

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

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# PHA Plans

5 Year Plan for Fiscal Years 2000 - 2004

Annual Plan for Fiscal Year 2000

**NOTE: THIS PHA PLANS TEMPLATE (HUD 50075) IS TO BE COMPLETED IN ACCORDANCE WITH  
INSTRUCTIONS LOCATED IN APPLICABLE PIH NOTICES**

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HUD 50075  
OMB Approval No: 2577-0226  
Expires: 03/31/2002

**PHA Plan  
Agency Identification**

**PHA Name:** Manchester Housing and Redevelopment Authority

**PHA Number:** NH36 POO1

**PHA Fiscal Year Beginning:** October 2000

**Public Access to Information**

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

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

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

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

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

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

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



**5-YEAR PLAN**  
**PHA FISCAL YEARS 2000 - 2004**  
[24 CFR Part 903.5]

**A. Mission**

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

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

The mission of the Manchester Housing and Redevelopment Authority is to provide and maintain decent, safe, sanitary and affordable housing in a suitable living environment for families and individuals of low income and to eliminate blight, promote economic development, foster creation of employment opportunities and increase the tax base.

**B. Goals**

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

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

- PHA Goal: Expand the supply of assisted housing  
Objectives:
- Apply for additional rental vouchers:
  - Reduce public housing vacancies:
  - Leverage private or other public funds to create additional housing opportunities:
  - Acquire or build units or developments
  - Other (list below)
- PHA Goal: Improve the quality of assisted housing  
Objectives:
- Improve public housing management: (PHAS score)

- Improve voucher management: (SEMAP score)
- Increase customer satisfaction:
- Concentrate on efforts to improve specific management functions:  
(list; e.g., public housing finance; voucher unit inspections)
- Renovate or modernize public housing units:
- Demolish or dispose of obsolete public housing:
- Provide replacement public housing:
- Provide replacement vouchers:
- Other: (list below)

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

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

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

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

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

**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, sexual orientation 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, sexual orientation and disability:
  - Undertake affirmative measures to ensure accessible housing to persons with all varieties of disabilities regardless of unit size required:
  - Other: (list below)

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

**Annual PHA Plan**  
**PHA Fiscal Year 2000**

[24 CFR Part 903.7]

**i. Annual Plan Type:**

Select which type of Annual Plan the PHA will submit.

**Standard Plan**

**Streamlined Plan:**

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

**Troubled Agency Plan**

**ii. Executive Summary of the Annual PHA Plan**

[24 CFR Part 903.7 9 (r)]

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

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**EXECUTIVE SUMMARY**

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

We have adopted the following mission statement to guide the activities of the Authority.

The mission of the Manchester Housing and Redevelopment Authority is to provide and maintain decent, safe, sanitary and affordable housing in a suitable living environment for families and individuals of low income and to eliminate blight, promote economic development, foster creation of employment opportunities and increase the tax base.

We have also adopted the following goals for the next five years.

- ~ Expand the supply of assisted housing
- ~ Improve the quality of assisted housing
- ~ Increase assisted housing choices
- ~ Provide an improved living environment
- ~ Promote self-sufficiency and asset development of families and individuals
- ~ Ensure equal opportunity and affirmatively further fair housing

Our Annual Plan is based on the premise that if we accomplish our goals and objectives we will be working towards the achievement of our mission.

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Manchester Housing and Redevelopment Authority  
FY 2000 Annual Plan Page 1

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OMB Approval No: 2577-0226  
Expires: 03/31/2002

The plans, statements, budget summary, policies, etc. set forth in the Annual Plan all lead towards the accomplishment of our goals. Taken as a whole, they outline a comprehensive approach towards our goals and are consistent with the Consolidated Plan. Here are just a few highlights of our Annual Plan:

- Implementation of a public housing homeownership program
- Deconcentration policy

In summary, we are on course to improve the condition of affordable housing in Manchester.

### **iii. Annual Plan Table of Contents**

[24 CFR Part 903.79 (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 (nh001a01)
- FY 2000 Capital Fund Program Annual Statement (See Component 7 – Capital Improvement Needs, Page 29)
- 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 2000 Capital Fund Program 5 Year Action Plan (See Component 7 – Capital Improvement Needs, Page 33)
- Public Housing Drug Elimination Program (PHDEP) Plan FY 2000 (nh001b01)
- Comments of Resident Advisory Board or Boards (must be attached if not included in PHA Plan text) (nh001d01)
- Other (List below, providing each attachment name)
  - Comments from Public Hearing (nh001c01)
  - Pet Policy (nh001e01)

**Supporting Documents Available for Review**

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

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

| <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                                                        | Most recent board-approved operating budget for the public housing program                                                                                                                                                                                                                                                                                                                                              | Annual Plan: Financial Resources;                            |
| X                                                        | Public Housing Admissions and (Continued) Occupancy Policy (A&O), which includes the Tenant Selection and Assignment Plan [TSAP]                                                                                                                                                                                                                                                                                        | Annual Plan: Eligibility, Selection, and Admissions Policies |
| X                                                        | Section 8 Administrative Plan                                                                                                                                                                                                                                                                                                                                                                                           | Annual Plan: Eligibility, Selection, and Admissions Policies |
| X                                                        | Public Housing Deconcentration and Income Mixing Documentation:<br>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<br>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<br><input checked="" type="checkbox"/> check here if included in the public housing A & O Policy                                                                                                                                                                                                            | Annual Plan: Rent Determination                              |
| N/A                                                      | Schedule of flat rents offered at each public housing development<br><input type="checkbox"/> check here if included in the public housing A & O Policy                                                                                                                                                                                                                                                                 | Annual Plan: Rent Determination                              |
| X                                                        | Section 8 rent determination (payment standard) policies<br><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<br><input checked="" type="checkbox"/> check here if included in the public housing A & O Policy                                                                                                                                                                                                                                                                                    | Annual Plan: Grievance Procedures                            |
| X                                                        | Section 8 informal review and hearing procedures<br><input checked="" type="checkbox"/> check here if included in Section 8 Administrative Plan                                                                                                                                                                                                                                                                         | Annual Plan: Grievance Procedures                            |
| X                                                        | The HUD-approved Capital Fund/Comprehensive Grant Program Annual Statement (HUD 52837) for the active grant year                                                                                                                                                                                                                                                                                                        | Annual Plan: Capital Needs                                   |
| N/A                                                      | Most recent CIAP Budget/Progress Report (HUD 52825) for any active CIAP grant                                                                                                                                                                                                                                                                                                                                           | Annual Plan: Capital Needs                                   |

| <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                                                        | Most recent, approved 5 Year Action Plan for the Capital Fund/Comprehensive Grant Program, if not included as an attachment (provided at PHA option)                                                 | Annual Plan: Capital Needs                        |
| N/A                                                      | Approved HOPE VI applications or, if more recent, approved or submitted HOPE VI Revitalization Plans or any other approved proposal for development of public housing                                | Annual Plan: Capital Needs                        |
| N/A                                                      | Approved or submitted applications for demolition and/or disposition of public housing                                                                                                               | Annual Plan: Demolition and Disposition           |
| N/A                                                      | Approved or submitted applications for designation of public housing (Designated Housing Plans)                                                                                                      | Annual Plan: Designation of Public Housing        |
| N/A                                                      | Approved or submitted assessments of reasonable revitalization of public housing and approved or submitted conversion plans prepared pursuant to section 202 of the 1996 HUD Appropriations Act      | Annual Plan: Conversion of Public Housing         |
| X                                                        | Approved or submitted public housing homeownership programs/plans                                                                                                                                    | Annual Plan: Homeownership                        |
| N/A                                                      | Policies governing any Section 8 Homeownership program<br><input type="checkbox"/> check here if included in the Section 8 Administrative Plan                                                       | Annual Plan: Homeownership                        |
|                                                          | Any cooperative agreement between the PHA and the TANF agency<br>* Being developed                                                                                                                   | Annual Plan: Community Service & Self-Sufficiency |
| X                                                        | FSS Action Plan/s for public housing and/or Section 8                                                                                                                                                | Annual Plan: Community Service & Self-Sufficiency |
| X                                                        | Most recent self-sufficiency (ED/SS, TOP or ROSS or other resident services grant) grant program reports                                                                                             | Annual Plan: Community Service & Self-Sufficiency |
| X                                                        | 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                         |
| N/A                                                      | Troubled PHAs: MOA/Recovery Plan                                                                                                                                                                     | Troubled PHAs                                     |
|                                                          | Other supporting documents (optional)<br>(list individually; use as many lines as necessary)                                                                                                         | (specify as needed)                               |
|                                                          |                                                                                                                                                                                                      |                                                   |

## **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**

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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<br/>by Family Type</b> |         |                |        |         |                |      |           |
|-------------------------------------------------------------------------|---------|----------------|--------|---------|----------------|------|-----------|
| Family Type                                                             | Overall | Afford-ability | Supply | Quality | Access-ibility | Size | Loca-tion |
| Income <= 30% of AMI                                                    | 4,460   | 4              | 5      | 2       | N/A            | 3    | N/A       |
| Income >30% but <=50% of AMI                                            | 2,900   | 4              | 5      | 2       | N/A            | 2    | N/A       |
| Income >50% but <80% of AMI                                             | 5,095   | 2              | 5      | 2       | N/A            | N/A  | N/A       |
| Elderly                                                                 | 3,750   | 4              | 5      | 2       | N/A            | N/A  | N/A       |
| Families with Disabilities                                              | 5,170   | 4              | 5      | 2       | 4              | N/A  | N/A       |
| Black                                                                   | 216     | 3              | 5      | 2       | N/A            | N/A  | N/A       |
| Hispanic                                                                | 389     | 3              | 5      | 2       | N/A            | N/A  | N/A       |
|                                                                         |         |                |        |         |                |      |           |
|                                                                         |         |                |        |         |                |      |           |

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 - 2005
- 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)  
New Hampshire Housing Finance Authority 1999 Residential Rental Cost Survey

