

<b>PHA 5-Year and Annual Plan</b>	<b>U.S. Department of Housing and Urban Development Office of Public and Indian Housing</b>	<b>OMB No. 2577-0226 Expires 4/30/2011</b>
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<b>1.0</b>	<b>PHA Information</b> PHA Name: Norwich Housing Authority      PHA Code: CT018000001 PHA Type: <input type="checkbox"/> Small <input checked="" type="checkbox"/> High Performing <input type="checkbox"/> Standard <input type="checkbox"/> HCV (Section 8) PHA Fiscal Year Beginning: (MM/YYYY): 04/2009				
<b>2.0</b>	<b>Inventory</b> (based on ACC units at time of FY beginning in 1.0 above) Number of PH units: 177      Number of HCV units: 514				
<b>3.0</b>	<b>Submission Type</b> <input checked="" type="checkbox"/> 5-Year and Annual Plan <input type="checkbox"/> Annual Plan Only <input type="checkbox"/> 5-Year Plan Only				
<b>4.0</b>	<b>PHA Consortia</b> <input type="checkbox"/> PHA Consortia: (Check box if submitting a joint Plan and complete table below.)				
	Participating PHAs	PHA Code	Program(s) Included in the Consortia	Programs Not in the Consortia	No. of Units in Each Program
					PH      HCV
	PHA 1:				
	PHA 2:				
	PHA 3:				
<b>5.0</b>	<b>5-Year Plan.</b> Complete items 5.1 and 5.2 only at 5-Year Plan update.				
<b>5.1</b>	<b>Mission.</b> 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 for the next five years:  The Norwich Housing Authority shall at all times strive to develop and operate each development solely for the purpose of providing decent, safe and sanitary housing for eligible families in a manner that promotes the serviceability, economy, efficiency and stability of the developments, and the economic and social well-being of the residents.  <u>See, also,</u> 5.2 and 10 below.				
<b>5.2</b>	<b>Goals and Objectives.</b> Identify the PHA's quantifiable goals and objectives that will enable the PHA to serve the needs of low-income and very low-income, and extremely low-income families for the next five years. Include a report on the progress the PHA has made in meeting the goals and objectives described in the previous 5-Year Plan.  The Norwich Housing Authority previously conducted an energy audit of its federal properties (Oakwood Knoll, Westwood Park and Dorsey Building). The same investigated and identified cost effective energy conservation measures. Work on these improvements has begun and will continue over the next five (5) years, to include, but not be limited to, insulating the Oakwood Knoll crawl space. In addition, the Authority intends to renovate bathrooms at the Dorsey Building and Westwood Park. Lastly, the Authority will continue Police Patrols at Oakwood Knoll, Dorsey Building and Westwood Park.  The Authority's 2006 Capital Fund Program (CFP CT26P01850106) has been applied towards the Energy Conservation Program and provided for additional police patrols at Oakwood Knoll, Westwood Park and the Dorsey Building. The Authority's 2007 Capital Fund Program (CFP CT26P01850107) has been used to implement the recommendations outlined in the aforesaid Energy Conservation Program and continues to provide for additional police patrols at Oakwood Knoll, Westwood Park and the Dorsey Building. The Authority's 2008 Capital Fund Program (CFP CT26P01850108) is being used to replace the Fire / Heat / Call for Aid Alarm System at the Dorsey Building and to continue to provide for additional police patrols at Oakwood Knoll, Westwood Park and the Dorsey Building.  <u>See, also,</u> 10 below.				
<b>6.0</b>	<b>PHA Plan Update</b>  (a) Identify all PHA Plan elements that have been revised by the PHA since its last Annual Plan submission:  There have been no revisions.  (b) Identify the specific location(s) where the public may obtain copies of the 5-Year and Annual PHA Plan. For a complete list of PHA Plan elements, see Section 6.0 of the instructions.  The 5-Year and Annual Plan are available at the Norwich Housing Authority's Main Office, 10 Westwood Park, Norwich, CT.				
<b>7.0</b>	<b>Hope VI, Mixed Finance Modernization or Development, Demolition and/or Disposition, Conversion of Public Housing, Homeownership Programs, and Project-based Vouchers.</b> <i>Include statements related to these programs as applicable.</i>  Not applicable.				

