

<b>PHA 5-Year and Annual Plan</b>	U.S. Department of Housing and Urban Development Office of Public and Indian Housing	<b>OMB No. 2577-0226</b> <b>Expires 4/30/2011</b>
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<b>1.0</b>	<b>PHA Information</b> PHA Name: <u>Housing Authority of the County of Riverside</u> PHA Code: <u>CA027</u> 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): <u>07/2011</u>												
<b>2.0</b>	<b>Inventory</b> (based on ACC units at time of FY beginning in 1.0 above) Number of PH units: <u>469</u> Number of HCV units: <u>8677</u>												
<b>3.0</b>	<b>Submission Type</b> <input type="checkbox"/> 5-Year and Annual Plan <input checked="" 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 <table border="1"> <thead> <tr> <th>PH</th> <th>HCV</th> </tr> </thead> <tbody> <tr> <td>PHA 1:</td> <td></td> </tr> <tr> <td>PHA 2:</td> <td></td> </tr> <tr> <td>PHA 3:</td> <td></td> </tr> </tbody> </table>	PH	HCV	PHA 1:		PHA 2:		PHA 3:	
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>***Not applicable-complete only for Annual Plan submitted with the 5-Year Plan</b>												
<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: <b>***Not applicable-complete only for Annual Plan submitted with the 5-Year Plan</b>												
<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. <b>***Not applicable-complete only for Annual Plan submitted with the 5-Year Plan</b>												

**PHA Plan Update**

(a) Identify all PHA Plan elements that have been revised by the PHA since its last Annual Plan submission:

**Updated PHA Plan Elements**

**1. Eligibility, Selection and Admissions Policies, including Deconcentration and Wait List Procedures.**

For 2011, the HCV Waiting List will remain closed except to veterans or widow/ers of a veteran or persons 75 years of age or older. Households that are currently registered for the Waiting List or who registered prior to July 1, 2010 will remain on the list until they are selected, withdrawn, or voluntarily removed. The preference criteria remains the same for the 2011-2012 agency plan, however the following changes have been made:

**1.** Qualified veterans and/or qualified families 75 years of age and older do not have to meet the rent-burdened or homeless preference. **2.** The definition of a working family has been modified to allow for the number of work hours of the head and spouse/co-head to be combined when determining the working family preference. **3.** The definition of a co-head has been modified to specify: A co-head is the boyfriend, girlfriend, or significant other of the head of the household. **4.** The Housing Authority of the County of Riverside's Zero Tolerance Policy has been updated to state that an applicant/tenant must not have had criminal activity which violates the Housing Authority's Zero Tolerance Policy and/or jail time within a five (5) year period instead of a three (3) year period. **5.** An applicant who was previously a participant in the Housing Choice Voucher (HCV) program and whose assistance was terminated by any Housing Authority may not receive HCV assistance for a minimum of **five** (5) years. There are no other changes to eligibility, selection, and admission policies for 2011.

**2. Financial Resources.**

Please see attached **Statement of Financial Resources**, which includes listings by general categories, of the Agency's anticipated resources for FY 2011, such as PHA Operating, Capital and other anticipated Federal resources, as well as tenant rents and other income available to support public housing and tenant-based assistance. The statement also includes the non-Federal sources of funds supporting each Federal program, and the planned use for the resources.

**3. Rent Determination.**

For 2011, the Agency has made no changes to the policies governing rent determination. The established payment standard amounts are in accordance with federal regulations and are within 90-110% of HUD Fair Market Rents published annually. Flat rent rates for the Affordable Public Housing program have been updated based on the current fair market value for each area.

**4. Operation and Management.**

For 2011, the Agency has made no changes to Operations or Management.

**5. Grievance Procedures.**

For 2011, there are no changes to the grievance procedure policies.

**6. Designated Housing for Elderly and Disabled Families.**

For 2011, there are no changes to housing designated for elderly and disabled families.

**7. Community Service and Self-Sufficiency.**

For 2011, there are no changes to Community Service and Self-Sufficiency policies/programs. We continue to administer the Family Self-Sufficiency program for HCV participants and the Resident Opportunity and Self Sufficiency for residents at the Quinto del Sol and the Cathedral City Public Housing communities.

**8. Safety and Crime Prevention.**

For 2011, there are no changes to the PHA plan regarding Safety and Crime Prevention.

**9. Pets.**

For 2011, there is no change to our pet policy.

**10. Civil Rights Certification.**

The Administrative Plan includes a detailed description of the Agency's steps to affirmatively further fair housing. Additionally, the Agency works closely with the Fair Housing Council of Riverside County to address any identifiable impediments to fair housing within the jurisdiction. Fair housing impediments are evaluated annually as part of the County's Consolidated Planning process.