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

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

| Housing Needs of Families on the Waiting List        |                                                                         |                     |                 |
|------------------------------------------------------|-------------------------------------------------------------------------|---------------------|-----------------|
| Waiting list type: (select one)                      |                                                                         |                     |                 |
| <input type="checkbox"/>                             | Section 8 tenant-based assistance                                       |                     |                 |
| <input checked="" type="checkbox"/>                  | Public Housing                                                          |                     |                 |
| <input type="checkbox"/>                             | Combined Section 8 and Public Housing                                   |                     |                 |
| <input type="checkbox"/>                             | Public Housing Site-Based or sub-jurisdictional waiting list (optional) |                     |                 |
| If used, identify which development/subjurisdiction: |                                                                         |                     |                 |
|                                                      | # of families                                                           | % of total families | Annual Turnover |
| Waiting list total                                   | 541                                                                     |                     | 215             |
| Extremely low income<br><=30% AMI                    | 390                                                                     | 72.1                |                 |
| Very low income<br>(>30% but <=50%<br>AMI)           | 117                                                                     | 21.6                |                 |
| Low income<br>(>50% but <80%<br>AMI)                 | 34                                                                      | 6.3                 |                 |
| Families with children                               | 253                                                                     | 46.8                |                 |
| Elderly families                                     | 250                                                                     | 46.2                |                 |
| Families with<br>Disabilities                        | 43                                                                      | 7.9                 |                 |
| Black                                                | 34                                                                      | 6.3                 |                 |
| Asian/Pacific Islander                               | 9                                                                       | 1.7                 |                 |
| Hispanic                                             | 44                                                                      | 8.1                 |                 |
|                                                      |                                                                         |                     |                 |

| <b>Housing Needs of Families on the Waiting List</b>                                                                                                          |     |      |     |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|------|-----|
| Characteristics by Bedroom Size (Public Housing Only)                                                                                                         |     |      |     |
| 0 BR / 1BR                                                                                                                                                    | 256 | 47.3 | 108 |
| 2 BR                                                                                                                                                          | 209 | 38.6 | 55  |
| 3 BR                                                                                                                                                          | 61  | 11.3 | 50  |
| 4 BR                                                                                                                                                          | 12  | 2.2  | 2   |
| 5 BR                                                                                                                                                          | 3   | 0.6  | 0   |
| 5+ BR                                                                                                                                                         | 0   | 0    | 0   |
| Is the waiting list closed (select one)? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes                                                  |     |      |     |
| If yes:                                                                                                                                                       |     |      |     |
| How long has it been closed (# of months)?                                                                                                                    |     |      |     |
| Does the PHA expect to reopen the list in the PHA Plan year? <input type="checkbox"/> No <input type="checkbox"/> Yes                                         |     |      |     |
| Does the PHA permit specific categories of families onto the waiting list, even if generally closed? <input type="checkbox"/> No <input type="checkbox"/> Yes |     |      |     |

| <b>Housing Needs of Families on the Waiting List</b>                                             |               |                     |                 |
|--------------------------------------------------------------------------------------------------|---------------|---------------------|-----------------|
| Waiting list type: (select one)                                                                  |               |                     |                 |
| <input checked="" type="checkbox"/> Section 8 tenant-based assistance                            |               |                     |                 |
| <input type="checkbox"/> Public Housing                                                          |               |                     |                 |
| <input type="checkbox"/> Combined Section 8 and Public Housing                                   |               |                     |                 |
| <input type="checkbox"/> Public Housing Site-Based or sub-jurisdictional waiting list (optional) |               |                     |                 |
| If used, identify which development/sub-jurisdiction:                                            |               |                     |                 |
|                                                                                                  | # of families | % of total families | Annual Turnover |
| Waiting list total                                                                               | 1303          |                     | 256             |
| Extremely low income<br><=30% AMI                                                                | 989           | 75.9                |                 |
| Very low income<br>(>30% but <=50%<br>AMI)                                                       | 295           | 22.6                |                 |
| Low income<br>(>50% but <80%<br>AMI)                                                             | 19            | 1.5                 |                 |
| Families with children                                                                           | 918           | 70.5                |                 |
| Elderly families                                                                                 | 150           | 11.5                |                 |

| <b>Housing Needs of Families on the Waiting List</b>                                                                                                          |     |      |     |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|------|-----|
| Families with Disabilities                                                                                                                                    | 218 | 16.7 |     |
| Black                                                                                                                                                         | 105 | 8.1  |     |
| American Native                                                                                                                                               | 3   | 0.2  |     |
| Asian/Pacific Islander                                                                                                                                        | 8   | 0.6  |     |
| Hispanic                                                                                                                                                      | 148 | 11.4 |     |
|                                                                                                                                                               |     |      |     |
| Characteristics by Bedroom Size (Public Housing Only)                                                                                                         |     |      |     |
| 1BR                                                                                                                                                           | N/A | N/A  | N/A |
| 2 BR                                                                                                                                                          | N/A | N/A  | N/A |
| 3 BR                                                                                                                                                          | N/A | N/A  | N/A |
| 4 BR                                                                                                                                                          | N/A | N/A  | N/A |
| 5 BR                                                                                                                                                          | N/A | N/A  | N/A |
| 5+ BR                                                                                                                                                         | N/A | N/A  | N/A |
| Is the waiting list closed (select one)? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes                                                  |     |      |     |
| If yes:                                                                                                                                                       |     |      |     |
| How long has it been closed (# of months)?                                                                                                                    |     |      |     |
| Does the PHA expect to reopen the list in the PHA Plan year? <input type="checkbox"/> No <input type="checkbox"/> Yes                                         |     |      |     |
| Does the PHA permit specific categories of families onto the waiting list, even if generally closed? <input type="checkbox"/> No <input type="checkbox"/> Yes |     |      |     |

**C. Strategy for Addressing Needs**

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

Awaiting information from the City.

**(1) Strategies**

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

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

Select all that apply

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

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

Select all that apply

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

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

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

Select all that apply

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



Other: (list below)

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

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

Select all that apply

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

**Need: Specific Family Types: The Elderly**

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

Select all that apply

- Seek designation of public housing for the elderly
  - Apply for special-purpose vouchers targeted to the elderly, should they become available
  - Other: (list below)
- Expand Congregate Services Program

**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)
- Seek opportunities to develop state-of-the-art accessible units.

**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)
- Increase outreach/impact of Cultural Diversity Program efforts.

**Strategy 2: Conduct activities to affirmatively further fair housing**

Select all that apply

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

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

**(2) Reasons for Selecting Strategies**

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

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

**2. Statement of Financial Resources**

[24 CFR Part 903.7.9 (b)]

List the financial resources that are anticipated to be available to the PHA for the support of Federal public housing and tenant-based Section 8 assistance programs administered by the PHA during the Plan year. Note: the table assumes that Federal public housing or tenant based Section 8 assistance

grant funds are expended on eligible purposes; therefore, uses of these funds need not be stated. For other funds, indicate the use for those funds as one of the following categories: public housing operations, public housing capital improvements, public housing safety/security, public housing supportive services, Section 8 tenant-based assistance, Section 8 supportive services or other.

| <b>Financial Resources:<br/>Planned Sources and Uses</b>                              |                   |                           |
|---------------------------------------------------------------------------------------|-------------------|---------------------------|
| <b>Sources</b>                                                                        | <b>Planned \$</b> | <b>Planned Uses</b>       |
| <b>1. Federal Grants (FY 2000 grants)</b>                                             |                   |                           |
| a) Public Housing Operating Fund                                                      | \$ 2,163,300      |                           |
| b) Public Housing Capital Fund                                                        | \$ 1,841,526      |                           |
| c) HOPE VI Revitalization                                                             | \$ 0              |                           |
| d) HOPE VI Demolition                                                                 | \$ 0              |                           |
| e) Annual Contributions for Section 8 Tenant-Based Assistance                         | \$ 7,167,584      |                           |
| f) Public Housing Drug Elimination Program (including any Technical Assistance funds) | \$ 273,022        |                           |
| g) Resident Opportunity and Self-Sufficiency Grants                                   | \$ 0              |                           |
| h) Community Development Block Grant                                                  | \$ 64,300         | Resident Services         |
| i) HOME                                                                               | \$ 0              |                           |
| Other Federal Grants (list below)                                                     |                   |                           |
| Congregate Services                                                                   | \$ 198,616        | Resident Services         |
| <b>2. Prior Year Federal Grants (unobligated funds only) (list below)</b>             |                   |                           |
| Comprehensive Grant                                                                   | \$ 707,784        | PH Capital Improvements   |
| EDSS / FIC                                                                            | \$ 420,146        | Resident Services         |
| Service Coordinator                                                                   | \$ 52,233         | Resident Services         |
| <b>3. Public Housing Dwelling Rental Income</b>                                       |                   |                           |
| Dwelling Rental                                                                       | \$ 3,276,800      | Public Housing Operations |
|                                                                                       |                   |                           |
| <b>4. Other income (list below)</b>                                                   |                   |                           |
| Investment Income                                                                     | \$ 112,560        | Public Housing Operations |
| Parking / space rental                                                                | \$ 18,000         | Public Housing Operations |

| <b>Financial Resources:<br/>Planned Sources and Uses</b> |                   |                                |
|----------------------------------------------------------|-------------------|--------------------------------|
| <b>Sources</b>                                           | <b>Planned \$</b> | <b>Planned Uses</b>            |
| <b>4. Non-federal sources</b> (list below)               |                   |                                |
| State of NH / Client fees                                | \$ 572,247        | Resident Services              |
| City Housing                                             | \$ 565,505        | Housing Operations             |
| City of Manchester / other                               | \$ 238,834        | Redevelopment / Youth Programs |
| <b>Total resources</b>                                   | \$17,672,457      |                                |
|                                                          |                   |                                |
|                                                          |                   |                                |

### **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: (120 days)
- Other: (describe)

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

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

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

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

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

**(2)Waiting List Organization**

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

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

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

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

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

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

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

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

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

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

**(3) Assignment**

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

- One

- Two
- Three or More

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

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

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

a. Income targeting:

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

b. Transfer policies:

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

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

Congregate Services Program

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 (Government Action only)
- Victims of domestic violence
- Substandard housing
- Homelessness
- High rent burden (rent is > 50 percent of income)

Other preferences: (select below)

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

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

Date and Time

Former Federal preferences:

- 1 Involuntary Displacement (Government Action only)
- Victims of domestic violence
- Substandard housing
- Homelessness
- High rent burden

Other preferences (select all that apply)

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

The Non-Housing Assistance Preference shall be given to the applicant family who is not receiving any local, state, or federal housing assistance.

