PHA PLAN AGENCY IDENTIFICATION

| PH | A Name: Dunn Housing Authority |
|----------|---|
| PH | A Number: NCO79 v 03 |
| PΗΔ | A Fiscal Year Beginning: (01/2000) |
| Pub | olic Access to Information |
| Info | ormation regarding any activities outlined in this plan can be obtained by contacting: (select all that |
| | Main administrative office of the PHA |
| | PHA development management offices |
| | PHA local offices |
| Dis | play Locations For PHA Plans and Supporting Documents |
| The | PHA Plans (including attachments) are available for public inspection at: (select all that apply) |
| X | 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) |
| | |
| | |
| DЦ | A Plan Supporting Documents are available for inspection at: (select all that apply) |
| гпл Х | 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]

| Α. | Mission |
|--------------|--|
| | 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. |
| X | The PHA's mission is: (state mission here) |
| higl esta | aim of the Dunn Housing Authority is to ensure safe, decent, and affordable housing: encouraging ner quality family life for eligible residents, create opportunities for resident economic self-sufficiency blish a drug and crime free environment, assure fiscal integrity in all programs administered withour rimination. |
| | |
| | |
| | |
| В. | Goals |
| HU | D Strategic Goal: Increase the availability of decent, safe, and affordable housing. |
| X | PHA Goal: Expand the supply of assisted housing Objectives: ☐ Apply for additional rental vouchers X Reduce public housing vacancies ☐ Leverage private or other public funds to create additional housing opportunities ☐ Acquire or build units or developments ☐ Other (list below) |
| | |

| X PHA Goal: Increase assisted housing choices Objectives: □ Provide voucher mobility counseling □ Conduct outreach efforts to potential voucher landlords □ Increase voucher homeownership program X Implement public housing or other homeownership programs □ Implement public housing site-based waiting lists □ Convert public housing to vouchers □ Other (list below) | X | | A Goal: Improve the quality of assisted housing jectives: 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) |
|---|---|-----|--|
| | X | Obj | Provide voucher mobility counseling Conduct outreach efforts to potential voucher landlords Increase voucher homeownership program Implement public housing or other homeownership programs Implement public housing site-based waiting lists Convert public housing to vouchers |

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

| X | PHA Goal: Provide an improved living environment Objectives: |
|---|--|
| | X Implement measures to deconcentrate poverty by bringing higher income public housing households into lower income developments |
| | X Implement measures to promote income mixing in public housing by assuring access for lower income families into higher income developments |
| | X Implement public housing security improvements |
| | ☐ Designate developments or buildings for particular resident groups (elderly persons with disabilities) |
| | ☐ Other (list below) |
| | |
| | D Strategic Goal: Promote self-sufficiency and asset development of families and ividuals |
| X | PHA Goal: Promote self-sufficiency and asset development of assisted households Objectives: |
| | X Increase the number and percentage of employed persons in assisted families |
| | X Provide or attract supportive services to improve assistance recipients' employability |
| | X Provide or attract supportive services to increase independence for the elderly or families with disabilities |
| | ☐ Other (list below) |

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

| X | PH | A Goal: Ensure equal opportunity and affirmatively further fair housing |
|---|-----|---|
| | Obj | ectives: |
| | X | Undertake affirmative measures to ensure access to assisted housing regardless of race, color, religion, national origin, sex, familial status, and disability |
| | X | Undertake affirmative measures to provide a suitable living environment for families living in assisted housing, regardless of race, color, religion, national origin, sex, familial status, and disability |
| | X | Undertake affirmative measures to ensure accessible housing to persons with all varieties of disabilities regardless of unit size required |
| | | Other (list below) |
| | | |

Other PHA Goals and Objectives (list below)

Annual PHA Plan PHA Fiscal Year 2000

[24 CFR Part 903.7]

| i. Annual Plan Type: | | | | |
|----------------------|-------|--|--|--|
| | Sta | ndard Plan | | |
| Stre | amliı | ned Plan: | | |
| | X | High Performing PHA | | |
| | X | Small Agency (<250 Public Housing Units) | | |
| | | Administering Section 8 Only | | |
| | Tro | oubled Agency Plan | | |
| <u>ii.</u> [24 (| | ecutive Summary of the Annual PHA Plan: art 903.7 9(r)] | | |

<u>iii. Annual Plan Table of Contents</u> [24 CFR Part 903.7 9(r)]

Table of Contents

| Annual | Plan | TAB# |
|---------|--|---------|
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| Attachi | ments | |
| Require | d Attachments: | |
| | Admissions Policy for Deconcentration | |
| X | FY 2000 Capital Fund Program Annual Statement | |
| | Most recent board-approved operating budget (Required Attachment for PHAs t troubled or at risk of being designated troubled ONLY) | hat are |
| Ontiona | ll Attachments: | |
| | PHA Management Organizational Chart | |
| | | |
| V | FY 2000 Capital Fund Program 5 Year Action Plan | |
| X | Public Housing Drug Elimination Program (PHDEP) Plan | |
| | Comments of Resident Advisory Board or Boards (must be attached if not included | ın PHA |
| _ | Plan text) | |
| Ц | Other (List below, providing each attachment name) | |

Supporting Documents Available for Review

| | List of Supporting Documents Available for Review | |
|----------------------------|--|--|
| Applicable & On Display | Supporting Document | Applicable Plan Component |
| √ | PHA Plan Certifications of compliance with the PHA Plans and Related Regulations | 5 Year and Annual Plans |
| √ | State/Local Government Certification of Consistency with the Consolidated Plan | 5 Year and Annual Plans |
| ✓ | Fair Housing Documentation: Records reflecting that the PHA has examined its programs or proposed programs, identified any impediments to fair housing choice in those programs, addressed or is addressing those impediments in a reasonable fashion in view of the resources available, and worked or is working with local jurisdictions to implement any of the jurisdictions' initiatives to affirmatively further fair housing that require the PHA's involvement. | 5 Year and Annual Plans |
| √ | Consolidated Plan for the jurisdiction(s) in which the PHA is located (which includes the Analysis of Impediments to Fair Housing Choice (AI)) and any additional backup data to support statement of housing needs in the jurisdiction. | Annual Plan: Housing Needs |
| ✓ | Most recent board-approved operating budget for the public housing program | Annual Plan: Final Resources |
| ~ | 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 |
| | Section 8 Administrative Plan | Annual Plan: Eligibility, Selection, and Admissions Policies |
| √ | Public Housing Deconcentration and Income Mixing Documentation: PHA board certifications of compliance with deconcentration requirements (section 16(a) of the U.S. Housing Act of 1937, as implemented in the 2/18/99 Quality Housing and Work Responsibility Act Initial Guidance; Notice and any further HUD guidance) and; Documentation of the required deconcentration and income mixing analysis | Annual Plan: Eligibility, Selection, and Admissions Policies |
| ~ | Public housing rent determination policies, including the methodology for setting public housing flat rents X Check here if included in the public housing A&O Policy | Annual Plan: Rent Determination |
| √ | Schedule of flat rents offered at each public housing development X Check here if included in the public housing A&O Policy | Annual Plan: Rent Determination |
| | Section 8 rent determination (payment standard) policies Check here if included in Section 8 Administrative Plan | Annual Plan: Rent Determination |
| ~ | 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 |

