

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

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# Pinellas County (Fla.) Housing Authority Plans

5-Year Plan for Fiscal Years 2006 - 2010

**AND**

**ANNUAL PLAN UPDATE FOR FISCAL YEAR 2006**

**OFFICIAL SUBMISSION**

as approved by Pinellas County Housing Authority  
Board of Commissioners on September 21, 2005

## **PHA Plan Agency Identification**

**PHA Name:** Pinellas County Housing Authority

**PHA Number:** FL062

**PHA Fiscal Year Beginning:** 01/2006

### **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)

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

**A. Mission**

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

- ☐ The mission of the PHA is the same as that of the Department of Housing and Urban Development: To promote adequate and affordable housing, economic opportunity and a suitable living environment free from discrimination.
- ☒ The PHA's mission is to provide safe, quality housing for families in need, as well as to develop new horizons which promote greater economic opportunities through assisting participants in achieving self-sufficiency; enhancing housing options; fostering healthy and vibrant neighborhoods; promoting empowerment, accountability and responsibility of clients and staff; furthering the aims of fair housing; and developing successful partnerships with federal, state and local community organizations.

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

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

- ☒ PHA Goal: Expand the supply of assisted housing  
Objectives:
- ☒ Apply for additional rental vouchers:
  - ☒ Reduce public housing vacancies: **Continue to maintain at 97%+ level during 2006**
  - ☒ Leverage private or other public funds to create additional housing opportunities:
  - ☒ Acquire or build units or developments
  - ☒ Other (Partnership with private landlords to increase housing options)

- ☒ PHA Goal: Improve the quality of assisted housing  
Objectives:
- ☒ Improve public housing management: (PHAS score)
  - ☒ Improve voucher management:
  - ☒ Increase customer satisfaction:
  - ☒ Concentrate on efforts to improve specific management functions ( e.g., upgrade hardware/software, continue benefit analysis of outsourcing)
  - ☒ Renovate or modernize public housing units:
  - ☒ Demolish or dispose of obsolete public housing:
  - ☐ Provide replacement public housing
  - ☒ Provide replacement vouchers:
  - ☐ Other:

☒ 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: **Continuation of program**
- ☒ Implement public housing or other homeownership programs:
- ☒ Implement public housing site-based waiting lists: **(10/04)**
- ☒ Convert public housing to vouchers:
- ☒ Other: (list below)
  1. Redevelopment of existing housing.
  2. Development of workforce and affordable housing.

**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**

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

Objectives:

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

1. **Partner with established Certified Nursing Assistance training program**

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

- ☒ PHA Goal: Ensure equal opportunity and affirmatively further fair housing  
Objectives:
- ☒ Undertake affirmative measures to ensure access to assisted housing regardless of race, color, religion national origin, sex, familial status, and disability.
  - ☒ Undertake affirmative measures to provide a suitable living environment for families living in assisted housing, regardless of race, color, religion national origin, sex, familial status, and disability: .
  - ☒ Undertake affirmative measures to ensure accessible housing to persons with all varieties of disabilities regardless of unit size required.
  - ☐ Other:

**Other PCHA Goals and Objectives:**

- Expand staff training and empowerment to enhance PCHA-wide levels of professionalism.
- Will continue to work to enhance affordable housing opportunities
- PCHA will make a diligent effort to expand the scope and outreach of its Section 3 initiatives to impact a greater number of public housing residents, and other Section 3 business concerns.
- Decrease the need for HUD funding thorough economies of scale initiatives with other HAs.
- Facilitate a favorable image of the PCHA Housing Authority and its program beneficiaries.
- Continue building on County-wide standardization of processes for HA within the county.

# Pinellas County Housing Authority (PCHA) Fiscal Year 2006 Annual Plan

[24 CFR Part 903.7]

## **i. Annual Plan Type:**

Select which type of Annual Plan the PCHA will submit.

☒ **Standard Plan**

### **Streamlined Plan:**

- ☐ **High Performing PHA\*** (eligible for FYE 2002)
- ☐ **Small Agency (<250 Public Housing Units)**
- ☐ **Administering Section 8 Only**

☐ **Troubled Agency Plan**

## **ii. Executive Summary of the Annual PCHA Plan** [24 CFR Part 903.7 9 (r)]

A brief overview of the information in the Annual Plan, including highlights of major initiatives and discretionary policies the PCHA has included in the Annual Plan.

The Board of Commissioners has installed a new senior management team at the Authority to correct deficiencies, build upon successes, and to lead the agency into creative, uncharted programmatic waters. Much emphasis will be placed on achieving savings through economies of scales (EOS) initiatives via Interlocal Agreements with other PHAs. In 2005, PCHA had Interlocal Agreements with other PHAs located within the County that included Executive Management services, Management Information Systems (M.I.S.) administration, Human Resources administration, and Public Housing management. PCHA has added Section 8 Program administration and Public Relations to its current EOS initiatives. Additional EOS initiatives to be implemented during this plan period include, but are not limited to Compliance, Purchasing, and Financial Management.

The agency places significant emphasis on achieving (and substantiating) high performance status in our Section 8 and Public Housing programs. Improving the quality of our housing stock and improving customer service will be high priority items during this plan period. Further, given the possibility of continued funding cuts, the agency will continue to pursue other revenue enhancing affordable housing opportunities that will also benefit the County's citizens. Expanding affordable homeownership and affordable (80/20 mix) rental housing opportunities top the list.

Staff and resident training is also a continuing focus of the Agency. Our expectation is that all staff shall attain the minimum recommended/required certifications within their field of endeavor within one year of employment. We will continue the development of a public housing Family Self-Sufficiency program, and we will encourage residents to attend statewide and national training conferences to enhance their business and leadership skills. PCHA has adopted a Section 3 Plan to give residents employment and contracting opportunities, and will continue to encourage the development of potential leadership within the Resident Associations.

Other areas of concentration during this Plan period shall be on resident health care education, transitioning out of the ownership and operation of public housing developments, creating affordable housing opportunities, and improving information flow, accountability, and services to the residents of PCHA's Assisted Living Facility (ALF).

### **iii. Annual Plan Table of Contents** [24 CFR Part 903.7 9 (r)]

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

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## Attachments

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

### Required Attachments:

- ☒ Admissions Policy for Deconcentration (Attachment A)
- ☒ FY 2006 Capital Fund Program Annual Statement (Attachment B)
- ☐ Most recent board-approved operating budget (Required Attachment for PHAs that are troubled or at risk of being designated troubled ONLY)

### Optional Attachments:

- ☐ PHA Management Organizational Chart
- ☒ FY 2005 Capital Fund Program 5 Year Action Plan (Attachment D)
- ☐ Public Housing Drug Elimination Program (PHDEP) Plan
- ☒ Comments of Resident Advisory Board or Boards (Attachment C)
- ☐ Other (List below, providing each attachment name)

## Supporting Documents Available for Review

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

List of Supporting Documents Available for Review		
Applicable & On Display	Supporting Document	Applicable Plan Component
X	PHA Plan Certifications of Compliance with the PHA Plans and Related Regulations	5 Year and Annual Plans
X	State/Local Government Certification of Consistency with the Consolidated Plan	5 Year and Annual Plans
X	Fair Housing Documentation: Records reflecting that the PHA has examined its programs or proposed programs, identified any impediments to fair housing choice in those programs, addressed or is addressing those impediments in a reasonable fashion in view of the resources available, and worked or is working with local jurisdictions to implement any of the jurisdictions' initiatives to affirmatively further fair housing that require the PHA's involvement.	5 Year and Annual Plans
X	Consolidated Plan for the jurisdiction/s in which the PHA is located (which includes the Analysis of Impediments to Fair Housing Choice (AI)) and any additional backup data to support statement of housing needs in the jurisdiction	Annual Plan: Housing Needs
X	Most recent board-approved operating budget for the public housing program	Annual Plan: Financial Resources

<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	Public Housing Admissions and (Continued) Occupancy Policy (A&O), which includes the Tenant Selection and Assignment Plan [TSAP]	Annual Plan: Eligibility, Selection, and Admissions Policies
X	Section 8 Administrative Plan	Annual Plan: Eligibility, Selection, and Admissions Policies
X	Public Housing Deconcentration and Income Mixing Documentation: 1. PHA board certifications of compliance with deconcentration requirements (section 16(a) of the US Housing Act of 1937, as implemented in the 2/18/99 <i>Quality Housing and Work Responsibility Act Initial Guidance; Notice</i> and any further HUD guidance) and 2. Documentation of the required deconcentration and income mixing analysis	Annual Plan: Eligibility, Selection, and Admissions Policies
X	Public housing rent determination policies, including the methodology for setting public housing flat rents <input checked="" type="checkbox"/> check here if included in the public housing A & O Policy	Annual Plan: Rent Determination
X	Schedule of flat rents offered at each public housing development <input checked="" type="checkbox"/> check here if included in the public housing A & O Policy	Annual Plan: Rent Determination
X	Section 8 rent determination (payment standard) policies <input checked="" type="checkbox"/> check here if included in Section 8 Administrative Plan	Annual Plan: Rent Determination
X	Public housing management and maintenance policy documents, including policies for the prevention or eradication of pest infestation (including cockroach infestation)	Annual Plan: Operations and Maintenance
X	Public housing grievance procedures <input 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
NA	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
NA	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
NA	Approved or submitted applications for demolition and/or disposition of public housing	Annual Plan: Demolition and Disposition