**11. Fiscal Year Audit.**

For Fiscal Year Ending June 30, 2010, the Housing Authority received an Unqualified auditor's opinion on compliance for major programs; and there were no material weaknesses or significant deficiencies identified in its financial statements. Please see attached **Fiscal Year End Audit Reports**.

**12. Asset Management.**

The agency continues to employ the Asset Management Plan described below and monitor the operational performance of each AMP. The Housing Authority of the County of Riverside's (HACR) asset management model eliminates the centralized functions and incorporates a property specific focus. Inventory that was stored at the Indio warehouse has been disbursed to individual sites and each site maintains a minimal amount of inventory to support its daily maintenance needs. The building of offices and workshops for the Public Housing Property Managers to conduct normal daily duties and the Maintenance Workers to perform their daily work are near completion and will facilitate the autonomy of each site. Both central warehouses have been eliminated under this model. Services by the Public Housing Property Manager and the Maintenance Worker are site specific and the HACR no longer operate out of two centralized offices and warehouses. On a quarterly basis information is gathered regarding the financial, physical, and management performance of each property. The reports detail move-outs, vacant unit turnaround times, lease renewals, unit work order status and evictions. This information has been utilized to determine whether or not a property is performing according to standards. These quarterly reports are maintained by the Director of the HACR. If a property is identified as non-performing, staff then proceed to make recommendations that address the areas of non-performance. The HACR Fiscal department has been monitoring all fiscal and budget performances via monthly budgets vs. actual reports and financial statements. The Public Housing Property Managers will be a more active participant in developing and monitoring their site specific budgets in the next fiscal year. The HACR will continue to utilize the Capital Fund Program to modernize our units. The AMPs will be monitored to ensure they are not operating at a loss. Any that are will be considered for disposition in the future.

**13. Violence Against Women Act (VAWA).**

For 2011, there have been no significant changes with regard to the Violence Against Women Act (VAWA).

(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.

Electronic copies of the 5-Year and Annual PHA Plan can be found on the Housing Authority's website at [www.harivco.org](http://www.harivco.org) and print copies will be made available at the main administrative office located at 5555 Arlington Avenue, Riverside, CA, 92504, the eastern county office located at 44-199 Monroe, Suite B, Indio, CA, 92201; and at all Public Housing sites (located in Manager's Office).

6.0

7.0	<p><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></p> <p>(a) <b>Hope VI or Mixed Finance Modernization or Development.</b> Not applicable.</p> <p>(b) <b>Demolition and/or Disposition</b> Not applicable.</p> <p>(c) <b>Conversion of Public Housing.</b> The AMPs will be monitored to ensure they are not operating at a loss. Any that are will be considered for conversion.</p> <p>(d) <b>Homeownership.</b> HACR has a comprehensive HUD approved Homeownership program that consists of a HCV Mortgage Voucher program, a locally funded infill housing program, and homeownership counseling for any interested participant with an emphasis on FSS families.</p> <p>(e) <b>Project-based Vouchers.</b> HACR currently has 48 project based vouchers in areas throughout Riverside County.</p>
8.0	<p><b>Capital Improvements.</b> Please complete Parts 8.1 through 8.3, as applicable.</p>
8.1	<p><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.</p>
8.2	<p><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.</p>
8.3	<p><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.</p>
9.0	<p><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.</p> <p><b>***Not applicable-complete only for Annual Plan submitted with the 5-Year Plan</b></p>
9.1	<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><b>***Not applicable-complete only for Annual Plan submitted with the 5-Year Plan</b></p>
10.0	<p><b>Additional Information.</b> Describe the following, as well as any additional information HUD has requested.</p> <p>(a) <b>Progress in Meeting Mission and Goals.</b> Provide a brief statement of the PHA's progress in meeting the mission and goals described in the 5-Year Plan.</p> <p>(b) <b>Significant Amendment and Substantial Deviation/Modification.</b> Provide the PHA's definition of "significant amendment" and "substantial deviation/modification"</p> <p><b>***Not applicable-complete only for Annual Plan submitted with the 5-Year Plan</b></p>
11.0	<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.</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>

This information collection is authorized by Section 511 of the Quality Housing and Work Responsibility Act, which added a new section 5A to the U.S. Housing Act of 1937, as amended, which introduced 5-Year and Annual PHA Plans. The 5-Year and Annual PHA plans provide a ready source for interested parties to locate basic PHA policies, rules, and requirements concerning the PHA's operations, programs, and services, and informs HUD, families served by the PHA, and members of the public of the PHA's mission and strategies for serving the needs of low-income and very low-income families. This form is to be used by all PHA types for submission of the 5-Year and Annual Plans to HUD. Public reporting burden for this information collection is estimated to average 12.68 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. HUD may not collect this information, and respondents are not required to complete this form, unless it displays a currently valid OMB Control Number.

