and the individual participation status and responsibilities along with specific procedures to follow for the certification process.

Resident meetings will be held at each development to advise residents of the regulations, changes in regulations, etc.

Residents who qualify for the exemption status will be provided with detailed information regarding what documents, if any, that are necessary for certification. It will be required that any change in resident exemption status be reported immediately to the HHA for the proper follow up and recertification/verification process. The information will also include cut-off dates for compliance. Similarly, those residents who will be required to participate in the program will be provided the dates and times for the mandatory orientation meeting.

Additionally, a list of all the community service providers and the volunteer profile sheet will be included in the first mailing to allow the resident an opportunity to begin the process of choosing the program component(s) they wish to pursue.

To facilitate resident convenience, peer support and to ensure that each participant is appropriately and adequately informed about his or her responsibilities under this statute, and mandatory orientation meeting will be held at each site.

During the meeting, the following items will be addressed:

1. Individual Requirements under this statute.
2. The benefits of compliance.
3. The consequences of non-compliance.

4. Choosing a program component and community resource provider.
5. Liability
6. Certification of compliance.
7. Program Termination
8. Grievance Procedure

VI. Program Requirements

It is the sole responsibility of the resident to secure appropriate placement and involvement with either the intense job skills training program, the community/volunteer service program or the combination of both. It is recommended that the resident choose a pre-approved provider from the list to avoid being placed in hazardous conditions or inappropriate (political activity) service activities.

HPHA will not assume any liability for any action arising out of the resident's involvement in this community service program. The resident's involvement with this program is not to be constructed as an employment relationship with the HPHA and/or the community service provider.

HPHA will provide the resident a list of approved community service providers, a description of the service that they provide and the name and number of the resource contact.

The resident is responsible to ensure that their participation is accurately verified and submitted at the appropriate time. Any changes in program status are to report to the Property Manager for proper tracking. To further ensure proper tracking of resident compliance and to maintain a positive relation with the community service providers, the provider will be given a form to notify the HPHA of any problems, concerns or changes in participant status.

For those individuals choosing the job skills training program, the number of hours spent in each session will count towards the eight-hour minimum per month. This will allow the resident some flexibility in continuing with an active job placement program if employment has not been obtained by the conclusion of the job skills training program. In the event employment has not been secured by the time accrued time has been expended, the resident will be required to complete the eight-hour monthly requirement of community/volunteer service.

At the point of the annual verification of participation, the resident is responsible for ensuring that the proper documentation of compliance is received and submitted to the HPHA. No self-certifications will be allowed. Written documentation of the number of hours of participation must be received in writing from the certifying agency.

VII. Scope of Activities and Supportive Services

Commitments of participation have been secured with the following agencies to provide the Intense Job Skills Training and the Community/Volunteer Service Placements:

Job Skills Training & Placement

Centro Latino	Maria Daily	828-441-2493
Department of Social Services	Karen Hefner	828-695-3311
CVCC Resource Development	Donna Trado	828-327-7000, ext 4370
CVCC Job Link Center		828-327-7000
CVCC Displaced Homemakers		828-327-7000
CVCC College Curriculum		828-327-7000
Workforce Security Act		828-327-7000 ext. 4370
Employment Security		828-466-5536
Experience Works		828-728-0200

Participant will work with the Property Manager who are employed by the HPHA.

The Property Manager will:

- Follow-up to determine that all participants have been informed of their obligations and have been provided with the proper orientation materials and resources and referrals made.
- Determine the level of compliance of the resident sixty days prior to the expiration of the lease.
- Provide written notification at least thirty days prior to the expiration of the lease to any resident who has been verified to be non-compliant with this mandate.

VIII Program Termination Procedure:

If the community service provider chooses to terminate the relationship with the resident, the resident will be responsible for securing a new and acceptable placement.

The following are reasons for termination of the Community Service Program/Placement:

- Failure to complete the required number of monthly work or self-sufficiency activities
- Inappropriate or abusive behavior
- The resident’s withdrawal from public housing.

IX. Grievance Procedure

Grievance must be submitted to the HPHA in writing. The informal hearing procedures will be utilized per the Public Housing Grievance Procedure.

X. Assurance and Non-Interference

The Housing Authority assures that all residents will be duly informed of their responsibilities under this statute and that the proper documentation and follow-up will be made to accurately verify and report compliance.