<b>List of Supporting Documents Available for Review</b>		
<b>Applicable &amp; On Display</b>	<b>Supporting Document</b>	<b>Applicable Plan Component</b>
NA	Approved or submitted applications for designation of public housing (Designated Housing Plans)	Annual Plan: Designation of Public Housing
NA	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
NA	Approved or submitted public housing homeownership programs/plans	Annual Plan: Homeownership
X	Policies governing any Section 8 Homeownership program <input type="checkbox"/> check here if included in the Section 8 Administrative Plan	Annual Plan: Homeownership
X	Any cooperative agreement between the PHA and the TANF agency	Annual Plan: Community Service & Self-Sufficiency
X	FSS Action Plan/s for public housing and/or Section 8	Annual Plan: Community Service & Self-Sufficiency
NA	Most recent self-sufficiency (ED/SS, TOP or ROSS or other resident services grant) grant program reports	Annual Plan: Community Service & Self-Sufficiency
NA	The most recent Public Housing Drug Elimination Program (PHDEP) 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
NA	Troubled PHAs: MOA/Recovery Plan	Troubled PHAs
	Other supporting documents (optional) (list individually; use as many lines as necessary)	(specify as needed)

1. **Statement of Housing Needs** [24 CFR Part 903.7 9 (a)]

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

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

<b>Housing Needs of Families in the Jurisdiction by Family Type</b>							
<b>Family Type</b>	<b>Overall</b>	<b>Afford- ability</b>	<b>Supply</b>	<b>Quality</b>	<b>Access- ability</b>	<b>Size</b>	<b>Location</b>
Income <= 30% of AMI	7,082	5	5	3	3	5	5
Income >30% but <=50% of AMI	7,909	5	4	3	3	4	4

<b>Housing Needs of Families in the Jurisdiction by Family Type</b>							
Family Type	Overall	Afford- ability	Supply	Quality	Access- ability	Size	Location
Income >50% but <80% of AMI	12,124	5	4	4	3	4	3
Elderly	6,412	5	4	3	3	2	3
Frail Elderly <50% AMI	4,014	5	5	3	3	2	3
Families with Disabilities	10%*	5	4	3	3	3	5
Caucasian	94%*	4	4	3	3	3	5
Black (non- Hispanic)	2%	5	4	3	3	3	5
Hispanic	3%*	5	4	3	3	3	5
Other	1%*	5	4	3	3	3	5

\*Percentage of overall population in the Jurisdiction Area.

Note: This information has not been updated since the submission of the 2005 Annual Plan.

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: FY 2001-05 Strategic Plan)
- ☐ U.S. Census data: the Comprehensive Housing Affordability Strategy ("CHAS") dataset
- ☐ American Housing Survey data  
Indicate year:
- ☐ Other housing market study  
Indicate year:
- ☐ Other sources: (list and indicate year of information)

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

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

### **Housing Needs of Families on the SECTION 8 Waiting List (reflects data as of September 1, 2005)\***

<b>Housing Needs of Families on the <u>SECTION 8</u> Waiting List</b> (reflects data as of September 1, 2005)*			
Waiting list type: (select one) <input checked="" type="checkbox"/> <b>Section 8 tenant-based assistance</b> <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	438	-----	350 (14%)
Extremely low income <=30% AMI	263	60%	
Very low income (>30% but <=50% AMI)	134	30%	
Low income (>50% but <80% AMI)	41	9.36%	
Families with children	375	85.6%	
Elderly families	30	6.8%	
Families with Disabilities	33	7.5%	
Race (White)	100	22.8%	
Race (Afro-American)	51	11.6%	
Race (Native American/Other)	0	0%	
Race (Asian)	0	0%	
Unknown (Applicant did not disclose)	287	65.5%	
Ethnicity (Non-Hispanic)	425	97%	
Ethnicity (Hispanic)	13	2.9%	
Is the waiting list closed (select one)? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes* If yes: How long has it been closed (# of months)? (since November 2002) Does the PHA expect to reopen the list in the PHA Plan year? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes Does the PHA permit specific categories of families onto the waiting list, even if generally closed? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			

<b>Housing Needs of Families on the <u>PUBLIC HOUSING</u> Waiting List</b> (reflects data as of September 14, 2005)*			
Waiting list type: (select one) <input type="checkbox"/> Section 8 tenant-based assistance <input checked="" type="checkbox"/> <b>Public Housing</b> <input type="checkbox"/> Combined Section 8 and Public Housing <input checked="" type="checkbox"/> Public Housing Site-Based or sub-jurisdictional waiting list (optional) If used, identify which development/subjurisdiction: Combined totals			
	# of families	% of total families	Annual Turnover
Waiting list total	1469*	-----	116 (8%)

<b>Housing Needs of Families on the <u>PUBLIC HOUSING</u> Waiting List</b> (reflects data as of September 14, 2005)*			
Extremely low income <=30% AMI	1182	80.46%	
Very low income (>30% but <=50% AMI)	212	14.43%	
Low income (>50% but <80% AMI)	75	5.11%	
Families with children	1060	77.13%	
Elderly families	124	8.44%	
Families with Disabilities	212	14.43%	
Race (Asian)	15	1.02%	
Race (White)	1089	74.13%	
Race (Afro-American)	324	22.06%	
Race/ (Native American/Other)	1	.07%	
Unknown (Applicant did not disclose)	40	2.72%	
Ethnicity (Non-Hispanic)	1350	91.90%	
Ethnicity (Hispanic)	119	8.10%	
1BR	530	36.08%	40(34.48%)
2 BR	544	37.03%	33 (28.45%)
3 BR	335	22.80%	30 (25.86%)
4 BR	2054	3.68%	10 (8.62%)
5+ BR	6	.41%	3(2.59%)
Is the waiting list closed (select one)? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes If yes: How long has it been closed (# of months)? (4/04) Does the PHA expect to reopen the list in the PHA Plan year? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Does the PHA permit specific categories of families onto the waiting list, even if generally closed? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes			

### C. Strategy for Addressing Needs

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

#### (1) Strategies

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

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

Select all that apply

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

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

Select all that apply

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

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

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

Select all that apply

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

**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:

**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:

### **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 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>Financial Resources: Planned Sources and Uses</b>		
<b>Sources</b>	<b>Planned \$</b>	<b>Planned Uses</b>
1. Federal Grants (FY 2004 grants)		

<b>Financial Resources: Planned Sources and Uses</b>		
<b>Sources</b>	<b>Planned \$</b>	<b>Planned Uses</b>
a) Public Housing Operating Fund	1,981,620	
b) Public Housing Capital Fund	898,096	
c) HOPE VI Revitalization	00	
d) HOPE VI Demolition	00	
e) Annual Contributions for Section 8 Tenant-Based Assistance	16,000,000	
f) Contract Administration for Section 8 New Construction	627,354	N/A
g) Resident Opportunity and Self-Sufficiency Grants	63,000	FSS Coordinator
h) Community Development Block Grant	50,000	Generator for Magnolia Gardens
i) HOME	00	N/A
Other Federal Grants (list below)	00	N/A
<b>Section 8 FSS</b>	130,000	FSS/HO Coordinator
<b>2. Prior Year Federal Grants (unobligated funds only)</b>		Utilize modernization funds for approved work items
FFY 2004 Capital Fund Program	124,519	
<b>3. Public Housing Dwelling Rental Income</b>	856,000	Normal Operating Expenses
<b>4. Other income (list below)</b>		
Interest income	7,000	
<b>5. Non-federal sources (list below)</b>	00	
<b>Total resources</b>	<b>\$ 20,737,589</b>	

### **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) up to 90 days  
☐ Other:

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

- ☒ Criminal or Drug-related activity  
☒ Rental history  
☐ Housekeeping  
☒ Other: State-wide shared eviction and delinquency log

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

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

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

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

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

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

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

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

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

1. How many site-based waiting lists will the PHA operate in the coming year? 4

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

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

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

### **(3) Assignment**

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

- ☒ One
- ☐ Two
- ☐ Three or More

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

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

Magnolia Gardens ALF allows for 2 refusals.