8.0	<b>Capital Improvements.</b> Please complete Parts 8.1 through 8.3, as applicable.
8.1	<b>Capital Fund Program Annual Statement/Performance and Evaluation Report.</b> As part of the PHA 5-Year and Annual Plan, annually complete and submit the <i>Capital Fund Program Annual Statement/Performance and Evaluation Report</i> , form HUD-50075.1, for each current and open CFP grant and CFFP financing.  <u>See attached.</u>
8.2	<b>Capital Fund Program Five-Year Action Plan.</b> As part of the submission of the Annual Plan, PHAs must complete and submit the <i>Capital Fund Program Five-Year Action Plan</i> , form HUD-50075.2, and subsequent annual updates (on a rolling basis, e.g., drop current year, and add latest year for a five year period). Large capital items must be included in the Five-Year Action Plan.  <u>See attached.</u>
8.3	<b>Capital Fund Financing Program (CFFP).</b> <input type="checkbox"/> Check if the PHA proposes to use any portion of its Capital Fund Program (CFP)/Replacement Housing Factor (RHF) to repay debt incurred to finance capital improvements.  N/A
9.0	<b>Housing Needs.</b> Based on information provided by the applicable Consolidated Plan, information provided by HUD, and other generally available data, make a reasonable effort to identify the housing needs of the low-income, very low-income, and extremely low-income families who reside in the jurisdiction served by the PHA, including elderly families, families with disabilities, and households of various races and ethnic groups, and other families who are on the public housing and Section 8 tenant-based assistance waiting lists. The identification of housing needs must address issues of affordability, supply, quality, accessibility, size of units, and location.  <u>See attached</u> , for statement of housing needs of families on the Authority’s public housing and Section 8 tenant-based assistance waiting lists.  A review of the City of Norwich’s Consolidated Plan, information provided by HUD, and other generally available data including, but not limited to, the last census, the housing needs of the low-income, very low-income, and extremely low-income families who reside in the jurisdiction served by the PHA, including elderly families, families with disabilities, and households of various races and ethnic groups, reflect similar needs to families on the Authority’s public housing and Section 8 tenant based assistance waiting lists.  Norwich’s most recent Consolidated Plan in 2002, showed that Norwich’s population was about 36,117 in 2000, of which 2,469 or 6.89% was black, 2,208 or 6.1% was Hispanic, 758 or 2.1% was Asian and 998 or 2.8% was other. 17.8% of the population was non-white. The establishment of two major casinos in the area has further changed the demographics in Norwich since 2000. The State Department of Economic Development estimated that in 2000 Norwich ranked 140 <sup>th</sup> of 169 Connecticut towns in per capita income. Consequently, the needs of Norwich’s population, including housing, are significantly greater than other parts of the state.  The City’s Consolidated Plan adopted the following strategies: “promote programs that increase owner occupancy of housing units; consider the need for smaller unit sizes as household size continues to decrease and the percentage of older persons fluctuates; maintain affordable housing efforts by continuing to update existing complexes and sustaining the state standard of 10% of housing units meeting affordable guidelines; and working with Southeast Council of Governments on a regional solution to the shortage of available rental units.” Compared to other communities in the region and the state as a whole, Norwich has fewer single family units and more multifamily units. In 2000, 53% of housing units in Norwich were owner occupied and 47% were renter occupied housing units. Between 1990 and 2000, the number of one person households increased from 27.8% to 32% (4.2% increase). The number of households with persons age 65+ decreased from 27.3% in 1990 to 25.8% in 2000. Households in Norwich with children under 18 years of age increased in 2000 to 33.3% from 31.5% in 1990.  According to the City’s Consolidated Plan, housing in Norwich was relatively affordable. Norwich ranked 152 <sup>nd</sup> of 155 communities in Connecticut in 1999 median sales price of residential property. Notwithstanding the above, there is a discrepancy in the affordability of housing sales and housing rental rates. Rents have continued to rise between 2000 – 2008, even during the recent economic downturn that has severely impacted single family housing sales. The primary cause of this phenomenon is the increase in employment at the afore-mentioned two casinos. As apartments have become scarce, rental rates have gone up. Even so, the City’s Consolidated Plan concludes that “Norwich currently does more than its share in providing affordable housing. According to data from the Connecticut Department of Economic and Community Development, Norwich had 2,982 units (18.1% of total units) that were considered ‘affordable’ housing as of 1999.”