4. Relationship of preferences to income targeting requirements:

- The PHA applies preferences within income tiers

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

**(5) Occupancy**

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

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

Bulletin boards, memos, notices

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:



At this time deconcentration is not an issue. The Authority has developed a Deconcentration Policy that discusses “skipping” and other procedures in the event this becomes an issue at a later date.

- Employing new admission preferences at targeted developments  
If selected, list targeted developments below:
- Other (list policies and developments targeted below)

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

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

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

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

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

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

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

## **B. Section 8**

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

### **(1) Eligibility**

- a. What is the extent of screening conducted by the PHA? (select all that apply)
- Criminal or drug-related activity only to the extent required by law or regulation
  - Criminal and drug-related activity, more extensively than required by law or regulation
  - More general screening than criminal and drug-related activity (list factors below)
  - 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? (New Hampshire and Massachusetts)
- d.  Yes  No: Does the PHA access FBI criminal records from the FBI for screening purposes? (either directly or through an NCIC-authorized source)
- e. Indicate what kinds of information you share with prospective landlords? (select all that apply)
- Criminal or drug-related activity
  - Other (describe below)
- Current and former landlord

**(2) Waiting List Organization**

- a. With which of the following program waiting lists is the section 8 tenant-based assistance waiting list merged? (select all that apply)
- None
  - Federal public housing
  - Federal moderate rehabilitation
  - Federal project-based certificate program
  - Other federal or local program (list below)
- b. Where may interested persons apply for admission to section 8 tenant-based assistance? (select all that apply)
- PHA main administrative office
  - Other (list below)

**(3) Search Time**

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

If yes, state circumstances below:

Thirty (30) day extensions are granted upon receipt of evidence of unsuccessful attempts to locate a unit or inability to look for a unit for a total maximum of 120 days.

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

- a. Income targeting

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

- b. Preferences

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

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

Former Federal preferences

- Involuntary Displacement (Government Action only)  
 Victims of domestic violence  
 Substandard housing  
 Homelessness  
 High rent burden (rent is > 50 percent of income)

Other preferences (select all that apply)

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

The Non-Housing Assistance Preference shall be given to the applicant family who is not receiving any local, state, or federal housing assistance.

Special Programs.

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

Date and Time

Former Federal preferences

- 1 Involuntary Displacement (Government Action only)
- Victims of domestic violence
- Substandard housing
- Homelessness
- High rent burden

Other preferences (select all that apply)

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

The Non-Housing Assistance Preference shall be given to the applicant family who is not receiving any local, state, or federal housing assistance.

Special Programs.

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

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

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

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

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

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

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

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

- The Section 8 Administrative Plan
- Briefing sessions and written materials
- Other (list below)

The Mod/SRO application describes that placement of participants is done by alcohol and drug rehabilitation professions. The Family Self Sufficiency Program Action Plan addresses eligibility for the program.

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

- Through published notices
- Other (list below)

The Mod/SRO Program. As eligibility is determined by substance abuse professionals, the Authority needn't conduct such outreach. Outreach for the Family Self Sufficiency Program is done by direct mail to Section 8 participants and by distribution of brochures.

### **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:

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

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

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

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

- For the earned income of a previously unemployed household member

For increases in earned income until recertification unless it's a new employer or additional employer

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

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

For household heads

For other family members

For transportation expenses

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

Other (describe below)

e. Ceiling rents

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

Yes for all developments

Yes but only for some developments

No

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

For all developments

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

For specified general occupancy developments

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

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

Other (list below)

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

Market comparability study

Fair market rents (FMR)

95<sup>th</sup> percentile rents

75 percent of operating costs

- 100 percent of operating costs for general occupancy (family) developments
- Operating costs plus debt service
- The "rental value" of the unit
- Other (list below)

f. Rent re-determinations:

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

- Never
- At family option
- Any time the family experiences an income increase
- Any time a family experiences an income increase above a threshold amount or percentage: (if selected, specify threshold)\_\_\_\_\_
- Other (list below)

Reported always even though it may not affect rent.

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 (90% for 4 bedroom assistance)
- 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)

Apartment rent levels in Manchester.

## **(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.)

| <b>Program Name</b>                                                 | <b>Units or Families Served at Year Beginning</b> | <b>Expected Turnover</b> |
|---------------------------------------------------------------------|---------------------------------------------------|--------------------------|
| Public Housing                                                      |                                                   |                          |
| Section 8 Vouchers                                                  |                                                   |                          |
| Section 8 Certificates                                              |                                                   |                          |
| Section 8 Mod Rehab                                                 |                                                   |                          |
| Special Purpose Section 8 Certificates/Vouchers (list individually) |                                                   |                          |
| Public Housing Drug Elimination Program (PHDEP)                     |                                                   |                          |
|                                                                     |                                                   |                          |
|                                                                     |                                                   |                          |

|                                           |  |  |
|-------------------------------------------|--|--|
| Other Federal Programs(list individually) |  |  |
|                                           |  |  |
|                                           |  |  |

**C. Management and Maintenance Policies**

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

(1) Public Housing Maintenance and Management: (list below)

(2) Section 8 Management: (list below)

**6. PHA Grievance Procedures**

[24 CFR Part 903.7 9 (f)]

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

**A. Public Housing**

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

If yes, list additions to federal requirements below:

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

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

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

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

assistance program in addition to federal requirements found at 24 CFR 982?

If yes, list additions to federal requirements below:

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

- PHA main administrative office  
 Other (list below)

## **7. Capital Improvement Needs**

[24 CFR Part 903.7 9 (g)]

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

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

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

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

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

Select one:

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

-or-

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

## **PHA Plan Table Library**

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

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

Capital Fund Grant Number NH36P001709 FFY of Grant Approval: (10/2000)

Original Annual Statement

| Line No. | Summary by Development Account                            | Total Estimated Cost |
|----------|-----------------------------------------------------------|----------------------|
| 1        | Total Non-CGP Funds                                       |                      |
| 2        | 1406 Operations                                           | \$ 151,800           |
| 3        | 1408 Management Improvements                              | \$ 110,700           |
| 4        | 1410 Administration                                       | \$ 140,800           |
| 5        | 1411 Audit                                                |                      |
| 6        | 1415 Liquidated Damages                                   |                      |
| 7        | 1430 Fees and Costs                                       | \$ 244,500           |
| 8        | 1440 Site Acquisition                                     |                      |
| 9        | 1450 Site Improvement                                     | \$ 32,000            |
| 10       | 1460 Dwelling Structures                                  | \$ 1,042,400         |
| 11       | 1465.1 Dwelling Equipment-Nonexpendable                   | \$ 12,800            |
| 12       | 1470 Nondwelling Structures                               |                      |
| 13       | 1475 Nondwelling Equipment                                | \$ 57,750            |
| 14       | 1485 Demolition                                           |                      |
| 15       | 1490 Replacement Reserve                                  |                      |
| 16       | 1492 Moving to Work Demonstration                         |                      |
| 17       | 1495.1 Relocation Costs                                   | \$ 15,000            |
| 18       | 1498 Mod Used for Development                             |                      |
| 19       | 1502 Contingency                                          | \$ 33,776            |
| 20       | <b>Amount of Annual Grant (Sum of lines 2-19)</b>         | <b>\$1,841,526</b>   |
| 21       | Amount of line 20 Related to LBP Activities               |                      |
| 22       | Amount of line 20 Related to Section 504 Compliance       | \$ 55,000            |
| 23       | Amount of line 20 Related to Security                     | \$ 45,000            |
| 24       | Amount of line 20 Related to Energy Conservation Measures | \$ 200,000           |

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

| Development Number/Name<br>HA-Wide Activities | General Description of Major Work Categories               | Development Account Number | Total Estimated Cost |
|-----------------------------------------------|------------------------------------------------------------|----------------------------|----------------------|
| NH 1-3 Benoit Homes                           | A&E Services for Rehabilitation                            | 1430.1                     | \$15,000             |
|                                               | Consulting/Testing Services for Rehabilitation             | 1430.2                     | \$10,000             |
|                                               | Site Rehabilitation                                        | 1450                       | \$32,000             |
|                                               | Comprehensive Building Rehabilitation<br>16 Dwelling Units | 1460                       | \$1,042,400          |
|                                               | Refrigerators and Ranges (16 D.U.s)                        | 1465.1                     | \$12,800             |
|                                               | Relocation Costs                                           | 1495.1                     | \$15,000             |
|                                               | Legal Counsel Contract and Bid Reviews                     | 1410.4                     | \$5,000              |
| PHA-Wide Management                           | Computer System Software and Support                       | 1408                       | \$27,700             |
| Improvements                                  | Staff Professional Development Training                    | 1408                       | \$21,500             |
|                                               | Resident Initiatives and Training                          | 1408                       | \$17,500             |
|                                               | Program Reviews                                            | 1408                       | \$16,500             |
|                                               | Newsletter/Operations Guides                               | 1408                       | \$25,000             |
|                                               | Archive Document Storage                                   | 1408                       | \$2,500              |
| Administration                                | Non-technical PHA Staff Salaries                           | 1410.1                     | \$97,016             |
|                                               | Non-technical PHA Staff Benefits                           | 1410.9                     | \$38,784             |

|                        |                                                                           |        |           |
|------------------------|---------------------------------------------------------------------------|--------|-----------|
| Fees and Costs         | PHA Project Inspectors Salaries and Benefits                              | 1430.7 | \$219,500 |
| Non-Dwelling Equipment | Computer System Enhancement<br>Office Equipment and Furniture Replacement | 1475.1 | \$57,750  |
| Operations             | Operations Account                                                        | 1406   | \$151,800 |
| Contingency            | Contingency Account                                                       | 1502   | \$33,776  |

**Annual Statement**

**Capital Fund Program (CFP) Part III: Implementation Schedule**

| Development Number/Name<br>HA-Wide Activities | All Funds Obligated<br>(Quarter Ending Date) | All Funds Expended<br>(Quarter Ending Date) |
|-----------------------------------------------|----------------------------------------------|---------------------------------------------|
| NH 1-3 Benoit Homes                           | 3/31/2001                                    | 9/30/2002                                   |
| PHA-Wide Management Improvements              | 3/31/2001                                    | 9/30/2002                                   |
| Administration                                | 3/31/2001                                    | 9/30/2002                                   |
| Fees and costs                                | 3/31/2001                                    | 9/30/2002                                   |
| Non-Dwelling Equipment                        | 3/31/2001                                    | 9/30/2002                                   |
|                                               |                                              |                                             |