### **(4) Admissions Preferences**

a. Income targeting:

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

b. Transfer policies:

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

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

c. Preferences

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

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

Former Federal preferences:

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

Other preferences: (select below)

- ☒ Working families and those unable to work because of age or disability
- ☐ Veterans and veterans' families
- ☐ Residents who live and/or work in the jurisdiction
- ☒ Those enrolled currently in educational, training, or upward mobility programs
- ☐ Households that contribute to meeting income goals (broad range of incomes)
- ☐ Households that contribute to meeting income requirements (targeting)
- ☒ Those previously enrolled in educational, training, or upward mobility programs
- ☐ Victims of reprisals or hate crimes
- ☒ Other preference(s): Single applicants who are not elderly, disabled or displaced can only be admitted after all elderly or disabled families or single displaced persons have been offered units at "mixed population" development sites.

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

#### 1 Date and Time

Former Federal preferences:

- 1** Involuntary Displacement (Disaster, Government Action, Action of Housing Owner, Inaccessibility, Property Disposition)
- Homelessness (those residing in a homeless shelter at the time of certification of housing)
- High rent burden

Other preferences (select all that apply)

- ☒ **1** Working families and those unable to work because of age or disability
- ☐ Veterans and veterans' families
- ☐ Residents who live and/or work in the jurisdiction
- ☐ Those enrolled currently in educational, training, or upward mobility programs
- ☐ 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
- ☒ **1** Other preference: **elderly, disabled**

4. Relationship of preferences to income targeting requirements:

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

**(5) Occupancy**

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

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

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

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

**(6) Deconcentration and Income Mixing**

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

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

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

☐ Adoption of site based waiting lists  
If selected, list targeted developments below:

☐ Employing waiting list “skipping” to achieve deconcentration of poverty or income mixing goals at targeted developments  
If selected, list targeted developments below:

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

☐ Other (list policies and developments targeted below)

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

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

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

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

- ☐ Not applicable: results of analysis did not indicate a need for such efforts
- ☐ List (any applicable) developments below: French Villas and Rainbow Village

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

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

## B. Section 8

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

### (1) Eligibility

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

- ☒ Criminal or drug-related activity only to the extent required by law or regulation
- ☒ Criminal and drug-related activity, more extensively than required by law or regulation
- ☐ More general screening than criminal and drug-related activity (list factors below)
- ☐ Other (list below)

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

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

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

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

- ☒ Criminal or drug-related activity (if known by PCHA)
- ☒ Other (past tenancy information)

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

a. With which of the following program waiting lists is the section 8 tenant-based assistance waiting list merged? (select all that apply)

- ☒ None
- ☐ Federal public housing
- ☐ Federal moderate rehabilitation
- ☐ Federal project-based certificate program
- ☐ Other federal or local program (list below)

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

- ☒ PHA main administrative office
- ☐ Other (list below)

## **(3) Search Time**

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

If yes, state circumstances: Sixty-day Limited extensions granted for disability accommodations, hard-to-house families and extenuating 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):

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

**1** Date and Time

Former Federal preferences

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

Homelessness (those residing in a homeless shelter at the time of certification of housing)

High rent burden

Other preferences (select all that apply)

- ☐ Working families and those unable to work because of age or disability
- ☒ 1 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)

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

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

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

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

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

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

## **5) Special Purpose Section 8 Assistance Programs**

a. In which documents or other reference materials are the policies governing eligibility, selection, and admissions to any special-purpose section 8 program administered by the PHA contained? (select all that apply)

- ☒ The Section 8 Administrative Plan
- ☒ Briefing sessions and written materials
- ☐ Other:

b. How does the PHA announce the availability of any special-purpose section 8 programs to the public?

- ☒ Through published notices
- ☒ Other: (networking with other agencies)

#### **4. PHA Rent Determination Policies**

[24 CFR Part 903.7 9 (d)]

##### **A. Public Housing**

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

##### **(1) Income Based Rent Policies**

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

a. Use of discretionary policies: (select one)

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

---or---

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

b. Minimum Rent

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

- ☐ \$0  
☐ \$1-\$25  
☒ \$26-\$50

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

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

Extenuating hardships addressed in Admissions and Continued Occupancy Policy

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

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

2. If yes to above, list the amounts or percentages charged and the circumstances under which these will be used below: Not Applicable

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)

d. 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 (**see above comments**)
- ☐ 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 (mark 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:

Between income re-examinations, how often must tenants report changes in income or family composition to the PHA such that the changes result in a rent adjustment? (mark 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: changes in family composition and/or HUD-approved allowances.

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

## **(2) Flat Rents**

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

- ☐ The section 8 rent reasonableness study of comparable housing
- ☐ Survey of rents listed in local newspaper
- ☒ Survey of similar unassisted units in the neighborhood
- ☐ Other (list/describe below)

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

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

### **(1) Payment Standards**

Describe the voucher payment standards and policies.

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

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

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

- ☐ FMRs are adequate to ensure success among assisted families in the PHA's segment of the FMR area
- ☐ The PHA has chosen to serve additional families by lowering the payment standard
- ☐ Reflects market or submarket
- ☐ Other (list below)
- c. If the payment standard is higher than FMR, why has the PHA chosen this level? (select all that apply)
- ☐ FMRs are not adequate to ensure success among assisted families in the PHA's segment of the FMR area
- ☐ Reflects market or submarket
- ☐ To increase housing options for families
- ☐ Other (list below)
- d. How often are payment standards reevaluated for adequacy? (select one)
- ☒ Annually
- ☐ Other (list below)
- e. What factors will the PHA consider in its assessment of the adequacy of its payment standard? (select all that apply)
- ☒ Success rates of assisted families
- ☒ Rent burdens of assisted families
- ☐ Other (list below)

## **(2) Minimum Rent**

- a. What amount best reflects the PHA's minimum rent? (select one)
- ☐ \$0
- ☐ \$1-\$25
- ☒ \$26-\$50
- b. ☐ Yes ☒ No: Has the PHA adopted any discretionary minimum rent hardship exemption policies? (if yes, list below)

## **5. Operations and Management**

[24 CFR Part 903.7 9 (e)]

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

### **A. PHA Management Structure**

Describe the PHA's management structure and organization.

(select one)

- ☒ An organization chart showing the PHA's management structure and organization is attached.

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

## B. HUD Programs Under PHA Management

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

Program Name	Units or Families Served at Year Beginning 2005	Expected Turnover
Public Housing	595	10%
Sect. 8 Vouchers/Certificates	2,737	14%

## 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:
  - a. Admissions and Continued Occupancy Policy
  - b. Tenant Selection and Admissions Policy
  - c. PCHA Policy/Rules Manual
  - d. Maintenance Policy & Procedures (Includes Pest Control measures)
  - e. Site Manager's Complete Guide to Assisted Housing
  - f. Fair Housing and Equal Opportunity Plan
  - g. Code of Federal Regulations and other HUD-required documents
- (2) Section 8 Management:
  - a. Administrative Plan
  - b. Fair Housing and Equal Opportunity Plan
  - c. Code of Federal Regulations and other HUD-required documents

## 6. PHA Grievance Procedures

[24 CFR Part 903.7 9 (f)]

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

### A. Public Housing

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

If yes, list additions to federal requirements below:

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

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

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

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

If yes, list additions to federal requirements below:

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

- ☒ PHA main administrative office
- ☐ Other (list below)

## **7. Capital Improvement Needs**

[24 CFR Part 903.7 9 (g)]

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

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

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

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

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

Select one:

- ☒ The Capital Fund Program Annual Statement is provided as an attachment to the PHA Plan at Attachment B

-or-

- ☐ The Capital Fund Program Annual Statement is provided below:

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

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

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

- b. If yes to question a, select one:



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

-or-

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

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

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

☐ Yes ☒ No: a) Has the PHA received a HOPE VI revitalization grant? (if no, skip to question c; if yes, provide responses to question b for each grant, copying and completing as many times as necessary)

b) Status of HOPE VI revitalization grant (complete one set of questions for each grant)

1. Development name:

2. Development (project) number:

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

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

☐ Yes ☒ No: c) Does the PHA plan to apply for a HOPE VI Revitalization grant in the Plan year?

If yes, list development name/s below:

☐ 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.)

1. Demolition/Disposition Activity Description	
1a. Development name:	1b.
2. Activity type: Demolition <input type="checkbox"/> Disposition <input type="checkbox"/>	
3. Application status (select one) <input type="checkbox"/> Approved <input type="checkbox"/> Submitted, pending approval <input type="checkbox"/> Planned application	
4. Date application:	
5. Number of units affected: 1	
6. Coverage of action: <input type="checkbox"/> Part of the development <input type="checkbox"/> Entire Property	
7. Timeline for activity: a.	