List of Supporting Documents Available for Review (Continued)

| Applicable & On Display | Supporting Document | Applicable Plan Component |
|----------------------------|---|---|
| ✓ | Public housing grievance procedures X check here if included in the public housing A&O Policy | Annual Plan: Grievance Procedures |
| | Section 8 informal review and hearing procedures Check here if included in Section 8 Administrative Plan | Annual Plan: Grievance Procedures |
| | The HUD-approved Capital Fund/Comprehensive Grant Program Annual Statement (HUD 52837) for the active grant year | Annual Plan: Capital Needs |
| ✓ | Most recent CIAP Budget/Progress Report (HUD 52825) for any active CIAP grant | Annual Plan: Capital Needs |
| | Most recent, approved 5 Year Action Plan for the Capital Fund/ Comprehensive Grant Program, if not included as an attachment (provided at PHA option) | Annual Plan: Capital Needs |
| | Approved HOPE VI applications or, if more recent, approved or submitted HOPE VI Revitalization Plans or any other approved proposal for development of public housing | Annual Plan: Capital Needs |
| | Approved or submitted applications for demolition and/or disposition of public housing | Annual Plan: Demolition and Disposition |
| | Approved or submitted applications for designation of public housing (Designated Housing Plans) | Annual Plan: Designation of Public Housing |
| | Approved or submitted assessments of reasonable revitalization of public housing and approved or submitted conversion plans prepared pursuant to Section 202 of the 1996 HUD Appropriations Act | Annual Plan: Conversion of Public Housing |
| | Approved or submitted public housing homeownership programs/plans | Annual Plan: Homeownership |
| | Policies governing any Section 8 Homeownership program Check here if included in the Section 8 Administrative Plan | Annual Plan: Homeownership |
| | Any cooperative agreement between the PHA and the TANF agency | Annual Plan: Community Service & Self-Sufficiency |
| | FSS Action Plan(s) for public housing and/or Section 8 | Annual Plan: Community Service & Self-Sufficiency |
| | Most recent self-sufficiency (ED/SS, TOP or ROSS or other resident services grant) grant program reports | Annual Plan: Community Service & Self-Sufficiency |
| ✓ | The most recent Public Housing Drug Elimination Program (PHDEP) semi-annual performance report for any open grant and most recently submitted PHDEP application (PHDEP Plan) | Annual Plan: Safety and Crime Prevention |
| √ | The most recent fiscal year audit of the PHA conducted under Section 5(h)(2) of the U.S. Housing Act of 1937 (42 U.S.C. 1437c(h)), the results of that audit and the PHA's response to any findings | Annual Plan: Annual Audit |

| Troubled PHAs: MOA/Recovery Plan | Troubled PHAs |
|---|-------------------|
| Other supporting documents (optional) (list individually; use as many lines as necessary) | Specify as Needed |

1. Statement of Housing Needs

[24 CFR Part 903.7 9(a)]

A. Housing Needs of Families in the Jurisdiction(s) Served by the PHA

| Housing Needs of Families in the Jurisdiction by Family Type | | | | | | | |
|--|---------|--------------------|--------|---------|--------------------|------|----------|
| Family Type | Overall | Afford- ability | Supply | Quality | Accessi -bility | Size | Location |
| Income <=30% of AMI | 10 | 3 | 4 | 3 | 3 | 3 | 3 |
| Income >30% but <=50% of AMI | 3 | 3 | 4 | 3 | 3 | 3 | 3 |
| Income > 50% but 80% of AMI | 1 | 3 | 4 | 3 | 3 | 3 | 3 |
| Elderly | 5 | 3 | 4 | 3 | 3 | 3 | 3 |
| Families with Disabilities | 4 | 3 | 4 | 3 | 3 | 3 | 3 |
| Race/Ethnicity B | 5 | 3 | 4 | 3 | 3 | 3 | 3 |
| Race/Ethnicity W | 9 | 3 | 4 | 3 | 3 | 3 | 3 |
| Race/Ethnicity | | | | | | | |
| Race Ethnicity | | | | | | | |

| What sources of information did the PHA use to conduct this analysis? (Check all that apply; all | | | | |
|--|--|--|--|--|
| materials must be made available for public inspection.) | | | | |
| ☐ Consolidated Plan of the Jurisdiction(s) | | | | |
| Indicate Year: | | | | |
| ☐ U.S. Census date: The Comprehensive Housing Affordability Strategy (CHAS) Dataset | | | | |
| ☐ American Housing Survey data | | | | |
| Indicate Year: | | | | |
| ☐ Other housing market study | | | | |
| Indicate Year: | | | | |
| X Other sources (list and indicate year of information) | | | | |
| PHA survey of local jurisdiction 11/99 - State of North Carolina Consolidated Plan 1998. | | | | |

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

| HOUSING NEEDS OF FAMILIES ON THE WAITING LIST | | | |
|---|-----------------|---------------------|--------------------|
| Waiting List Type: Public Housing | | | |
| | No. of Families | % of Total Families | Annual Turnover |
| Waiting list total | 14 | | 36 |
| Extremely low income (<=30% AMI) | 10 | 71% | |
| Very low income (>30 % but <=50% AMI) | 3 | 22% | |
| Low income (>50% but <80% AMI) | 1 | 07% | |
| Families with children | 5 | 36% | |
| Elderly families | 5 | 36% | |
| Families with Disabilities | 4 | 28% | |
| Race/ethnicity B | 5 | 36% | |
| Race/ethnicity W | 9 | 64% | |
| Race/ethnicity H | 0 | 0 | |
| Race/ethnicity | | | |
| | | | |
| Characteristics by Bedroom Size (Public Housing Only) | | | |
| 1 BR | 10 | 71% | |
| 2 BR | 4 | 29% | |
| 3 BR | 0 | 0 | |
| 4 BR | 0 | 0 | |
| 5 BR | 0 | 0 | |
| 5+ BR | N/A | N/A | |

| Is the waiting list closed? Select One: X No \square Yes \square If yes: |
|---|
| How long has it been closed? (Number of months) |
| Does the PHA expect to reopen the list in the PHA Plan year? \square No \square Yes |
| Does the PHA permit specific categories of families onto the waiting list, |
| even if generally closed? No Yes |

| HOUSING NEEDS OF FAMILIES ON THE WAITING LIST | | | |
|---|-----------------|---------------------|--------------------|
| Waiting List Type: Section 8 Assisted Housing | | | |
| | No. of Families | % of Total Families | Annual Turnover |
| Waiting list total | | | |
| Extremely low income (<=30% AMI) | | | |
| Very low income (>30 % but <=50% AMI) | | | |
| Low income (>50% but <80% AMI) | | | |
| Families with children | | | |
| Elderly families | | | |
| Families with Disabilities | | | |
| Race/ethnicity | | | |
| | | | |
| Characteristics by Bedroom Size (Public Housing Only) | | | |
| 1 BR | | | |
| 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? (Number of 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 | | | |

| HOUSING N | IEEDS OF FAMILIE | S ON THE WAITING LI | ST |
|--|----------------------|---------------------|--------------------|
| Waiting List Type: Combine | ed Section 8 and Pub | lic Housing | |
| | No. of Families | % of Total Families | Annual Turnover |
| Waiting list total | | | |
| Extremely low income (<=30% AMI) | | | |
| Very low income (>30 % but <=50% AMI) | | | |
| Low income (>50% but <80% AMI) | | | |
| Families with children | | | |
| Elderly families | | | |
| Families with Disabilities | | | |
| Race/ethnicity | | | |
| | | | |
| Characteristics by Bedroom Size (Public | | | |