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

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

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

b. If yes to question a, select one:

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

-or-

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



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

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

| Optional 5-Year Action Plan Tables                                     |                                         |                     |                            |                                     |
|------------------------------------------------------------------------|-----------------------------------------|---------------------|----------------------------|-------------------------------------|
| Development Number                                                     | Development Name (or indicate PHA wide) | Number Vacant Units | % Vacancies in Development |                                     |
| NH 1-3                                                                 | Benoit Homes                            |                     |                            |                                     |
| Description of Needed Physical Improvements or Management Improvements |                                         |                     | Estimated Cost             | Planned Start Date (HA Fiscal Year) |
| Site Rehabilitation                                                    |                                         |                     | \$ 160,000                 | 2001                                |
| Comprehensive Building Rehabilitation of 27 Dwelling Units             |                                         |                     | \$ 3,000,000               | 2001                                |
| <b>Total estimated cost over next 5 years</b>                          |                                         |                     | <b>\$ 3,160,000</b>        |                                     |

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

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

| Optional 5-Year Action Plan Tables                                     |                                         |                     |                                     |
|------------------------------------------------------------------------|-----------------------------------------|---------------------|-------------------------------------|
| Development Number                                                     | Development Name (or indicate PHA wide) | Number Vacant Units | % Vacancies in Development          |
| NH 1-4                                                                 | Scattered Sites                         |                     |                                     |
| Description of Needed Physical Improvements or Management Improvements |                                         | Estimated Cost      | Planned Start Date (HA Fiscal Year) |
| Site Rehabilitation                                                    |                                         | \$ 207,360          | 2004                                |
| Comprehensive Building Rehabilitation of 108 Dwelling Units            |                                         | \$ 3,963,600        | 2004                                |
| <b>Total estimated cost over next 5 years</b>                          |                                         | <b>\$ 4,170,960</b> |                                     |

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

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

| Optional 5-Year Action Plan Tables                                     |                                         |                     |                            |                                     |
|------------------------------------------------------------------------|-----------------------------------------|---------------------|----------------------------|-------------------------------------|
| Development Number                                                     | Development Name (or indicate PHA wide) | Number Vacant Units | % Vacancies in Development |                                     |
| N/A                                                                    | PHA Wide                                | N/A                 | N/A                        |                                     |
| Description of Needed Physical Improvements or Management Improvements |                                         |                     | Estimated Cost             | Planned Start Date (HA Fiscal Year) |
| <b>Management Improvements</b>                                         |                                         |                     |                            |                                     |
| Computer System Enhancements                                           |                                         |                     | \$ 210,800                 | 2001                                |
| Staff Professional Development Trainings                               |                                         |                     | \$ 92,000                  | 2001                                |
| Resident / Community Programs and Training                             |                                         |                     | \$ 70,000                  | 2001                                |
| Program Reviews and Improvements                                       |                                         |                     | \$ 66,000                  | 2001                                |
| Newsletter / Operations Guides and Videos                              |                                         |                     | \$ 100,000                 | 2001                                |
| Office Equipment and Furniture Replacement                             |                                         |                     | \$ 151,000                 | 2001                                |
| <b>Total estimated cost over next 5 years</b>                          |                                         |                     | <b>\$ 689,800</b>          |                                     |

## **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.)

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

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

[24 CFR Part 903.7 9 (i)]

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

1.  Yes  No: Has the PHA designated or applied for approval to designate or does the PHA plan to apply to designate any public housing for occupancy only by the elderly families or only by families with disabilities, or by elderly families and families with disabilities or will apply for designation for occupancy by only elderly families or only families with disabilities,

or by elderly families and families with disabilities as provided by section 7 of the U.S. Housing Act of 1937 (42 U.S.C. 1437e) in the upcoming fiscal year? (If “No”, skip to component 10. If “yes”, complete one activity description for each development, unless the PHA is eligible to complete a streamlined submission; PHAs completing streamlined submissions may skip to component 10.)

2. Activity Description

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

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

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

[24 CFR Part 903.7 9 (j)]

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

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

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

2. Activity Description

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

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

5. Description of how requirements of Section 202 are being satisfied by means other than conversion (select one)

- Units addressed in a pending or approved demolition application (date submitted or approved: \_\_\_\_\_)
- Units addressed in a pending or approved HOPE VI demolition application (date submitted or approved: \_\_\_\_\_)
- Units addressed in a pending or approved HOPE VI Revitalization Plan (date submitted or approved: \_\_\_\_\_)
- Requirements no longer applicable: vacancy rates are less than 10 percent
- Requirements no longer applicable: site now has less than 300 units
- Other: (describe below)

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

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

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

[24 CFR Part 903.7 9 (k)]

**A. Public Housing**

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

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

2. Activity Description

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



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

| <b>Public Housing Homeownership Activity Description</b><br>(Complete one for each development affected) |                                                                                                                                                                                             |
|----------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 1a. Development name:                                                                                    |                                                                                                                                                                                             |
| 1b. Development (project) number:                                                                        |                                                                                                                                                                                             |
| 2. Federal Program authority:                                                                            | <input type="checkbox"/> HOPE I<br><input type="checkbox"/> 5(h)<br><input type="checkbox"/> Turnkey III<br><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<br><input type="checkbox"/> Submitted, pending approval<br><input type="checkbox"/> Planned application |
| 4. Date Homeownership Plan/Program approved, submitted, or planned for submission:<br>(DD/MM/YYYY)       |                                                                                                                                                                                             |
| 5. Number of units affected:                                                                             |                                                                                                                                                                                             |
| 6. Coverage of action: (select one)                                                                      | <input type="checkbox"/> Part of the development<br><input type="checkbox"/> Total development                                                                                              |

## B. Section 8 Tenant Based Assistance

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

2. Program Description:

a. Size of Program

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

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

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

b. PHA-established eligibility criteria

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

If yes, list criteria below:

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

[24 CFR Part 903.7 9 (l)]

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

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

1. Cooperative agreements:

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

If yes, what was the date that agreement was signed? DD/MM/YY

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

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

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

#### **(1) General**

a. Self-Sufficiency Policies



a. Participation Description

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

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

**C. Welfare Benefit Reductions**

1. The PHA is complying with the statutory requirements of section 12(d) of the U.S. Housing Act of 1937 (relating to the treatment of income changes resulting from welfare program requirements) by: (select all that apply)

- Adopting appropriate changes to the PHA’s public housing rent determination policies and train staff to carry out those policies
- Informing residents of new policy on admission and reexamination
- Actively notifying residents of new policy at times in addition to admission and reexamination.
- Establishing or pursuing a cooperative agreement with all appropriate TANF agencies regarding the exchange of information and coordination of services
- Establishing a protocol for exchange of information with all appropriate TANF agencies
- Other: (list below)

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

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

[24 CFR Part 903.7 9 (m)]

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

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

1. Describe the need for measures to ensure the safety of public housing residents (select all that apply)

- High incidence of violent and/or drug-related crime in some or all of the PHA's developments
- High incidence of violent and/or drug-related crime in the areas surrounding or adjacent to the PHA's developments
- Residents fearful for their safety and/or the safety of their children
- Observed lower-level crime, vandalism and/or graffiti
- People on waiting list unwilling to move into one or more developments due to perceived and/or actual levels of violent and/or drug-related crime
- Other (describe below)

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

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

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

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

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

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

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

**C. Coordination between PHA and the police**

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

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

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

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

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

- Yes  No: Is the PHA eligible to participate in the PHDEP in the fiscal year covered by this PHA Plan?
- Yes  No: Has the PHA included the PHDEP Plan for FY 2000 in this PHA Plan?
- Yes  No: This PHDEP Plan is an Attachment. (Attachment Filename: NH001b01)

**14. RESERVED FOR PET POLICY**

[24 CFR Part 903.7 9 (n)]  
(See Attachment nh001e01)

**15. Civil Rights Certifications**

[24 CFR Part 903.7 9 (o)]

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

## **16. Fiscal Audit**

[24 CFR Part 903.7 9 (p)]

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

## **17. PHA Asset Management**

[24 CFR Part 903.7 9 (q)]

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

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

## **18. Other Information**

[24 CFR Part 903.7 9 (r)]

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

1.  Yes  No: Did the PHA receive any comments on the PHA Plan from the Resident Advisory Board/s?

2. If yes, the comments are: (if comments were received, the PHA **MUST** select one)

Attached at Attachment (nh001d01)

Provided below:

3. In what manner did the PHA address those comments? (select all that apply)

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

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

Other: (list below)

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

1.  Yes  No: Does the PHA meet the exemption criteria provided section 2(b)(2) of the U.S. Housing Act of 1937? (If no, continue to question 2; if yes, skip to sub-component C.)

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

3. Description of Resident Election Process

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

Candidates were nominated by resident and assisted family organizations

Candidates could be nominated by any adult recipient of PHA assistance

Self-nomination: Candidates registered with the PHA and requested a place on ballot

Other: (describe)

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: (provide name here)  
 City of Manchester, New Hampshire
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)  
  
 Homeownership; providing decent, safe, affordable housing; rehabilitation of housing units; affirmative action; housing for the elderly; housing for the disabled.
  - Other: (list below)
4. The Consolidated Plan of the jurisdiction supports the PHA Plan with the following actions and commitments: (describe below)  
 Commitment to improving housing conditions in the City of Manchester.

**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.

# Deconcentration Policy

Approved by Board of Commissioners

July 11, 2000

The Manchester Housing and Redevelopment Authority (“Authority”) is committed to administering fair housing policies, practices and procedures. Fair Housing prohibits discrimination based on race, color, religion, gender, disability, familial status or national origin for the purposes of segregating populations. In an attempt to further diminish all forms of discrimination, the U.S. Department of Housing and Urban Development has established guidelines that will reduce the concentration of lower income and higher income families in particular buildings or developments (Deconcentration).

As of the date stated above, family income levels within the Authority’s general occupancy developments meet deconcentration standards. However, the Authority recognizes the possibility that this may not always be the case and therefore has developed the following policy in regards to deconcentration.