Each community service provider will be given an opportunity to provide feedback of their experiences with the program inclusive of any recommendations in order that the HPHA can adequately assess the effectiveness of the program and to identify long-term and ongoing program needs.

XI. Implementation Timetable

Outreach effort and follow-up will be implemented upon approval of the proposed plan.

XII. Certification of Coordination:

The Hickory Public Housing Authority will coordinate all services with the aid of the Public Housing Division to ensure implementation and to maintain the integrity of all data collected.

**City of Hickory Housing Authority
REAC Follow-up Plan System
and
Resident Satisfaction Improvement
Strategy**



Communication

AREA OF CONCERN: Inability of Residents to Communicate With Management Regarding Problems and Issues

Clear communication of services, procedures, other neighborhood-related issues and activities is a critical component in the success of a development. This section measures the level of that communication in the area of events, activities, and programs available to residents, and the ability of residents to communicate with management regarding problems and issues. The following are action items that have been or will be implemented for making improvements in this area:

ACTION ITEMS:

1. Establish Communication Linkages

The Agency has developed and implemented a schedule of regular group meetings with Residents, Resident Advisory Board, or meet individually with residents to discuss resident concerns and perceptions on this issue. If situations which are identified as problems are improved, then it is believed that satisfaction with this service area should improve.

Funding Source (if required) to be utilized: Operating Budget

Task Start Date: 12/04 Target Date of Completion: ongoing

2. Ensure Written Policies and Procedures

The Agency will review its written policies and procedures to determine if all applicable policies and procedures have been documented, where necessary the Agency will prepare the missing documents. The Agency will also ensure that residents have copies of them, that the residents have input and that they are in agreement with them. Care will be taken to assure that the Agency management or staff does not dictate policies. Finally, residents will be encouraged to participate, as much as possible, in policy development.

Funding Source (if required) to be utilized: _____

Task Start Date: 01/05 Target Date of Completion: 03/05

3. Use Culturally Relevant Language

The Agency has instituted and implemented a culturally appropriate and relevant language in which to communicate with residents.

The Agency has developed materials including; posters, signage, notices, bulletins, circulars, newsletters, and relevant reports in a language that is culturally appropriate for the majority of its residents that do not speak or understand English.

Funding Source (if required) to be utilized: _____

Task Start Date: 12/04 Target Date of Completion: ongoing

Safety

AREA OF CONCERN: Failure of Agency To Convince Residents That It Is Making Efforts To Provide Safe Living Conditions

The goal of this section is to capture how safe residents feel and to assess if the housing agency is making efforts to provide safe living conditions. The following are action items that will be used to make improvements in this area.

ACTION ITEMS:

1. Establish Communication Linkages

The Agency has developed and implemented a schedule of regular group meetings with Residents, Resident Advisory Board, or meet individually with residents to discuss resident concerns and perceptions on this issue. If situations which are identified as problems are improved, then it is believed that satisfaction with this service area should improve.

Funding Source (if required) to be utilized: Operating Budget

Task Start Date: 12/04 Target Date of Completion: ongoing

2. Establish Working Relations With Police

The Agency has established a partnership with the Hickory Police Department in the community so as to have a variety of cooperative arrangements and agreements. Some of these agreements will be, but are not be limited to the following activities:

- Periodic and regular meetings between the local police agency and PHA management.
- Provisions of access by the local police agency to vacant units in order to facilitate surveillance and pursuit.
- Provision of community space for police/community meetings.
- Youth counseling.
- Community policing.
- Security surveys.

Funding Source (if required) to be utilized: Capital Fund

Task Start Date: 12/04 Target Date of Completion: ongoing

3. All Crimes Reported

The Agency has instituted a policy of reporting all criminal activity to local police authorities. This policy was put in place to establish a continuous line of communication between local police authorities and the Agency thereby creating a credible, working relationship between both groups.

Funding Source (if required) to be utilized: Capital Fund

Task Start Date: 12/04 Target Date of Completion: ongoing

5. Addition of More Lighting

The Agency will contract Hickory Police Department to review existing lighting for crime prevention through environmental design. Periodic checks will be made by Hickory Public Authority staff to ensure all lights are operating properly.

Funding Source (if required) to be utilized: Capital Fund

Task Start Date: 12/04 Target Date of Completion: 06/05

6. Check All Locks

The Agency will immediately begin a program of checking all locks and outside doors to assure that they are not in disrepair, and repair all locks that are damaged.