## **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)]

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

## 2. Activity Description

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

Designation of Public Housing Activity Description	
1a. Development name:	
1b. Development (project) number:	
2. Designation type:	
Occupancy by only the elderly	<input type="checkbox"/>
Occupancy by families with disabilities	<input type="checkbox"/>
Occupancy by only elderly families and families with disabilities	<input type="checkbox"/>
3. Application status (select one)	
Approved; included in the PHA's Designation Plan	<input type="checkbox"/>
Submitted, pending approval	<input type="checkbox"/>
Planned application	<input type="checkbox"/>
4. Date this designation approved, <b>submitted</b> , or planned for submission:	
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: 100	
7. Coverage of action (select one)	
<input type="checkbox"/> Part of the development	
<input type="checkbox"/> Total development	

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

[24 CFR Part 903.7 9 (j)]

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

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

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

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

Conversion of Public Housing Activity Description	
1a. Development name:	
1b. Development (project) number:	

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

<p><b>B. Conversions pursuant to Section 22 of the U.S. Housing Act of 1937</b></p>
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<p><b>C. Reserved for Conversions pursuant to Section 33 of the U.S. Housing Act of 1937</b></p>
--

**11. Homeownership Programs Administered by the PHA**

[24 CFR Part 903.7 9 (k)]

**A. Public Housing**

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

1. ☐ Yes ☒ No: Does the PHA administer any homeownership programs administered by the PHA under an approved section 5(h) homeownership program (42 U.S.C. 1437c(h)), or an approved HOPE I program (42 U.S.C. 1437aaa) or has the PHA applied or plan to apply to administer any homeownership programs under

section 5(h), the HOPE I program, or section 32 of the U.S. Housing Act of 1937 (42 U.S.C. 1437z-4). (If “No”, skip to component 11B; if “yes”, complete one activity description for each applicable program/plan, unless eligible to complete a streamlined submission due to **small PHA** or **high performing PHA** status. PHAs completing streamlined submissions may skip to component 11B.)

2. Activity Description

- ☐ Yes ☐ No: Has the PHA provided all required activity description information for this component in the **optional** Public Housing Asset Management Table? (If “yes”, skip to component 12. If “No”, complete the Activity Description table below.)

<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.

**Program Description:** Homeownership Program targets working and eligible elderly families within PCHA’s existing Section 8 FSS program to minimize turnover. Participants must have a 3% minimum down payment of purchase price, (at least 1/3 of which is from the family’s personal resources). Financing must be provided, insured, or guaranteed by state, federal or other

agency that complies with secondary mortgage market underwriting requirements, or complies with generally accepted private underwriting standards.

**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

1. Participant in PCHA Family Self-Sufficiency Program for at least one year
2. A first-time homeowner and income eligible according to minimum federal wage standards

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

[24 CFR Part 903.7 9 (l)]

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

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

**1. Cooperative agreements:**

☒ Yes ☐ No: Has the PHA 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? 03/12/01

**1. 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

**B. Services and programs offered to residents and participants**

**(1) General**

a. Self-Sufficiency Policies

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

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

b. Economic and Social self-sufficiency programs

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

Services and Programs				
Program Name & Description (including location, if appropriate)	Estimated Size	Allocation Method (waiting list/random selection/specific criteria/other)	Access (development office / PHA main office / other provider name)	Eligibility (public housing or section 8 participants or both)
Neighborhood Senior Services (congregate dining at Lakeside Terrace)	80	needs based	development office	both
Head Start at French Villas and Rainbow Village	40	needs based	development office	both
YMCA youth programs and after school care at Rainbow Village.	100	needs based	development office	both
Limited Healthcare screening program (all complexes)	150	needs based	development office	both
Limited Case Management at Magnolia Gardens ALF and Lakeside Terrace	100	needs based	development office	public housing
Urban League economic uplift programs at Rainbow Village	75	needs basis	development office	public housing

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

a. Participation Description

Family Self Sufficiency (FSS) Participation
---

Program	Required Number of Participants (start of FY 2005 Estimate)	Actual Number of Participants (As of: 9/1/05)
Public Housing	Self-Cap of 50	3
Section 8	50	70

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

### C. Welfare Benefit Reductions

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

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

#### See Attachment E

### 13. PHA Safety and Crime Prevention Measures

[24 CFR Part 903.7 9 (m)]

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

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

1. Describe the need for measures to ensure the safety of public housing residents (select all that apply)
- ☒ High incidence of violent and/or drug-related crime in some or all of the PHA's developments
  - ☒ High incidence of violent and/or drug-related crime in the areas surrounding or adjacent to the PHA's developments
  - ☒ Residents fearful for their safety and/or the safety of their children



- ☐ Observed lower-level crime, vandalism and/or graffiti
- ☐ People on waiting list unwilling to move into one or more developments due to perceived and/or actual levels of violent and/or drug-related crime
- ☐ Other (describe below)

2. What information or data did the PHA used to determine the need for PHA actions to improve safety of residents (select all that apply).

- ☒ Safety and security survey of residents
- ☒ Analysis of crime statistics over time for crimes committed “in and around” public housing authority
- ☐ Analysis of cost trends over time for repair of vandalism and removal of graffiti
- ☒ Resident reports
- ☒ PHA employee reports
- ☒ Police reports
- ☐ Demonstrable, quantifiable success with previous or ongoing anticrime/anti drug programs
- ☒ Other (describe below)  
Town Hall Meetings

3. Which developments are most affected? Rainbow Village and French Villas

## **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:

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

2. Which developments are most affected? Rainbow Village and French Villas

## **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? French Villas and Rainbow Village

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

PHAs eligible for FY 2001 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? **PHDEP FUNDING DISCONTINUED FISCAL YEAR 2002**
- ☐ Yes ☒ No: Has the PHA included the PHDEP Plan for **ACTIVE PROGRAMS** in this PHA Plan?
- ☐ Yes ☒ No: This PHDEP Plan is an Attachment.

#### **14. RESERVED FOR PET POLICY** [24 CFR Part 903.7 9 (n)]

See Attachment F

#### **15. Civil Rights Certifications**

[24 CFR Part 903.7 9 (o)]

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

#### **16. Fiscal Audit**

[24 CFR Part 903.7 9 (p)]

- 1. ☒ Yes ☐ No: Is the PHA required to have an audit conducted under section 5(h)(2) of the U.S. Housing Act of 1937 (42 U.S.C. 1437c(h))?  
(If no, skip to component 17.)
- 2. ☒ Yes ☐ No: Was the most recent fiscal audit submitted to HUD?
- 3. ☒ Yes ☐ No: Were there any findings as the result of that audit?
- 4. ☒ Yes ☐ No: If there were any findings, do any remain unresolved?  
If yes, how many unresolved findings remain? \_6\_\_
- 5. ☒ Yes ☐ No: Have responses to any unresolved findings been submitted to HUD?  
If not, when are they due (state below)

#### **17. PHA Asset Management**

[24 CFR Part 903.7 9 (q)]

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

1. ☒ Yes ☐ No: Is the PHA engaging in any activities that will contribute to the long-term asset management of its public housing stock , including how the Agency will plan for long-term operating, capital investment, rehabilitation, modernization, disposition, and other needs that have **not** been addressed elsewhere in this PHA Plan?
  
2. What types of asset management activities will the PHA undertake? (select all that apply)
  - ☐ Not applicable
  - ☒ Private management
  - ☒ Development-based accounting
  - ☒ Comprehensive stock assessment
  - ☒ Other: (list below) – Mixed Financing
  
3. ☐ Yes ☒ No: Has the PHA included descriptions of asset management activities in the **optional** Public Housing Asset Management Table?

## **18. Other Information**

[24 CFR Part 903.7 9 (r)]

### **A. Resident Advisory Board Recommendations**

1. ☒ Yes ☐ No: Did the PHA receive any comments on the PHA Plan from the Resident Advisory Board/s?
  
2. If yes, the comments are: (if comments were received, the PHA **MUST** select one)
  - ☒ Attached at Attachment C
  - ☐ Provided below:
  
3. In what manner did the PHA address those comments? (select all that apply)
  - ☒ Considered comments, but determined that no changes to the PHA Plan were necessary.
  - ☐ The PHA changed portions of the PHA Plan in response to comments  
List changes below:
  - ☐ Other: (list below):

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

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

3. Description of Resident Election Process: All commissioners are appointed by the Governor of the State of Florida

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

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

b. Eligible candidates: (select one)

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

c. Eligible voters: (select all that apply)

- ☐ All adult recipients of PHA assistance (public housing and section 8 tenant-based assistance)
- ☐ Representatives of all PHA resident and assisted family organizations
- ☐ Other (list)

### **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: Pinellas County (Fla.)

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

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

4. The Consolidated Plan of the jurisdiction supports the PHA Plan with the following actions and commitments: (describe below): None

#### **D. Other Information Required by HUD**

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

#### **Attachments**

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

# ATTACHMENT A

## Admissions Policy for Deconcentration

### RESOLUTION NO. PH-99-485

WHEREAS, the new Quality Housing and Work Responsibility Act (QHWRA) of 1998 requires a LHA to submit an admissions policy with a de-concentration reduction strategy designed to provide for de-concentration of poverty and income mixing by bringing higher income tenants into lower-income projects and visa versa.

WHEREAS, the QHWRA states that this de-concentration strategy should not be construed to impose or require any specific income or racial quotas for any project or projects.

