

# PHA Plans

5 Year Plan for Fiscal Years 2006 - 2010  
Annual Plan for Fiscal Year 2006

**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:** The Housing Authority of the City of Cullman

**PHA Number:** AL 052

**PHA Fiscal Year Beginning: (mm/yyyy)** 10/2006

**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 2006 – 2010**

[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)

- X      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.**

- X      PHA Goal: Expand the supply of assisted housing  
Objectives:  
      Apply for additional rental vouchers:  
X      Reduce public housing vacancies: Improve amenities offered  
      Leverage private or other public funds to create additional housing opportunities:  
      Acquire or build units or developments  
      Other (list below)
- X      PHA Goal: Improve the quality of assisted housing  
Objectives:  
X      Improve public housing management: (PHAS score) Maintain Standard performer status  
      Improve voucher management: (SEMAP score)  
X      Increase customer satisfaction: Based on survey results

- Concentrate on efforts to improve specific management functions: (list; e.g., public housing finance; voucher unit inspections)
- X Renovate or modernize public housing units: Currently under MOD
- Demolish or dispose of obsolete public housing:
- Provide replacement public housing:
- Provide replacement vouchers:
- Other: (list below)

PHA Goal: Increase assisted housing choices

Objectives:

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

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

PHA 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)

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

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

Objectives:

- X 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)

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

- X PHA Goal: Ensure equal opportunity and affirmatively further fair housing Objectives:
  - X Undertake affirmative measures to ensure access to assisted housing regardless of race, color, religion national origin, sex, familial status, and disability:
  - X 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:
  - X Undertake affirmative measures to ensure accessible housing to persons with all varieties of disabilities regardless of unit size required:
  - Other: (list below)

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

**Comments**

Other PHA Goals and Objectives

1. **Development 52-1 and 52-2: Install Playground Equipment**
2. **Development 52-1, 52-2, 52-3, and 52-4: Landscaping/Tree trimming and sidewalk and parking bay repair.**
3. **Build Structure to cover vehicles and Equipment**
4. **Build Reserves**
5. **Upgrade computer system and Housing Software**
6. **Development 52-1: Re-roof**
7. **Make routine repairs to Administration Building**
8. **Renovations to Administration Building**
9. **Development 52-1 and 52-3: Raise water line shut off valves**
10. **Development 52-1 and 52-2: Replace ceilings**
11. **Install trusses and re-roof Community Center**
12. **Development 52-1 Interior Drain lines**

13. **Development 52-1 and 52-2: Install Storm windows and doors**
14. **Development 52-2: Renovate kitchen cabinets**
15. **Development 52-1, 52-2, 52-3 and 52-4: Renovate Handicapped units**

**Annual PHA Plan  
PHA Fiscal Year 2006**

[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 Annual Plan which is attached hereto was developed by the Housing Authority of the City of Cullman, hereinafter referred to as the HA in this document and accompanying Plan, in accordance with the Rules and Regulations promulgated by HUD.*

*The goals and objectives of this HA are contained in the Five-Year Plan and the ACOP Plan. These were written to comply with the HUD guidelines, rules, regulations, and Federal Law. The basic goals and objectives are:*

- 1. Provide decent and affordable housing in Cullman, Alabama.*
- 2. The HA will ensure equal opportunity in housing for all Americans.*
- 3. The HA will promote self-sufficiency and asset development of families and individuals.*
- 4. The HA will take steps to help improve community quality of life and economic vitality.*

*This Plan was written after consultation with necessary parties and entities as provided in the guidelines issued by HUD. All necessary accompanying documents are attached to the document, or are available upon request*

### **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
- FY 2006 Capital Fund Program Annual Statement
- Most recent board-approved operating budget (Required Attachment for PHAs that are troubled or at risk of being designated troubled ONLY)



Optional Attachments:

- X PHA Management Organizational Chart
- X FY 2005 Capital Fund Program 5 Year Action Plan
- Public Housing Drug Elimination Program (PHDEP) Plan
- Comments of Resident Advisory Board or Boards (must be attached if not included in PHA Plan text)
- X Other (List below, providing each attachment name) Definition of Deviation attachment a1, Deconcentration Policy attachment a2, , Resident advisory board member List attachment a3 and Progress of Goals attachment a4 Organizational Chart a5. attachment a6 Resident Survey Follow up plan.

**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.

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

<b>List of Supporting Documents Available for Review</b>		
<b>Applicable &amp; On Display</b>	<b>Supporting Document</b>	<b>Applicable Plan Component</b>
		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 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 A & O Policy	Annual Plan: Rent Determination
X	Section 8 rent determination (payment standard) policies <input type="checkbox"/> check here if included in Section 8 Administrative Plan	Annual Plan: Rent Determination
X	Public housing management and maintenance policy documents, including policies for the prevention or eradication of pest infestation (including cockroach infestation)	Annual Plan: Operations and Maintenance
X	Public housing grievance procedures <input type="checkbox"/> check here if included in the public housing A & O Policy	Annual Plan: Grievance Procedures
X	Section 8 informal review and hearing procedures <input type="checkbox"/> check here if included in Section 8 Administrative Plan	Annual Plan: Grievance Procedures
X	The HUD-approved Capital Fund/Comprehensive Grant Program Annual Statement (HUD 52837) for the active grant year	Annual Plan: Capital Needs
X	Most recent CIAP Budget/Progress Report (HUD 52825) for any active CIAP grant	Annual Plan: Capital Needs
X	Most recent, approved 5 Year Action Plan for the Capital Fund/Comprehensive Grant Program, if not included as an attachment (provided at PHA option)	Annual Plan: Capital Needs
	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
	Approved or submitted applications for demolition and/or	Annual Plan: Demolition

<b>List of Supporting Documents Available for Review</b>		
<b>Applicable &amp; On Display</b>	<b>Supporting Document</b>	<b>Applicable Plan Component</b>
	disposition of public housing	and Disposition
	Approved or submitted applications for designation of public housing (Designated Housing Plans)	Annual Plan: Designation of Public Housing
	Approved or submitted assessments of reasonable revitalization of public housing and approved or submitted conversion plans prepared pursuant to section 202 of the 1996 HUD Appropriations Act	Annual Plan: Conversion of Public Housing
	Approved or submitted public housing homeownership programs/plans	Annual Plan: Homeownership
	Policies governing any Section 8 Homeownership program <input 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
	FSS Action Plan/s for public housing and/or Section 8	Annual Plan: Community Service & Self-Sufficiency
	Most recent self-sufficiency (ED/SS, TOP or ROSS or other resident services grant) grant program reports	Annual Plan: Community Service & Self-Sufficiency
	The most recent Public Housing Drug Elimination Program (PHEDEP) semi-annual performance report for any open grant and most recently submitted PHDEP application (PHDEP Plan)	Annual Plan: Safety and Crime Prevention
X	The most recent fiscal year audit of the PHA conducted under section 5(h)(2) of the U.S. Housing Act of 1937 (42 U.S.C. 1437c(h)), the results of that audit and the PHA's response to any findings	Annual Plan: Annual Audit
	Troubled PHAs: MOA/Recovery Plan	Troubled PHAs
X	Other supporting documents (optional) (list individually; use as many lines as necessary)	Pet policy and Community Service policy Resident Survey Plan

# 1. Statement of Housing Needs

[24 CFR Part 903.7 9 (a)]

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

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

Housing Needs of Families in the Jurisdiction by Family Type							
Family Type	Overall	Afford-ability	Supply	Quality	Access-ibility	Size	Loca-tion
Income <= 30% of AMI	655						
Income >30% but <=50% of AMI	451						
Income >50% but <80% of AMI	394						
Elderly							
Families with Disabilities							
Race/Ethnicity							
Race/Ethnicity							
Race/Ethnicity							
Race/Ethnicity							