| Housing Only) | | | |
|---|--|--|--|
| 1 BR | | | |
| 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? (Number of 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 | | | |

| HOUSING NEEDS OF FAMILIES ON THE WAITING LIST | | | |
|---|-----------------|---------------------|--------------------|
| Waiting List Type: Public Housing Site-Based or sub-jurisdictional waiting list (optional) If used, identify which development / subjurisdiction. | | | |
| | No. of Families | % of Total Families | Annual Turnover |
| Waiting list total | | | |
| Extremely low income (<=30% AMI) | | | |
| Very low income (>30 % but <=50% AMI) | | | |
| Low income (>50% but <80% AMI) | | | |
| Families with children | | | |
| Elderly families | | | |
| Families with Disabilities | | | |
| Race/ethnicity | | | |
| Race/ethnicity | | | |

| Ra | ice/ethnicity | | | | |
|------------------|---|-----------------------|-----------------------------|-------------------------|--|
| Ra | ce/ethnicity | | | | |
| | | | 1 | | |
| Be | naracteristics by droom Size (Public ousing Only) | | | | |
| 1 I | BR | | | | |
| 2 1 | 3R | | | | |
| 3 I | 3R | | | | |
| 4 I | BR | | | | |
| 5 1 | 3R | | | | |
| 5+ | BR | | | | |
| C. (1) Nee | C. Strategy for Addressing Needs (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 | | | | |
| | • | | | | |
| X | Employ effective maintenance units off-line | e and management p | policies to minimize the nu | mber of public housing | |
| X X □ | 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 | n 8 lease-up rates by | | | |
| Paul | Tanner & Associates | | 5 Year Pl | an / Worksheet- Page 16 | |

| | ramines to rent throughout the jurisdiction |
|---|--|
| X | 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 |
| X | Participate in the Consolidated Plan development process to ensure coordination with broader |
| | community strategies |
| | 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 | | |
| □ Employ admissions preferences aimed at families who are working X 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: | | |
| □ Seek designation of public housing for the elderly □ Apply for special-purpose vouchers targeted to the elderly, should they become available □ Other (list below) | | |

Need: Specific Family Types: Families with Disabilities

| Stra | ategy 1: Target available assistance to Families with Disabilities |
|--------|---|
| X X | 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) |
| Stra | ed: Specific Family Types: Races or ethnicities with disproportionate housing needs ategy 1: Increase awareness of PHA resources among families of races and ethnicities with disproportionate needs: Affirmatively market to reconstant in the base disproportionate housing needs |
| X | Affirmatively market to races/ethnicities shown to have disproportionate housing needs Other (list below) |

| Strategy 2: Conduct activities to affirmatively further fair housing | | |
|--|--|--|
| | Counsel Section 8 tenants as to location of units outside of areas of poverty of 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) | |
| <u>(2)</u> | Reasons for Selecting Strategies he 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)]

| Financial Resources: Plann | ed Sources and U | ses |
|---|------------------|--------------|
| Sources | Planned \$ | Planned Uses |
| 1. Federal Grants (FY 2000 Grants) | | |
| a. Public Housing Operating Fund | \$ 241,350 | |
| b. Public Housing Capital Fund | 224,950 | |
| c. HOPE VI Revitalization | 0 | |
| d. HOPE VI Demolition | 0 | |
| e. Annual Contributions for Section 8 Tenant-Based Assistance | 0 | |
| f. Public Housing Drug Elimination Program (including any Technical Assistance Funds) | 50,000 | |
| g. Resident Opportunity and Self- Sufficiency Grants | 0 | |
| h. Community Development Block Grant | 0 | |
| i. HOME | 0 | |
| Other Federal Grants (list below) | 0 | |
| | | |
| 2. Prior Year Federal Grants (unobligated funds only) (list below) | | |
| | 0 | |
| | | |
| 3. Public Housing Dwelling Rental Income | 212,630 | Operations |
| 4. Non-federal sources (list below) | 0 | |
| | | |

| Total Resources | \$ 728,930 | |
|-----------------|------------|--|

3. PHA Policies Governing Eligibility, Selection, and Admissions

[24 CFR Part 903.7 9(c)]

| | D 11 | TT | • |
|----|-------|--------|-------|
| Α. | Publi | ic Hoi | using |
| | | | |

| A. | Public Housing |
|------------|--|
| <u>(1)</u> | <u>Eligibility</u> |
| a. | When does the PHA verify eligibility for admission to public housing? (select all that apply) When families are within a certain number of being offered a unit: (state number) When families are within a certain time of being offered a unit: (state time) Other (list below) |
| | At time of taking application |
| b. | Which non-income (screening) factors does the PHA use to establish eligibility for admission to public housing (select all that apply)? X Criminal or Drug-related activity X Rental history X Housekeeping ☐ Other (describe) |
| c. | X Yes □ No: Does the PHA request criminal records from local law enforcement agencies for screening purposes? |
| d. | Yes X No: Does the PHA request criminal records from State law enforcement agencies for screening purposes? |
| e. | X Yes \(\square\) 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. | app | nich methods does the PHA plan to use to organize its public housing waiting list (select all that ply)? Community-wide list |
|----|-----|---|
| | | • |
| | 님 | Sub-jurisdictional lists |
| | | Site-based waiting lists |
| | Ш | Other (describe) |
| | | |
| | | |
| | | |
| | | |
| b. | | nere may interested persons apply for admission to public housing? |
| | X | PHA main administrative office |
| | Ц | PHA development site management office |
| | | Other (list below) |
| | | |
| | | |
| | | |
| | | |
| | | |
| c. | | he PHA plans to operate one or more site-based waiting lists in the coming year, answer each of |
| | | 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 |
| | ۷. | upcoming year (that is, they are not part of a previously-HUD |
| | | approved site based waiting list plan)? If yes, how many lists? |
| | | |
| | 3. | ☐ Yes ☐ No: May families be on more than one list simultaneously? If yes, |
| | | how many lists? |
| | 4 | |
| | 4. | Where can interested persons obtain more information about and sign up to be on the site-based waiting lists? (select all that apply) |
| | | □ PHA main administrative office |
| | | _ |
| | | ☐ All PHA development management offices ☐ Monogement offices at developments with site based waiting lists |
| | | ☐ Management offices at developments with site-based waiting lists ☐ At the development to which they would like to apply |
| | | ☐ At the development to which they would like to apply |
| | | ☐ Other (list below) |