**Privacy Act Notice.** The United States Department of Housing and Urban Development is authorized to solicit the information requested in this form by virtue of Title 12, U.S. Code, Section 1701 et seq., and regulations promulgated thereunder at Title 12, Code of Federal Regulations. Responses to the collection of information are required to obtain a benefit or to retain a benefit. The information requested does not lend itself to confidentiality

## Instructions form HUD-50075

**Applicability.** This form is to be used by all Public Housing Agencies (PHAs) with Fiscal Year beginning April 1, 2008 for the submission of their 5-Year and Annual Plan in accordance with 24 CFR Part 903. The previous version may be used only through April 30, 2008.

### 1.0 PHA Information

Include the full PHA name, PHA code, PHA type, and PHA Fiscal Year Beginning (MM/YYYY).

### 2.0 Inventory

Under each program, enter the number of Annual Contributions Contract (ACC) Public Housing (PH) and Section 8 units (HCV).

### 3.0 Submission Type

Indicate whether this submission is for an Annual and Five Year Plan, Annual Plan only, or 5-Year Plan only.

### 4.0 PHA Consortia

Check box if submitting a Joint PHA Plan and complete the table.

### 5.0 Five-Year Plan

Identify the PHA's Mission, Goals and/or Objectives (24 CFR 903.6). Complete only at 5-Year update.

**5.1 Mission.** A statement of the mission of the public housing agency for serving the needs of low-income, very low-income, and extremely low-income families in the jurisdiction of the PHA during the years covered under the plan.

**5.2 Goals and Objectives.** Identify quantifiable goals and objectives that will enable the PHA to serve the needs of low income, very low-income, and extremely low-income families.

**6.0 PHA Plan Update.** In addition to the items captured in the Plan template, PHAs must have the elements listed below readily available to the public. Additionally, a PHA must:

- (a) Identify specifically which plan elements have been revised since the PHA's prior plan submission.
- (b) Identify where the 5-Year and Annual Plan may be obtained by the public. At a minimum, PHAs must post PHA Plans, including updates, at each Asset Management Project (AMP) and main office or central office of the PHA. PHAs are strongly encouraged to post complete PHA Plans on its official website. PHAs are also encouraged to provide each resident council a copy of its 5-Year and Annual Plan.

#### PHA Plan Elements. (24 CFR 903.7)

1. **Eligibility, Selection and Admissions Policies, including Deconcentration and Wait List Procedures.** Describe the PHA's policies that govern resident or tenant eligibility, selection and admission including admission preferences for both public housing and HCV and unit assignment policies for public housing; and procedures for maintaining waiting lists for admission to public housing and address any site-based waiting lists.

2. **Financial Resources.** A statement of financial resources, including a listing by general categories, of the PHA's anticipated resources, such as PHA Operating, Capital and other anticipated Federal resources available to the PHA, as well as tenant rents and other income available to support public housing or tenant-based assistance. The statement also should include the non-Federal sources of funds supporting each Federal program, and state the planned use for the resources.
3. **Rent Determination.** A statement of the policies of the PHA governing rents charged for public housing and HCV dwelling units.
4. **Operation and Management.** A statement of the rules, standards, and policies of the PHA governing maintenance management of housing owned, assisted, or operated by the public housing agency (which shall include measures necessary for the prevention or eradication of pest infestation, including cockroaches), and management of the PHA and programs of the PHA.
5. **Grievance Procedures.** A description of the grievance and informal hearing and review procedures that the PHA makes available to its residents and applicants.
6. **Designated Housing for Elderly and Disabled Families.** With respect to public housing projects owned, assisted, or operated by the PHA, describe any projects (or portions thereof), in the upcoming fiscal year, that the PHA has designated or will apply for designation for occupancy by elderly and disabled families. The description shall include the following information: **1)** development name and number; **2)** designation type; **3)** application status; **4)** date the designation was approved, submitted, or planned for submission, and; **5)** the number of units affected.
7. **Community Service and Self-Sufficiency.** A description of: **(1)** Any programs relating to services and amenities provided or offered to assisted families; **(2)** Any policies or programs of the PHA for the enhancement of the economic and social self-sufficiency of assisted families, including programs under Section 3 and FSS; **(3)** How the PHA will comply with the requirements of community service and treatment of income changes resulting from welfare program requirements. **(Note: applies to only public housing).**
8. **Safety and Crime Prevention.** For public housing only, describe the PHA's plan for safety and crime prevention to ensure the safety of the public housing residents. The statement must include: (i) A description of the need for measures to ensure the safety of public housing residents; (ii) A description of any crime prevention activities conducted or to be conducted by the PHA; and (iii) A description of the coordination between the PHA and the appropriate police precincts for carrying out crime prevention measures and activities.