<p><b>9.1</b></p>	<p><b>Strategy for Addressing Housing Needs.</b> 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. <b>Note: Small, Section 8 only, and High Performing PHAs complete only for Annual Plan submission with the 5-Year Plan.</b></p> <p>Maximize the number of affordable units available to PHA within its current resources by reducing turnover time for vacated public housing units, reduce time to renovate public housing units, maintain or increase Section 8 lease-up rates by establishing payment standards that will enable families to rent throughout the jurisdiction and participate I the Consolidated Plan development process to ensure co-ordination with broader community strategies and to identify housing needs, to include, but not limited to affordability, supply, quality, accessibility, size of units and location. PHA has actively participated and cooperated with various municipal entities and nonprofits looking to increase and improve affordable housing alternatives within the jurisdiction. This, in turn, would benefit individuals on the PHA’s waiting list.</p>
<p><b>10.0</b></p>	<p><b>Additional Information.</b> Describe the following, as well as any additional information HUD has requested.</p> <p>(a) Progress in Meeting Mission and Goals. Provide a brief statement of the PHA’s progress in meeting the mission and goals described in the 5-Year Plan.</p> <p>The Authority’s 2006 Capital Fund Program (CFP CT26P01850106) will be applied towards the Energy Conservation Program and to provide for additional police patrols at Oakwood Knoll and Westwood Park. The Authority’s 2007 Capital Fund Program (CFP CT26P01850107) will be used to implement the recommendations outlined in the aforesaid Energy Conservation Program and continue to provide additional police patrols at Oakwood Knoll and Westwood Park. The Authority’s 2008 Capital Fund Program (CFP CT26P01850108) will be used to replace the Fire / Heat / Call for Aid Alarm System at the Dorsey Building and to continue to provide additional police patrols at Oakwood Knoll and Westwood Park.</p> <p>See, also, 5.1 and 5.2 above.</p> <p>(b) Significant Amendment and Substantial Deviation/Modification. Provide the PHA’s definition of “significant amendment” and “substantial deviation/modification”</p> <p>Significant amendments to the Annual Plan include the changes identified as substantial deviations from the 5-year plan and any change in a CFP work item / project resulting in an increase or decrease of 25% or more in the amount of funding for that work item / project and require approval from the Board of Commissioners.</p> <p>Substantial deviations from the 5-year plan are changes to any plans or policies that fundamentally change the agency’s mission, goals, objectives or plans and require approval from the Board of Commissioners. This definition also includes any work item / projects to be added to the CFP 5-year action plan.</p>
<p><b>11.0</b></p>	<p><b>Required Submission for HUD Field Office Review.</b> In addition to the PHA Plan template (HUD-50075), PHAs must submit the following documents. Items (a) through (g) may be submitted with signature by mail or electronically with scanned signatures, but electronic submission is encouraged. Items (h) through (i) must be attached electronically with the PHA Plan. <b>Note:</b> Faxed copies of these documents will not be accepted by the Field Office.</p> <p>(a) Form HUD-50077, <i>PHA Certifications of Compliance with the PHA Plans and Related Regulations</i> (which includes all certifications relating to Civil Rights)</p> <p>(b) Form HUD-50070, <i>Certification for a Drug-Free Workplace</i> (PHAs receiving CFP grants only)</p> <p>(c) Form HUD-50071, <i>Certification of Payments to Influence Federal Transactions</i> (PHAs receiving CFP grants only)</p> <p>(d) Form SF-LLL, <i>Disclosure of Lobbying Activities</i> (PHAs receiving CFP grants only)</p> <p>(e) Form SF-LLL-A, <i>Disclosure of Lobbying Activities Continuation Sheet</i> (PHAs receiving CFP grants only)</p> <p>(f) Resident Advisory Board (RAB) comments. Comments received from the RAB must be submitted by the PHA as an attachment to the PHA Plan. PHAs must also include a narrative describing their analysis of the recommendations and the decisions made on these recommendations. See attached.</p> <p>(g) Challenged Elements</p> <p>(h) Form HUD-50075.1, <i>Capital Fund Program Annual Statement/Performance and Evaluation Report</i> (PHAs receiving CFP grants only)</p> <p>(i) Form HUD-50075.2, <i>Capital Fund Program Five-Year Action Plan</i> (PHAs receiving CFP grants only)</p>



Annual Statement/Performance and Evaluation Report  
 Capital Fund Program, Capital Fund Program Replacement Housing Factor and  
 Capital Fund Financing Program


U.S. Department of Housing and Urban Development  
 Office of Public and Indian Housing  
 OMB No. 2577-0226  
 Expires 4/30/2011

<b>Part I: Summary</b>					
PHA Name: Norwich Housing Authority 10 Westwood Park, Norwich, CT		Grant Type and Number Capital Fund Program Grant No: CT26P01850106    Replacement Housing Factor Grant No: Date of CFFP: _____			FFY of Grant: 2006 FFY of Grant Approval: 2006
Type of Grant <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no: ) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: <u>9/30/2008</u> <input type="checkbox"/> Final Performance and Evaluation Report					
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost <sup>1</sup>	
		Original	Revised <sup>2</sup>	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) <sup>3</sup>	15,000.00	15,000.00	15,000.00	13,487.25
3	1408 Management Improvements				
4	1410 Administration (may not exceed 10% of line 21)	20,000.00	20,000.00	20,000.00	20,000.00
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	56,747.00	41,785.65	41,785.65	41,785.65
8	1440 Site Acquisition				
9	1450 Site Improvement	75,000.00	0.00	0.00	0.00
10	1460 Dwelling Structures				
11	1465.1 Dwelling Equipment—Nonexpendable	0.00	154,961.35	154,961.35	34,859.50
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment	65,000.00	0.00	0.00	0.00
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities <sup>4</sup>				
18a	1501 Collateralization or Debt Service paid by the PHA				
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment				
19	1502 Contingency (may not exceed 8% of line 20)				
20	Amount of Annual Grant: (sum of lines 2 – 19)	231,747.00	231,747.00	231,747.00	110,132.40
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 Activities				
23	Amount of line 20 Related to Security – Soft Costs				
24	Amount of line 20 Related to Security – Hard Costs				
25	Amount of line 20 Related to Energy Conservation Measures	0.00	196,747.00	196,747.00	196,747.00

<sup>1</sup> To be completed for the Performance and Evaluation Report.  
<sup>2</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.  
<sup>3</sup> PHAs with under 250 units in management may use 100% of CFP Grants for operations.  
<sup>4</sup> RHF funds shall be included here.