(3) Assignment

| 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) $\square \text{One} \\ X \text{Two} \\ \square \text{Three or More}$ |
|--|
| X Yes \square No: Is this policy consistent across all waiting list types? |
| If answer to "b" is no, list variations for any other than the primary public housing waiting list(s) for the PHA: |
| |
| |
| |
| Admissions Preferences |
| Incoming 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? |
| Transfer policies: In what circumstances will transfers take precedence over new admissions? (list below) X Emergencies X Overhoused X Underhoused X Medical justification X Administrative reasons determined by the PHA (e.g., to permit modernization work) □ Resident choice (state circumstances below) □ Other (list below) |
| <u> </u> |

| c. | Preferences |
|-----|---|
| | 1. X Yes \(\square\) 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) |
| For | mer Federal preferences: |
| X | Involuntary Displacement (Disaster, Government Action, Action of Housing Owner, Inaccessibility, |
| | Property Disposition) |
| X | Victims of domestic violence |
| X | Substandard housing |
| | Homelessness |
| X | High rent burden (rent is >50 percent of income) |
| Oth | er preferences (select below) |
| | Working families and those unable to work because of age or disability |
| | Veterans and veterans' families |
| | Residents who live and/or work in the jurisdiction |
| | Those enrolled currently in educational, training, or upward mobility programs |
| | Households that contribute to meeting income goals (broad range of incomes) |
| | Households that contribute to meeting income requirements (targeting) |
| | Those previously enrolled in educational, training, or upward mobility programs |
| | Victims of reprisals or hate crimes |
| | Other preference(s) (list below) |

3. If the PHA will employ admissions preferences, please prioritized by placing a "1" in the space that represents your first priority, a "2" in the box representing your second priority, and so on. If you give equal weight to one or more of these choices (either through an absolute hierarchy or through a point system), place the same number next to each. That means you can use "1" more than once, "2" more than once, etc. Date and Time Former Federal Preferences: Involuntary Displacement (Disaster, Government Action, Action of Housing Owner, Inaccessibility, Property Disposition) 4 Victims of domestic violence Substandard housing Homelessness 3 High rent burden Other Preferences (select all that apply) Working families and those unable to work because of age or disability ☐ Veterans and veterans' families Residents who live and/or work in the jurisdiction ☐ Those enrolled currently in educational, training, or upward mobility programs Households that contribute to meeting income goals (broad range of incomes) Households that contribute to meeting income requirements (targeting) Those previously enrolled in educational, training, or upward mobility programs ☐ Victims of reprisals or hate crimes ☐ Other preference(s) (list below) 4. Relationship of preferences to income targeting requirements: ☐ The PHA applies preferences within income tiers X Not applicable: the pool of applicant families ensures that the PHA will meet income targeting requirements

| <u>(5)</u> | Occupancy |
|------------|--|
| a. | What reference materials can applicants and residents use to obtain information about the rules of |
| | occupancy of public housing? (select all that apply) |
| | X The PHA-resident lease |
| | X The PHA's Admissions and (Continued) Occupancy policy |
| | X PHA briefing seminars or written materials |
| | ☐ Other source (list) |
| b. | How often must residents notify the PHA of changes in family composition? (select all that apply) ☐ At an annual reexamination and lease renewal |
| | X Any time family composition changes |
| | ☐ At family request for revision |
| | ☐ Other (list) |
| | Deconcentration and Income Mixing X 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? |
| h | ☐ Yes X No: Did the PHA adopt any changes to its admissions policies based |
| ٠. | 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 a targeted developments If selected, list targeted developments below: |

| | Employing new admission preferences at targeted developments If selected, list targeted developments below: |
|------|--|
| | Other (list policies and developments targeted below) |
| d. | Yes X 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. I | f 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

| 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) Other (list below) Other (list below) Yes No: Does the PHA request criminal records from local law enforcement agencies for screening purposes? C. Yes No: Does the PHA request criminal records from State law enforcement agencies for screening purposes? d. Yes No: Does the PHA access FBI criminal records from the FBI for screening purposes? (either directly or through an NCIC-authorized source) Indicate what kinds of information you share with prospective landlords? (select all that apply) Criminal or drug-related activity Other (list below) | 1) Eligibility |
|--|---|
| □ 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) □ Yes □ No: Does the PHA request criminal records from local law enforcement agencies for screening purposes? □ Yes □ No: Does the PHA request criminal records from State law enforcement agencies for screening purposes? d. □ Yes □ No: Does the PHA access FBI criminal records from the FBI for screening purposes? (either directly or through an NCIC-authorized source) e. Indicate what kinds of information you share with prospective landlords? (select all that apply) □ Criminal or drug-related activity | _ |
| □ More general screening than criminal and drug-related activity (list factors below) □ Other (list below) □ Yes □ No: Does the PHA request criminal records from local law enforcement agencies for screening purposes? □ Yes □ No: Does the PHA request criminal records from State law enforcement agencies for screening purposes? □ 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 (list below) □ Yes □ No: Does the PHA request criminal records from local law enforcement agencies for screening purposes? □ Yes □ No: Does the PHA request criminal records from State law enforcement agencies for screening purposes? d. □ Yes □ No: Does the PHA access FBI criminal records from the FBI for screening purposes? (either directly or through an NCIC-authorized source) e. Indicate what kinds of information you share with prospective landlords? (select all that apply) □ Criminal or drug-related activity | _ |
| b. | = 14301e general sereening than erinimal and drag related delivity (list lactors below) |
| agencies for screening purposes? c. Yes No: Does the PHA request criminal records from State law enforcement agencies for screening purposes? d. Yes No: Does the PHA access FBI criminal records from the FBI for screening purposes? (either directly or through an NCIC-authorized source) e. Indicate what kinds of information you share with prospective landlords? (select all that apply) Criminal or drug-related activity | ☐ Other (list below) |
| agencies for screening purposes? d. Yes No: Does the PHA access FBI criminal records from the FBI for screening purposes? (either directly or through an NCIC-authorized source) e. Indicate what kinds of information you share with prospective landlords? (select all that apply) Criminal or drug-related activity | |
| 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 | _ |
| ☐ Criminal or drug-related activity | screening purposes? (either directly or through an NCIC-authorized |
| | ☐ Criminal or drug-related activity |

(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) |
| | outer reading of reem program (not eelew) |
| 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) |
| | |
| | |
| | |
| | |
| | |
| | Search Time |
| a. | Yes No: Does the PHA give extensions on standard 60-day period to search for a unit? |
| If v | es, state circumstances below: |
| пу | es, state circumstances below. |

(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) | | | |
| Fori | ner Federal preferences: | | | |
| | Involuntary Displacement (Disaster, Government Action, Action of Housing Owner, Inaccessibility, | | | |
| | Property Disposition) | | | |
| | Victims of domestic violence | | | |
| | Substandard housing | | | |
| | Homelessness | | | |
| | High rent burden (rent is >50 percent of income) | | | |
| Oth | er 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) | | | |

| | 3. | If the PHA will employ admissions preferences, please prioritized by placing a "1" in the space that represents your first priority, a "2" in the box representing your second priority, and so on If you give equal weight to one or more of these choices (either through an absolute hierarchy or through a point system), place the same number next to each. That means you can use "1 more than once, "2" more than once, etc. |
|------|-----------|---|
| | | Date and Time |
| | | Former Federal Preferences: Involuntary Displacement (Disaster, Government Action, Action of Housing Owner Inaccessibility, Property Disposition) Victims of domestic violence Substandard housing Homelessness High rent burden Other Preferences (select all that apply) Working families and those unable to work because of age or disability Veterans and veterans' families Residents who live and/or work in the jurisdiction Those enrolled currently in educational, training, or upward mobility programs Households that contribute to meeting income goals (broad range of incomes |
| | | Households that contribute to meeting income requirements (targeting) Those previously enrolled in educational, training, or upward mobility programs Victims of reprisals or hate crimes Other preference(s) (list below) |
| 4. | | ong applicants on the waiting list with equal preference status, how are applicants selected? ect one) Date and time of application Drawing (lottery) or other random choice technique |
| 5. | | ne PHA plans to employ preferences for "residents who live and/or work in the jurisdiction ect one) |
| Paul | ☐ Tann | This preference has previously been reviewed and approved by HUD er & Associates 5 Year Plan / Worksheet- Page 34 |

4.