## Determination

The Authority will determine levels of income concentration for families residing in general occupancy developments in the following manner:

- 1) Annually determine the average income of all families residing in all of its general occupancy developments.
- 2) Annually determine the average income of all families residing in each building of each general occupancy development. “Building” shall stand to mean one or more contiguous structures containing at least eight (8) public housing dwelling units. Sites that do not meet the definition of building shall have the deconcentration requirement applied to the entire site as if it were a building.
- 3) Determine which, if any, general occupancy development buildings have an average income higher or lower than the PHA average for general occupancy developments. Buildings that have an average income that is within ten percent (+/-) of the average shall be considered to have met deconcentration standards. Buildings that have an average income that is beyond ten percent of the average shall be considered to be in violation of deconcentration standards.

## Remedy

In the event one or more general occupancy development buildings falls ten percent or more beyond the average income - either higher or lower - the following procedures will be followed:

- 1) Determine which families on the waiting list have incomes higher or lower than the PHA average.
- 2) When a unit becomes available for occupancy in a building with higher incomes the unit shall be offered to the first family on the waiting list that has an income lower than the PHA average. When a unit becomes available for occupancy in a building with lower incomes the unit shall be offered to the first family on the waiting list that has an income higher than the PHA average. Families that are higher on the waiting list but do not meet the appropriate income guideline may be skipped over as required. If the waiting list does not contain a family in the income category to whom the unit is to be offered, the Authority will offer the unit to a family based on other eligibility requirements.

**Deconcentration Policy**  
Approved by Board of Commissioners  
July 11, 2000

As with any offer of a vacant unit in public housing, families may refuse up to two units. Should a third unit be offered and refused the family may fall to the bottom of the waiting list but will not be removed solely for refusing units under the deconcentration policy.

No family shall be forced to vacate a unit in order for deconcentration standards to be met. However, if the Authority is aware of a unit that is to be vacated, efforts may be made to locate a family in a required income level prior to the unit actually becoming vacant.

All efforts to maintain deconcentration standards shall be properly recorded.

Applicability of local preferences

In selecting families for admission, the Authority may use local preferences **except** if using such preferences would result in offering a unit in a higher income building to a higher income family or in a lower income building to a lower income family. The following local preferences, if approved by the Authority, are the only exceptions to this rule:

- a) homeless persons;
- b) families paying more than fifty percent (50%) of their income in rent; or
- c) victims of domestic violence.

The Authority reserves the right to amend the number and nature of local preferences in accordance with all relevant regulations. All local preferences must affirmatively further fair housing.

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Management reserves the right to amend this policy as necessary in accordance with federal, state and local regulations.

# Public Housing Drug Elimination Program Plan

**Note: THIS PHDEP Plan template (HUD 50075-PHDEP Plan) is to be completed in accordance with Instructions located in applicable PIH Notices.**

**Annual PHDEP Plan Table of Contents:**

1. General Information/History
2. PHDEP Plan Goals/Budget
3. Milestones
4. Certifications

**Section 1: General Information/History**

- A. Amount of PHDEP Grant \$273,022**
- B. Eligibility type (Indicate with an “x”) N1 \_\_\_\_\_ N2 \_\_\_\_\_ R X**
- C. FFY in which funding is requested 2000**
- D. Executive Summary of Annual PHDEP Plan**

In the space below, provide a brief overview of the PHDEP Plan, including highlights of major initiatives or activities undertaken. It may include a description of the expected outcomes. The summary must not be more than five (5) sentences long

The Manchester Housing and Redevelopment Authority proposes a multifaceted program which includes the following components: (1) Continued reimbursement of law enforcement for the employment of two full time community police officers; (2) Physical improvements to enhance security; (3) Drug prevention, intervention and treatment strategies; (4) Educational and economic opportunities for residents; and (5) a Drug Elimination Program Manager, Resident Facilitator, Youth Opportunities Specialist and related support staff to administer all of the Public Housing Drug Elimination Grant Programs.

**E. Target Areas**

Complete the following table by indicating each PHDEP Target Area (development or site where activities will be conducted), the total number of units in each PHDEP Target Area, and the total number of individuals expected to participate in PHDEP sponsored activities in each Target Area.

| PHDEP Target Areas<br>(Name of development(s) or site) | Total # of Units within<br>the PHDEP Target<br>Area(s) | Total Population to<br>be Served within the<br>PHDEP Target<br>Area(s) |
|--------------------------------------------------------|--------------------------------------------------------|------------------------------------------------------------------------|
| NH 1-1, Elmwood Gardens                                | 200                                                    | 653                                                                    |
| NH 1-2, Kelley Falls                                   | 132                                                    | 385                                                                    |
| NH 1-3, Benoit Homes                                   | 150                                                    | 141                                                                    |
| NH 1-4, Scattered Sites                                | 140                                                    | 171                                                                    |
| NH 1-5, O’Malley Apartments                            | 100                                                    | 104                                                                    |
| NH 1-6, Kalivas Apartments                             | 100                                                    | 104                                                                    |
| NH 1-8, Pariseau Apartments                            | 100                                                    | 108                                                                    |
| NH 1-14, Burns Apartments                              | 121                                                    | 139                                                                    |
| NH 1-15, Gallen Apartments                             | 95                                                     | 106                                                                    |
| NH 1-16, Rimmon & Gates                                | 6                                                      | 16                                                                     |
| NH 1-20 (to be named)                                  | 19                                                     | 33                                                                     |
| NH 1-21 (to be named)                                  | 4                                                      | 12                                                                     |
| NH 1-22 (to be named)                                  | 2                                                      | 1                                                                      |

**F. Duration of Program**

Indicate the duration (number of months funds will be required) of the PHDEP Program proposed under this Plan (place an “x” to indicate the length of program by # of months. For “Other”, identify the # of months).

6 Months \_\_\_\_\_ 12 Months  X  18 Months \_\_\_\_\_ 24 Months \_\_\_\_\_ Other \_\_\_\_\_

**G. PHDEP Program History**

Indicate each FY that funding has been received under the PHDEP Program (place an “x” by each applicable Year) and provide amount of funding received. If previously funded programs have not been closed out at the time of this submission, indicate the fund balance and anticipated completion date. For grant extensions received, place “GE” in column or “W” for waivers.

| Fiscal Year of Funding | PHDEP Funding Received | Grant #        | Fund Balance as of Date of this Submission | Grant Extensions or Waivers | Anticipated Completion Date |
|------------------------|------------------------|----------------|--------------------------------------------|-----------------------------|-----------------------------|
| FY 1995                | X                      | NH36DEP0010195 | \$0                                        | none                        |                             |
| FY 1996                | X                      | NH36DEP0010196 | \$0                                        | none                        |                             |
| FY 1997                | X                      | NH36DEP0010197 | \$0                                        | none                        |                             |
| FY1998                 | X                      | NH36DEP0010198 | \$225,931                                  | none                        | 01/08/01                    |
| FY 1999                | X                      | NH36DEP0010199 | \$252,052                                  | none                        | 11/19/01                    |

**Section 2: PHDEP Plan Goals and Budget**

**A. PHDEP Plan Summary**

In the space below, summarize the PHDEP strategy to address the needs of the target population/target area(s). Your summary should briefly identify: the broad goals and objectives, the role of plan partners, and your system or process for monitoring and evaluating PHDEP-funded activities. This summary should not exceed 5-10 sentences.

MHRA’s PHDEP strategy has evolved into a multifaceted plan utilizing the resources within the greater Manchester community to significantly reduce the use of drugs and drug-related crime. The successful partnership with the Manchester Police Department has resulted in the reduction of drug related offenses, a higher level of police security and protection in the neighborhoods, and an improvement in the overall quality of life for the residents. The prevention, intervention and treatment components of the plan continue to address family violence, poor parenting skills and a lack of support mechanisms for the many young, single-parent families living in public housing. The Summer Swim, Escuelita and Boys and Girls Club Busing programs each provide enriching and educational experiences for school aged children in a safe and positive environment. The Police Athletic League programs have provided young residents with the opportunity to participate in a variety of sports activities; while available to the community at large, these programs would otherwise be inaccessible to MHRA residents due to their registration fees. Plan partners in the development and implementation of these programs include: University of New Hampshire Cooperative Extension; 4-H; Manchester Boys and Girls Club; Daniel Webster Council – Boy Scouts of America; New Hampshire Community Technical Institute; New Hampshire College; Latin American Center – Southern New Hampshire Services, Inc.; Police Athletic League; and the Alliance for the Progress of Hispanic Americans. Program progress is monitored through the criminal activity records and statistics provided by the Manchester Police Department as well as through monthly progress reports from partner agencies and resident participant feedback.

## B. PHDEP Budget Summary

Enter the total amount of PHDEP funding allocated to each line item.

| FY_2000_ PHDEP Budget Summary           |                  |
|-----------------------------------------|------------------|
| Budget Line Item                        | Total Funding    |
| 9110 – Reimbursement of Law Enforcement | \$70,000         |
| 9120 – Security Personnel               | --               |
| 9130 – Employment of Investigators      | --               |
| 9140 – Voluntary Tenant Patrol          | --               |
| 9150 – Physical Improvements            | \$4,000          |
| 9160 – Drug Prevention                  | \$58,000         |
| 9170 – Drug Intervention                | \$56,000         |
| 9180 – Drug Treatment                   | \$3,367          |
| 9190 – Other Program Costs              | \$81,655         |
| <b>TOTAL PHDEP FUNDING</b>              | <b>\$273,022</b> |

## C. PHDEP Plan Goals and Activities

In the tables below, provide information on the PHDEP strategy summarized above by budget line item. Each goal and objective should be numbered sequentially for each budget line item (where applicable). Use as many rows as necessary to list proposed activities (additional rows may be inserted in the tables). PHAs are not required to provide information in shaded boxes. Information provided must be concise—not to exceed two sentences in any column. Tables for line items in which the PHA has no planned goals or activities may be deleted.