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

- Consolidated Plan of the Jurisdiction/s  
Indicate year:
- U.S. Census data: the Comprehensive Housing Affordability Strategy (“CHAS”) dataset
- American Housing Survey data  
Indicate year:
- Other housing market study  
Indicate year:
- X Other sources: (list and indicate year of information) CHAS Data 1990

## 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	75		90 units or 30%
Extremely low income <=30% AMI	34		
Very low income (>30% but <=50% AMI)			
Low income (>50% but <80% AMI)	41		
Families with children			
Elderly families	8		
Families with Disabilities	12		
Race/ethnicity			
Race/ethnicity			

Housing Needs of Families on the Waiting List			
Race/ethnicity			
Race/ethnicity			
Characteristics by Bedroom Size (Public Housing Only) 0BR	3		
1BR	38		
2 BR	20		
3 BR	12		
4 BR	2		
5 BR			
5+ BR			
Is the waiting list closed (select one)? X 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)			
X 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	92		58
Extremely low	46		

Housing Needs of Families on the Waiting List			
income <=30% AMI			
Very low income (>30% but <=50% AMI)	46		
Low income (>50% but <80% AMI)			
Families with children			
Elderly families	10		
Families with Disabilities	16		
Race/ethnicity			
Race/ethnicity			
Race/ethnicity			
Race/ethnicity			
Characteristics by Bedroom Size (Public Housing Only) 0 BR	0		
1BR	35		
2 BR	32		
3 BR	23		
4 BR	2		
5 BR			
5+ BR			
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			

### 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

**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.

<b>Estimated Financial Resources: Planned Sources and Uses</b>		
<b>Sources</b>	<b>Planned \$</b>	<b>Planned Uses</b>
<b>1. Federal Grants (FY 2006 grants)</b>		
a) Public Housing Operating Fund	\$598,000	
b) Public Housing Capital Funds 2006	Estimated \$524,123	
c) HOPE VI Revitalization		
d) HOPE VI Demolition		
e) Annual Contributions for Section 8 Tenant-Based Assistance	\$395,916	
f) Public Housing Drug Elimination Program (including any Technical Assistance funds)		
g) Resident Opportunity and Self-Sufficiency Grants		
h) Community Development Block Grant		
i) HOME		
Other Federal Grants (list below)		
<b>2. Prior Year Federal Grants (unobligated funds only) (list below)</b>		
<b>3. Public Housing Dwelling Rental Income</b>	\$345,350	Housing Authority operations
<b>4. Other income (list below)</b>		
Interest	\$4,880	Housing Authority operations
Other income	\$78,000	Housing Authority operations
<b>4. Non-federal sources (list below)</b>		

Estimated Financial Resources: Planned Sources and Uses		
Sources	Planned \$	Planned Uses
<b>Total resources</b>	\$1,946,269	

### **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)
- X Other: (describe) At time of application.

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

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

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

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

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

##### **(2) Waiting List Organization**

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

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

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

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

c. If the PHA plans to operate one or more site-based waiting lists in the coming year, answer each of the following questions; if not, skip to subsection **(3) Assignment**

1. How many site-based waiting lists will the PHA operate in the coming year?

2.  Yes  No: Are any or all of the PHA's site-based waiting lists new for the upcoming year (that is, they are not part of a previously-HUD-approved site based waiting list plan)?  
If yes, how many lists?

3.  Yes  No: May families be on more than one list simultaneously?  
If yes, how many lists?

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

- PHA main administrative office
- All PHA development management offices
- Management offices at developments with site-based waiting lists
- At the development to which they would like to apply
- Other (list below)

### **(3) Assignment**

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

- One
- Two

X Three or More

b. X Yes  No: Is this policy consistent across all waiting list types?

c. If answer to b is no, list variations for any other than the primary public housing waiting list/s for the PHA:

**(4) Admissions Preferences**

a. Income targeting:

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

b. Transfer policies:

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

X Emergencies

Overhoused

X Underhoused

X Medical justification

X Administrative reasons determined by the PHA (e.g., to permit modernization work)

X Resident choice: (state circumstances below) Must be a tenant and pay a \$50 transfer fee.

Other: (list below)

c. Preferences

1.  Yes X No: Has the PHA established preferences for admission to public housing (other than date and time of application)? (If "no" is selected, skip to subsection **(5) Occupancy**)

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

Former Federal preferences:

Involuntary Displacement (Disaster, Government Action, Action of Housing Owner, Inaccessibility, Property Disposition)

Victims of domestic violence

Substandard housing

Homelessness

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

Other preferences: (select below)

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

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

Date and Time

Former Federal preferences:

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

Other preferences (select all that apply)

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

4. Relationship of preferences to income targeting requirements:

- The PHA applies preferences within income tiers



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

**(5) Occupancy**

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

- X The PHA-resident lease  
X 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)

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

**(6) Deconcentration and Income Mixing**

a.  Yes X 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 X No: Did the PHA adopt any changes to its **admissions policies** based on the results of the required analysis of the need to promote deconcentration of poverty or to assure income mixing?

c. If the answer to b was yes, what changes were adopted? (select all that apply)

- Adoption of site based waiting lists  
If selected, list targeted developments below:
- Employing waiting list "skipping" to achieve deconcentration of poverty or income mixing goals at targeted developments

If selected, list targeted developments below:

- Employing new admission preferences at targeted developments  
If selected, list targeted developments below:

- Other (list policies and developments targeted below)

d.  Yes  No: Did the PHA adopt any changes to **other** policies based on the results of the required analysis of the need for deconcentration of poverty and income mixing?

e. If the answer to d was yes, how would you describe these changes? (select all that apply)

- Additional affirmative marketing  
 Actions to improve the marketability of certain developments  
 Adoption or adjustment of ceiling rents for certain developments  
 Adoption of rent incentives to encourage deconcentration of poverty and income-mixing  
 Other (list below)

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

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

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

- X 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)

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

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

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

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

- X Criminal or drug-related activity
- Other (describe below)

### **(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)

- X 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)

- X PHA main administrative office
- Other (list below)

### **(3) Search Time**

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

If yes, state circumstances below: Sometimes more than one extension is granted, but only in rare circumstances.

**(4) Admissions Preferences**

a. Income targeting

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

b. Preferences

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

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

Former Federal preferences

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

Other preferences (select all that apply)

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

3. If the PHA will employ admissions preferences, please prioritize by placing a "1" in the space that represents your first priority, a "2" in the box representing your second priority, and so on. If you give equal weight to one or more of these choices (either through an absolute

hierarchy or through a point system), place the same number next to each. That means you can use “1” more than once, “2” more than once, etc.

Date and Time

Former Federal preferences

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

Other preferences (select all that apply)

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

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)

- X The Section 8 Administrative Plan  
X 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  
X Other (list below) There is no need for ads, “word of mouth” is enough.

**4. PHA Rent Determination Policies**

[24 CFR Part 903.7 9 (d)]

**A. Public Housing**

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

**(1) Income Based Rent Policies**

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

a. Use of discretionary policies: (select one)

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

---or---

- X 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
- X \$26-\$50

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

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

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

1.  Yes X No: Does the PHA plan to charge rents at a fixed amount or percentage less than 30% of adjusted income?

2. If yes to above, list the amounts or percentages charged and the circumstances under which these will be used below:

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

- For the earned income of a previously unemployed household member
- For increases in earned income
- Fixed amount (other than general rent-setting policy)

If yes, state amount/s and circumstances below:

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

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

e. Ceiling rents

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

- Yes for all developments
- Yes but only for some developments
- No

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

- For all developments
- For all general occupancy developments (not elderly or disabled or elderly only)
- For specified general occupancy developments
- For certain parts of developments; e.g., the high-rise portion
- For certain size units; e.g., larger bedroom sizes
- Other (list below)

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

- Market comparability study
- Fair market rents (FMR)
- 95<sup>th</sup> percentile rents
- 75 percent of operating costs
- 100 percent of operating costs for general occupancy (family) developments
- Operating costs plus debt service
- The "rental value" of the unit
- Other (list below)

f. Rent re-determinations:

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

- Never
- At family option
- Any time the family experiences an income increase



- Any time a family experiences an income increase above a threshold amount or percentage: (if selected, specify threshold)\_\_\_\_\_
- Other (list below)

g.  Yes X 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
- X 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)

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

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

- FMRs are adequate to ensure success among assisted families in the PHA's segment of the FMR area
- X 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)

- X 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)

- X Success rates of assisted families
- X 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
- X \$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)

- X An organization chart showing the PHA's management structure and organization is attached.
- X A brief description of the management structure and organization of the PHA follows: The Executive Director supervises all of the administration and maintenance staff. The Head maintenance foreman supervises the maintenance mechanics and laborers.