5.

| ☐ The PHA requests approval for this preference through this PHA Plan | | | | | |
|---|--|--|--|--|--|
| | | | | | |
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| 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 |
|------------|---|
| <u>(5)</u> | Special Purpose Section 8 Assistance Programs |
| a. | In which documents or other reference materials are the policies governing eligibility, selection, and admissions to any special-purpose Section 8 program administered by the PHA contained? (select all that apply) The Section 8 Administrative Plan Briefing sessions and written materials Other (list below) |
| b. | How does the PHA announce the availability of any special-purpose Section 8 programs to the public? Through published notices Other (list below) |

4. PHA Rent Determination Policies [24 CFR Part 903.7 9(d)]

A. Public Housing

(1) Income based Rent Policies

| <u>(1)</u> | income based Kent Policies |
|------------|---|
| a. | Use of discretionary policies (select one) |
| X | 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)) |
| O | R |
| | The PHA employs discretionary policies for determining income based rent (If selected, continue to question "b".) |
| b. | Minimum Rent |
| | What amount best reflects the PHA's minimum rent? (select one) □ \$0 X \$1 - \$25 □ \$26 - \$50 |
| | 2. ☐ Yes X No: Has the PHA adopted any discretionary minimum rent hardship exemption policies? |
| | 3. If yes to question 2, list these policies below: |

| c. | Rents set at less than 30% than adjusted income 1. □ Yes X No: Does the PHA plan to charge rents at a fixed amount or percentage less than 30% of adjusted income? |
|----|---|
| | 2. If yes to above, list the amounts or percentages charged and the circumstances under which these will be used below: |
| | Which of the discretionary (optional) deductions and/or exclusions policies does the PHA plan to employ (select all that apply) For the earned income of a previously unemployed household member For increases in earned income Fixed amount (other than general rent-setting policy) If yes, state amount(s) and circumstances below: |
| | Fixed percentage (other than general rent-setting policy) If yes, state percentage(s) and circumstances below: |
| | For household heads For other family members For transportation expenses For non-reimbursed medical expenses of non-disabled or non-elderly families Other (describe below) |

| e. | Ceil | 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 | | | | |
| | X | 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) | | | | |
| | | 95th percentile rents | | | | |
| | | 75 percent of operating costs | | | | |
| | | 100 percent of operating costs for general occupancy (family) developments | | | | |
| | | Operating costs plus debt service | | | | |
| | | The "rental value" of the unit | | | | |
| | | Other (list below) | | | | |

| f. | Rer | nt 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 | |
| | X | 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) | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| σ | п, | Yes X No: Does the PHA plan to implement individual savings accounts for | |
| g. | ш. | 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 | |
| <u>\</u> | | | |
| 1. | | setting the market-based flat rents, what sources of information did the PHA use to establish parability? (select all that apply) | |
| X | The | e Section 8 rent reasonableness study of comparable housing | |
| X | , , , | | |
| X | Sur | vey of similar unassisted units in the neighborhood | |
| | Oth | er (list below) | |
| | | | |
| | | | |

B. Section 8 Tenant-Based Assistance

(1) Payment Standards

| a. | What is the PHA's payment standard? (select the category that best describes your standard) At or above 90% but below 100% of FMR 100% of FMR Above 100% but at or below 110% of FMR Above 110 of FMR (if HUD approved; describe circumstances below) |
|----|---|
| b. | If the payment standard is lower than FMR, why has the PHA selected this standard (select all that apply) FMRs are adequate to ensure success among assisted families in the PHA's segment of the FMR area The PHA has chosen to serve additional families by lowering the payment standard Reflects market or submarket Other (list below) |
| | 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) |
| <u>(2)</u> | 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)]

| A. | PHA | Management | Structure |
|----|-----|------------|-----------|
|----|-----|------------|-----------|

(select one)

☐ An organization chart showing the PHA's management structure and organization is attached

 \boldsymbol{X} A brief description of the management structure and organization of the PHA follows:

Executive Director

Housing Manager

Clerk/Recpt.

Maintenance Mechanic

B. HUD Programs Under PHA Management

| Program Name | Units or Families Served at Year Beginning | Expected Turnover |
|--|--|----------------------|
| Public Housing | 143 | 36 |
| Section 8 Vouchers | | |
| Section 8 Certificates | | |
| Section 8 Mod Rehab | | |
| Special Purpose Section 8 Certificates/Vouchers (list individually) | | |
| Public Housing Drug Elimination Program (PHDEP) | 143 | |
| | | |
| Other Federal Programs (list individually) | | |
| | | |
| | | |
| | | |

| C. N | Management | and | Maintenance | Policies |
|------|-------------------|-----|-------------|-----------------|
|------|-------------------|-----|-------------|-----------------|

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

Maintenance Plan

(2) Section 8 Management: (list below)

6. PHA Grievance Procedures [24 CFR Part 903.7 9(f)]

| A. Public Housing |
|---|
| Yes X No: Has the PHA established any written grievance procedures in addition to federal requirements found at 24 CFR Part 966, Subpart B, for residents of public housing? |
| If yes, list additions to federal requirements below: |
| Which PHA office should residents or applicants to public housing contact to initiate the PHA grievance process? (select all that apply) X PHA main administrative office PHA development management offices Other (list below) |
| B. Section 8 Tenant-Based Assistance |
| 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 | Canital | Improven | nent Needs |
|-----|---------|------------|----------------|
| / • | Capitai | THINDIONCH | iciii i i ccus |

[24 CFR Part 903.7 9(g)]

A. Capital Fund Activities

(1) Capital Fund Program Annual Statement

| | ect one: The Capital Fund Program Annual Statement is provided as an attachment to the PHA Plan at Attachment (state name) |
|---|--|
| C | DR |
| X | The Capital Fund Program Annual Statement is provided below: (if selected, copy the CFP Annual Statement from the Table Library and insert here) |

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

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

Capital Fund Grant # NC-19PO79907 FFY of Grant Approval: (2000)

X Original Annual Statement

| Line # | Summary by Development Account | Total Estimated Cost |
|--------|---|-------------------------|
| 1 | Total Non-CGP Funds | |
| 2 | 1406 Operations | |
| 3 | 1408 Management | |
| 4 | 1410 Administration | \$ 2,500.00 |
| 5 | 1411 Audit | 0 |
| 6 | 1415 Liquidated Damages | 0 |
| 7 | 1430 Fees and Costs | 21,500.00 |
| 8 | 1440 Site Acquisition | 0 |
| 9 | 1450 Site Improvement | 0 |
| 10 | 1460 Dwelling Structures | 200,000.00 |
| 11 | 1465.1 Dwelling Equipment-Nonexpendable | 0 |
| 12 | 1470 Nondwelling Structures | 0 |
| 13 | 1475 Nondwelling Equipment | 0 |
| 14 | 1485 Demolition | 0 |
| 15 | 1490 Replacement Reserve | 0 |
| 16 | 1492 Moving to Work Demonstration | 0 |
| 17 | 1495.1 Relocation Costs | 0 |
| 18 | 1498 Mod Used for Development | 0 |
| 19 | 1502 Contingency | 0 |
| 20 | Amount of Annual Grant (Sum of lines 2 - 19) | \$ 224,000.00 |
| 21 | Amount of line 20 Related to LBP Activities | 0 |
| 22 | Amount of line 20 Related to Section 504 Compliance | 0 |
| 23 | Amount of line 20 Related to Security | 0 |

| 24 | Amount of line 20 Related to Energy Conservation | |
|----|--|--|
| | Measures | |