WHEREAS, the QHWRA requires that at least 40% of the PCHA's dwelling units be made available in a given fiscal year to families whose incomes do not exceed 30% of the AMI.

WHEREAS, the targeting requirements apply to new admissions only.

WHEREAS, QHWRA states that the PCHA may offer "incentives" to encourage eligible higher income families to occupy dwelling units in development predominantly occupied by eligible very low income families and visa versa.

WHEREAS, the QHWRA requirements for income targeting also applies to the Section 8 program.

NOW, THEREFORE, be it resolved that the Board of Commissioners of the Pinellas County Housing Authority here formally directs the Pinellas County Housing Authority administration to implement the above and attached strategies.

**ADOPTED 6/16/99 by PCHA BOARD OF COMMISSIONERS**

## **ATTACHMENT B**

### **Annual Statement/Performance and Evaluation Report**

### **Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I:**

#### **Summary**

<b>PHA Name:</b> Pinellas County Housing Authority	<b>Grant Type and Number</b> Capital Fund Program Grant No: FL14P062501-06 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	179,619			
3	1408 Management Improvements				
4	1410 Administration	89,810			
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	20,000			
8	1440 Site Acquisition				
9	1450 Site Improvement	75,000			
10	1460 Dwelling Structures	523,000			
11	1465.1 Dwelling Equipment—Nonexpendable	6,500			
12	1470 Nondwelling Structures				
13	1475 Nondwelling Equipment	4,167			
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1499 Development Activities				
19	1501 Collateralization or Debt Service				
20	1502 Contingency				
21	Amount of Annual Grant: (sum of lines 2 – 20)	898,096			
22	Amount of line 21 Related to LBP Activities				
23	Amount of line 21 Related to Section 504 compliance	\$4000			
24	Amount of line 21 Related to Security – Soft Costs				
25	Amount of Line 21 Related to Security – Hard Costs				
26	Amount of line 21 Related to Energy Conservation Measures				

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

PHA Name: Pinellas County Housing Authority		Grant Type and Number Capital Fund Program Grant No: FL14P062501-06 Replacement Housing Factor Grant No:				Federal FY of Grant: 2005		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
PCHA - Wide	Operations	1406	1	179,619				
	Computer software/Training	1408	1	0				
	Salary – Executive Director, Finance Director, Capital Funds Coordinator, Accountant	1410	4	66,450				
	Benefits - Executive Director, Finance Director, Capital Funds Coordinator, Accountant	1410	4	23,360				
	Architectural/Engineering Fees	1430		20,000				
	Computer Hardware	1475		4,167				
	Vehicle	1475		0				
Magnolia Gardens ALF	Generator	1450		0				
Rainbow Village (FL62.2)	Landscape & Site Improvements	1450		0				
	ADA Modifications	1460		1,500				
	Water Heaters	1460		0				
	Electrical Upgrades	1460		0				
	Interior Rehabs	1460		2,500				
	Appliances	1465		6,500				



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

PHA Name: Pinellas County Housing Authority		Grant Type and Number Capital Fund Program Grant No: FL14P062501-06 Replacement Housing Factor Grant No:				Federal FY of Grant: 2005		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
Lakeside Terrace	Street Paving	1450		75,000				
(FL62.4)	Bathroom	1460						
	ADA Modifications	1460		2,500				
	Fire/Smoke Alarm Upgrades	1460		140,000				
French Villas	Water Line Upgrades	1450						
(FL62.9)	Replace Sewer Lines	1450						
	Fire/Smoke Alarm Upgrades	1460		330,000				
	Electrical Upgrades	1460		53,000				

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

PHA Name: Pinellas County Housing Authority			Grant Type and Number Capital Fund Program No: : FL14P062501-06 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	
FL062-9	8/07			8/09			
FL062-2	8/07			8/09			
FL062-4	8/07			8/09			
FL062-010	8/07			8/09			
PCHA-Wide	8/07			8/09			

# ATTACHMENT C

## Pinellas County Housing Authority Inter-office Memo

**Date:** September 15, 2005  
**To:** Darrell Irions, Executive Director  
**From:** Doug Zimmer, Interim Director of Housing Management  
**CC:** Robin Adams, Director of General Services  
**Subj:** Resident Advisory Board Meeting

On Wednesday, 14 September 2005, the Pinellas County Housing Authority – Resident Advisory Board met to discuss proposed changes to the PCHA Agency Annual 5 year plan, Fiscal Year 2006.

Board members in attendance:

Judy Briggs – Palm Lake Village  
Shirley Hurd – French Villas

Residents in attendance:

Todd Reimal – Rainbow Village  
Al Renaldi – Rainbow Village

Topics covered during this meeting included but were not limited too:

Economies of Scale Program Updates  
Capital Fund Program Updates

PCHA Mission Statement  
PCHA Executive Summary

### **Resident Concerns and Comments:**

Palm Lake Village –  
Recreation Center Renovations – Bathrooms, Kitchen  
55 yr old age restrictions – younger community, no participation

Rainbow Village –  
Security System/Cameras in Laundry rooms  
Community Policing/Security  
Lighting – residents were informed of the upcoming improvements

French Villas –  
Community Police – Drug arrests  
Lighting – playground area, illicit activities occurring after hours  
Community Room – Improvements, i.e stove, etc.

Meeting was adjourned at 10:45.

# ATTACHMENT D

## Capital Fund Program Five-Year Action Plan (FFY 2006 – 2010)

### Part I: Summary

PHA Name: Pinellas County Housing Authority				Original 5-Year Plan <input type="checkbox"/> Revision No:	
Development Number/Name/HA- Wide	Year 1	Work Statement for Year 2 FFY Grant: FL14P06250106 PHA FY: 2007	Work Statement for Year 3 FFY Grant: FL14P06250107 PHA FY: 2008	Work Statement for Year 4 FFY Grant: FL14P06250108 PHA FY: 2009	Work Statement for Year 5 FFY Grant: FL14P06250109 PHA FY: 2010
	Annual Statement				
F162.010 Magnolia Gardens ALF		\$60,000	\$10,000	\$10,000	\$15,000
F162.2/Rainbow Village		\$291,225	\$344,379	\$278,826	\$238,000
F162.4/Lakeside Terrace		\$154,743	\$116,589	\$179,803	\$156,000
F162.0/French Villas		\$98,532	\$133,532	\$169,427	\$195,500
HA-wide		\$293,596	\$293,596	\$260,040	\$293,596
CFP Funds Listed for 5-year planning	\$898,096	\$898,096	\$898,096	\$898,096	\$898,096
Replacement Housing Factor Funds					

# Capital Fund Program Five-Year Action Plan (FFY 2006 –2010)

## Part II: Supporting Pages—Work Activities

Activities for Year 1	Activities for Year : <u>2</u> FFY Grant: <u>2007</u> PHA FY: <u>2007</u>			Activities for Year: <u>2</u> FFY Grant: <u>2007 (cont.)</u> PHA FY: <u>2007 (cont.)</u>		
	Development Name/Number	Major Work Categories	Estimated Cost	Development Name/Number	Major Work Categories	Estimated Cost
See	F162.010/Magnolia Gardens ALF	Storm Shutters	60,000	PA - Wide	Operations	179,619
Annual	<b>Subtotal</b>		<b>\$60,000</b>		Salaries & Benefits	89,810
	F162.2/Rainbow Village	Electrical Upgrades	76,225			
		HVAC Upgrades	15,000			
		Interior Renovations	100,000		A/E Service Fees	20,000
		Site Improvements	100,000		Computer Hardware	4,167
	<b>Subtotal</b>		<b>\$291,225</b>			
	F162.4/Lakeside Terrace	Windows	75,000	<b>Subtotal</b>		<b>\$293,596</b>
		Bathroom	29,743			
		Site Improvements	40,000			
		Appliances	10,000			
	<b>Subtotal</b>		<b>\$154,743</b>			
	F162.9/French Villas	Water line upgrades	20,000			
		Electrical Upgrades	68,532			
		Signage	10,000			
	<b>Subtotal</b>		<b>\$98,532</b>			
<b>Total CFP Estimated Cost</b>			<b>\$604,500</b>			<b>\$293,596</b>