Funding Source (if required) to be utilized: Operating

Task Start Date: 01/05 Target Date of Completion: ongoing

7. Provide More Recreational Areas

The Agency will implement a long-term program for seeking resources to, and using those monies for, building and/or maintaining neighborhood playgrounds and basketball courts. In addition the Agency will also create youth programs to discourage crime amongst that age group.

Funding Source (if required) to be utilized: _____

Task Start Date: 01/05 Target Date of Completion: ongoing

Neighborhood Appearances

AREA OF CONCERN: Dissatisfaction With Upkeep In Different Areas of the Development

A poorly maintained development can lead to a number of problems. The appearance of the housing development should be neat and orderly. Ideally, the development should compliment the community and there should not be a clear line that defines the borders of the development due to perpetual problems such as litter, broken glass, and vandalism. Residents are encouraged to be part of the solution. There is an established process in place for residents to report problems. Management responds in a timely and professional manner to appearance problems in the community. The following are action items that the Agency will undertake to make improvements in this area.

ACTION ITEMS:

1. Establish Communication Linkages

The Agency has developed and implemented a schedule of regular group meetings with Residents, Resident Advisory Board, or meet individually with residents to discuss resident concerns and perceptions on this issue.

Funding Source (if required) to be utilized: Operating

Task Start Date: 12/04 Target Date of Completion: ongoing

2. Schedule Anti-Pest Treatments and Trash Removal Pickups More Frequently

The Agency has implemented a regular pest extermination program weekly, as well as trash pick up days on which large items can be picked up.

Funding Source (if required) to be utilized: OP Funds/Capital Fund

Task Start Date: 10/04 Target Date of Completion: ongoing

3. Common Areas and Parking Lots

The agency will make weekly site visits to determine status of common areas, parking lots and playgrounds. If needed additional trash removal days will be added. As funding permits common areas, parking lots and playgrounds will be resurfaced.

Funding Source (if required) to be utilized: Capital Funds

Task Start Date: 04/05 Target Date of Completion: ongoing

**Hickory
Housing Authority
WINGS
Family Self-Sufficiency Program**

Action Plan



**Revised and Adopted
By Board of Commissioners
June 23, 2004**

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Appendix 16

Introduction

This Action Plan introduces WINGS a Family Self-Sufficiency Program (FSS). The FSS Program is designed to provide Public Housing residents an opportunity to secure training and develop the skills needed to obtain a good job, or if already employed, to develop a career path to a better job.

We realize that most program Participants have family responsibilities. Adding additional responsibilities to their lifestyles can be difficult. However, the FSS Coordinator will help to find solutions so that these difficulties can be overcome. The road to financial success is never easy. It requires hard work and sacrifice. This program will offer assistance in obtaining economic self-sufficiency.

Demographics, such as the number of participants, family size, racial and ethnic data, and supportive service needs shall be maintained. Participant selection, enrollment and retention information shall be maintained.

Demographics for public housing as outlined below:

Families:

Total Number of Families	284
Total Number of Elderly Residents	39
Total Number of Handicapped/Disabled Residents	4
Total Number of Female head of Household	229
Total Number of Male head of Household	47
Total Number of Single Parent Heads	138
Total Number of Residents	791

Age, Sex and Race:

Number of Females	229
Number of Males	228
0-5 Years Old	128
6-12 Years Old	126
13-18 Years Old	74
18 Years Old	276
African-American Residents	195
Caucasian Residents	63
Hispanic Residents	17
Other	3

I. Eligibility/Outreach/Selection

Eligibility

Participants of the Public Housing Program are eligible to participate in the WINGS. Participants porting into the jurisdiction are eligible to continue participation in the FSS Program or may begin participation. Participant from other FSS – type programs are not anticipated to switch to the WINGS FSS Program.

Note:

The Head of the Household for the FSS Contract must be the same as the Head of the Household on the Dwelling Lease Agreement.

Outreach to Potential FSS Participants

Outreach efforts to minority and non-minority participants by the FSS Coordinator may include direct mailouts, briefings of service providers, orientation sessions to potential participant families, and flyer circulation/distribution. As needed, bi-lingual information may be available. The WINGS FSS Program will also be explained at the Public Housing and Section 8 HCV Program briefings.

All new participants will be provided information concerning the program and an invitation to attend a scheduled orientation session.