### **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.)

<b>Program Name</b>	<b>Units or Families Served at Year Beginning</b>	<b>Expected Turnover</b>
Public Housing	326	30%
Section 8 Vouchers	183	18%
Section 8 Certificates	NA	
Section 8 Mod Rehab	NA	
Special Purpose Section 8 Certificates/Vouchers (list individually)	NA	
Public Housing Drug Elimination Program (PHDEP)	NA	
	NA	
Other Federal Programs(list	NA	

individually)		
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**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)  
*Maintenance Plan, Management Policy, Admissions and Continued Occupancy Policy, Lease and Grievance Policy, Community service, Pet Policy, Pest control policy*

(2) Section 8 Management: (list below)

*Section 8 Administrative 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 X No: Has the PHA established any written grievance procedures in addition to federal requirements found at 24 CFR Part 966, Subpart B, for residents of public housing?

If yes, list additions to federal requirements below:

2. Which PHA office should residents or applicants to public housing contact to initiate the PHA grievance process? (select all that apply)

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

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

1.  Yes X No: Has the PHA established informal review procedures for applicants to the Section 8 tenant-based assistance program and informal hearing

procedures for families assisted by the Section 8 tenant-based assistance program in addition to federal requirements found at 24 CFR 982?

If yes, list additions to federal requirements below:

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

- PHA main administrative office  
 Other (list below)

## **7. Capital Improvement Needs**

[24 CFR Part 903.7 9 (g)]

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

### **A. Capital Fund Activities**

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

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

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

Select one:

- The Capital Fund Program Annual Statement is provided as an attachment to the PHA Plan at 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. X Yes  No: Is the PHA providing an optional 5-Year Action Plan for the Capital Fund? (if no, skip to sub-component 7B)

b. If yes to question a, select one:

X 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 X No: a) Has the PHA received a HOPE VI revitalization grant? (if no, skip to question c; if yes, provide responses to question b for each grant, copying and completing as many times as necessary)  
b) Status of HOPE VI revitalization grant (complete one set of questions for each grant)

1. Development name:

2. Development (project) number:

3. Status of grant: (select the statement that best describes the current status)

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

Yes X 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

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.)

<b>Demolition/Disposition Activity Description</b>
1a. Development name: 1b. Development (project) number:
2. Activity type: Demolition <input type="checkbox"/> Disposition <input type="checkbox"/>
3. Application status (select one) Approved <input type="checkbox"/> Submitted, pending approval <input type="checkbox"/> Planned application <input type="checkbox"/>
4. Date application approved, submitted, or planned for submission: <u>(DD/MM/YY)</u>
5. Number of units affected: 6. Coverage of action (select one) <input type="checkbox"/> Part of the development

<input type="checkbox"/> Total development
7. 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 X 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.

<b>Designation of Public Housing Activity Description</b>	
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: (DD/MM/YY)
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.

<b>Conversion of Public Housing Activity Description</b>	
1a. Development name:	
1b. Development (project) number:	
2. What is the status of the required assessment?	
<input type="checkbox"/> Assessment underway <input type="checkbox"/> Assessment results submitted to HUD <input type="checkbox"/> Assessment results approved by HUD (if marked, proceed to next question) <input type="checkbox"/> Other (explain below)	
3. <input type="checkbox"/> Yes <input type="checkbox"/> No: Is a Conversion Plan required? (If yes, go to block 4; if no, go to block 5.)	
4. Status of Conversion Plan (select the statement that best describes the current status)	
<input type="checkbox"/> Conversion Plan in development <input type="checkbox"/> Conversion Plan submitted to HUD on: (DD/MM/YYYY) <input type="checkbox"/> Conversion Plan approved by HUD on: (DD/MM/YYYY) <input type="checkbox"/> Activities pursuant to HUD-approved Conversion Plan underway	
5. Description of how requirements of Section 202 are being satisfied by means other than conversion (select one)	
<input type="checkbox"/> Units addressed in a pending or approved demolition application (date submitted or approved: _____) <input type="checkbox"/> Units addressed in a pending or approved HOPE VI demolition application (date submitted or approved: _____) <input type="checkbox"/> Units addressed in a pending or approved HOPE VI Revitalization Plan (date submitted or approved: _____) <input type="checkbox"/> Requirements no longer applicable: vacancy rates are less than 10 percent <input type="checkbox"/> Requirements no longer applicable: site now has less than 300 units <input type="checkbox"/> 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**

**A. Public Housing**

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

1.  Yes X 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.)

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

<input type="checkbox"/> Total development
--

## B. Section 8 Tenant Based Assistance

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

2. Program Description:

a. Size of Program

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

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

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

b. PHA established eligibility criteria

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

## 12. PHA Community Service and Self-sufficiency Programs

[24 CFR Part 903.7 9 (l)]

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

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

1. Cooperative agreements:

X 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? 04/11/97

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)

- X 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 X 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. )

<b>Services and Programs</b>				
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)

**(2) Family Self Sufficiency program/s**

a. Participation Description

<b>Family Self Sufficiency (FSS) Participation</b>		
Program	Required Number of Participants (start of FY 2000 Estimate)	Actual Number of Participants (As of: DD/MM/YY)
Public Housing		
Section 8		

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
- X Informing residents of new policy on admission and reexamination
- X 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**

**COMMUNITY SERVICE REQUIREMENT POLICY  
FOR THE HOUSING AUTHORITY OF THE CITY OF CULLMAN**

**SERVICE REQUIREMENT**

*Except for any family member who is an exempt individual, each adult resident of public housing must:*

- 1) *Contribute 8 hours per month of community service (does not include political activities); or*
- 2) *Participate in an economic self sufficiency program for 8 hours per month; or*
- 3) *Perform 8 hours per month of combined community service and economic self sufficiency*

**COVERED RESIDENTS**

*All public housing residents between the ages of 18 and 62 years of age who are not exempt*

**EXEMPT RESIDENTS**

Any public housing resident who is:

- 1) 62 years or older
- 2) Blind or disabled and who certifies that because of this disability she or he is unable to comply with the requirements of the policy:
- 3) Primary caretaker of a person who is 62 years or older or who is blind or disabled;
- 4) Engaged in work activities;
- 5) Engaged in a work activity under the state program funded under Part A of Title IV of the Social Security Act, or under any other welfare program of the state, including a state administered welfare-to-work program;
- 6) Member of a family receiving assistance, benefits or services under a state program funded under Part A of Title IV of the Social Security Act, or under any other welfare program of the state, including a state administered welfare-to work program and has not been found by the state to be in noncompliance with such a program;

**VIOLATION OF SERVICE REQUIREMENT**

Violation of the service requirement is grounds for nonrenewal of the twelve (12) months lease agreement, but not for termination of tenancy during the course of the twelve (12) months lease term.

**COMMUNITY SERVICE**

The performance of volunteer work or duties that are a public benefit and that serve to improve the quality of life, enhance resident self-sufficiency or increase resident self responsibility in the community. Community service is not employment and may not include political activities.