Table Library

Annual Statement

Capital Fund Program (CFP) Part II: Supporting Table

| General Description of Major Work Categories | Developme nt Account Number | Total Estimated Cost |
|---|--|--|
| Administration | 1410 | \$ 2,500 |
| Fees & Cost | 1430 | 21,500 |
| Dwelling Structures Kitchen Cabinets 143 units | 1460 | 200,000. |
| | | |
| | Categories Administration Fees & Cost Dwelling Structures Kitchen Cabinets 143 | General Description of Major Work Categories Account Number Administration Fees & Cost Dwelling Structures Kitchen Cabinets 143 |

| TOTAL | \$ 224,000 |
|-------|------------|

Table Library

Annual Statement Capital Fund Program (CFP) Part III: Implementation Schedule

| Development Number/Name HA-Wide Activities | All Funds Obligated (Quarter Ending Date) | All Funds Expended (Quarter Ending Date) |
|--|---|---|
| NC-79 Site 1 & 2 | 3/31/01 | 3/31/02 |
| | | |

Table Library

| <u>(Z) (</u> | Optional 5- Year Action Plan |
|--------------|---|
| a. [| Yes X No: Is the PHA providing an optional 5-Year Action Plan for the |
| | Capital Fund? (if no, skip to sub-component 7B) |
| b. I □ | f 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) |
| O | R |
| | The Capital Fund Program 5-Year Action Plan is provided below: (if selected, copy the CFF optional 5-Year Action Plan from the Table Library and insert here) |

| B. HOPE VI and Public Housing Development and Replacement Activities (Non-Capital Fund) |
|---|
| Yes X No: a) Has the PHA received a HOPE VI revitalization grant? (if no, skip to question c; if yes, provide responses to question "b" for each grant, copying and completing as many times as necessary) b) Status of HOPE VI revitalization grant (complete one set of questions for each grant) 1. Development name 2. Development (project) number 3. Status of grant (select the statement that best describes the current status) ☐ Revitalization Plan under development ☐ Revitalization Plan submitted, pending approval ☐ Revitalization Plan approved ☐ Activities pursuant to an approved Revitalization Plan underway |
| ☐ Yes ☐ 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 | X | No: | e) Will the PHA be conducting any other public housing development or replacement activities not discussed in the Capital Fund Program Statement? If yes, list developments or activities below: | Annual |
|-----|---|-----|--|--------|
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |

8. Demolition and Disposition [24 CFR Part 903.7 9(h)] 1. ☐ Yes X 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 \square Yes \square No: Has the PHA provided the activities description information in the **optional** Public Housing Asset Management Table? (If "yes", skip to component 9. If "No", complete the Activity Description table below.) **Demolition/Disposition Activity Description** 1. a. Development name: b. Development (project) number: 2. Activity type: Demolition □ Disposition \square 3. Application status: (select one) Approved □ Submitted, pending approval □ Planned application 4. Date application approved, submitted, or planned for submission: (MM/DD/YY) 5. Number of units affected: 6. Coverage of action (select one) ☐ Part of the development ☐ Total development 7. Timeline for activity: a. Actual or projected start date of activity:

b. Projected end date of activity:

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

[24 CFR Part 903.7 9(i)]

| 1. □ Yes X No: | Has the PHA designated or applied for approval to designate or does the PHA plan to apply to designate any public housing for occupancy only by the elderly families or only by families with disabilities, or by elderly families and families with disabilities or will apply for designation for occupancy by only elderly families or only families with disabilities, or by elderly families and families with disabilities as provided by Section 7 of the U.S. Housing Act of 1937 (42 U.S.C. 1437e) in the upcoming fiscal year? (If "No", skip to component 10; in "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.) |
| I | Designation of Public Housing Activity Description |
| 1. a. Development | name: |
| b. Development | (project) number: |
| Oc | be: Occupancy by only the elderly \square cupancy by families with disabilities \square cupancy by only elderly families and families with disabilities \square |
| | (select one) led in the PHA's Designated Plan □ ng approval □ Planned application □ |
| 4. Date this application for submission: (| on approved, submitted, or planned MM/DD/YY) |
| ** | nis designation constitute a (select one) tion Plan |
| 6. Number of units at | fected: |
| 7. Coverage of action Part of the de | · · · · · · · · · <u> </u> |

10. Conversion of Public Housing to Tenant-Based Assistance [24 CFR Part 903.7 9(j)]

| A. Assessments of Reasonable Revitalization Pursuant to Section 202 of the HUD FY 1990 HUD Appropriations Act | | | | |
|---|--|--|--|--|
| 1. □ Yes X No: | Have any of 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 on the following page.) | | | |

11. Homeownership Programs Administered by the PHA [24 CFR Part 903.7 9(k)] A. Public Housing 1. Tes X No: Does the PHA administer any homeownership programs administered by the PHA under an approved Section 5(h) Homeownership Program (42 U.S.C. 1437c(h)), or an approved HOPE I program (42 U.S.C. 1437 aaa) 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 \square Yes \square No: Has the PHA provided all activity description information for this component in the **optional** Public Housing Asset Management Table? (If "yes", skip to component 12. If "No", complete the Activity Description table below.) **Public Housing Activity Description** (Complete one for each development affected) 1. a. Development name: b. Development (project) number: 2. Federal Program authority: \square HOPE I \square 5(h) \square Turnkey \square Section 32 of the USHA of 1937 (effective 10/1/99) 3. Application status: (select one) Approved; included in the PHA's Homeownership Plan/Program ☐ Submitted, pending approval ☐ Planned application 4. Date Homeownership Plan/Program approved, submitted, or planned for submission: (MM/DD/YYYY) 5. Number of units affected: 6. Coverage of action (select one) ☐ Part of the development

☐ 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 ☐ N | |
| participants? ☐ 25 or few ☐ 26 - 50 p ☐ 51 to 100 | ver participants articipants |
| | No: Will the PHA's program have eligibility criteria for participation in its Section 8 Homeownership Option program in addition to HUD criteria? If yes, list criteria below: |

12. PHA Community Service and Self-sufficiency Programs

[24 CFR Part 903.7 9(1)]