Staff will make a direct appeal to current Participants of Public Housing to apply for the FSS Program. This appeal will take place at the time of their annual renewal and during the regular course of resident contact. Program Participants are invited to attend an FSS orientation session that explains the program. Direct mailing and flyers are a vital part of outreach efforts; however, the most effective method is direct personal contact.

Families who do not decide to participate in the WINGS FSS program will not be affected by their decision. They will retain all rights under the Public Housing program.

Selection of Participants:

WINGS FSS Coordinator recruits FSS Participants from current public housing. All program participants are eligible to voluntarily participate in the FSS Program. Their enrollment and active participation in the FSS Program is highly encouraged. A paper verification of the offering and acceptance/non-acceptance and the selection process will be maintained to ensure families are selected without regard to race, color, religion, sex, handicap, family status, or national origin.

Potential participants shall be informed about the following incentives:

- Escrow Account
- Increased Independence
- Increased Income
- Education and Training
- Homeownership and Others

II. STEPS IN THE SELF-SUFFICIENCY PROCESS

All interested persons may contact the WINGS FSS Coordinator to obtain information on the FSS Program. The FSS Coordinator will schedule interested clients for an orientation.

Orientation Session:

The Head of the Household must attend the orientation session and all annual case review sessions held during the program. The orientation session will include presentations by FSS staff, and other community partner organizations. Structure for the orientation session may be as follows:

- A. Welcome - Attendance is taken at the door and "first name" tags are prepared. Guests are greeted on an informal basis.
- B. Program & FSS Staff Introduction - The staff will explain the main objective and process of the program.
- C. Self-Assessment & Goal Setting Exercise - Ever mindful that self-esteem of the participants is of the utmost importance, the WINGS FSS Coordinator shall facilitate an informal client self-assessment and goal setting exercise. Self exploration is critical in the quest for a self sufficiency plan. The orientation will also foster a feeling of independence, interdependence and mutual support for individuals who might typically otherwise feel isolated and alienated from others.
- D. Program Briefing - The FSS Staff must be prepared to address the following types of questions:
 1. (What is the WINGS FSS Program?) The FSS Program is a program to promote economic self-sufficiency among residents of federal assisted programs.
 2. (How does FSS work and how do you achieve success?) The staff may review the FSS Brochure/Information Sheet and discuss when a FSS participant is considered a success. The staff may explain the criteria for the definition of successful completion of the FSS Program.
 3. The staff will explain the Escrow Account as another incentive of the FSS Program.
- E. Question and Answer Session - The staff will allow for a question and answer session. The main objective of this session is to encourage the guests to ask questions to obtain clarifications.
- F. Application - The staff will allow approximately from ten to fifteen minutes to review the basic content areas in the application for the FSS Program. The staff will ask the guests to fill out the application if they feel they are interested in becoming FSS Participants.

Handouts recommended for the orientation session are as follows:

- FSS Information Sheet/Brochure
- FSS Application
- FSS Orientation Acknowledge Form
- FSS Pre-Enrollment Information
- FSS Personal Needs Assessment

After the family has expressed interest in participating by completing the application for the program, the FSS Coordinator will schedule a follow-up appointment.

- G. Assessment - The first case session will include an in-depth needs assessment which serves as the base line for determining what services will be needed in support of the prospective participant.
- H. Service Plan - The FSS Coordinator ensures that all needs of the family identified in the service plan (Individual Training and Services Plan) are addressed and coordinated with services. Resources in both public and private sectors are essential for the Housing Authority FSS Program. A network of service providers (focusing towards the participant's needs) is carefully identified and coordinated by the FSS Coordinator. The network of services not only allows for the exchange of timely information, but also provides the agency a system which prevents duplication of servicing activities. The participant's needs are matched and addressed with resources and documented in the case file.

The WINGS FSS Program may sponsor an FSS Fair. At this Fair representative from service agencies will set up booths to explain their services. WINGS participants can sign up for services needed in their Individual Training and Services Plan.

The nature of the program necessitates that the families establish their own educational and employment goals. To comply with the Contract of Participation, the interim goals must lead to an income which will be above the entitlement levels for government assistance by the end of the fourth year of the program.