**QUALIFIED COMMUNITY SERVICE ORGANIZATIONS AND ACTIVITIES**

As a convenience to covered residents, the Housing Authority will develop, post on the Authority's bulletin boards and provide to covered residents a list of qualified organization (and activities) that have agreed to work with residents in helping them satisfy their community service requirement. Residents are not limited to the published list and are encouraged to identify other organizations and activities. To ensure compliance with this community service policy, residents should seek the Housing Authority's approval prior to volunteering for organizations or performing activities not included on the published list. It is the Housing Authority's policy to provide great latitude in approving community service organizations and activities.

**DETERMINING RESIDENT STATUS**

Per the Housing Authority's approved Admission and Continued Occupancy Policy (ACOP):

- 1) The status of all applicant family members will be determined and families notified during the application process.
- 2) During annual (or every three years for residents paying flat rents) recertifications, the status of each family member will be reviewed and determined.



- 3) *Between recertifications, residents are required to notify the Housing Authority within ten (10) days when there is a change in employment, income, family composition or welfare-to-work training or employment activities. The Housing Authority will use the information to determine changes, if any, in family member status.*
- 4) *Members will be informed verbally and in writing of their community service requirement.*

**ASSURING RESIDENT COMPLIANCE**

*The Housing Authority shall review and verify family compliance with service requirements annual at least thirty (30) days before the end of the twelve (12) month lease term. The Housing Authority will retain reasonable documentation of service requirement performance or exemption in resident family files.*

*If the Housing Authority determines that a covered family member has not complied with their service requirements, the Housing Authority will notify the family of this determination, describe the noncompliance and state the Authority will not renew the lease at the end of the twelve (12) month lease term unless:*

- 1) *The family enters into an agreement with the Authority that the noncompliant family member will cure such noncompliance within the twelve (12) month term of the new lease while also satisfying the on-going service requirement.*
- 2) *Or the family provides written assurance satisfactory to the Authority that the noncompliant family member no longer resides in the unit.*

*Families may request a grievance hearing on the Housing Authority's determination in accordance with the Authority's approved Grievance Procedure.*

**SIGNED CERTIFICATIONS**

*The Housing Authority management staff will provide signed certifications of any community service activities administered by the Authority. In a similar manner, organizations other than the Authority who administer qualifying activities must provide signed certifications.*

*The Housing Authority will provide covered residents with three part, prepaid post-card size certification forms which the residents will present to the organization administering the qualifying activities for certification approval and signatures. The person(s) approved for signing the certifications will tear the three part prepaid mailer form apart, give one copy to the resident, keep one copy and drop the prepaid (and preaddressed) part in the mail back to the Authority. The Authority will file the returned cards in each covered resident's file.*

**QUALIFIED COMMUNITY SERVICE  
ORGANIZATIONS AND ACTIVITIES**

*The following list of qualified service organizations and activities is presented as a convenience to covered residents. Covered residents are not limited to the following list and are encouraged to identify other organizations and activities.*

**Qualified Organizations:**

- 1) *Commissions on Aging*
- 2) *Hospital*
- 3) *Salvation Army*
- 4) *Red Cross*
- 5) *Nursing Homes*
- 6) *Public Schools*
- 7) *The Housing Authority of the City of Cullman*

**Qualified Activities:**

- 1) *Volunteer services to any qualified organization*
- 2) *Self-sufficiency activities such as education, training and self-improvement classes*
- 3) *Housing Authority or City Volunteer Trash Pickup Day*
- 4) *Participation in monthly resident programs as presented by the Housing Authority*
- 5) *Participation in scheduled and announced resident meetings as certified by the Housing Authority.*

**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 use 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) All developments

**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) Contract with police officer for additional patrolling and on foot policing in each development.

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

### 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) All developments

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

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

- 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 2000 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)]

# **Pet Policy**

## **Cullman Housing Authority (HA)**

### **Section I.**

1. Pet ownership: A tenant may own one or more common household pets or have one or more common household pets present in the dwelling unit of such tenant, subject to the following conditions:
  1. Each Head of Household may own up to two pets. If one of the pets is a dog or cat, (or other four legged animal), the second pet must be contained in a cage or an aquarium for fish. Each bird or other animals, other than fish, shall be counted as one pet.
  2. If the pet is a dog or cat, it must be neutered/spayed by the age of six (6) months, and cats must be declawed by the age of three (3) months. The evidence can be provided by a statement/bill from a veterinarian and/or staff of the humane society. The evidence must be provided prior to the execution of this agreement and/or within 10 days of the pet becoming of the age to be neutered/spayed or declawed. Tenant must provide waterproof and leak proof litter boxes for cat waste, which must be kept inside the dwelling unit. Cardboard boxes are not acceptable and will not be approved. The Tenant shall not permit refuse from litter boxes to accumulate nor to become unsightly or unsanitary. Also, the weight of a cat cannot exceed 10 pounds (fully grown) and a dog may not exceed 20 pounds in weight (fully grown). All other four legged animals are limited to 10 pounds (fully grown).
  3. If the pet is a bird, it shall be housed in a birdcage and cannot be let out of the cage at any time.
  4. If the pet is a fish, the aquarium must be twenty gallons or less, and the container must be placed in a safe location in the unit. The Tenant is limited to one container for the fish; however, there is no limit on the number of fish that can be maintained in the container as long as the container is maintained in a safe and nonhazardous manner.
  5. If the pet is a cat or dog, it must have received rabies and distemper inoculations or boosters, as applicable. Evidence of inoculations can be provided by a statement/bill from veterinarian or staff of the humane society and must be provided before the execution of this agreement.
  6. All pets must be housed within the unit and no facilities can be constructed outside of the unit for any pet. No animal shall be permitted to be loose and if the pet is taken outside it must be taken outside on a leash and kept off other Tenant's lawns. Also, all pets must wear collars with identification at all times. Pets without a collar will be picked-up immediately and transported to the Humane Society or other appropriate facility.

7. All authorized pet(s) must be under the control of an adult. An unleashed pet, or one tied to a fixed object, is not considered to be under the control of an adult. Pets which are unleashed, or leashed and unattended, on HA property may be impounded and taken to the local Humane Society. It shall be the responsibility of the Tenant to reclaim the pet at the expense of the Tenant. Also, if a member of the HA staff has to take a pet to the Humane Society the Tenant will be charged \$50 to cover the expense of taking the pet(s) to the Humane Society.
  8. Pet(s) may not be left unattended for more than twenty-four consecutive hours. If it is reported to HA staff that a pet(s) has been left unattended for more than a twenty-four (24) consecutive hour period, HA staff may enter the unit and remove the pet and transfer the pet to the humane society. Any expense to remove and reclaim the pet from any facility will be the responsibility of the Tenant. In the case of an emergency, the HA will work with the resident to allow more than 24 hours for the resident to make accommodations for the pet.
  9. Pet(s), as applicable, must be weighed by a veterinarian or staff of the humane society. A statement containing the weight of the pet must be provided to the HA prior to the execution of this agreement and upon request by the HA.
2. Responsible Pet Ownership: Each pet must be maintained responsibly and in accordance with this pet ownership lease addendum and in accordance with all applicable ordinances, state and local public health, animal control, and animal anti-cruelty laws and regulations governing pet ownership. Any waste generated by a pet must be properly and promptly disposed of by the tenant to avoid any unpleasant and unsanitary odor from being in the unit.
  3. Prohibited Animals: Animals or breeds of animals that are considered by the HA to be vicious and/or intimidating will not be allowed. Some examples of animals that have a reputation of a vicious nature are: reptiles, rottweiler, doberman pinscher, chows, pit bulldog, and/or any animal that displays vicious behavior. This determination will be made by a HA representative prior to the execution of this lease addendum.
  4. Pet(s) shall not disturb, interfere or diminish the peaceful enjoyment of other tenants. The terms, "disturb, interfere or diminish" shall include but not be limited to barking, howling, chirping, biting, scratching and other like activities. This includes any pets who make noise continuously and/or incessantly for a period of 10 minutes or intermittently for one-half hour or more and therefore disturbs any person at any time of the day or night. The Housing Manager will terminate this authorization if a pet disturbs other tenants under this section of the lease addendum. The Tenant will be given one week to make other arrangements for the care of the pet or the dwelling lease will be terminated.