Annual Statement/Performance and Evaluation Report  
 Capital Fund Program, Capital Fund Program Replacement Housing Factor and  
 Capital Fund Financing Program

U.S. Department of Housing and Urban Development  
 Office of Public and Indian Housing  
**Expires 4/30/2011**

<b>Part I: Summary</b>				
<b>PHA Name:</b> Norwich Housing Authority 10 Westwood Park, Norwich, CT 06360		<b>Grant Type and Number</b> Capital Fund Program Grant No: CT26P01850106    Replacement Housing Factor Grant No: Date of CFFP: _____		<b>FFY of Grant:</b> 2006 <b>FFY of Grant Approval:</b> 2006
<b>Type of Grant</b> <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no: ) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: <input type="checkbox"/> Final Performance and Evaluation Report				
<b>Line</b>	<b>Summary by Development Account</b>	<b>Total Estimated Cost</b>		<b>Total Actual Cost <sup>1</sup></b>
		<b>Original</b>	<b>Revised <sup>2</sup></b>	<b>Obligated                      Expended</b>
<b>Signature of Executive Director</b> 		<b>Date</b> 12-11-08	<b>Signature of Public Housing Director                      Date</b>	

<b>Part II: Supporting Pages</b>								
PHA Name: Norwich Housing Authority		Grant Type and Number Capital Fund Program Grant No: CT26P01850106 CFFP (Yes/ No): Replacement Housing Factor Grant No:				Federal FFY of Grant: 2006		
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised <sup>1</sup>	Funds Obligated <sup>2</sup>	Funds Expended <sup>2</sup>	
PHA Wide	Operations	1406		15,000.00	15,000.00	15,000.00	13,487.25	On-going
PHA Wide	Administration	1410		20,000.00	20,000.00	20,000.00	20,000.00	
PHA Wide	Energy Audit Implementations	1430		28,578.00	41,785.65	41,785.65	41,785.65	
CT18-2,3	A&E - Asphalt Sidewalk Replacement	1430		12,500.00	0	0	0	
PHA Wide	A&E - Emg. Generator Install.	1430		15,669.00	0	0	0	
CT18-2,3	Exterior Painting	1450		15,000.00	0	0	0	
CT18-2,3	Asphalt Sidewalk Replacement	1450		60,000.00	0	0	0	
PHA Wide	Emergency Generators	1475		65,000.00	0	0	0	
PHA Wide	Energy Conservation Program	1465		0	154,961.35	154,961.35	34,859.50	On-going

<sup>1</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

<sup>2</sup> To be completed for the Performance and Evaluation Report.

<b>Part II: Supporting Pages</b>								
PHA Name:		Grant Type and Number		CFFP (Yes/ No):		Federal FFY of Grant:		
		Capital Fund Program Grant No:						
		Replacement Housing Factor Grant No:						
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised <sup>1</sup>	Funds Obligated <sub>2</sub>	Funds Expended <sup>2</sup>	

<sup>1</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

<sup>2</sup> To be completed for the Performance and Evaluation Report.



<b>Part III: Implementation Schedule for Capital Fund Financing Program</b>					
PHA Name: Norwich Housing Authority					Federal FFY of Grant: 2006
Development Number Name/PHA-Wide Activities	All Fund Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Reasons for Revised Target Dates <sup>1</sup>
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	
PHA Wide - Operations	7/08	7/08	7/10		
PHA Wide - Admin.	7/08	7/08	7/10	9/06	
PHAWide-EnergyAuditIm	7/08	7/08	7/10	9/08	
CT18-2,3AsphaltSidewlks	7/08				
PHAWideA&E EmgGen	7/08				
CT18-2,3AsphaltSidewlk	7/08				
PHAWide Emg Gen	7/08				
PHA Wide Eng Conserv	7/08	7/08	7/10		

<sup>1</sup> Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of 1937, as amended.

<b>Part III: Implementation Schedule for Capital Fund Financing Program</b>					
PHA Name:				Federal FFY of Grant:	
Development Number Name/PHA-Wide Activities	All Fund Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Reasons for Revised Target Dates <sup>1</sup>
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	

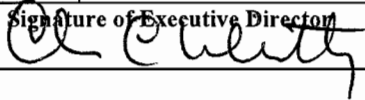
<sup>1</sup> Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of 1937, as amended.

Annual Statement/Performance and Evaluation Report  
 Capital Fund Program, Capital Fund Program Replacement Housing Factor and  
 Capital Fund Financing Program

U.S. Department of Housing and Urban Development  
 Office of Public and Indian Housing  
 OMB No. 2577-0226  
**Expires 4/30/2011**

Part I: Summary					
<b>PHA Name:</b> Norwich Housing Authority 10 Westwood Park, Norwich, CT 06360		<b>Grant Type and Number</b> Capital Fund Program Grant No: CT26P01850107    Replacement Housing Factor Grant No: Date of CFFP: _____		<b>FFY of Grant:</b> 2007 <b>FFY of Grant Approval:</b> 2007	
<b>Type of Grant</b> <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no: ) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: <u>9/30/2008</u> <input type="checkbox"/> Final Performance and Evaluation Report					
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost <sup>1</sup>	
		Original	Revised <sup>2</sup>	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) <sup>3</sup>	15,000.00		0	0
3	1408 Management Improvements				
4	1410 Administration (may not exceed 10% of line 21)	22,485.00		22,485.00	22,485.00
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	40,000.00		10,000.00	0
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	147,369.00		100,000.00	0
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment				
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities <sup>4</sup>				
18a	1501 Collateralization or Debt Service paid by the PHA				
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment				
19	1502 Contingency (may not exceed 8% of line 20)				
20	Amount of Annual Grant: (sum of lines 2 – 19)	224,854.00		132,485.00	22,485.00
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 Activities				
23	Amount of line 20 Related to Security – Soft Costs				
24	Amount of line 20 Related to Security – Hard Costs				
25	Amount of line 20 Related to Energy Conservation Measures	187,369.00		110,000.00	0

<sup>1</sup> To be completed for the Performance and Evaluation Report.  
<sup>2</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.  
<sup>3</sup> PHAs with under 250 units in management may use 100% of CFP Grants for operations.  
<sup>4</sup> RHF funds shall be included here.