- I. Contract of Participation - After the service plan is completed, a Contract of Participation is completed by the FSS Coordinator, signed and agreed to by the Head of the Household of the participating family. The five (5)-year period begins when the Contract of Participation is signed, obligating the family to follow the individualized service plan. Should the Contract of Participation be signed and dated other than the first of the month, the contract becomes effective the first of the following month.

Updates to the case status are processed by documenting to the Case Narrative Sheet in the case file. Changes should also be made to an automated system.

Extensions may be granted on a case by case basis and only with a supervisor's written approval.

IV. FSS Coordinator Reviews & Updates of Self-Sufficiency Plans

Even though a great amount of time and effort is invested during the application and assessment steps, a critical component is the trusting long-term relationship. Documentation of client progress will be completed monthly with each participant. The monthly review/update may be conducted in person, by mail, and/or over the telephone. However, an annual review must be conducted by the FSS Coordinator in person with the Head of the FSS family and all other family participants. The purpose of the review is to evaluate the progress made toward the goals set by each participant. Failure to meet goals, comply with the Dwelling Lease Agreement, and comply with the Housing Authority rules and regulations may result in termination of the FSS Contract of Participation, loss of FSS escrow, and in some cases housing assistance. Updates to the case status will be documented on the FSS Case Narrative and on the automated FSS system, if available.

Key elements in case coordination are as follows:

- Advocacy, re-assuring the effectiveness of the FSS Program
- Technical Assistance, providing guidance & resource information
- Supportive Counseling
- Monitoring progress and activities
- Re-evaluating, reviewing and possible revision of goals

V. Supportive Services

This section is a certification of coordination, as possible, with the JOBS, JTPA and other programs. Recognizing that the Housing Authority is funded primarily for housing assistance, community agencies are the primary source of supportive services to FSS clients. The Housing Authority's FSS Program Coordinator identifies and coordinates services for clients through a wide variety of agencies to address the needs of participants, to include education, job training, parenting, budgeting, homeownership, etc. The FSS Coordinator shall conduct briefings as needed to public and private agencies within the local community, in an effort to develop/strengthen a network of supportive services for the FSS Program. Thus, continuing to improve and expand the network of resources amongst the community.

Child Care

The FSS Program does not offer any direct Child Care Assistance, but certain programs that the participant may be enrolled in do offer Child Care Assistance.

Transportation

Transportation assistance may be offered through the FSS Program on certain occasions, however the majority of transportation assistance would be provided through the specific program that the participant is enrolled in, depending on the program.

Remedial Education

There are various agencies in the community that do offer different remedial education such as English as a Second Language and GED. Each case would vary, depending upon the needs of the participant.

Education

Coordination geared toward completion of secondary and/or post secondary education is important for FSS families who identify this as being one of their goals.

Job Training, Preparation, and Counseling

FSS Participants are referred for employment and training services to various community agencies.

Money Management Training

Issues pertaining to personal finances are addressed at various levels within the program process. FSS Coordinator meet with each family to identify a potential need for financial counseling and make necessary referrals.

Home Ownership Counseling and HCV Program

Information is given to the FSS participants from different home ownership programs, such as the Fannie Mae Foundation and the Housing Authority's Section 8 HCV Homeownership Program. The PHA will also work with the Western Piedmont Council of Government and Habitat for Humanity to provide homeownership options for program participants. Currently classes are offered twice yearly for interested persons.

Family Violence

Referrals are made to various community agencies for counseling and support services for child, adolescent, and adult victims of family violence. Additionally, these agencies may provide temporary shelter, legal advocacy, financial referrals, and job training programs for victims of family violence. These resources are readily available to all FSS participants.

Substance Abuse Treatment and Counseling

FSS program participants needing substance abuse treatment and counseling may be serviced through various community agencies.

Homemaking & Parenting Skills Training

FSS participants are assisted through various community agencies. Follow-up on the participant's progress should be conducted by FSS staff. A strong network of services and/or servicing action should be established.

Adolescent Services

Images and Wise Guys

Teen-Up

Mental Health Services

Mental Health Services at Social Services

Mentoring

FSS staff should conduct the mentoring process. Also possible is to have previous FSS participants who have become self-sufficient speak at workshops.

Personal Growth Self-Esteem

FSS staff should develop workshops with speakers from various community agencies.