9. **Pets.** A statement describing the PHAs policies and requirements pertaining to the ownership of pets in public housing.
10. **Civil Rights Certification.** A PHA will be considered in compliance with the Civil Rights and AFFH Certification if: it can document that it examines its programs and proposed programs to identify any impediments to fair housing choice within those programs; addresses those impediments in a reasonable fashion in view of the resources available; works with the local jurisdiction to implement any of the jurisdiction's initiatives to affirmatively further fair housing; and assures that the annual plan is consistent with any applicable Consolidated Plan for its jurisdiction.
11. **Fiscal Year Audit.** The results of the most recent fiscal year audit for the PHA.
12. **Asset Management.** A statement of how the agency will carry out its asset management functions with respect to the public housing inventory of the agency, including how the agency will plan for the long-term operating, capital investment, rehabilitation, modernization, disposition, and other needs for such inventory.
13. **Violence Against Women Act (VAWA).** A description of: 1) Any activities, services, or programs provided or offered by an agency, either directly or in partnership with other service providers, to child or adult victims of domestic violence, dating violence, sexual assault, or stalking; 2) Any activities, services, or programs provided or offered by a PHA that helps child and adult victims of domestic violence, dating violence, sexual assault, or stalking, to obtain or maintain housing; and 3) Any activities, services, or programs provided or offered by a public housing agency to prevent domestic violence, dating violence, sexual assault, and stalking, or to enhance victim safety in assisted families.

**7.0 Hope VI, Mixed Finance Modernization or Development, Demolition and/or Disposition, Conversion of Public Housing, Homeownership Programs, and Project-based Vouchers**

- (a) **Hope VI or Mixed Finance Modernization or Development.** 1) A description of any housing (including project number (if known) and unit count) for which the PHA will apply for HOPE VI or Mixed Finance Modernization or Development; and 2) A timetable for the submission of applications or proposals. The application and approval process for Hope VI, Mixed Finance Modernization or Development, is a separate process. See guidance on HUD's website at: <http://www.hud.gov/offices/pih/programs/ph/hope6/index.cfm>
- (b) **Demolition and/or Disposition.** With respect to public housing projects owned by the PHA and subject to ACCs under the Act: (1) A description of any housing (including project number and unit numbers [or addresses]), and the number of affected units along with their sizes and accessibility features) for which the PHA will apply or is currently pending for demolition or disposition; and (2) A timetable for the demolition or disposition. The application and approval process for demolition and/or disposition is a separate process. See guidance on HUD's website at: [http://www.hud.gov/offices/pih/centers/sac/demo\\_dispo/index.cfm](http://www.hud.gov/offices/pih/centers/sac/demo_dispo/index.cfm)  
**Note:** This statement must be submitted to the extent that approved and/or pending demolition and/or disposition has changed.
- (c) **Conversion of Public Housing.** With respect to public housing owned by a PHA: 1) A description of any building or buildings (including project number and unit count) that the PHA is required to convert to tenant-based assistance or

that the public housing agency plans to voluntarily convert; 2) An analysis of the projects or buildings required to be converted; and 3) A statement of the amount of assistance received under this chapter to be used for rental assistance or other housing assistance in connection with such conversion. See guidance on HUD's website at: <http://www.hud.gov/offices/pih/centers/sac/conversion.cfm>

- (d) **Homeownership.** A description of any homeownership (including project number and unit count) administered by the agency or for which the PHA has applied or will apply for approval.
- (e) **Project-based Vouchers.** If the PHA wishes to use the project-based voucher program, a statement of the projected number of project-based units and general locations and how project basing would be consistent with its PHA Plan.

**8.0 Capital Improvements.** This section provides information on a PHA's Capital Fund Program. With respect to public housing projects owned, assisted, or operated by the public housing agency, a plan describing the capital improvements necessary to ensure long-term physical and social viability of the projects must be completed along with the required forms. Items identified in 8.1 through 8.3, must be signed where directed and transmitted electronically along with the PHA's Annual Plan submission.