## Capital Fund Program Five-Year Action Plan (FFY 2006 –2010)

### Part II: Supporting Pages—Work Activities

Activities for Year 1	Activities for Year : <u>3</u> FFY Grant: <u>2008</u> PHA FY: <u>2008</u>			Activities for Year: <u>3</u> FFY Grant: <u>2008 (cont.)</u> PHA FY: <u>2008 (cont.)</u>		
	Development Name/Number	Major Work Categories	Estimated Cost	Development Name/Number	Major Work Categories	Estimated Cost
See	F162.010/Magnolia Gardens ALF	Site Improvements	10,000	FL62.9/French Villas	Interior Renovations	123,532
Annual						
Statement	<b>Subtotal</b>		<b>\$10,000</b>		Appliances	10,000
				<b>Subtotal</b>		<b>\$133,532</b>
	F162.2/Rainbow Village	Site Improvements	121,925			
		Interior Renovations	100,000	HA-Wide	Operations	\$78,339
		HVAC Upgrades	112,454			
		Water Heaters/Appliances	10,000		Salaries & Benefits	129,814
	<b>Subtotal</b>		<b>\$344,379</b>		Travel & Training	10,443
					Vehicles	20,000
	FL62.4/Lakeside Terr	ADA Modifications	5,000		A/E Service Fees	30,000
		Bathrooms	45,000		Computer Hardware	25,000
		Appliances/Water Heaters	10,000			
		Landscaping	56,589			
				<b>Subtotal</b>		<b>\$293,596</b>
	<b>Subtotal</b>		<b>\$116,589</b>			
<b>Total CFP Estimated Cost</b>			<b>\$470,968</b>			<b>\$427,128</b>

## Capital Fund Program Five-Year Action Plan (FFY 2006 –2010)

### Part II: Supporting Pages—Work Activities

Activities for Year 1	Activities for Year : <u>4</u> FFY Grant: <u>2009</u> PHA FY: <u>2009</u>			Activities for Year: <u>4</u> FFY Grant: <u>2009 (cont.)</u> PHA FY: <u>2009(cont.)</u>		
	Development Name/Number	Major Work Categories	Estimated Cost	Development Name/Number	Major Work Categories	Estimated Cost
See	FL62.010/Magnolia Gardens ALF	Site Improvements	10,000			
Annual				F162.9/French Villas	HVAC	40,000
Statement	<b>Subtotal</b>		<b>\$10,000</b>		Electrical Upgrades	119,427
					Appliances	10,000
	FL/62.2 Rainbow Village	Exterior Improvements	143,975	<b>Subtotal</b>		<b>\$169,427</b>
		Interior Renovations	100,000			
				HA-Wide	Operations	93,736
		Appliances/ Water heaters	10,000		Salaries & Benefits	136,304
		Vehicle -van	24,851			
	<b>Subtotal</b>		<b>\$278,826</b>			
					Vehicle	10,000
	FL62.4/Lakeside Terr	Satellite Laundry	179,803		A/E Service Fees	20,000
	<b>Subtotal</b>		<b>\$179,803</b>			
				<b>Subtotal</b>		<b>\$260,040</b>
<b>Total CFP Estimated Cost</b>			<b>\$468,629</b>			<b>\$429,467</b>



## Capital Fund Program Five-Year Action Plan (FFY 2006 –2010)

### Part II: Supporting Pages—Work Activities

Activities for Year 1	Activities for Year : <u>5</u> FFY Grant: <u>2010</u> PHA FY: <u>2010</u>			Activities for Year: <u>5</u> FFY Grant: <u>2010 cont.)</u> PHA FY: <u>2010 cont.)</u>		
	Development Name/Number	Major Work Categories	Estimated Cost	Development Name/Number	Major Work Categories	Estimated Cost
See	FL010/Magnolia Gardens ALF	Appliances	15,000	HA - wide	Operations	94,928
Annual					Administration/Office Supplies	5,000
	<b>Subtotal</b>		<b>\$15,000</b>		Computer Software	51,323
	FL62.2/Rainbow Village	Gutters & downspouts	116,611		Travel & Training	5,000
		Interior Rehabs	103,389		CFP Staff Salaries & Benefits	77,345
		Water heaters	3,000		A/E Service Fees	30,000
		Appliances	15,000			
	<b>Subtotal</b>		<b>\$238,000</b>		Vehicle	30,000
	FL62.4/Lakeside Terr	Satellite Laundry	100,000	<b>Subtotal</b>		<b>\$293,596</b>
		Bathroom Cabinets	54,000			
		Appliances	2,000			
	<b>Subtotal</b>		<b>\$156,000</b>			
	FL62.9/French Villas	Windows	187,000			
		Appliances	5,000			
		ADA Modifications	1,500			
	<b>Subtotal</b>		<b>\$193,500</b>			
<b>Total CFP Estimated Cost</b>			<b>\$602,500</b>			<b>\$293,596</b>

## **ATTACHMENT E**

### **PCHA COMMUNITY SERVICE/ SELF SUFFICIENCY POLICY**

#### **A. Background**

The Quality Housing and Work Responsibility Act of 1998 requires that all non-exempt (see definitions) public housing adult residents (18 or older) contribute eight (8) hours per month of community service (volunteer work) or participate in eight (8) hours of training, counseling, classes or other activities that help an individual toward self sufficiency and economic independence. This is a requirement of the Public Housing Lease.

#### **B. Definitions**

Community Service - volunteer work which includes, but is not limited to:

- Work at a local school, hospital, recreation center, senior center or child care center
- Work with youth or senior organizations
- Work at the Authority to help improve physical conditions
- Work at the Authority to help with children's programs
- Work at the Authority to help with senior programs
- Helping neighborhood groups with special projects
- Working through resident organization to help other residents with problems
- Caring for the children of other residents so they may volunteer

NOTE: Political activity is excluded.

Self Sufficiency Activities – activities that include, but are not limited to:

- Job training programs
- GED classes
- Substance abuse or mental health counseling
- English proficiency or literacy (reading) classes
- Budgeting and credit counseling
- Any kind of class that helps a person toward economic independence
- Full time student status at any school, college or vocational school

Exempt Adult – an adult member of the family who

- Is a 62 years of age or older
- Has a disability that prevents him/her from being gainfully employed
- Is the caretaker of a disabled person
- Is working at least 20 hours per week
- Is participating in a welfare to work program

- Is receiving assistance from TANF and is in compliance with job training and work activities requirements of the program.
- Is a full time student

**C. Requirements of the Program**

1. The eight (8) hours per month may be either volunteer work or self sufficiency program activity or a combination of the two.
2. As least eight (8) hours of activity must be performed each month. An individual may not skip a month and then double up the following month, unless special circumstances warrant special consideration. The Authority will make the determination of whether to allow or disallow a deviation from the schedule.
3. Activities must be Performed within the community and not outside the jurisdictional area of the Authority.
4. Family obligations
  - At lease execution or re-examination after February 1, 2000, all adult members (18 or older) of a public housing resident family must
    - 1 provide documentation that they are exempt from Community Service requirement if they qualify for an exemption, and
    - 2 sign a certification that they have received and read this policy and understand that if they are not exempt, failure to comply with the Community Service requirement will result in nonrenewal of their lease.
  - At each annual re-examination, non-exempt family members must present a completed documentation form (to be provided by the Authority) of activities performed over the previous twelve (12) months. This form will include places for signatures of supervisors, instructors, or counselors certifying to the number of hours contributed.
  - If a family member is found to be noncompliant at re-examination, he/she and the Head of Household will sign an agreement with the Authority to make up the deficient hours over the next twelve (12) month period.
5. Change in exempt status:
  - If, during the twelve (12) month period, a non-exempt person becomes exempt, it is his/her responsibly to report this to the Authority and provide documentation of such.
  - If, during the twelve (12) month period, an exempt person becomes non-exempt, it is his/her responsibility to report this to the Authority. The Authority will provide the person with the Recording/Certification documentation form and a list of agencies in the community that provide volunteer and/or training opportunities.

**D. Authority obligations**

1. To the greatest extent possible and practicable, the Authority will

**PCHA Community Services Policy, Page 2**

- provide names and contacts at agencies that can provide opportunities for residents, including disabled, to fulfill their Community Service obligations. *(According to the Quality Housing and Work Responsibility Act, a disabled person who is otherwise able to be gainfully employed is not necessarily exempt from the Community Service requirement)*
  - provide in-house opportunities for volunteer work or self sufficiency programs.
2. The Authority will provide the family with exemption verification forms and Recording/Certification documentation forms and a copy of this policy at initial application and at lease execution
  3. The Authority will make the final determination as to whether or not a family member is exempt from the Community Service requirement. Residents may use the Authority's Grievance Procedure if they disagree with the Authority's determination.
  4. Noncompliance of family member
    - At least thirty (30) days prior to annual re-examination and/or lease expiration, the Authority will begin reviewing the exempt or non-exempt status and compliance of family members.
    - If the Authority finds a family member to be noncompliant, the Authority will enter into an agreement with the noncompliant member and the Head of Household to make up the deficient hours over the next twelve (12) month period.
    - If, at the next annual re-examination, the family member still is not compliant, the lease will not be renewed and the entire family will have to vacate, unless the noncompliant member agrees to move out of the unit.
    - The family may use the Authority's Grievance Procedure to protest the lease termination.