VI. Case Coordination

WINGS staff and/or partnering agencies provide the following types of services to FSS participants:

- A set of logical steps and a process of interaction is established, ensuring that FSS participants are informed of needed services in a supportive, efficient, and cost-effective manner.
- FSS staff may coordinate a range of resources, assuring accountability, and continuity of care, accessibility, and efficiency. Action is also taken to ensure that clients are kept

informed of other pertinent services, treatment, care and other opportunities or services to which they may be entitled.

- The FSS Coordinator has responsibility for service planning and system coordination with the participant family, on an on-going basis to develop the following:
 - An appropriate service plan
 - Assure access to services
 - Monitor service delivery
 - Advocate for client needs
 - Evaluate service outcomes

VII. Completion/Termination from the FSS Program

Completion of the WINGS FSS Program

Completion of the WINGS FSS Program is when participants earn their wings and is achieved when the family has fulfilled all of its responsibilities under the Contract of Participation, and the family income meets or exceeds the income level established by HUD for admission to the Housing Authority programs. The Participant provides written proof that no family members receive any form of welfare assistance and has not received welfare assistance for the past 12 consecutive months (written verification from service providers is required), AND

Thirty percent (30%) of the family's monthly income meets or exceeds the Fair Market Rent as established by HUD for the family's qualified bedroom size. When either of these conditions is present the family is relieved of all requirements of their FSS Contract of Participation. At this point, the participant is considered to have successfully completed the program requirements and may be graduated from the FSS Program.

Termination from the FSS Program

In addition to the Housing Authority procedures covering termination from the WINGS Program the following FSS Program guidelines may apply for families participating in the Housing Authority FSS Program:

Failure to Meet Goals

In the event that an FSS participant fails to meet educational and/or employment goals in the FSS Contract of Participation the following steps may be taken:

STEP 1 - The assigned case coordinator will conduct a personal interview with the Participant to determine the nature of the barrier. If the Coordinator determines that the barrier is beyond the participant's control; a revised service plan will be written with the goal remaining economic self-sufficiency. However, if in the opinion of the FSS Coordinator the barrier rests within the control of the Participant, the Participant's case along with an applicable written summary and recommendation may be referred to a supervisor for review. After approval by the Supervisor the recommendation will be documented in the FSS file and appropriate changes made.

STEP 2 - The FSS Participant may request an informal hearing under the appeal process outlined in the Housing Authority's Grievance Procedure, if he/she disagrees with the recommendation.

VIII. WINGS FSS Program Coordinating Committee

Families who do not decide to participate in the WINGS FSS program will not be affected by their decision. They will retain all rights under the Public Housing Program and/or the Section 8 HCV program.

The WINGS FSS Program Coordinating Committee shall include representatives of agencies that may provide needed services, other resources, and at least one Participant. The purpose of the PCC is to provide advice regarding policies and procedures, and to assist with obtaining needed resources.

IX. Escrow Account

The general concept of the escrow account is that FSS families accrue funds and continue to pay rent in accordance with their income changes. For escrow to accrue, the current family TTP must be greater than the family TTP when the FSS Contract of Participation was executed due to an increase in earned income by the FSS participants. The amount of funds escrowed for the family will be affected by incremental increases in the family income.

Note: If the Head of Household gets married after the execution of the Contract of Participation, the spouse's earned income is counted when computing the escrow, regardless of whether they have an individual training and services plan.

Income and rent calculation

The family's annual income, earned income, and TTP is inserted into the contract of Participation at execution. These are the baseline figures for future escrow calculations.

The figures may be taken from the amounts on the last reexamination or interim determination before the family's initial participation in the FSS Program, unless more than 120 days will pass between the effective date of the reexamination and the effective date of the contract. The Housing Authority will conduct a new reexamination if it is more than 120 days.

If the family's earned income increases, the Housing Authority compares the TTP to the baseline TTP and, in most cases, the difference is escrowed.

Calculating the Escrow Credit

After the effective date of the Contract of Participation, an escrow credit calculation will be made on the Escrow Credit Worksheet. This will establish the "base" from which the family will begin. For every annual or interim reexamination the escrow will be calculated and the FSS Coordinator will record the information on the FSS CLIENT LIST SPREADSHEET, under the appropriate columns. The completed spreadsheet will be forwarded to Finance Department on a monthly basis.

Impact of the Income Limits for Admission

- The monthly escrow credit will be different depending on whether the annual income for the family falls within the Housing Authority's adopted very-low-income limits for admission or low-income limits for admission.