A. PHA Coordination with the Welfare (TANF) Agency

| 1. | Cooperative agreements: |
|--------|---|
| | Yes X No: Has the PHA entered into a cooperative agreement with the TANF Agency, to share information and/or target supportive services (as contemplated by Section 12(d)(7) of the Housing Act of 1937)? If yes, what was the date that agreement was signed? 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 | | | | | | |
|----|--|--|--|--|--|--|--|
| | Which, if any of the following discretionary policies will the PHA employ to enhance the | | | | | | |
| | economic and social self-sufficiency of assisted families in the following areas? (select all that apply) | | | | | | |
| | | | | | | | |
| | ☐ Public housing rent determination policies | | | | | | |
| | ☐ Public housing admissions policies | | | | | | |
| | ☐ Section 8 admissions policies ☐ Preference in admission to Section 8 for certain public housing families | | | | | | |
| | | | | | | | |
| | ☐ Preferences for families working or engaging in training or education programs for non-housing programs operated or coordinated by the PHA | | | | | | |
| | ☐ Preference/eligibility for public housing homeownership option participation | | | | | | |
| | ☐ Preference/eligibility for Section 8 homeownership option participation | | | | | | |
| | ☐ Other policies (list below) | | | | | | |
| | | | | | | | |
| b. | Economic and Social self-sufficiency programs | | | | | | |
| | ☐ Yes ☐ No: Does the PHA coordinate, promote or provide any programs | | | | | | |
| | to enhance the economic and social self-sufficiency of | | | | | | |
| | residents? (If "yes", complete the following table; if | | | | | | |
| | "no" skip to sub-component 2, Family Self Sufficiency | | | | | | |
| | Programs. The position of the table may be altered to | | | | | | |
| | facilitate its use.) | | | | | | |

| | Services | s and Programs | | |
|---|-------------------|--|---|--|
| Program Name & Description (including location, if appropriate) | Estimated Size | Allocation Method (waiting list, random selection, specific criteria, other) | Access (development office, PHA main office, other provider name) | Eligibility (public housing or Section 8 participants or both) |

(2) Family Self Sufficiency Program(s)

a. Participation Description

| | Family Self Sufficiency (FSS) Participa | ation |
|----------------|---|--|
| Program | Required Number of Participants (start of FY 2000 Estimate) | Actual Number of Participants (As of DD/MM/YY) |
| Public Housing | | |
| Section 8 | | |

| b. | Yes | No: If the PHA is not maintaining the minimum program size |
|----|-----|--|
| | | required by HUD, does the most recent FSS Action |
| | | Plan address the steps the PHA plans to take to |
| | | achieve at least the minimum program size? |
| | | If no, lies 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)
- X Adopting appropriate changes to the PHA's public housing rent determination policies and train staff to carry out those policies
- X Informing residents of new policy on admission and reexamination
- X Actively notifying residents of new policy at times in addition to admission and reexamination
- ☐ Establishing or pursuing a cooperative agreement with all appropriate TANF agencies regarding the exchange of information and coordination of services
- Establishing a protocol for exchange of information with all appropriate TANF agencies
- ☐ Other (list below)

13. PHA Safety and Crime Prevention Measures [24 CFR Part 903.7 9(m)]

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

| 1. | Describe the need for measures to ensure the safety of public residents (select all that apply) |
|------------|---|
| X | High incidence of violent and/or drug-related crime in some or all of the PHA's developments |
| X | High incidence of violent and/or drug-related crime in the areas surrounding or adjacent to the PHA's developments |
| X | Residents fearful for their safety and/or the safety of their children |
| X | 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 (list below) |
| 2. | What information or data did the PHA use to determine the need for PHA actions to improve safety of residents (select all that apply) |
| T 7 | |
| X | Safety and security survey of residents |
| X | Analysis of crime statistics over time for crimes committed "in and around" public housing authority |
| X | Analysis of cost trends over time for repair of vandalism and removal of graffiti |
| X | Resident reports |
| X | PHA employee reports |
| X | Police reports |
| X | Demonstrable, quantifiable success with previous or ongoing anticrime/anti drug programs Other (describe below) |
| | |

| 3. | Which developments are most affected? (list below) |
|------------------|---|
| | Washington Heights & Harnett Terrace |
| В. | 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) |
| X X X D | 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) Washington Heights & Harnett Terrace |
| | |

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) |
|----|---|
| X | Police involvement in development, implementation, and/or ongoing evaluation of drug-elimination plan |
| X | Police provide crime data to housing authority staff for analysis and action |
| X | Police have established a physical presence on housing authority property (e.g., community policing office, officer in residence) |
| X | Police regularly testify in and otherwise support eviction cases |
| X | Police regularly meet with the PHA management and residents |
| X | 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) |
| | Washington Heights & Harnett Terrace |
| D. | Additional information as required PHDEP/PHDEP Plan |
| X | Yes \(\square \) No: Is the PHA eligible to participate in the PHDEP in the fiscal year covered by this PHA Plan? |
| X | Yes \(\square\) No: Has the PHA included the PHDEP Plan for FY 2000 in this PHA Plan? |
| X | Yes ☐ No: This PHDEP Plan is an Attachment |
| | (Attachment Filename <u>PHDEP</u>) |
| | |

14. (Reserved for Pet Policy) [24 CFR Part 903.7 9(n)]

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

16. Fiscal Audit

| 17. PHA Asset Managem [24 CFR Part 903.7 9(q)] 1. □ Yes X No: Is the 1 | PHA engaging in any activities that will constitute 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 man □ Not applicable □ Private management □ Development-based acc □ Comprehensive stock a □ Other: (list below) | |
| 3. □ Yes X No: Has the | e PHA inlcuded 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 |
| Yes X No: Did the PHA receive any comments on the PHA Plan from the Resident Advisory Board(s)? |
| If yes, the comments are: (if comments were received, the PHA MUST select one) Attached at Attachment (File name) Provided below: 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. | Des | cripti | on 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 | X 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. | Des | criptio | on of Resident Election Process |
| | a. | Nor | mination 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. | | 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. | Elig | rible 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 Consolidated Plan

- 1. Consolidated Plan jurisdiction (provide name here)
- 2. The PHA has taken the following steps to ensure consistency of this PHA Plan with the Consolidated Plan for the jurisdiction (select all that apply)
- X The PHA has based its statement of needs of families in the jurisdiction on the needs expressed in the Consolidated Plan(s)
- X The PHA has participated in any consultation process organized and offered by the Consolidated Plan agency in the development of the Consolidated Plan
- X The PHA has consulted with the Consolidated Plan agency during the development of this PHA Plan
- X Activities to be undertaken by the PHA in the coming year are consistent with the initiatives contained in the Consolidated Plan. (list below)

4. The Consolidated Plan of the jurisdiction supports the PHA Plan with the following actions and commandments (describe below)

D. Other Information Required by HUD

ATTACHMENTS

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 | S : |
|--|------------|
|--|------------|

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

| Section 1: General Information/History |
|---|
|---|

- A. Amount of PHDEP Grant \$ 31,000
- B. Eligibility type (Indicate with an "x") N1 X N2 R_____
- 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

PHA contracts with local law enforcement agency for additional patrols and security over and above baseline services.

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 (Name of development(s) or site) | Total # of Units within the PHDEP Target Area(s) | Total Population to be Served within the |
|---|--|--|
| | | PHDEP Target Area(s) |
| Powell Villege/ Mckay Court/Washington | 93 | 302 |
| Harnett Terace | 50 | 150 |
| | | |

| и. | I himotion o | of Program |
|----|--------------|------------|
| | | и втиогани |
| | | |

| Indicate the dura | ation (number o | of months funds | s will be requir | red) of the | PHDEP I | Program proposed | d under this | Plan (1 | place |
|-------------------|------------------|-----------------|------------------|-------------|-------------|------------------|--------------|---------|-------|
| an "x" to indicat | te the length of | program by # o | of months. For | "Other", | identify tl | ne # of months). | | | |

| 6 Months 12 Months | 18 Months X | _ 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 <u>have not</u> 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 Extension s or Waivers | Anticipate d Completio n Date |
|---------------------------|------------------------------|------------------|---|---------------------------------------|--|
| FY 1995 | | | | | |
| FY 1996 | | | | | |
| FY 1997 | 50,000.00 | NC-19DEPO7901-97 | 0 | No | Closed |
| FY1998 | 50,000.00 | NC-19DEP07901-98 | 0 | No | Closed |
| FY 1999 | 31,400.00 | NC-19DEP07901-99 | 31,400.00 | No | 12/00 |

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.