**Note:**

**Any pet that is not fully grown will be weighed every six months. Also, any pet that exceeds the weight limit at any time during occupancy will not be an eligible pet and must be removed from HA property.** If the animal should become destructive, create a nuisance, represent a threat to the safety and security of other persons, or create a health hazard, the Housing Manager will terminate the authorization. The tenant, in writing, that the animal must be removed from the Public Housing Development, within 10 day of the date of the notice from the HA. The Tenant may request a hearing, which will be handled according to the HA's established grievance procedure. The pet may remain with the tenant during the hearing process unless the HA has determined that the pet may be a danger or threat to the safety and security of other persons. If this determination has been made by the HA, the pet must be immediately removed from the unit upon receipt of the notice from the HA.

6. The Tenant is solely responsible for cleaning up the waste of the pet within the dwelling and on the premises of the public housing development. If the pet is taken outside it must be on a leash at all times. If there is any visible waste by the pet it must be disposed of in a plastic bag, securely tied and placed in the garbage receptacle for their unit. If the HA staff is required to clean any waste left by a pet, the Tenant will be charged \$25 for the removal of the waste.
7. The Tenant shall have pets restrained so that maintenance can be performed in the apartment. The Tenant shall, whenever an inspection or maintenance is scheduled, either be at home or shall have all animals restrained or caged. If a maintenance person enters an apartment where an animal is not restrained, maintenance shall not be performed, and the Tenant shall be charged a fee of \$25.00. If this same situation again occurs, the pet shall be removed from the premises. Pets that are not caged or properly restrained may be impounded by animal control officers or by HA staff and taken to the local Humane Society. It shall be the responsibility of the Tenant to reclaim the pet at the expense of the Tenant. Also, if a member of the HA staff takes a pet to the Humane Society the Tenant will be charged an additional \$50 to cover the expense of taking the pet(s) to the Humane Society. The housing authority shall not be responsible if any animal escapes from the residence due to maintenance, inspections or other activities of the landlord.
8. Pets may not be bred or used for any commercial purposes.

## **Section II. SCHEDULE OF ANNUAL FEES AND INITIAL DEPOSIT**

### **FEE AND DEPOSIT SCHEDULE**

(An Annual Fee and Deposit is required for each pet)

Type of Pet	Fee	Deposit
Dog	\$150	\$250
Cat	\$100	\$150
Fish Aquarium	\$50	\$100
Fish Bowl (Requires no power and no larger than two gallons)	\$0	\$25
Caged Pets	\$100	\$150

NOTE: Under 24 CFR 5.63-380 (subpart C) Elderly Residents DO NOT have to pay the nonrefundable annual fees.

Note: The above schedule is applicable for each pet; therefore, if a tenant has more than one pet he or she must pay the applicable annual fee and deposit for each pet.

The entire annual fee and deposit (subject to the exception listed below) must be paid prior to the execution of the lease addendum. No pet shall be allowed in the unit prior to the completion of the terms of this pet policy. The annual fee shall be paid at the time of reexamination each year and all proof of inoculations and other requirements shall be made available to the HA at such time. The Annual Fee is not reimbursable. The deposit made shall be utilized to offset damages caused by the pet and/or tenant. Any balance, if any, from the deposit will be refunded to the tenant. **THERE SHALL BE NO REFUND OF THE ANNUAL FEE.**

It shall be a serious violation of the lease for any tenant to have a pet without proper approval and without having complied with the terms of this policy. Such violation shall be considered to be a violation of Paragraph IV (L) of the lease (a serious violation) and the HA will issue a termination notice. The tenant will be entitled to a grievance hearing in accordance with the provisions of Paragraph 5 of this Pet Policy or the Grievance Procedure, as applicable.

RESIDENT ACKNOWLEDGMENT

After reading and/or having read to me this lease addendum I, \_\_\_\_\_ agree to the following: (Print Name)

I agree to abide by the requirements outlined in this lease addendum for pet ownership and to keep the pet(s) in accordance with this lease addendum.

I agree and understand that I am liable for any damage or injury whatsoever caused by pet(s) and shall pay the landlord or applicable party for any damages or injury caused by the pet(s). I also realize that I should obtain liability insurance for pet ownership and that paying for the insurance is my responsibility.

I agree to accept full responsibility and will indemnify and hold harmless the landlord for any claims by or injuries to third parties or their property caused by my pet(s).

I agree to pay a non-refundable annual fee of \$\_\_\_\_\_ to cover some of the additional operating cost incurred by the HA. I also understand that this fee is due and payable prior to the execution of this lease addendum and each twelve months thereafter.

I agree to pay a refundable pet deposit of \$\_\_\_\_\_ to the HA. The Annual Fee and Initial Deposit must be paid prior to the execution of this lease addendum. The pet deposit may be used by the Landlord at the termination of the lease toward payment of any rent or toward payment of any other costs made necessary because of Tenant's occupancy of the premises. Otherwise, the pet deposit, or any balance remaining after final inspection, will be returned to the Tenant after the premises are vacated and all keys have been returned.

I AGREE AND UNDERSTAND THAT ALL INFORMATION CONCERNING MY PET(S) MUST BE UPDATED ANNUALLY AND PROVIDED TO THE HA AT THE ANNUAL REEXAMINATION. ANNUAL FEES SHALL BE PAYABLE IN FULL TWELVE MONTHS FROM THE APPROVAL DATE.

I AGREE AND UNDERSTAND THAT VIOLATING THIS LEASE ADDENDUM MAY RESULT IN THE REMOVAL OF THE PET(S) FROM THE PROPERTY OF THE HA AND/OR EVICTION. I, ALSO UNDERSTAND THAT I MY NOT BE ALLOWED TO OWN ANY TYPE OF PET IN THE FUTURE WHILE BEING AN OCCUPANT OF THE HA.

I ALSO UNDERSTAND THAT I MUST OBTAIN PRIOR APPROVAL FORM THE HA BEFORE MAKING A CHANGE OF A PET FOR WHICH THIS POLICY WAS APPROVED OR ADDING A SECOND PET. ALSO, A PICTURE MAY BE TAKEN BY THE HA STAFF OF THE PET (S) FOR DOCUMENTATION.

Head of Household Signature

Date

Housing Authority Representative Signature

Date



## **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. X 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. X Yes  No: Was the most recent fiscal audit submitted to HUD?
3.  Yes X No: Were there any findings as the result of that audit?
4.  Yes  No: If there were any findings, do any remain unresolved?  
If yes, how many unresolved findings remain? \_\_\_\_\_
5.  Yes  No: Have responses to any unresolved findings been submitted to HUD?  
If not, when are they due (state below)?

## **17. PHA Asset Management**

[24 CFR Part 903.7 9 (q)]

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

1. X 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
  - X Development-based accounting
  - Comprehensive stock assessment
  - Other: (list below)
3.  Yes X No: Has the PHA included descriptions of asset management activities in the **optional** Public Housing Asset Management Table?

## **18. Other Information**

[24 CFR Part 903.7 9 (r)]

### **A. Resident 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 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: Thelma Folsom
  - B. How was the resident board member selected: (select one)?
    - Elected
    - Appointed
  - C. The term of appointment is (include the date term expires): 6/12/07
  
2. A. If the PHA governing board does not have at least one member who is directly assisted by the PHA, why not?
  - the PHA is located in a State that requires the members of a governing board to be salaried and serve on a full time basis
  - the PHA has less than 300 public housing units, has provided reasonable notice to the resident advisory board of the opportunity

to serve on the governing board, and has not been notified by any resident of their interest to participate in the Board.