<b>Part I: Summary</b>					
<b>PHA Name:</b> Norwich Housing Authority		<b>Grant Type and Number</b> Capital Fund Program Grant No: CT26P01850107      Replacement Housing Factor Grant No: Date of CFFP: _____			<b>FFY of Grant:</b> 2007 <b>FFY of Grant Approval:</b> 2007
<b>Type of Grant</b> <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no: ) <input type="checkbox"/> Performance and Evaluation Report for Period Ending: <input type="checkbox"/> Final Performance and Evaluation Report					
<b>Line</b>	<b>Summary by Development Account</b>	<b>Total Estimated Cost</b>		<b>Total Actual Cost <sup>1</sup></b>	
		Original	Revised <sup>2</sup>	Obligated	Expended
<b>Signature of Executive Director</b> 		<b>Date</b> 12-11-08		<b>Signature of Public Housing Director</b>  <b>Date</b>	

Part II: Supporting Pages								
PHA Name: Norwich Housing Authority		Grant Type and Number Capital Fund Program Grant No: CT26P01850107 CFFP (Yes/ No): Replacement Housing Factor Grant No:				Federal FFY of Grant: 2007		
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised <sup>1</sup>	Funds Obligated <sup>2</sup>	Funds Expended <sup>2</sup>	
PHA Wide	Operations	1406		15,000.00		0	0	
PHA Wide	Administration	1410		22,485.00		22,485.00	22,485.00	
PHA Wide	Owner's Rep Services-EngConsProg	1430		40,000.00		10,000.00	0	On-going
CT18-2	Westwood Park Bathroom Renov	1460		147,369.00	0	0	0	omitted
PHA Wide	Energy Conservation Program	1460			147,369.00	100,000.00	0	On-going

<sup>1</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

<sup>2</sup> To be completed for the Performance and Evaluation Report.

Part II: Supporting Pages								
PHA Name:		Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant No:			CFFP (Yes/ No):		Federal FFY of Grant:	
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised <sup>1</sup>	Funds Obligated <sub>2</sub>	Funds Expended <sup>2</sup>	

<sup>1</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

<sup>2</sup> To be completed for the Performance and Evaluation Report.

<b>Part III: Implementation Schedule for Capital Fund Financing Program</b>					
PHA Name: Norwich Housing Authority					Federal FFY of Grant: 2007
Development Number Name/PHA-Wide Activities	All Fund Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Reasons for Revised Target Dates <sup>1</sup>
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	
PHA Wide Operations	9/09		9/11		
PHA Wide Administration	9/09	12/07	9/11	12/07	
PHA Wide EngAuditImp	9/09		9/11		
CT18-2 Bathroom Reno	9/09				
PHAWide EngConsvProg	9/09		9/11		

<sup>1</sup> Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of 1937, as amended.

<b>Part III: Implementation Schedule for Capital Fund Financing Program</b>					
PHA Name:				Federal FFY of Grant:	
Development Number Name/PHA-Wide Activities	All Fund Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Reasons for Revised Target Dates <sup>1</sup>
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	

<sup>1</sup> Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of 1937, as amended.




Annual Statement/Performance and Evaluation Report  
 Capital Fund Program, Capital Fund Program Replacement Housing Factor and  
 Capital Fund Financing Program

U.S. Department of Housing and Urban Development  
 Office of Public and Indian Housing  
 OMB No. 2577-0226  
 Expires 4/30/2011

Part I: Summary					
<b>PHA Name:</b> Norwich Housing Authority 10 Westwood Park, Norwich, CT 06360		<b>Grant Type and Number</b> Capital Fund Program Grant No: CT26P01850108    Replacement Housing Factor Grant No: Date of CFFP: _____			<b>FFY of Grant:</b> 2008 <b>FFY of Grant Approval:</b> 2008
<b>Type of Grant</b> <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no: ) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: <u>9/30/2008</u> <input type="checkbox"/> Final Performance and Evaluation Report					
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost <sup>1</sup>	
		Original	Revised <sup>2</sup>	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) <sup>3</sup>	15,000.00		0	0
3	1408 Management Improvements				
4	1410 Administration (may not exceed 10% of line 21)	23,730.00		23,730.00	23,732.00
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	35,000.00		15,372.00	15,007.76
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	163,594.00		0	0
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment				
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities <sup>4</sup>				
18a	1501 Collateralization or Debt Service paid by the PHA				
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment				
19	1502 Contingency (may not exceed 8% of line 20)				
20	Amount of Annual Grant: (sum of lines 2 – 19)	237,324.00		39,104.00	38,739.76
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 Activities				
23	Amount of line 20 Related to Security – Soft Costs				
24	Amount of line 20 Related to Security – Hard Costs				
25	Amount of line 20 Related to Energy Conservation Measures				

<sup>1</sup> To be completed for the Performance and Evaluation Report.  
<sup>2</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.  
<sup>3</sup> PHAs with under 250 units in management may use 100% of CFP Grants for operations.  
<sup>4</sup> RHF funds shall be included here.