| 9110 - Reimbursement of Law Enforcement |                                                                                              |                   |            |                        |               | Total PHDEP Funding: \$70,000 |                          |
|-----------------------------------------|----------------------------------------------------------------------------------------------|-------------------|------------|------------------------|---------------|-------------------------------|--------------------------|
| Goal(s)                                 | To reduce drug-related criminal activity in targeted public housing developments.            |                   |            |                        |               |                               |                          |
| Objectives                              | Continue two utilize two full time Manchester Police officers to provide community policing. |                   |            |                        |               |                               |                          |
| Proposed Activities                     | # of Persons Served                                                                          | Target Population | Start Date | Expected Complete Date | PHDEP Funding | Other Funding (Amount/Source) | Performance Indicators   |
| 1. Community Policing                   |                                                                                              |                   | 12/01/01   | 11/31/02               | \$70,000      | \$10,000 in-kind MPD          | Reduce criminal activity |
| 2.                                      |                                                                                              |                   |            |                        |               |                               |                          |
| 3.                                      |                                                                                              |                   |            |                        |               |                               |                          |

| 9150 - Physical Improvements |                                                                                      |        |       |          |       | Total PHDEP Funding: \$4,000 |                        |
|------------------------------|--------------------------------------------------------------------------------------|--------|-------|----------|-------|------------------------------|------------------------|
| Goal(s)                      | To enhance security through physical improvements                                    |        |       |          |       |                              |                        |
| Objectives                   | To continue the resident initiative summer program for vegetable and flower gardens. |        |       |          |       |                              |                        |
| Proposed Activities          | # of                                                                                 | Target | Start | Expected | PHDEP | Other                        | Performance Indicators |

|                   | Person<br>s<br>Served | Population | Date   | Complete<br>Date | Funding | Funding<br>(Amount<br>/Source) |                                      |
|-------------------|-----------------------|------------|--------|------------------|---------|--------------------------------|--------------------------------------|
| 1. Garden Program |                       |            | 5/1/01 | 9/30/02          | \$4,000 |                                | Provide garden program to residents. |
| 2.                |                       |            |        |                  |         |                                |                                      |
|                   |                       |            |        |                  |         |                                |                                      |

| <b>9160 - Drug Prevention</b> |                                                                                                                 |                      |               |                              | <b>Total PHDEP Funding: \$58,000</b> |                                         |                        |
|-------------------------------|-----------------------------------------------------------------------------------------------------------------|----------------------|---------------|------------------------------|--------------------------------------|-----------------------------------------|------------------------|
| Goal(s)                       | To reduce drugs and drug related crime through educational/diversionary programming.                            |                      |               |                              |                                      |                                         |                        |
| Objectives                    | To provide Summer Swim, Escuelita, Computer Applications, Boys and Girls Club and PAL programming to residents. |                      |               |                              |                                      |                                         |                        |
| Proposed Activities           | # of<br>Person<br>s<br>Served                                                                                   | Target<br>Population | Start<br>Date | Expected<br>Complete<br>Date | PHEDEP<br>Funding                    | Other<br>Funding<br>(Amount<br>/Source) | Performance Indicators |
| 1. Computer Applications      | 48                                                                                                              | 48                   | 1/4/01        | 11/30/02                     | \$28,000                             |                                         | 48 students            |
| 2. Summer Swim                | 30                                                                                                              | 234                  | 7/1/01        | 8/30/02                      | \$3,000                              |                                         | 30 participants        |
| 3. Escuelita                  | 12                                                                                                              | 24                   | 7/1/01        | 8/20/02                      | \$3,000                              | \$3,020<br>private<br>donation          | 12 participants        |
| 4. Boys and Girls Club        | 100                                                                                                             | 310                  | 12/1/01       | 11/30/02                     | \$22,000                             |                                         | 100 participants       |
| 5. Police Athletic League     | 20                                                                                                              | 234                  | 12/1/01       | 11/30/02                     | \$2,000                              |                                         | 10 participants        |

| <b>9170 - Drug Intervention</b> |                                                                                                             |                      |               |                              | <b>Total PHDEP Funding: \$56,000</b> |                                         |                            |
|---------------------------------|-------------------------------------------------------------------------------------------------------------|----------------------|---------------|------------------------------|--------------------------------------|-----------------------------------------|----------------------------|
| Goal(s)                         | To educate staff, provide referrals/interventions and prevent youth from dropping out of school             |                      |               |                              |                                      |                                         |                            |
| Objectives                      | Encourage education and training for staff and residents, provide drop-out prevention activities for youth. |                      |               |                              |                                      |                                         |                            |
| Proposed Activities             | # of<br>Person<br>s<br>Served                                                                               | Target<br>Population | Start<br>Date | Expected<br>Complete<br>Date | PHEDEP<br>Funding                    | Other<br>Funding<br>(Amount<br>/Source) | Performance Indicators     |
| 1. Conferences/Training         | 10                                                                                                          | 10                   | 12/1/01       | 11/30/02                     | \$2,000                              |                                         | 10 training units provided |
| 2. Outdoor Adventure            | 30                                                                                                          | 138                  | 12/1/01       | 11/30/02                     | \$39,000                             | \$1,164 in<br>kind                      | 30 participants            |
| 3. Cultural Intervention        | 10                                                                                                          | 24                   | 12/1/01       | 11/30/02                     | \$15,000                             |                                         | 10 participants            |

| <b>9180 - Drug Treatment</b> |                                                                                                             |  |  |  | <b>Total PHDEP Funding: \$3,367</b> |  |  |
|------------------------------|-------------------------------------------------------------------------------------------------------------|--|--|--|-------------------------------------|--|--|
| Goal(s)                      | To provide access to treatment for residents who are in need of drug abuse intervention and treatment.      |  |  |  |                                     |  |  |
| Objectives                   | Continue to employ a Resident Facilitator and absorb treatment costs for individuals as needed/appropriate. |  |  |  |                                     |  |  |



| Proposed Activities | # of Persons Served | Target Population | Start Date | Expected Complete Date | PHEDEP Funding | Other Funding (Amount /Source) | Performance Indicators |
|---------------------|---------------------|-------------------|------------|------------------------|----------------|--------------------------------|------------------------|
| 1. Treatment        | 5                   | Unknown           | 12/1/01    | 11/30/02               | \$3,367        |                                |                        |
| 2.                  |                     |                   |            |                        |                |                                |                        |
| 3.                  |                     |                   |            |                        |                |                                |                        |

| 9190 - Other Program Costs |                                                                                                |                   |            |                        | Total PHDEP Funds: \$81,655 |                                |                        |
|----------------------------|------------------------------------------------------------------------------------------------|-------------------|------------|------------------------|-----------------------------|--------------------------------|------------------------|
| Goal(s)                    | To monitor program success and ensure continuation of programming.                             |                   |            |                        |                             |                                |                        |
| Objectives                 | To survey residents annually and continue to fund staff to carry out drug elimination strategy |                   |            |                        |                             |                                |                        |
| Proposed Activities        | # of Persons Served                                                                            | Target Population | Start Date | Expected Complete Date | PHEDEP Funding              | Other Funding (Amount /Source) | Performance Indicators |
| 1. Annual survey           |                                                                                                |                   | 1/5/01     | 1/20/01                | \$3,000                     |                                | 50% return rate        |
| 2. Salaries and Benefits   |                                                                                                |                   | 12/1/01    | 11/30/02               | \$78,655                    | \$59,155                       |                        |
| 3.                         |                                                                                                |                   |            |                        |                             |                                |                        |

### Section 3: Expenditure/Obligation Milestones

Indicate by Budget Line Item and the Proposed Activity (based on the information contained in Section 2 PHDEP Plan Budget and Goals), the % of funds that will be expended (at least 25% of the total grant award) and obligated (at least 50% of the total grant award) within 12 months of grant execution.

| Budget Line Item #                 | 25% Expenditure of Total Grant Funds By Activity # | Total PHDEP Funding Expended (sum of the activities) | 50% Obligation of Total Grant Funds by Activity # | Total PHDEP Funding Obligated (sum of the activities) |
|------------------------------------|----------------------------------------------------|------------------------------------------------------|---------------------------------------------------|-------------------------------------------------------|
| <i>e.g Budget Line Item # 9120</i> | <i>Activities 1, 3</i>                             |                                                      | <i>Activity 2</i>                                 |                                                       |
| 9110                               | Activity 1                                         | \$70,000                                             | Activity 1                                        | \$70,000                                              |
| 9120                               |                                                    |                                                      |                                                   |                                                       |
| 9130                               |                                                    |                                                      |                                                   |                                                       |
| 9140                               |                                                    |                                                      |                                                   |                                                       |
| 9150                               | Activity 1                                         | \$4,000                                              | Activity 1                                        | \$4,000                                               |
| 9160                               | Activity 1,2,3,4,5                                 | \$58,000                                             | Activity 1,2,3,4,5                                | \$58,000                                              |
| 9170                               | Activity 1,2,3                                     | \$56,000                                             | Activity 1,2,3                                    | \$56,000                                              |
| 9180                               | Activity 1                                         | \$3,367                                              | Activity 1                                        | \$3,367                                               |
| 9190                               | Activity 1,2                                       | \$81,655                                             | Activity 1,2                                      | \$81,655                                              |
|                                    |                                                    |                                                      |                                                   |                                                       |
| <b>TOTAL</b>                       |                                                    | \$273,022                                            |                                                   | \$273,022                                             |
|                                    |                                                    |                                                      |                                                   |                                                       |

#### **Section 4: Certifications**

A comprehensive certification of compliance with respect to the PHDEP Plan submission is included in the “PHA Certifications of Compliance with the PHA Plan and Related Regulations.”

## Comments and questions from the July 6, 2000 Public Hearing Comprehensive Agency Plan

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The Public Hearing began with an explanation of the purpose of the Comprehensive Agency Plan, which provides an opportunity for the public and residents to review and comment on the policies governing the Authority's operations. Authority staff gave a presentation on the Plan and its components. The floor was then open to the public. The following questions and comments were received at that time.

**Question:** I care for my granddaughter. Does the new Section 8 rule regarding renting to a relative affect me?

**Response:** No. This rule only applies to a family member that rents an apartment to another family member.

**Comment:** A lot of protections have been dropped for Section 8 tenants. They will call the MHRA with a problem and are told staff can't or won't help them.

**Response:** We try to protect tenants the best we can. We can force some issues, however, it is currently a "landlord" market. Example: a tenant can call staff when repairs aren't done. Staff can contact the landlord, stating that the repairs must be done or the tenant will have to terminate the lease. The landlord can refuse to make the repairs - which would result in the tenant being forced to move out - knowing the apartment can be leased for a higher rent and fewer strings by a non-subsidized tenant. Section 8 staff often advises tenants to contact legal aide.

**Comment:** A door was broken due to an attempted break-in. When the police were contacted, the tenant was told to contact the MHRA. If we in turn contacted the police, then they would get involved.

**Response:** Call us anyway. We can investigate the other tenant if s/he is on Section 8, although this information cannot be disclosed. We now have someone on staff who devotes some time to investigations.