Other (explain):

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

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

### **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: (State of Alabama)

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)

X Other: (list below) The PHA has submitted the plan to ADECA to insure the plan is consistent with the States Plan.

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.

### CAPITAL FUND PROGRAM TABLES

Annual Statement/Performance and Evaluation Report					
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary					
PHA Name: Cullman Housing Authority		Grant Type and Number Capital Fund Program Grant No: AL052501-06 Replacement Housing Factor Grant No:		Federal FY of Grant: 2006	
<input checked="" type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies           Revised Annual Statement (revision no: ) <input type="checkbox"/> Performance and Evaluation Report for Period Ending: <input type="checkbox"/> Final Performance and Evaluation Report					
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations	\$38,000			
3	1408 Management Improvements Soft Costs Management Improvements Hard Costs				
4	1410 Administration	\$22,000			
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	\$38,800			
8	1440 Site Acquisition				
9	1450 Site Improvement	\$425,323.00			
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				

<b>Annual Statement/Performance and Evaluation Report</b> <b>Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary</b>				
PHA Name: Cullman Housing Authority		Grant Type and Number Capital Fund Program Grant No: AL052501-06 Replacement Housing Factor Grant No:		Federal FY of Grant: 2006
<input checked="" type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies                    Revised Annual Statement (revision no: ) <input type="checkbox"/> Performance and Evaluation Report for Period Ending: <input type="checkbox"/> Final Performance and Evaluation Report				
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost
17	1495.1 Relocation Costs			
18	1499 Development Activities			
19	1502 Contingency			
	Amount of Annual Grant: (sum of lines.....)	\$524,123		
	Amount of line XX Related to LBP Activities			
	Amount of line XX Related to Section 504 compliance			
	Amount of line XX Related to Security –Soft Costs			
	Amount of Line XX related to Security-- Hard Costs			
	Amount of line XX Related to Energy Conservation Measures			
	Collateralization Expenses or Debt Service			



<b>Annual Statement/Performance and Evaluation Report</b> <b>Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)</b> <b>Part II: Supporting Pages</b>									
PHA Name: Cullman Housing Authority			<b>Grant Type and Number</b> Capital Fund Program Grant No: AL052501-06 Replacement Housing Factor Grant No:				Federal FY of Grant: 2006		
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

<b>Annual Statement/Performance and Evaluation Report</b> <b>Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)</b> <b>Part III: Implementation Schedule</b>							
PHA Name: <b>Cullman Housing Authority</b>			<b>Grant Type and Number</b> Capital Fund Program No: AL052501-06 Replacement Housing Factor No:				Federal FY of Grant: 2006
Development Number Name/HA-Wide Activities	All Fund Obligated (Quarter Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates
	Original	Revised	Actual	Original	Revised	Actual	
AL 52-1/4 (1406)	12/31/07			12/31/09			
AL 52-1/4 (1410)	12/31/07			12/31/09			
AL 52-1/4 (1430)	12/31/07			12/31/09			
AL 52-1/4 (1450)	12/31/07			12/31/09			

<b>Annual Statement/Performance and Evaluation Report</b> <b>Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary</b>
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<b>PHA Name:</b> Cullman Housing Authority	<b>Grant Type and Number</b> Capital Fund Program Grant No: AL052501-05 Replacement Housing Factor Grant No:	<b>Federal FY of Grant:</b> 2005
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Original Annual Statement 
  Reserve for Disasters/ Emergencies 
  Revised Annual Statement (revision no: ) 1  
 Performance and Evaluation Report for Period Ending: 
  Final Performance and Evaluation Report

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations	\$38,000	\$50,000	0	0
3	1408 Management Improvements Soft Costs				
	Management Improvements Hard Costs				
4	1410 Administration	\$22,000	\$22,000	0	0
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	\$38,800	\$38,000	0	0
8	1440 Site Acquisition				
9	1450 Site Improvement	\$485,537.00	\$475,567	0	0
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	1499 Development Activities				
19	1502 Contingency				
	Amount of Annual Grant: (sum of lines.....)	\$584,337.00	\$585,567.00	0	0
	Amount of line XX Related to LBP Activities				
	Amount of line XX Related to Section 504 compliance				
	Amount of line XX Related to Security –Soft Costs				
	Amount of Line XX related to Security-- Hard Costs				
	Amount of line XX Related to Energy Conservation Measures				
	Collateralization Expenses or Debt Service				

<b>Annual Statement/Performance and Evaluation Report</b> <b>Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary</b>				
PHA Name: Cullman Housing Authority		Grant Type and Number Capital Fund Program Grant No: AL052501-05 Replacement Housing Factor Grant No:		Federal FY of Grant: <b>2005</b>
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies                   X Revised Annual Statement (revision no: ) 1 <input type="checkbox"/> Performance and Evaluation Report for Period Ending: <input type="checkbox"/> Final Performance and Evaluation Report				
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost

<b>Annual Statement/Performance and Evaluation Report</b>									
<b>Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)</b>									
<b>Part II: Supporting Pages</b>									
PHA Name: Cullman Housing Authority			Grant Type and Number Capital Fund Program Grant No: AL052501-05 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
Al 052-1/4	Operations		1406		\$50,000		0		
Al 052-1/4	Nontechnical-Prorate Salary of ED to CFP for duties as inspector of work< fee accountant for extra duties		1410		\$22,000		0		
Al 052-2&4	Architect- draw site plans and coordinate bidding, inspections		1430		\$38,000		0		
Al 52-1	Re-roof 80 units and community building		1460		\$475,567.00		0		

<b>Annual Statement/Performance and Evaluation Report</b> <b>Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)</b> <b>Part II: Supporting Pages</b>									
PHA Name: Cullman Housing Authority			<b>Grant Type and Number</b> Capital Fund Program Grant No: AL052501-05 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

<b>Annual Statement/Performance and Evaluation Report</b> <b>Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)</b> <b>Part III: Implementation Schedule</b>							
PHA Name: Cullman Housing Authority		<b>Grant Type and Number</b> Capital Fund Program No: AL052501-05 Replacement Housing Factor No:					Federal FY of Grant: 2005
Development Number Name/HA-Wide Activities	All Fund Obligated (Quarter Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates
	Original	Revised	Actual	Original	Revised	Actual	
AL 52-1/4 (1406)	12/31/06			12/31/07			
AL 52-1/4 (1410)	12/31/06			12/31/07			
AL 52-1/4 (1430)	12/31/06			12/31/07			
AL 52-1/4 (1450)	12/31/06			12/31/07			

<b>Annual Statement/Performance and Evaluation Report</b>					
<b>Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary</b>					
PHA Name: Cullman Housing Authority		Grant Type and Number Capital Fund Program Grant No: AL052501-04 Replacement Housing Factor Grant No:		Federal FY of Grant: 2004	
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input checked="" type="checkbox"/> Revised Annual Statement (revision no: ) 2 <input type="checkbox"/> Performance and Evaluation Report for Period Ending: <input type="checkbox"/> Final Performance and Evaluation Report					
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations	\$60,000	\$38,000	\$38,000	\$34,648.77
3	1408 Management Improvements Soft Costs				
	Management Improvements Hard Costs				
4	1410 Administration	\$21,116	\$22,000	\$22,000	\$10,000
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	\$20,000	\$38,800	\$38,800	\$38,800
8	1440 Site Acquisition				
9	1450 Site Improvement	\$500,000	\$485,537	\$485,537	\$280,949.21
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	1499 Development Activities				
19	1502 Contingency				
	Amount of Annual Grant: (sum of lines.....)	\$601,116	\$584,337	\$584,337	363,949.21
	Amount of line XX Related to LBP Activities				