<b>Part I: Summary</b>					
<b>PHA Name:</b> Norwich Housing Authority		<b>Grant Type and Number</b> Capital Fund Program Grant No: CT26P01850108    Replacement Housing Factor Grant No: Date of CFFP: _____		<b>FFY of Grant:</b> 2008 <b>FFY of Grant Approval:</b> 2008	
<b>Type of Grant</b> <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no: ) <input type="checkbox"/> Performance and Evaluation Report for Period Ending: <input type="checkbox"/> Final Performance and Evaluation Report					
<b>Line</b>	<b>Summary by Development Account</b>	<b>Total Estimated Cost</b>		<b>Total Actual Cost <sup>1</sup></b>	
		Original	Revised <sup>2</sup>	Obligated	Expended
<b>Signature of Executive Director</b> 		<b>Date</b> 12-11-08		<b>Signature of Public Housing Director</b>  <b>Date</b>	

Part II: Supporting Pages								
PHA Name: Norwich Housing Authority		Grant Type and Number Capital Fund Program Grant No: CT26P01850108 CFFP (Yes/ No): Replacement Housing Factor Grant No:				Federal FFY of Grant: 2008		
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised <sup>1</sup>	Funds Obligated <sup>2</sup>	Funds Expended <sup>2</sup>	
PHA Wide	Operations	1406		15,000.00		0	0	
PHA Wide	Administration	1410		23,730.00		23,730.00	23,732.00	
CT18-3	A&E-Fire Alarm Replacement	1430		35,000.00		15,372.00	15,007.76	On-going
CT18-3	Fire Alarm Replacement Project	1460		163,594.00		0	0	On-going

<sup>1</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.  
<sup>2</sup> To be completed for the Performance and Evaluation Report.

Part II: Supporting Pages								
PHA Name:		Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant No:			CFFP (Yes/ No):		Federal FFY of Grant:	
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised <sup>1</sup>	Funds Obligated <sub>2</sub>	Funds Expended <sup>2</sup>	

<sup>1</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.  
<sup>2</sup> To be completed for the Performance and Evaluation Report.

<b>Part III: Implementation Schedule for Capital Fund Financing Program</b>					
PHA Name: Norwich Housing Authority					Federal FFY of Grant: 2008
Development Number Name/PHA-Wide Activities	All Fund Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Reasons for Revised Target Dates <sup>1</sup>
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	
PHA Wide Operations	6/10		6/12		
PHA Wide Admin	6/10		6/12		
CT18-3 A&E	6/10		6/12		
CT18-3 Fire Alarm Proj	6/10		6/12		

<sup>1</sup> Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of 1937, as amended.

<b>Part III: Implementation Schedule for Capital Fund Financing Program</b>					
PHA Name:			Federal FFY of Grant:		
Development Number Name/PHA-Wide Activities	All Fund Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Reasons for Revised Target Dates <sup>1</sup>
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	

<sup>1</sup> Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of 1937, as amended.

Part I: Summary

PHA Name: Norwich Housing Authority 10 Westwood Park, Norwich, CT 06360		Grant Type and Number Capital Fund Program Grant No: _____ Date of CFFP: _____	Replacement Housing Factor Grant No: _____	FFY of Grant: 2009	FFY of Grant Approval: 2009
Type of Grant <input checked="" type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Performance and Evaluation Report for Period Ending: _____ <input type="checkbox"/> Revised Annual Statement (revision no: _____) <input type="checkbox"/> Final Performance and Evaluation Report					

Line	Summary by Development Account	Total Estimated Cost	Revised <sup>2</sup>	Obligated	Expended
1	Total non-CFF Funds				
2	1406 Operations (may not exceed 20% of line 21) <sup>3</sup>	15,000.00			
3	1408 Management Improvements				
4	1410 Administration (may not exceed 10% of line 21)	23,730.00			
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	55,000.00			
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	143,594.00			
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment				
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities <sup>4</sup>				
18a	1501 Collateralization or Debt Service paid by the PHA				
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment				
19	1502 Contingency (may not exceed 8% of line 20)				
20	Amount of Annual Grant: (sum of lines 2 – 19)	237,324.00			
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 Activities				
23	Amount of line 20 Related to Security – Soft Costs				
24	Amount of line 20 Related to Security – Hard Costs				
25	Amount of line 20 Related to Energy Conservation Measures				

<sup>1</sup> To be completed for the Performance and Evaluation Report.  
<sup>2</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.  
<sup>3</sup> PHAs with under 250 units in management may use 100% of CFF Grants for operations.  
<sup>4</sup> RHF funds shall be included here.