**Appendix 1**

**Community Service Exemption Certification**

**I certify that I am eligible for an exemption from the Community Service requirement for the Following reason:**

- ( ) I am 62 or older**
- ( ) I have a disability which prevents me from working**  
*(Certification of Disability Form will serve as documentation)*
- ( ) I am working**  
*(Employment Verification form will serve as documentation)*
- ( ) I am participating in a Welfare to Work Program**  
*(Must provide verification letter from agency)*
- ( ) I am receiving TANF and am participating in a required economic self sufficiency program or work activity**  
*(Must provide verification from the funding agency that you are complying with job training or work requirements)*
- ( ) I am a full time student**  
*(Must Provide verification letter from school attended)*

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**Resident**

---

**Date**

## Community Service Compliance Certification

**I/ We have received a copy of, have read and understand the contents of the Authority's Community Service/Self Sufficiency Policy.**

**I/We understand that this is a requirement of the Quality Housing and Work Responsibility Act of 1998 and that if we do not comply with this requirement, our lease will not be renewed.**

**Resident \_\_\_\_\_ Date \_\_\_\_\_**

**Resident \_\_\_\_\_ Date \_\_\_\_\_**

**Resident \_\_\_\_\_ Date \_\_\_\_\_**



**ATTACHMENT F**  
**Pinellas County Housing Authority**  
**PET OWNERSHIP POLICY**

**A. PET RULES**

The following rules shall apply for the keeping of pets by Residents living in the units operated by the Housing Authority. These rules do not apply to service or companion animals verified to be needed by a person with a documented disability.

- 1 Common household pets as authorized by this policy means the following domesticated animal: cats, dogs, fish, birds and turtles, that are traditionally kept in the home for pleasure rather than for commercial purposes.**
- 2 Each resident family will be allowed to house only one (1) dog or cat, one cage of up to three birds, or one ten gallon fish tank at any time. Visiting guests with pets will not be allowed.**
- 3 Each resident family shall register their pet with the Authority BEFORE it is brought onto the Authority premises, and will update the registration annually. The registration will include: (Appendix 1)**
  - Information sufficient to identify the pet and to demonstrate that it is a common household pet, including a picture;**
  - A certificate signed by a licensed veterinarian or a State or Local Authority empowered to inoculate animals, stating that the pet has received all inoculations required by applicable State and Local Law;**
  - The name, address, and telephone number of one or more responsible parties who will care for the pet if the pet owner dies, is incapacitated, or is otherwise unable to care for the pet.**
  - The registration will be updated annually at the annual re-examination of the Residents' income.**
  - A statement, signed by the resident, indicating that the pet owner has read the pet rules and agrees to comply with them; (Appendix 2)**
  - The Authority may refuse to register a pet if:**
    - 1) The pet is not a common household pet;**
    - 2) The keeping of the pet would violate any applicable house pet rule;**
    - 3) The pet owner fails to provide complete pet registration information**
    - 4) The pet owner fails annually to update the pet registration;**
    - 5) The Authority reasonably determines, based on the pet owners; habits and practices and/or the pet's temperament, that the pet owner will be unable to keep the pet in compliance with the pet rules and other legal obligations;**
    - 6) Financial ability to care for the pet will not be a reason for the Authority to refuse to register a pet.**



- **The Authority will notify the pet owner if the Authority refuses to register a pet. The notice will:**
  - 1) **State the reasons for refusing to register the pet;**
  - 2) **Be served on the pet owner in accordance with the procedure outlined in paragraph B.1 of this policy; and**
  - 3) **Be combined with a notice of a pet rule violation if appropriate.**
- 4. **Cats and dogs shall be limited to small breeds, where total adult weight shall not exceed twenty (20) pounds and total adult height at the shoulder shall not exceed twelve (12) inches. The size limitations do not apply to service animals.**
- 5. **All cat and dog pets shall be neutered or spayed, and verified by veterinarian, cost to be paid by the owner. Pet owners will be required to present a certificate of health from their veterinarian verifying all required annual vaccines, initially and at re-examination.**
- 6. **A non-refundable pet fee of \$25.00 shall be charged and a refundable pet security deposit of \$50.00 for the pet owner's unit shall be made to the Housing Authority. Such deposit will be a one-time deposit (per pet) and shall be used to help cover cost of damages to the unit caused by the pet. No security deposit interest will be paid upon refund if the resident is eligible for any refund return.**
- 7. **Pet shall be quartered in the Resident's unit.**
- 8. **Dogs and cats shall be kept on a leash and controlled by a responsible individual when taken outside.**
- 9. **No dog houses will be allowed on the premises.**
- 10. **Pets (dogs and cats), shall be allowed to run only on the owner's lawn or the development's designated pet area and owners shall clean up after pet after each time the animal eliminates.**
- 11. **All City/County Ordinances concerning pets will be complied with.**
- 12. **Pets shall be removed from the premises when their conduct or condition is duly determined to constitute a nuisance or a threat to the health and safety of the pet owner or other occupants of the Authority in accordance with paragraph B.3 below.**
- 13. **Birds must be kept in regular bird cages and not allowed to fly throughout the unit.**
- 15. **Dishes or containers for food and water will be located in the owner's apartment. Food and /or table scraps, will not be deposited anywhere outdoors, including the owner's yard.**
- 16. **Residents will not feed or water stray animals or wild animals.**
- 17. **Pets will not be allowed on specified common areas (playgrounds, under clotheslines, social rooms, office, maintenance space, etc.).**
- 18. **Each resident family will be responsible for the noise or odor caused by their pet. Obnoxious odors can cause health problems and will not be tolerated.**

**B.    Pet Violation Procedure**

1. **NOTICE OF PET RULE VIOLATION (Appendix 3):** When the Authority determines on the basis of objective facts supported by written statements, that a pet owner has violated one or more of these rules governing the owning or keeping of pets, the Authority will:
  - Serve a notice of the pet rule violation on the owner by sending a letter by first class mail, properly stamped and addressed to the Resident at the leased dwelling unit, with a proper return address, or
  - serve a copy of the notice on any adult answering the door at the Residents' leased dwelling unit, or if no adult responds, by placing the notice under or through the door, if possible, or else by attaching the notice to the door;
2. The notice of pet rule violation must contain a brief statement of the factual basis for the determination and the pet rule or rules alleged to be violated;
3. The notice must state that the pet owner has ten (10) working days from the effective date of service of notice to correct the violation (including, in appropriate circumstances, removal of the pet) or to make a written request for a meeting to discuss the violation, (the effective date of service is that day that the notice is delivered or mailed, or in the case of service by posting, on the day that the notice was initially posted);
4. The notice must state that the pet owner is entitled to be accompanied by another person on his or her choice at the meeting;
5. The notice must state that the pet owners' failure to correct the violation, to request a meeting, or to appear at a requested meeting may result in initiation of procedures to terminate the pet owners' lease.
6. **PET RULE VIOLATIONS MEETING:** If the pet owner makes a timely request for a meeting to discuss an alleged pet rule violation, the Authority shall establish a mutually agreeable time and place for the meeting to be held within fifteen (15) working days from the effective date of request for pet rule violation meeting (unless the Authority agrees to a later date).
  - The Authority and the pet owner shall discuss any alleged pet rule violation and attempt to correct it and reach an understanding acceptable to both parties.
  - The Authority may, as a result of the meeting, give the pet owner additional time to correct the violation.
  - Whatever decision or agreements, if any, are made will be reduced to writing, signed by both parties, with one copy for the pet owner and one copy placed in the Authority's Resident file.

7. **NOTICE OF PET REMOVAL:** If the pet owner and the Authority are unable to resolve the pet rule violation at the pet rule violation meeting, or if the Authority determines that the pet owner has failed to correct the pet rule violation within any additional time provided for this purpose under paragraph 6 above (or at the meeting, if appropriate), the Authority will send the pet owner a notice requiring the pet owner to remove the pet. This notice must:
  - Contain a brief statement of the factual basis for the determination and the pet rule or rules that have been violated;
  - State that the pet owner must remove the pet within (10) days of the effective date of service of notice or pet removal (or the meeting, if the notice is served at the meeting);
  - State the failure to remove the pet may result in initiation of procedures to terminate the pet owners' residency.
8. **INITIATION OF PROCEDURE TO TERMINATE PET OWNERS RESIDENCY:** The Authority will not initiate procedure to terminate a pet owners' residency based on a pet rule violation unless:
  - The pet owner has failed to remove the pet or correct the pet rule violation within the applicable time period specified in paragraph 3b above;
  - The pet rule violation is sufficient to begin procedures to terminate the pet owner's residency under the terms of the lease and application regulations,
  - Provisions of Resident's Lease, Section XIV: Termination of Lease will apply in all cases

**C. Protection of the Pet**

1. If the health or safety of a pet is threatened by the death or incapacity of the pet owner, or by other factors that render the pet owner unable to care for the pet, the Authority may:
  - Contact the responsible party or parties listed in the registration form and ask that they assume responsibility for the pet;
  - If the responsible party or parties are unwilling or unable to care for the pet, the Authority may contact the appropriate State or Local Animal Control Authority or Humane Society (or designated agent of such Authority) and request the removal of the pet;
  - If the Authority is unable to contact the responsible parties despite reasonable efforts, action as outlined in 1 b above will be followed; and
  - If none of the above actions produce results, the Authority may enter the pet owner's unit, remove the pet, and place the pet in a facility that will provide care and shelter until the pet owner or a representative of the pet owner is able to assume responsibility for the pet, but no longer than thirty (30) days. The cost of the animal care facility provided under this section shall be borne by the pet owner.