<b>Annual Statement/Performance and Evaluation Report</b> <b>Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary</b>					
PHA Name: Cullman Housing Authority		Grant Type and Number Capital Fund Program Grant No: AL052501-04 Replacement Housing Factor Grant No:		Federal FY of Grant: 2004	
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input checked="" type="checkbox"/> Revised Annual Statement (revision no: ) 2 <input type="checkbox"/> Performance and Evaluation Report for Period Ending: <input type="checkbox"/> Final Performance and Evaluation Report					
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
	Amount of line XX Related to Section 504 compliance				
	Amount of line XX Related to Security –Soft Costs				
	Amount of Line XX related to Security-- Hard Costs				
	Amount of line XX Related to Energy Conservation Measures				
	Collateralization Expenses or Debt Service				

<b>Annual Statement/Performance and Evaluation Report</b> <b>Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)</b> <b>Part II: Supporting Pages</b>									
PHA Name: Cullman Housing Authority			Grant Type and Number Capital Fund Program Grant No: AL052501-04 Replacement Housing Factor Grant No:				Federal FY of Grant: 2004		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories		Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
Al 052-1/4	Operations		1406		\$60,000	\$38,000	\$38,000	\$34,648.77	
Al 052-1/4	Nontechnical-Prorate Salary of ED to CFP for duties as inspector of work< fee accountant for extra duties		1410		\$21,116	\$22,000	\$22,000	\$10,000	
Al 052-2&4	Architect- draw site plans and coordinate bidding, inspections		1430		\$20,000	\$38,800	\$38,800	\$38,800	
Al 52-2	Replacing roofs and soffits, modernize and reconfigure plumbing	61	1450		\$500,000	\$485,337	\$485,337	\$280,500.44	



<b>Annual Statement/Performance and Evaluation Report</b> <b>Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)</b> <b>Part II: Supporting Pages</b>									
PHA Name: Cullman Housing Authority			<b>Grant Type and Number</b> Capital Fund Program Grant No: AL052501-04 Replacement Housing Factor Grant No:				Federal FY of Grant: 2004		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories		Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work

<b>Annual Statement/Performance and Evaluation Report</b> <b>Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)</b> <b>Part III: Implementation Schedule</b>							
PHA Name: <b>Cullman Housing Authority</b>		<b>Grant Type and Number</b> Capital Fund Program No: AL052501-04 Replacement Housing Factor No:				Federal FY of Grant: 2004	
Development Number Name/HA-Wide Activities	All Fund Obligated (Quarter Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates
	Original	Revised	Actual	Original	Revised	Actual	
AL 52-1/4 (1406)	12/31/05			12/31/06			
AL 52-1/4 (1410)	12/31/05			12/31/06			
AL 52-1/4 (1430)	12/31/05			12/31/06			
AL 52-1/4 (1450)	12/31/05			12/31/06			

<b>Capital Fund Program Five-Year Action Plan</b>					
<b>Part I: Summary</b>					
PHA Name <b>Cullman Housing Authority</b>				<input checked="" type="checkbox"/> <b>Original 5-Year Plan</b>	
				<input type="checkbox"/> <b>Revision No:</b>	
Development Number/Name/HA-Wide	Year 1	Work Statement for Year 2 FFY Grant: AL052501-06 PHA FY: 2007	Work Statement for Year 3 FFY Grant: AL052501-07 PHA FY:2008	Work Statement for Year 4 FFY Grant: AL052501-08 PHA FY:2009	Work Statement for Year 5 FFY Grant: AL052501-10 PHA FY:2010
PHA Wide Operations, Administration, A/E Fees	Annual Statement	\$123,000	\$123,000	\$123,000	\$123,000
All developments					\$461,337
52-1		\$230,668.50		\$30,668.50	
52-2			\$461,337	\$30,668.50	
52-3		\$230,668.50			
52-4					
			Non dwelling structures	\$400,000	
Total CFP Funds (Est.)		\$584,337	\$584,337	\$584,337	
Total Replacement Housing Factor Funds					

<b>Capital Fund Program Five-Year Action Plan</b> <b>Part II: Supporting Pages—Work Activities</b>						
Activities for Year 1	Activities for Year : <u>  2  </u> FFY Grant: AL052501-07 PHA FY:2007			Activities for Year: <u>  3  </u> FFY Grant: AL052501-08 PHA FY:2008		
		PHA Wide Operations, Administration, A/E Fees	\$123,000		PHA Wide Operations, Administration, A/E Fees	\$123,000
	52-3	Replace the roofs on 85 units. Playground equipment, landscaping, benches, picnic sheds	\$230,668.50	52-2	Complete interior modernization, replace paneling with sheetrock, new flooring and update bathrooms	\$461,337
	52-1	Install central heat and air for 80 units	\$230,668.50			

<b>Capital Fund Program Five-Year Action Plan</b>						
<b>Part II: Supporting Pages—Work Activities</b>						
Activities for Year	Activities for Year : <u>4</u> FFY Grant: AL052501-09 PHA FY:2009			Activities for Year: <u>5</u> FFY Grant: AL052501-10 PHA FY:2010		
		PHA Wide Operations, Administration, A/E Fees	\$123,000		PHA Wide Operations, Administration, A/E Fees	\$123,000
	52-1 and 2	Install new playground equipment	\$61,337	52-1, 2, 3 and 4	Totally renovate all Handicap units	\$461,337
	Administration and Maintenance Building	Build Structure to cover maintenance vehicles and equipment, Build additional storage and remodel maintenance and administration building	\$400,000			

## **Required Attachment \_\_\_ AL 052-a1\_\_\_:**

### **1. Amendment and Deviation Definitions**

24 CFR Part 903.7(r)

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

#### **A. Substantial Deviation from the 5-year Plan: shall mean any action taken by the PHA that changes or modifies:**

- 1 Rent or admission policies or organization of the waiting list;**
- 2 The Capital Fund Program plan either through the addition or deletion of items or projects from the list of planned activities or change in use of replacement reserves funds under capital Funds; and**
- 3 Planned demolition or disposition, designation, homeownership programs or conversion activities.**

**Exceptions. Exceptions to this definition will be made for any for the above actions that are made to reflect a change in HUD regulatory requirements.**

#### **B. B. Significant Amendment or Modification to the Annual Plan: shall mean any action taken by the PHA that changes or modifies:**

- 1 Rent or admission policies or organization of the waiting list;**
- 2 The Capital Fund Program plan either through the addition or deletion of items or projects from the list of planned activities or change in use of replacement reserves funds under capital Funds; and**
- 3 Planned demolition or disposition, designation, homeownership programs or conversion activities.**

**Exceptions. Exceptions to this definition will be made for any for the above actions that are made to reflect a change in HUD regulatory requirements.**

**General. For the purposes of the 5 Year and Annual Public Housing Agency Plan any substantial deviation or significant amendment or modification to the plans will**

**be subject to the review of the Resident Advisory Board and Full public hearing process requirements.**

**Required Attachment \_\_\_ AL 052-a2 \_\_\_:**

### **DECONCENTRATION**

\_\_\_ Yes  No Does the PHA have any general occupancy (family) public housing developments covered by the deconcentration rule? If no, this section is complete. If yes, continue to the next question.

\_\_\_ Yes  No Do any of these covered developments have average incomes above or below 85% to 115% of the average incomes of all such developments? If no, this section is complete.

### **DECONCENTRATION POLICY**

#### **PUBLIC HOUSING:**

In an ongoing effort for The Housing Authority to meet or exceed the laws and regulations regarding its public housing programs, the following Deconcentration Policy has been adopted by the Housing Authority (HA) in order to comply with the Quality Housing and Work Responsibility Act of 1998, Section 513.