<b>Part I: Summary</b>			
PHA Name: Norwich Housing Authority 10 Westwood Park, Norwich, CT 06360		Grant Type and Number Capital Fund Program Grant No: _____ Date of CFFP: _____	FFY of Grant: 2009 FFY of Grant Approval: 2009
Type of Grant <input checked="" type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies		Revised Annual Statement (revision no: ) <input type="checkbox"/> Revised Annual Statement and Evaluation Report <input type="checkbox"/> Final Performance and Evaluation Report	
Performance and Evaluation Report for Period Ending: <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending:		Total Estimated Cost	
Line	Summary by Development Account	Original	Revised <sup>2</sup>
			Obligated
			Expended
Signature of Executive Director <i>[Signature]</i>		Signature of Public Housing Director	
Date 12-11-08		Date	
Total Actual Cost <sup>1</sup>		Total Actual Cost <sup>1</sup>	



Part II: Supporting Pages

PHA Name:		Norwich Housing Authority		Grant Type and Number		Capital Fund Program Grant No:		CFFP (Yes/No):		Federal FFY of Grant:	
Development Number		Name/PHA-Wide Activities		General Description of Major Work		Development Account No.		Quantity		Total Estimated Cost	
Status of Work		Total Actual Cost		Total Estimated Cost		Original		Revised <sup>1</sup>		Funds Obligated <sup>2</sup>	
		Funds Obligated <sup>2</sup>		Funds Obligated <sup>2</sup>		Funds Obligated <sup>2</sup>		Funds Obligated <sup>2</sup>		Funds Obligated <sup>2</sup>	
PHA Wide	Operations	1406	15,000.00								
PHA Wide	Administration	1410	23,730.00								
CT18-2	A&E Attic Reconstruction	1430	10,000.00								
CT18-2	Attic Reconstruction	1460	10,000.00								
CT18-1	A&E Crawl Space & Attic Insulation	1430	35,000.00								
CT18-1	Crawl Space & Attic Insulation	1460	123,594.00								
CT18-2,3	A&E Therm. & Valve Replacement	1430	10,000.00								
CT18-2,3	Therm. & Valve Replacement	1460	10,000.00								

<sup>1</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.  
<sup>2</sup> To be completed for the Performance and Evaluation Report.

Part II: Supporting Pages

PHA Name:		Grant Type and Number		Capital Fund Program Grant No:	Replacement Housing Factor Grant No:	Federal FFY of Grant:		
Development Number	Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost	Total Actual Cost	Status of Work	
					Original	Revised <sup>1</sup>	Funds Obligated <sup>2</sup>	Funds Expended <sup>2</sup>

<sup>1</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.  
<sup>2</sup> To be completed for the Performance and Evaluation Report.

Part III: Implementation Schedule for Capital Fund Financing Program

PHA Name: Norwich Housing Authority		Federal FFY of Grant: 2009	
Development Number Name/PHA-Wide Activities	All Fund Obligated (Quarter Ending Date)	All Funds Expended (Quarter Ending Date)	Reasons for Revised Target Dates <sup>1</sup>
Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date
PHA Wide Operations	6/11	6/13	
PHA Wide Admin	6/11	6/13	
CT18-2 A&E Attic Recon.	6/11	6/13	
CT18-1 A&E Insulation	6/11	6/13	
CT18-1 Insulation	6/11	6/13	
CT18-2,3 A&E Therm	6/11	6/13	
CT18-2,3 Therm&Valve	6/11	6/13	

<sup>1</sup> Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of 1937, as amended.



**Capital Fund Program—Five-Year Action Plan**

U.S. Department of Housing and Urban Development  
 Office of Public and Indian Housing  
 Expires 4/30/2011

<b>Part I: Summary</b>						
PHA Name / Number Norwich Housing Authority CT018000001		Locality (City/County & State) Norwich / New London County, CT			<input checked="" type="checkbox"/> Original 5-Year Plan <input type="checkbox"/> Revision No:	
A.	Development Number and Name	Work Statement for Year 1 FFY 2009	Work Statement for Year 2 FFY 2010	Work Statement for Year 3 FFY 2011	Work Statement for Year 4 FFY 2012	Work Statement for Year 5 FFY 2013
B.	Physical Improvements Subtotal	Annual Statement	193,594	193,594	193,594	193,594
C.	Management Improvements					
D.	PHA-Wide Non-dwelling Structures and Equipment					
E.	Administration		23,730	23,730	23,730	23,730
F.	Other					
G.	Operations		20,000	20,000	20,000	20,000
H.	Demolition					
I.	Development					
J.	Capital Fund Financing – Debt Service					
K.	Total CFP Funds		237,324	237,324	237,324	237,324
L.	Total Non-CFP Funds					
M.	Grand Total		237,324	237,324	237,324	237,324

<b>Part I: Summary (Continuation)</b>						
PHA Name / Number Norwich Housing Authority CT018000001		Locality (City/county & State) Norwich / New London, CT			<input checked="" type="checkbox"/> Original 5-Year Plan <input type="checkbox"/> Revision No:	
A.	Development Number and Name	Work Statement for Year 1 FFY 2009	Work Statement for Year 2 FFY 2010	Work Statement for Year 3 FFY 2011	Work Statement for Year 4 FFY 2012	Work Statement for Year 5 FFY 2013
	CT18-1 Oakwood Knoll	Annual Statement				
	CT18-2 Westwood Park		193,594	193,594		
	CT18-3 Dorsey Building				193,594	193,594
	CT18-4 Swan Avenue					
	PHA Wide		43,730	43,730	43,730	43,730