**D. NUISANCE OR THREAT TO HEALTH OR SAFETY**

**Nothing in this policy prohibits the Authority or the Appropriate City/County Authority from requiring the removal of any pet from the Authority property. If the pet's conduct or condition is duly determined to constitute, under the provisions of State or Local Law, a nuisance or threat to the health or safety or other occupants of the Authority property or of other persons in the community where the project is located.**

**E. APPLICATION OF RULES**

- 1 Pet owners will be responsible and liable for any and all bodily harm to other residents or individuals. Destruction of personal property belonging to others caused by owner's pet will be the moral and financial obligation of the pet owner.**
- 2 All pet rules apply to resident and/or resident's guests.**
- 3 All pet owners who have a pet lease and required pet deposit prior to the implementation of this new policy will be "grandfathered" in under the old policy. Those who have birds or fish will not be required to pay a deposit or fee prior to the effective date of this policy. All eligible and approved pets under this policy and entering after the effective date of this policy shall pay a non-refundable pet fee of \$25.00 and a required \$50.00 refundable pet deposit which will apply to dogs, cats, fish, turtles and birds.**

**PCHA Pet Policy, Page 5**  
**Appendix I**

**Pet Agreement**

1. Management considers the keeping of pets a serious responsibility and a risk to each resident in the apartment. If you do not properly control and care for a pet, you will be liable if it causes any damages or disturbs other residents.
2. Conditional Authorization for Pet. You may keep the pet that is described below in the apartment until Dwelling Lease is terminated. Management may terminate this authorization sooner if your right of occupancy is lawfully terminated or if you or your pet, your guests or any member of your household violate any of the rules contained in the Authority's pet Policy or this Agreement.
3. Non-refundable Pet Fee. A one-time non-refundable pet fee of \$25.00 shall be charged prior to the addition of the pet.
4. Pet Security Deposit. The Pet Security Deposit will be \$50.00 for your current pet. The Pet Security is a one-time, refundable deposit less any damages. No Security Deposit interest will be accrued.
  - If, at any time in the future, this pet is replaced by another animal, another one-time security deposit will be charged for that animal.
  - This deposit will be used to pay reasonable expenses directly attributable to the presence of the pet in the complex, including but not limited to, the cost of repairs and replacement to, and fumigation of, the apartment.
4. Liability Not Limited. The deposit under this Pet Agreement does not limit resident's liability for property damages, cleaning, deodorization, defleaing, replacements, or personal injuries.
5. Description of Pet. You may keep only one pet as described below. The pet may not exceed twelve (12) inches in height at the shoulder and twenty (20) pounds in adult weight. You may not substitute other pets for this one without amending this agreement.

Pet's Name \_\_\_\_\_ -Type\_\_\_\_\_

Breed \_\_\_\_\_ Color \_\_\_\_\_ Weight \_\_\_\_\_ Age \_\_\_\_\_

Housebroken? \_\_\_\_\_ City of License \_\_\_\_\_ License No. \_\_\_\_\_

Date of last Rabies shot \_\_\_\_\_

Names, address and phone number of person able to care for pet in case of resident's permanent or temporary inability to care for animals

Name \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_

**APPENDIX 2**

**Pet Policy Certification**

**Attach photo of Pet here**



**By** \_\_\_\_\_

**Title** \_\_\_\_\_

**Pinellas County Housing Authority**

**Resident** \_\_\_\_\_

**Resident** \_\_\_\_\_

**Resident** \_\_\_\_\_

**I have read, fully understand and will abide by the rules and regulations contained in the Housing Authority Pet Policy and in this Pet Agreement.**

**PCHA Pet Policy, Page 7  
Appendix 3**

**Pet Policy Rules Violation Notice**

**DATE:** \_\_\_\_\_

**TIME: (IF DELIVERED)** \_\_\_\_\_ **A.M./P.M.**

**TO:** \_\_\_\_\_

**NAME OF RESIDENT:** \_\_\_\_\_

**STREET ADDRESS;** \_\_\_\_\_

**CITY, STATE, ZIP CODE** \_\_\_\_\_

**PET NAME OR TYPE** \_\_\_\_\_

**This notice hereby informs you of the following pet rule violation:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Factual Basis for Determination of Violation:** \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**As pet owner you have ten (10) calendar days from the date shown on this notice (date Notice delivered or mailed) in which to correct the violation or make a written request for a meeting to discuss the violation.**

**As pet owner you are entitled to be accompanied by another person of your choice at the meeting.**

**Failure to correct the violation, to request a meeting, or to appear at the requested meeting may result in initiation of procedures to terminate your tenancy.**

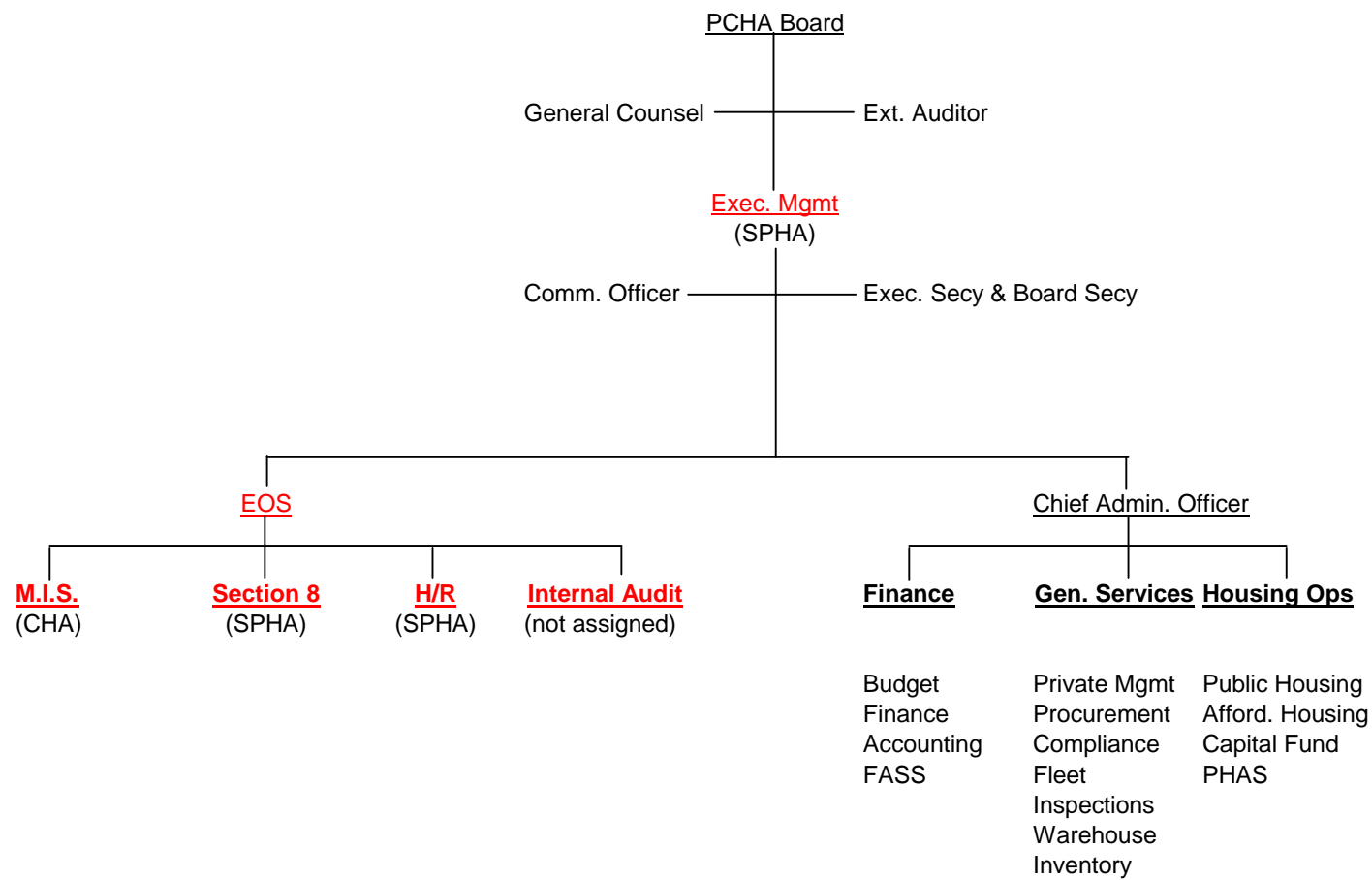
\_\_\_\_\_  
**Housing Manager**





# PCHA INTERIM ORGANIZATIONAL CHART

Sep-05



Red Highlights = Economies of Scale Initiatives