**General Response:** Federal regulations have removed us a lot further from the process. We no longer have a standard lease form to utilize. We still do what we can to help tenants but that is a lot less than it used to be because of new regulations. Tenants are advised to screen their landlords. Any tenant with problems should contact the Section 8 department, Dick Webster in particular.

**Comment:** This was not a complaint against the maintenance staff but simply a clarification. The comment was regarding snow plowing at the ends of O'Malley Street. Some staff will plow; others will politely state that it is the City's responsibility and that they are not allowed to plow.

**Response:** The MHRA has obtained ownership of O'Malley Street from the intersection of South Elm Street to Trahan Street and Brown Avenue to Ahern Street. The maintenance staff should be plowing these areas.

**Question:** How do I switch from Section 8 to a Scattered Site (public housing) development? There is a 12 to 18-month waiting period. Other agencies that provide subsidized housing have a waiting list that is five years or more.

**Response:** Apply anyway. There are other agencies that provide subsidized housing that we recommend applying to as well. Often people are on a number of waiting lists but don't remove their names once they receive housing assistance. When they come to the top of the MHRA list they are already housed; sometimes this scenario results in a fast moving list. If you contact the office we will provide a list of subsidized housing developments.

**Comments and questions from the July 6, 2000 Public Hearing  
Comprehensive Agency Plan**

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No preference is given for people already residing in assisted housing. The theory is that those who need assistance, need it; those who already are in subsidized housing don't need the assistance as badly. As a result, a person/family in this situation may constantly be moved to the bottom of the waiting list.

**Question:** Why can't at least elderly have a second screen door for their units? Tenants have to provide a \$100 deposit if they want a screen door. When they leave, the door will stay and the new person will get the door for free.

**Response:** When a tenant with a screen door vacates a unit their deposit is returned assuming the screen door is in good condition.

**Question:** What if the rent goes so high that a Section 8 tenant has to pay more than 40% of their monthly income?

**Response:** There is nothing stopping a landlord from raising the rent after the initial lease. If you are in the apartment where the rent is raised it is your decision whether to stay and pay more.

**Question:** How much is deducted for medical expenses?

**Response:** Three percent is deducted for medical expenses.

**Question:** If the rent goes up, the tenant either pays or leaves. Does the MHRA have listings to help a tenant locate a new apartment?

**Response:** Yes, the MHRA has listings but with the current market apartments are renting very quickly. We also maintain a list of the 25 largest Section 8 landlords which has helped in locating available apartments.

**Comment:** Some of the outside trim throughout the development needs painting.

**Comment:** There are specific days when the trash is supposed to be put out for pick-up. Some people put it out after pick-up so it stays there for a few days, gets thrown around. Everyone should have to go by the same rules.

**Question:** Are there ceiling rents in Section 8? Can a landlord kick you out if your rent goes up and you can't pay?

**Response:** You can be kicked-out if your rent goes up and you can't pay.

**Comprehensive Agency Plan  
Comments and Questions from July 10, 2000  
Resident Advisory Board Meeting**

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**Present:**

Resident Advisory Board:

Eleanor Brooks  
Ginny Carmichael  
Bill Donohoe  
Marie Donohoe

MHRA Staff:

Ken Edwards, Assistant Executive Director  
Amanda Parenteau, Project Coordinator

All persons present were in attendance at the July 6 Public Hearing during which a full presentation of the Comprehensive Agency Plan was given by MHRA staff. The Resident Advisory Board meeting began with a brief review of the PHA Plan and it's purpose followed by a question and answer period. Below is a list of questions, comments and responses from this meeting.

**Question:** Why can't elderly buildings stay elderly?

**Response:** Housing must be offered to any and all eligible persons; we can't discriminate regardless of age.

**Question:** What is the ratio of efficiency and one-bedroom apartments at the Pariseau?

**Response:** I think 35 – 40% are efficiencies; the rest are one-bedrooms. We've considered converting to all one-bedroom units, however, this would require combining units resulting in a loss of units and a reduction in HUD funding without a change in the size of the building. (The actual number of efficiencies is 58 out of 100)

**Comment:** Residents at Kalivas Apartments are worried about trespassing once the new MNHS units on Auburn Street are occupied. The police have been called about current trespassing but they say they can't do anything.

**Response:** We've installed "No Trespassing" signs already. MNHS is very good about managing their properties. Police should be more responsive to calls because signs are up.

**Question:** Will they ever increase congregate services?

**Response:** Not that we are aware of. We've applied for funding from the state for an additional site but we did not receive funding. We will continue to apply for funding as opportunities arise.

**Question:** Applicants may refuse up to two units?

**Response:** Yes.

**Question:** What is the procedure for applying for modernization funds? What about major unexpected items?

**Response:** Modernization funding is included in the Agency Plan. In addition we budget approximately \$500,000 each year for extraordinary maintenance for preventative maintenance and emergencies. We can also access operating reserves if something unexpected arises. We use extraordinary maintenance to replace appliances, roofs, etc. before problems arise. The elevator at Burns and the closet door replacements at Kalivas were funded through the extraordinary maintenance budget.

**Question:** Are O'Malley and Pariseau next in line for sprinklers?

**Response:** Yes after Kalivas, which is scheduled to start in September.

**Question:** Why were the stoves at Burns replaced? Did one burn out?

**Response:** Appliances are cyclically replaced so that a problem doesn't arise. Used appliances are sold through a bidding process, usually to large scale landlords or used appliance stores.

**Question:** Whose responsibility is it to inform new tenants of everything that's going on?

**Response:** Management staff is responsible for conducting an orientation.

**Comment:** The fire alarm will go off, which is very loud, and a new tenant will have no idea what is going on. Also, if the panic alarm is set off it automatically unlocks the door to allow entry. However, if the handle is touched the door automatically locks. New tenants don't know this.

**Comprehensive Agency Plan  
Comments and Questions from July 10, 2000  
Resident Advisory Board Meeting**

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**Comment:** Staff members don't always tell new residents about features in the apartments.

**Comment:** The hi-rises use fire wardens to be sure other tenants know evacuation routes.

**Question:** A resident in Section 8 requires a lot of medical equipment. Can this person stay in a two-bedroom apartment because of the need for space to house the medical equipment?

**Response:** I don't know for sure. The tenant would need confirmation from his/her doctor stating s/he needs the equipment and thus the additional room and request a reasonable accommodation. It would also depend on the landlord.

**Question:** Why weren't screen doors put on all the units at Elmwood?

**Response:** The cost involved was prohibitive.

**Question:** Is it against the law to put screen doors on the front of the units?

**Response:** No. Screen doors are not allowed on the front of buildings because if only a few units in a building have screen doors it would not look right.

**Comment:** Unauthorized people are the biggest problem.

**Response:** It is very difficult to prove a case against unauthorized people. We don't want to go to court unless we know we will be successful, and it takes substantial staff time to fully investigate and develop a case against an unauthorized person.

**Comment:** A number of tenants put out their trash too early and then leave the barrels there for days. Or they will not take their trash to the sidewalk for pick-up for weeks, letting it pile up in the enclosed areas.

## **Chapter 10**

### **PET POLICY**

**[24 CFR 5.309]**

#### **INTRODUCTION**

Housing authorities have discretion to decide whether or not to develop policies pertaining to the keeping of pets in public housing units. This Chapter explains the MHRA's policies on the keeping of pets and any criteria or standards pertaining to the policy. The rules adopted are reasonably related to the legitimate interest of the MHRA to provide a decent, safe and sanitary living environment for all residents, to protecting and preserving the physical condition of the property, and the financial interest of the MHRA.

The purpose of this policy is to establish the MHRA's policy and procedures for ownership of pets in MHRA housing developments and to ensure that no applicant or resident is discriminated against regarding admission or continued occupancy because of ownership of pets. It also establishes reasonable rules governing the keeping of common household pets.

Nothing in this policy or the dwelling lease limits or impairs the right of persons with disabilities to own animals that are used to assist them.

#### **A. PET DEPOSIT**

Residents with pets (dogs and cats) must pay a \$50.00 pet deposit.

The MHRA will refund the Pet Deposit plus interest to the resident, less any damage caused by the pet to the dwelling unit within thirty (30) days after removal of the pet from the unit and after completion of a unit inspection.

The Pet Deposit plus interest will be returned to the person designated by the former resident in the event of the former resident's incapacitation or death.

The MHRA will provide the resident or designee identified above with a written list of any charges against the Pet Deposit. If the resident disagrees with the amount charged to the Pet Deposit, the MHRA will provide a meeting to discuss the charges.

#### **ASSISTIVE ANIMALS**

Certain pet rules may be excluded from the pet policy if those animals assist persons with disabilities or are required for a resident to enjoy an equal housing opportunity.

To be excluded from the pet policy, the resident/pet owner must certify:

That there is a person with disabilities in the household;

That the animal has been trained to assist with the specified disability;

That the need for an assistive animal in the provision of services is required to live and function independently.

Any exception to the pet policy must be approved by the Public Housing Property Manager.

Residents with approved assistive animals shall be subject to all pet policy requirements that would put other residents' safety or well being in jeopardy.

Residents utilizing an assistive animal and able to certify the need will be eligible for the medical allowance for all costs associated with the animal and its maintenance, such as food, shots, license, etc. and will not be required to pay the Pet Deposit.

## **B. MANAGEMENT APPROVAL OF PETS**

All pets must be approved in advance by MHRA management.

The pet owner must submit and enter into a Pet Agreement with the MHRA.

### **Registration of Pets**

Pets must be registered with the MHRA before they are brought onto the premises. Registration includes certificate signed by a licensed veterinarian or State/local authority that the pet has received all inoculations required by State or local law, that the pet has no communicable disease(s) and is pest-free.

### **MHRA Rules and Regulations for Pets in Elderly Housing**

1. Resident must provide information sufficient to identify the pet and demonstrate that it is a pet allowed by MHRA and provide a photograph of the pet.
2. No animal may be more than twenty (20) inches high nor weigh more than forty (40) pounds.
3. Resident must provide management with a "damage deposit" of \$50.00.
4. Resident must be totally responsible for the care and cleanliness of the animal, both within the building and apartment areas.
5. No more than one dog or one cat is permitted in each dwelling unit.