<b>Part II: Supporting Pages – Physical Needs Work Statement(s)</b>						
Work Statement for Year 1 FFY 2009	Work Statement for Year 2011 FFY 2010			Work Statement for Year: 2012 FFY 2011		
	Development Number/Name General Description of Major Work Categories	Quantity	Estimated Cost	Development Number/Name General Description of Major Work Categories	Quantity	Estimated Cost
See	CT18-2 Westwood Park Bathroom Renovations		193,594	CT18-2 Westwood Park Bathroom Renovations		193,594
Annual Statement						
	Subtotal of Estimated Cost		\$193,594	Subtotal of Estimated Cost		\$193,594

<b>Part II: Supporting Pages – Physical Needs Work Statement(s)</b>						
Work Statement for Year 1 FFY 2009	Work Statement for Year 2013 FFY 2012			Work Statement for Year: 2014 FFY 2013		
	Development Number/Name General Description of Major Work Categories	Quantity	Estimated Cost	Development Number/Name General Description of Major Work Categories	Quantity	Estimated Cost
See	18-3 Dorsey Building Bathroom Renovations		193,594	18-3 Dorsey Building Bathroom Renovations		193,594
Annual Statement						
	Subtotal of Estimated Cost		\$193,594	Subtotal of Estimated Cost		\$193,594





<b>Part III: Supporting Pages – Management Needs Work Statement(s)</b>				
Work Statement for Year 1 FFY 2009	Work Statement for Year 2013 FFY 2012		Work Statement for Year: 2014 FFY 2013	
	Development Number/Name General Description of Major Work Categories	Estimated Cost	Development Number/Name General Description of Major Work Categories	Estimated Cost
	See	PHA Operations	20,000	PHA Operations
Annual	PHA Administration	23,730	PHA Administration	23,730
Statement				
	Subtotal of Estimated Cost	\$43,730	Subtotal of Estimated Cost	\$43,730

## Norwich Housing Authority – CT018

### PHA 5-Year and Annual Plan

#### 11.0 (f) Resident Advisory Board (RAB) comments.

RAB had questions regarding the Energy Performance Contract (“EPC”). It was explained that work should be completed by the end of December, 2008. RAB had concerns about the level of lighting in the bedrooms. Authority is in the process of addressing this issue. RAB asked questions regarding continued funding for the Federal Resident Services Coordinator. It was noted that, at present, the position is funded through grants and private donations. The Authority hopes that HUD will refund this position. RAB was very supportive of extra police patrols. The same is part of the Authority’s Annual Plan. RAB favored the inclusion of kitchen / bathroom upgrades / renovations in the 5-Year Plan. RAB unanimously approved the Annual Plan and 5-Year Plan.

Norwich Housing Authority – CT018

2009 Annual Plan

**Statement of Housing Needs** [24 CFR Part 903.12 (b), 903.7(a)]

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

<b>Housing Needs of Families on the PHA's Waiting Lists</b>			
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	218		31
Extremely low income <=30% AMI	174	80%	
Very low income (>30% but <=50% AMI)	39	18%	
Low income (>50% but <80% AMI)	5	2%	
Families with children	112	51%	
Elderly families	56	26%	
Families with Disabilities	50	23%	
Race/ethnicity – white	124	57%	
Race/ethnicity – black	22	10%	
Race/ethnicity – Am. Indian	3	1%	
Race/ethnicity – Asian	4	2%	
Race/ethnicity – Hispanic	65	30%	
Characteristics by Bedroom Size (Public Housing Only)			
1BR	106	48%	22
2 BR	65	30%	5
3 BR	43	20%	2
4 BR	4	2%	2
5 BR	0		
5+ BR	0		
Is the waiting list closed (select one)? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
If yes:			
How long has it been closed (# of months)?			
Does the PHA expect to reopen the list in the PHA Plan year? <input type="checkbox"/> No <input type="checkbox"/> Yes			
Does the PHA permit specific categories of families onto the waiting list, even if generally closed?			
<input type="checkbox"/> No <input type="checkbox"/> Yes			

### Housing Needs of Families on the PHA's Waiting Lists

Waiting list type: (select one)

- Section 8 tenant-based assistance
- Public Housing
- Combined Section 8 and Public Housing
- Public Housing Site-Based or sub-jurisdictional waiting list (optional)

If used, identify which development/subjurisdiction:

	# of families	% of total families	Annual Turnover
Waiting list total	675		106
Extremely low income <=30% AMI	525	77%	
Very low income (>30% but <=50% AMI)	142	21%	
Low income (>50% but <80% AMI)	8	1%	
Families with children	408	60%	
Elderly families	9	1%	
Families with Disabilities	51	8%	
Other – Single	207	31%	
Race/ethnicity – white	291	43%	
Race/ethnicity – black	163	24%	
Race/ethnicity – Hispanic	206	31%	
Race/ethnicity – Asian	2	0%	
Race/ethnicity – Am. Indian	13	2%	
Characteristics by Bedroom Size (Public Housing Only)			
1BR			
2 BR			
3 BR			
4 BR			
5 BR			
5+ BR			

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

If yes:

How long has it been closed (# of months)? 13 months

Does the PHA expect to reopen the list in the PHA Plan year?  No  Yes

Does the PHA permit specific categories of families onto the waiting list, even if generally closed?

No  Yes