- For housing program eligibility purposes, the gross annual income is compared to the income limit. For FSS escrow calculation purposes, the adjusted annual income is compared to the income limit.
- For very-low income families, the amount to be escrowed is the lesser of:
 - Difference between 30% of current monthly adjusted income and the family rent adjusted to exclude increases in earned income;
 - Difference between current TTP and the TTP on the effective date of the FSS Contract of Participation.
- When the adjusted income exceeds the very-low income limit, 30% of the amount by which the adjusted income exceeds the very-low income limit is deducted from the estimated credit. The remainder is the family's actual escrow credit.
- For families over the low-income limit, there will be no FSS credit.
- No additional credits will be made to the family's FSS account when the FSS family has completed the Contract of Participation or when the Contract of Participation is terminated or otherwise nullified.
- A lower percentage of the earned income may be credited to the escrow account if:
 - Adult family members are added to the household or if a child turns 18 after execution of the Contract of Participation;
 - The additional earned income increases the family's total income above the very low income limits.

It is critical that the correct income limits (Low and Very Low) for the current family size is entered on the escrow worksheet.

Timing of the Credit Calculation

The base for the family is established by the FSS Coordinator at the time the family signs their Contract of Participation for the FSS Program. Staff must calculate monthly escrow credit thereafter whenever there is or annual or interim reexaminations. If the family has one or more interim reexaminations during the year, the monthly escrow amount may change during the year. Otherwise, the monthly escrow credit will be the same for the entire period between reexaminations.

Procedures for reporting escrow balances/changes to Finance Staff

At the end of each month, all changes which have been made to the FSS Client will be completed and forwarded to the Public Housing Manager and finance staff (to include changes to escrow accounts), the FSS Coordinator will inform a supervisor for approval, and copy the finance staff.

Finance staff will verify the changes by identifying in columns titled "Escrow Begin/Month/Year," (This column will have the month the escrow starts, or the month of the change), "Escrow End/Month/Year," (This column will have the month in which the escrow ends) "Total Number of Months," (This column would be the total number of months that is used to figure the amount of escrow) "Monthly Escrow," (This will show the amount of escrow per month that should be credited) "Sub-Total," (This should be the number of months (x) the monthly escrow amount) "Interest Payment," (To be figured by Finance Staff "Total" (This amount would be the Sub-Total plus any interest payment), Columns "O" (Account Withdrawal), "P" (Date Withdrawal) "G" (Reason for Withdrawal), will be used only when a

participant has withdrawn money from their escrow account. Column "R," (Account Balance) will be the amount of the escrow balance, after any withdrawals have been made.

Escrow Fund Deposits and Investments

The Housing Authority is required to deposit the escrow funds calculated into a depository account to be held for the family.

Crediting the Escrow Account

The Housing Authority will deposit all escrowed funds into a single depository account for each FSS Program. This is so that the Internal Revenue Services (IRS) will not count the funds or interest on the funds in the escrow account as income for purposes of income tax, either before or when the family actually receives the escrow. The Housing Authority credits the account once annually. The FSS worksheet credit calculations are added for the twelve (12) month period and the Housing Authority then makes one (1) adjustment. If the Housing Authority finds that a family did not report income they were required to report, the Housing Authority will not credit the family's escrow account with any portion of back rent.

Interest on the FSS Escrow Account

Before applying the interest, the Housing Authority must check to see if the family owes rent or other amounts due to the Housing Authority.

If the family owes any amount, the Housing Authority will reduce the balance in the account by the amount owed.

Reporting of the FSS Escrow Account

The Housing Authority will make a report on the status of the Escrow Account, a minimum of once per year.

The report will include the following:

- The balance at the beginning of the year
- The amount of the family's rent payment that was credited to the FSS Account
- Any deductions/disbursements made from the account
- The amount of interest earned on the account during the year
- The total in the account at the end of the reporting period

Disbursement of the FSS Escrow Account

The FSS Coordinator shall review the case and determine if the FSS participant has completed the FSS program. The FSS Coordinator shall prepare a recommendation for release of escrow account funds for each FSS participant that has successfully completed the FSS program.

Prior to disbursement of any FSS Escrow funds the FSS file and the tenant file will be sent to a supervisor for review and approval. The files should contain a written request from the family for the escrow funds, the required verifications of income, government assistance, a written recommendation by the FSS Coordinator and a completed FSS Escrow Account Status.