**INCOME MIX TARGETING:** To meet the requirements of the Act, and subsequent HUD regulations, at least 40 percent of families admitted to public housing by the HA must have incomes that do not exceed 30% of the area median. If 40% or more of the housing authority units are occupied by families whose incomes do not exceed 30% of the area median income, this requirement shall be considered as being met.

Additionally, to meet this goal, the housing authority will use the provisions of fundability to the extent that the housing authority has provided more than seventy-five percent of newly available vouchers in its Section 8 program, including those resulting from turnover, to very poor families. The number of fungible housing credits used to drop the annual requirement for housing very poor families below 40 percent of the newly available units in public housing is limited to the lowest of the following:

1. The number of units equivalent to ten (10) percent of the number of newly available vouchers.
2. The number of public housing units that (i) are in public housing projects located in census tracts having a poverty rate of 30% or more, and (ii) are made available for occupancy by, and actually occupied in that year by, families other than very poor families, or

3. The number of units that cause the housing authority's overall requirement for housing very poor families to drop to 30% of its newly available units.

**PROHIBITION OF CONCENTRATION OF LOW-INCOME FAMILIES:** The HA will not, in meeting this income mix targeting, concentrate very low-income families, or other families with relatively low incomes, in public housing units in certain projects or certain buildings. The Housing Authority will review the income and occupancy characteristics of each project to ensure that a low-income concentration does not occur.

**DECONCENTRATION:** The Housing Authority shall make every effort to deconcentrate families of certain income characteristics within the HA complexes. To achieve this, the Housing Authority may offer incentives for eligible families having higher incomes to occupy dwelling units in projects predominantly occupied by eligible families having lower incomes, and provide for occupancy of eligible families having lower incomes in project predominantly occupied by eligible families having higher incomes. Incentives by the Housing Authority allow for the eligible family to have the sole discretion in determining whether to accept the incentive and the agency may not take any adverse action toward any eligible family for choosing not to accept these incentives. The skipping of a family on the waiting list to reach another family to implement this Deconcentration Policy shall not be considered an adverse action. As such, the Housing Authority will continue to accept applications and place the individuals on a waiting list. Selection will be made based on a combination of the local preferences and an income target mix. Any eligible family who qualifies as a higher income family may accept a dwelling unit assignment and be placed randomly into a vacant housing unit.

The Housing Authority will track the income mix within each project in an effort to avoid a concentration of higher or lower income families in any one project.

Each project has greater than forty (40) percent of the families with thirty (30) percent or less of the median income.

Monitoring will be conducted to confirm that at least forty (40) percent of all leased units will be within thirty (30) percent of median income. The calculations listed above exclude vacant units and were averaged by occupied units.

Efforts through marketing and outreach shall be made to increase the number of families with incomes greater than thirty (30) percent of median income in the projects noted above in order to avoid concentrations of very low-income families in the projects as per the requirements of the QHWRA of 1998.





### **Required Attachment \_\_\_ AL 052-a3\_\_\_: Membership of the Resident Advisory Board or Boards**

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

Phillip Gossett  
Clara Edge  
Addlene Miller  
Jerry Smith

### **Required Attachment \_\_\_ AL 052-a4\_\_\_:Progress in Meeting 5 Year Goals**

In the five year plan the Housing Authority set many goals. Goals that we have accomplished are:

We have replaced all water and sewer lines in Developments 52-2 and 52-4.  
We have re-roofed AL-52-2 and AL52-3.  
We have developed a plan to replace all of the CHA vehicles.  
We have completed the modernization of AL 52-4.  
We have covered all soffits with vinyl in AL 52-3

The long-range scope of the Authority is to improve the facilities and community for all its residents. The Authority plans to make site improvements by adding landscaping and by refurbishing many sidewalks. We are also planning to replace as well as to give the development a new and attractive look for the community.

The Authority will continue to serve the HA community not only by providing them with decent housing but also by improving the community of its residents.

### **Required Attachment \_\_\_ AL 052-a5\_\_\_: Organizational Chart**

Executive Director

Administrative Positions	Technical Positions
Hsg. Mgr/ Admin. Asst/ Occup. Spec.	Maintenance Supervisor
Section 8 Coordinator	Maintenance Mechanic
Accounts Payable/Clerk	Maintenance Mechanic Assistant
Clerk/Cashier	Maintenance Laborer
Office Clerk	Grounds Laborer

**Required Attachment \_\_\_ AL 052-a5 \_\_\_ :**  
**Component 10 (B) Voluntary Conversion Initial Assessments**

- a. **How many of the PHA's developments are subject to the Required Initial Assessments? four**
- 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 developmets not general occupancy projects)?None**
- c. **How many Assessments were conducted for the PHA's covered developments? four**
- d. **Identify PHA developments that may be appropriate for conversion based on the Required Initial Assessments:**

<b>Development Name</b>	<b>Number of Units</b>
N/A	N/A

- e. **If the PHA has not completed the Required Initial Assessments, describe the status of these assessments. Completed October 4, 2001**

**Required Attachment \_\_\_ AL 052-a6\_\_\_:**

**THE CULLMAN HOUSING AUTHORITY FOLLOW UP PLAN FOR  
CUSTOMER SERVICE AND SATISFACTION SURVEY**

**The Cullman Housing Authority is dedicated to providing its residents with customer service and satisfaction. This plan is a result of the survey conducted by REAC for the year 2005. The results of the survey showed the residents of the Cullman Housing Authority ranked the Authority as follows:**

<b>Maintenance</b>	<b>=</b>	<b>89.17</b>
<b>Communication</b>	<b>=</b>	<b>74.46</b>
<b>Safety</b>	<b>=</b>	<b>83.94</b>
<b>Appearance</b>	<b>=</b>	<b>93.79</b>

**The score on communications is below the national average. . The Housing Authority's plan is to address these concerns by first conducting its own survey to identify specific concerns and suggestions from its residents. A copy of this survey will be included in this plan as an attachment. After the survey is completed, the Authority will address each concern and develop methods to attempt to satisfy its residents.**

**METHODS AND STRATEGIES FOR ADDRESSING CONCERNS**

**The methods and strategies the Authority will use are as follow:**

**Communications**

- 1 Arrange to communicate with residents by holding meetings, surveys, letters, flyers, community bulletin boards or individual interviews on a quarterly basis.**
- 2 Ensure there is adequate internal PHA communication.**
- 3 Assist and encourage residents to be part of the solution, by joining or developing committees/ organizations that can help improve the community.**
- 4 Notify residents of improvements being made to the development.**

**With this plan we are confident the concerns and needs of the residents will be considered and evaluated. After the evaluation is completed the Authority will take all necessary actions to satisfy its residents' concerns. The planned date for implementation is October 2006.**

**THE CULLMAN HOUSING AUTHORITY RESIDENT SATISFACTION  
FOLLOW UP SURVEY**

**The results are back from the resident satisfaction survey that was sent out to randomly selected residents. The survey indicated our residents were not satisfied with communications with the Authority.**

**This survey will be sent out by HUD each year. In order to improve our score, please take a few minutes to answer the following questions:**

**How could communications between the office staff and residents be improved?**

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**What would you like office staff to do that is not already being done to inform you in the following areas?**

**MAINTENANCE/SERVICES-Our current policy is to provide advance notice of services such as inspections, pest control, etc.**

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**What can we do to keep you better informed about the Rules of your Lease?**

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**Do you think the staff is courteous?\_\_\_\_\_**

**Why do you feel the staff is not responsive to your concerns?**

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**What can the Housing Authority do to make you feel safer?**

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**What could we do to improve your neighborhood?**

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**Would you like to participate in a resident organization? \_\_\_\_\_**

**Please take a few minutes to complete this survey. You do not have to sign it or put your name anywhere on it. There is a box in the front lobby to place it in. Please return this survey when you pay your rent.**

**Thank you for your cooperation.**

**Sincerely,**

**Steven Sides  
Executive Director**