6. Animals must be leashed. No animal waste will be tolerated on any building site. A pet waste removal charge of \$5.00 will be assessed for each occurrence and repeated offenses will be considered good cause for withdrawal of permission to have a pet. Failure to remove the pet will result in lease termination.
7. If a resident cares for another resident's pet, they must abide by all rules in the Pet Policy.
8. MHRA shall not be held responsible for illnesses caused to animals due to maintenance procedures such as extermination, use of cleaning or painting products, lawn and garden care.
9. The pet owner must register the pet before it is brought on the development premises and must update the registration annually, at time of recertification.
10. Resident must provide management with a veterinarian's certificate stating the animal is in good health and, if pet is a dog or cat, that it has been neutered or spayed and received all necessary inoculations.
11. Any person who considers a dog to be a nuisance (barking for sustained periods so as to disturb the peace and quiet of a neighborhood or area) or a menace (vicious to persons, their animals or property), may make a complaint in writing to any law enforcement officer and such complaint will be filed.
12. All pets shall be licensed as appropriate under local law.
13. Except for entering and exiting, no pet shall be allowed in common areas, e.g.: lobbies, Community Center/Rooms, laundry areas, hallways, stair towers, above grade balconies of platforms, outside areas where residents congregate, etc. of any building.

### **Refusal To Register Pets**

The MHRA may not refuse to register a pet based on the determination that the pet owner is financially unable to care for the pet. If the MHRA refuses to register a pet, a written notification will be sent to the pet owner stating the reason for denial and shall be served in accordance with HUD Notice requirements.

The MHRA will refuse to register a pet if:

The pet is not a MHRA approved pet as defined in this policy;

Keeping the pet would violate the Pet Policy;

The pet owner fails to provide complete pet registration information, or fails to update the registration annually;

The MHRA reasonably determines that the pet owner is unable to keep the pet in compliance with the pet rules and other lease obligations. The pet's temperament and behavior may be

considered as a factor in determining the pet owner's ability to comply with provisions of the lease.

The notice of refusal may be combined with a notice of a pet violation.

### **Types of Pets Allowed**

No types of pets other than the following may be kept by a resident.

Residents are not permitted to have more than one type of pet.

1. Dogs (Allowed in elderly housing only)

Maximum number: one (1)

Maximum adult weight: forty (40) pounds

Must be housebroken

Must be spayed or neutered

Must have all required inoculations

Must be licensed as specified now or in the future by State law and local ordinance, rules and regulations

2. Cats (Allowed in elderly housing only)

Maximum number: one (1)

Must be spayed or neutered

Must have all required inoculations

Must be trained to use a litter box or other waste receptacle

Must be licensed as specified now or in the future by State law or local ordinance, rules and regulations

3. Birds (Allowed in both elderly and family housing)

Maximum number: two (2)

Must be enclosed in a cage at all times

4. Fish (Allowed in both elderly and family housing)

Maximum aquarium size: 1-20 gallon

Must be maintained on a safe and sturdy stand

**C. PETS TEMPORARILY ON THE PREMISES**

Pets, which are not owned by a resident, will not be allowed.

Residents are prohibited from feeding or harboring stray animals on MHRA property, including pigeons and squirrels.

This rule excludes visiting pet programs sponsored by a humane society or other non-profit organization and approved by the MHRA.

**D. DESIGNATION OF PET/NO-PET AREAS**

The following areas are designated no-pet areas:

- Outside areas where residents congregate.
- Lobbies, except to enter and exit.
- Community centers/rooms
- Laundry areas
- Hallways and stair towers, except to enter and exit.
- Above grade community balconies and platforms.

**E. ADDITIONAL FEES AND DEPOSITS FOR PETS**

The resident/pet owner shall be required to pay a refundable deposit for the purpose of defraying all reasonable costs directly attributable to the presence of pets.

Residents with a dog or a cat must pay a \$50.00 deposit.

Payment is due prior to the date the pet is properly registered and brought into the apartment.

The MHRA reserves the right to change or increase the required deposit for new residents or current residents who become a new pet owner by amendment to these rules.

The MHRA will refund the Pet Deposit plus interest to the resident, less any damage caused by the pet to the dwelling unit, within thirty (30) days after removal of the pet from the unit and after completion of a unit inspection.

The MHRA will return the Pet Deposit plus interest to the former resident or to the person designated by the former resident in the event of the former resident's incapacitation or death.

The MHRA will provide the resident or designee identified above with a written list of any charges against the pet deposit. If the resident disagrees with the amount charged to the pet deposit, the MHRA will schedule a meeting to discuss the charges.

All reasonable expenses incurred by the MHRA as a result of damages directly attributable to the presence of the pet in the development will be the responsibility of the resident, including:

- The cost of repairs and replacements to the resident's dwelling unit;
- Fumigation of the dwelling unit;
- Common areas of the development.

Pet Deposits are **not** a part of rent payable by the resident.

**F. ALTERATIONS TO UNIT**

Resident pet owners shall not alter their unit, patio, premises or common areas to create an enclosure for any animal. Installation of pet doors is prohibited.

**G. PET WASTE REMOVAL CHARGE**

A separate pet waste removal charge of \$5.00 per occurrence will be assessed against the resident for violations of the pet policy.

Pet deposit and pet waste removal charges are **not** part of rent payable by the resident.

All reasonable expenses incurred by the MHRA as the result of damages directly attributable to the presence of the pet will be the responsibility of the resident, including:

- The cost of repairs and replacements to the dwelling unit;
- Fumigation of the dwelling unit.

If the resident is in occupancy when such costs occur, the resident shall be billed for such costs as a current charge.

If such expenses occur as the result of a move-out inspection, they will be deducted from the pet deposit. The resident will be billed for any amount that exceeds the pet deposit.

The pet deposit plus interest, less any amounts withheld will be refunded when the resident moves out or no longer has a pet on the premises, whichever occurs first.

The expense of flea deinfestation shall be the responsibility of the resident.

#### **H. PET AREA RESTRICTIONS**

Pets must be maintained within the resident's unit. When outside of the unit (within the building or on the grounds) dogs and cats must be kept on a leash or carried and under the control of the resident or other responsible individual at all times.

Pets are not permitted in common areas including lobbies, community rooms and laundry areas except while passing through common areas which are entrances to and exits from the building.

#### **I. NOISE**

Pet owners must agree to control the noise of pets so that such noise does not constitute a nuisance to other residents or interrupt their peaceful enjoyment of their housing unit or premises. This includes, but is not limited to loud or continuous barking, howling, whining, biting, scratching, chirping, or other such activities.

#### **J. CLEANLINESS REQUIREMENTS**

Litter Box Requirements. All animal waste or the litter from litter boxes shall be picked up immediately by the pet owner, disposed of in sealed plastic trash bags, and placed in a trash bin. If bags are not strong, litter should be double bagged.

Litter shall not be disposed of by being flushed through a toilet.

Litter boxes shall be stored inside the resident's dwelling unit.

Removal of Waste From Other Locations. The Resident/Pet Owner shall be responsible for the removal of waste by placing it in a sealed plastic bag and disposing of it in an outside trash bin.

All fumigation costs attributable to pets during occupancy will be charged to the resident.

Any fumigation costs in units with dogs, cats, or birds will be charged to the resident at the time the unit is vacated.

The resident/pet owner shall take adequate precautions to eliminate any pet odors within or around the unit and to maintain the unit in a sanitary condition at all times.

#### **K. PET CARE**

No pet shall be left unattended in any apartment for an inappropriate period of time.

All resident pet owners shall be responsible for adequate care, nutrition, exercise and medical attention for his/her pet.

Resident pet owners must recognize that other residents may have chemical sensitivities or allergies related to pets, or may be easily frightened or disoriented by animals. Pet owners must agree to exercise courtesy with respect to other residents.

**L. RESPONSIBLE PARTIES**

The resident pet owner will be required to designate one responsible party for the care of the pet if the health or safety of the 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.

**M. INSPECTIONS**

The MHRA, after reasonable notice to the resident during reasonable hours, will enter and inspect the premises, in addition to other inspections allowed.

**N. PET RULE VIOLATION NOTICE**

If a determination is made on objective facts supported by written statements, that a resident/pet owner has violated the Pet Policy, written notice will be served.

The Notice will contain a brief statement of the factual basis for the determination and the pet rule(s), which were violated. The notice will also state:

That the resident pet owner has five (5) business days from the effective date of the service of notice to correct the violation or make written request for a meeting to discuss the violation;

That the resident pet owner is entitled to be accompanied by another person of his or her choice at the meeting; and

That the resident pet owner's failure to correct the violation, request a meeting, or appear at a requested meeting may result in initiation of procedures to terminate the pet owner's residency.

If the pet owner requests a meeting within the five (5) business days period, the meeting will be scheduled no later than seven (7) calendar days before the effective date of service of the notice, unless the pet owner agrees to a later date in writing.

**O. NOTICE FOR PET REMOVAL**

If the resident pet owner and the MHRA are unable to resolve the violation at the meeting or the pet owner fails to correct the violation in the time period allotted by the MHRA, the MHRA may serve notice to remove the pet.

The Notice shall contain:

A brief statement of the factual basis for the MHRA's determination of the pet rule that has been violated;

The requirement that the resident pet owner must remove the pet within five (5) business days of the notice; and

A statement that failure to remove the pet may result in the initiation of termination of the lease.

**P. TERMINATION OF RESIDENCY**

The MHRA may initiate procedures for termination of residency based on a pet rule violation if:

The pet owner has failed to remove the pet or correct a pet rule violation within the time period specified; and

The pet rule violation is sufficient to begin procedures to terminate residency under terms of the lease.

**Q. PET REMOVAL**

If the death or incapacity of the pet owner threatens the health or safety of the pet, or other factors occur that render the owner unable to care for the pet, the situation will be reported to the Responsible Party designated by the resident pet owner. This would include pets that are poorly cared for or have been left unattended for over twenty-four (24) hours.

If the responsible party is unwilling or unable to care for the pet, or if the MHRA, after reasonable efforts, cannot contact the responsible party, the MHRA may contact the appropriate State or local agency and request the removal of the pet.

If the pet is removed as a result of any aggressive act on the part of the pet, the pet will not be allowed back on the premises.

**R. EMERGENCIES**

The MHRA will take all necessary steps to insure that pets that become vicious, display symptoms of severe illness, or demonstrate behavior that constitutes an immediate threat to the health or safety of others, are referred to the appropriate State or local entity authorized to remove such animals.

If it is necessary for the MHRA to place the pet in a shelter facility, the cost will be the responsibility of the resident pet owner.