The family may use the final disbursement of escrow account funds for ANY reason. The amount in an FSS account, in excess of any amount owed to the Housing Authority by the FSS family, is paid to the head of the FSS family when any of the following occur:

- Whenever 30% of the family's monthly adjusted income equals or exceeds the existing housing Fair Market Rent for the Certificate or Voucher size issued in Section 8 (even if the five year term of contract is not up);
- When the Contract of Participation has been completed, and the Head of the family certifies that, to the best of his/her knowledge and belief, NO FAMILY MEMBER has received federal or state governmental assistance for the past 12 consecutive months.

Interim Disbursements

The Housing Authority may at its sole option disburse a portion of the funds from the escrow account during the Contract of Participation period for CONTRACT RELATED EXPENSES if the family:

- Has fulfilled certain interim contract goals;
- Needs a portion of the FSS account funds for purposes consistent with the contract, such as school tuition, job training, business start up expenses, auto (when public transportation is unavailable or inaccessible to the family) or homeownership.

The Housing Authority will not release funds from the Escrow Account unless the funds are withdrawn to aid in the completion of an interim goal (interim disbursement). However, any interim disbursement paid to the family must be repaid to the Housing Authority if the payment was based on fraud or misinformation by the participating family.

Interim disbursements are requested in the same manner as final payments. The FSS file and tenant file must be sent to the Deputy Director for review with final review to be made by the Executive Director. The files should contain a written request from the family with verification from the vendor showing actual costs for interim disbursement along with a written recommendation from the FSS Coordinator and a current Escrow Account Status. If disbursement is approved the family must send the FSS Coordinator a receipt/receipts to verify payment was made

Change in Family Composition

If the Head of the FSS family no longer resides with other family members in the unit, the remaining adult members of the family will have the right to designate another adult family member who is on the lease agreement (and is also the Head of Household on the lease) to receive the funds. If the head of household marries, household income increases and the new Total Tenant Payment (TTP) equals or exceeds the Section 8 existing Fair Market Rent (FMR), the family is entitled to the escrow and is deemed a graduate of the FSS Program.

If the family with two adults separate and the Housing Authority determines that the escrow should be paid to the FSS family, it may be paid to the family member continuing to reside in the unit. Also, if the family member was not designated as head of the FSS family, they must now designate himself/herself as head of the FSS family (Also on the lease agreement) in order to receive the escrow.

Forfeiting the Escrow Account

Amounts in the FSS account will be forfeited if any of the following occur:

- The Contract of Participation is terminated;
- The Contract of Participation is completed but the family is receiving welfare assistance when the contract expires, including extensions.

If the head of the family dies and the remaining members of the family choose not to continue participating in the program and the Contract obligations have not been met, the escrow funds would be forfeited. If the family does not pay their rent to the Public Housing program or abide by the lease agreement or program regulations, the funds may be forfeited for any of the following:

- Failure to comply with the applicable lease or any of the family obligations or the Contract of Participation;
- Nonpayment of tenant rent is also grounds for terminating a family's FSS participation and forfeiture of the escrow account.

X. Procedures for Complaints/Hearings

- The FSS Participant will receive a written notice of the decision of adverse action within ten (10) calendar days from the date of decision.
- The notice shall contain a brief statement of the reason(s) for the decision. The notice also should contain procedures for filing complaint/ appeal.
- The FSS Participant may submit a written request to the Housing Authority within fifteen (15) days from the date of the notice, requesting an informal hearing.
- The housing authority shall designate any person(s) as the review officer(s). The person(s) designated as the review officer(s) shall not be the person who made or approved the decision under review or a subordinate of such person.
- The proceedings of the review shall be informal and confined to factors relating to the Family Self-Sufficiency Program and to decide whether decision of adverse action is justified.
- The housing authority shall notify the participant of the date, the time, and the place of conducting the informal review at least one week prior to the date of the review.
- The participant shall have the right to present his/her objections either orally or in writing.

The Decision

1. The review officer(s) shall decide whether the decision of adverse action to the participant was justified and according to the Federal regulations and rules of the housing authority. This final decision shall be given within seven (7) calendar days from the date of review.
2. The housing authority shall promptly notify the participant in writing of the final decision, and a brief statement of the reasons for the final decision. In no case shall the decision take more than fourteen (14) calendar days.

HUD Canceled Form 50070 Certification for Drug
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