Reduce Drugs and Drug Related Crime through additional Patrol using the Dunn Police Department. Statistics have shown that crime has been reduce within the communities and the surrounding areas. Resident work with the Police on a regular basis and assist the Police with tips.. The program is monitored by comparing semi-annual police reports.

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 | 31,00.00 | | | | |
| 9120 - Security Personnel | | | | | |
| 9130 - Employment of Investigators | | | | | |
| 9140 - Voluntary Tenant Patrol | | | | | |
| 9150 - Physical Improvements | | | | | |
| 9160 - Drug Prevention | | | | | |
| 9170 - Drug Intervention | | | | | |
| 9180 - Drug Treatment | | | | | |
| 9190 - Other Program Costs | | | | | |
| | | | | | |

31,000.00

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 PH | IDEP Fundi | ing: \$ 31,000.00 | |
|---|-------------------------------|----------------------|---------------|------------------------------|-------------------|--------------------------------|------------------------|
| Goal(s) | Reduce | drugs and drug- | related c | rime. | | | |
| Objectives | Addition | nal Patrols and S | ecurity | | | | |
| Proposed Activities | # of Person s Served | Target Population | Start Date | Expected Complete Date | PHEDEP Funding | Other Funding (Amount/ Source) | Performance Indicators |
| 1.Patrols & Security | | | 1/01 | 6/02 | 31,000. | 0 | |
| 2. | | | | | | | |
| 3. | | | | | | | |

| 9120 - Security Personnel | | | | Total PHDEP Funding: \$ | | | |
|---------------------------|-------------------------------|----------------------|---------------|------------------------------|-------------------|--------------------------------|------------------------|
| Goal(s) | | | | | II. | | |
| Objectives | | | | | | | |
| Proposed Activities | # of Person s Served | Target Population | Start Date | Expected Complete Date | PHEDEP Funding | Other Funding (Amount /Source) | Performance Indicators |
| 1. | | | | | | | |
| 2. | | | | | | | |
| 3. | | | | | | | |

| 9130 - Employment of Investigators | | | | Total PHDEP Funding: \$ | | | |
|------------------------------------|-------------------------------|----------------------|---------------|------------------------------|-------------------|--------------------------------|------------------------|
| Goal(s) | | | | | | | |
| Objectives | | | | | | | |
| Proposed Activities | # of Person s Served | Target Population | Start Date | Expected Complete Date | PHEDEP Funding | Other Funding (Amount /Source) | Performance Indicators |
| 1. | | | | | | | |
| 2. | | | | | | | |
| 3. | | | | | | | |

| 9140 - Voluntary Tenant Patrol | | | | | Total PHDEP Funding: \$ | | |
|--------------------------------|-------------------------------|----------------------|---------------|------------------------------|-------------------------|--------------------------------|------------------------|
| Goal(s) | | | | | | | |
| Objectives | | | | | | | |
| Proposed Activities | # of Person s Served | Target Population | Start Date | Expected Complete Date | PHEDEP Funding | Other Funding (Amount /Source) | Performance Indicators |
| 1. | | | | | | | |
| 2. | | | | | | | |
| 3. | | | | | | | |

| 9150 - Physical Improvements | | | | | Total PHDEP Funding: \$ | | |
|------------------------------|-------------------------------|----------------------|---------------|------------------------------|-------------------------|--------------------------------|------------------------|
| Goal(s) | | | | | | | |
| Objectives | | | | | | | |
| Proposed Activities | # of Person s Served | Target Population | Start Date | Expected Complete Date | PHEDEP Funding | Other Funding (Amount /Source) | Performance Indicators |
| 1. | | | | | | | |
| 2. | | | | | | | |
| 3. | | | | | | | |

| 9160 - Drug Prevention | | | | | Total PHDEP Funding: \$ | | |
|------------------------|-------------------------------|----------------------|---------------|------------------------------|-------------------------|--------------------------------|------------------------|
| Goal(s) | | | | | | | |
| Objectives | | | | | | | |
| Proposed Activities | # of Person s Served | Target Population | Start Date | Expected Complete Date | PHEDEP Funding | Other Funding (Amount /Source) | Performance Indicators |
| 1. | | | | | | | |
| 2. | | | | | | | |
| 3. | | | | | | | |

| 9170 - Drug Intervention | | | | | Total PHDEP Funding: \$ | | |
|--------------------------|-------------------------------|----------------------|---------------|------------------------------|-------------------------|--------------------------------|------------------------|
| Goal(s) | | | | | | | |
| Objectives | | | | | | | |
| Proposed Activities | # of Person s Served | Target Population | Start Date | Expected Complete Date | PHEDEP Funding | Other Funding (Amount /Source) | Performance Indicators |
| 1. | | | | | | | |
| 2. | | | | | | | |
| 3. | | | | | | | |

| 9180 - Drug Treatment | | | | | Total PHDEP Funding: \$ | | |
|-----------------------|-------------------------------|----------------------|---------------|------------------------------|-------------------------|--------------------------------|------------------------|
| Goal(s) | | | | | | | |
| Objectives | | | | | | | |
| Proposed Activities | # of Person s Served | Target Population | Start Date | Expected Complete Date | PHEDEP Funding | Other Funding (Amount /Source) | Performance Indicators |
| 1. | | | | | | | |
| 2. | | | | | | | |
| 3. | | | | | | | |

| 9190 - Other Program Costs | | | | Total PHDEP Funds: \$ | | | |
|----------------------------|-------------------------------|----------------------|---------------|------------------------------|-------------------|--------------------------------|------------------------|
| Goal(s) | | | | | | | |
| Objectives | | | | | | | |
| Proposed Activities | # of Person s Served | Target Population | Start Date | Expected Complete Date | PHEDEP Funding | Other Funding (Amount /Source) | Performance Indicators |
| 1. | | | | | | | |
| 2. | | | | | | | |
| 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 | 25% | Total PHDEP | 50% | Total PHDEP |
|--------------------|-----------------|---------------|---------------|----------------|
| Item # | Expenditure | Funding | Obligation of | Funding |
| | of Total Grant | Expended (sum | Total Grant | Obligated (sum |
| | Funds By | of the | Funds by | of the |
| | Activity # | activities) | Activity # | activities) |
| e.g Budget Line | Activities 1, 3 | | Activity 2 | |
| Item # 9120 | | | | |
| | | | | |
| 9110 | Activity #1 | 15,000. | Activity #1 | 25,000. |
| 9120 | | | | |
| 9130 | | | | |
| 9140 | | | | |
| 9150 | | | | |
| 9160 | | | | |
| 9170 | | | | |
| 9180 | | | | |
| 9190 | | | | |
| | | | | |
| TOTAL | | \$15,000. | | \$25,000. |

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."