**8.1 Capital Fund Program Annual Statement/Performance and Evaluation Report.** PHAs must complete the *Capital Fund Program Annual Statement/Performance and Evaluation Report* (form HUD-50075.1), for each Capital Fund Program (CFP) to be undertaken with the current year's CFP funds or with CFFP proceeds. Additionally, the form shall be used for the following purposes:

- (a) To submit the initial budget for a new grant or CFFP;
- (b) To report on the Performance and Evaluation Report progress on any open grants previously funded or CFFP; and
- (c) To record a budget revision on a previously approved open grant or CFFP, e.g., additions or deletions of work items, modification of budgeted amounts that have been undertaken since the submission of the last Annual Plan. The Capital Fund Program Annual Statement/Performance and Evaluation Report must be submitted annually.

Additionally, PHAs shall complete the Performance and Evaluation Report section (see footnote 2) of the *Capital Fund Program Annual Statement/Performance and Evaluation* (form HUD-50075.1), at the following times:

1. At the end of the program year; until the program is completed or all funds are expended;
2. When revisions to the Annual Statement are made, which do not require prior HUD approval, (e.g., expenditures for emergency work, revisions resulting from the PHAs application of fungibility); and
3. Upon completion or termination of the activities funded in a specific capital fund program year.

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

PHAs must submit the *Capital Fund Program Five-Year Action Plan* (form HUD-50075.2) for the entire PHA portfolio for the first year of participation in the CFP and annual update thereafter to eliminate the previous year and to add a new fifth year (rolling basis) so that the form always covers the present five-year period beginning with the current year.

**8.3 Capital Fund Financing Program (CFFP).** Separate, written HUD approval is required if the PHA proposes to pledge any

portion of its CFP/RHF funds to repay debt incurred to finance capital improvements. The PHA must identify in its Annual and 5-year capital plans the amount of the annual payments required to service the debt. The PHA must also submit an annual statement detailing the use of the CFFP proceeds. See guidance on HUD's website at:

<http://www.hud.gov/offices/pih/programs/ph/capfund/cffp.cfm>

**9.0 Housing Needs.** Provide a statement of the housing needs of families residing in the jurisdiction served by the PHA and the means by which the PHA intends, to the maximum extent practicable, to address those needs. **(Note: Standard and Troubled PHAs complete annually; Small and High Performers complete only for Annual Plan submitted with the 5-Year Plan).**

**9.1 Strategy for Addressing Housing Needs.** Provide a 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. **(Note: Standard and Troubled PHAs complete annually; Small and High Performers complete only for Annual Plan submitted with the 5-Year Plan).**

**10.0 Additional Information.** Describe the following, as well as any additional information requested by HUD:

- (a) **Progress in Meeting Mission and Goals.** PHAs must include (i) a statement of the PHAs progress in meeting the mission and goals described in the 5-Year Plan; (ii) the basic criteria the PHA will use for determining a significant amendment from its 5-year Plan; and a significant amendment or modification to its 5-Year Plan and Annual Plan. **(Note: Standard and Troubled PHAs complete annually; Small and High Performers complete only for Annual Plan submitted with the 5-Year Plan).**
- (b) **Significant Amendment and Substantial Deviation/Modification.** PHA must provide the definition of "significant amendment" and "substantial deviation/modification". **(Note: Standard and Troubled PHAs complete annually; Small and High Performers complete only for Annual Plan submitted with the 5-Year Plan.)**

- (c) PHAs must include or reference any applicable memorandum of agreement with HUD or any plan to improve performance. **(Note: Standard and Troubled PHAs complete annually).**

**11.0 Required Submission for HUD Field Office Review.** In order to be a complete package, PHAs must submit items (a) through (g), with signature by mail or electronically with scanned signatures. Items (h) and (i) shall be submitted electronically as an attachment to the PHA Plan.

- (a) Form HUD-50077, *PHA Certifications of Compliance with the PHA Plans and Related Regulations*
- (b) Form HUD-50070, *Certification for a Drug-Free Workplace (PHAs receiving CFP grants only)*
- (c) Form HUD-50071, *Certification of Payments to Influence Federal Transactions (PHAs receiving CFP grants only)*
- (d) Form SF-LLL, *Disclosure of Lobbying Activities (PHAs receiving CFP grants only)*
- (e) Form SF-LLL-A, *Disclosure of Lobbying Activities Continuation Sheet (PHAs receiving CFP grants only)*
- (f) Resident Advisory Board (RAB) comments.
- (g) Challenged Elements. Include any element(s) of the PHA Plan that is challenged.
- (h) Form HUD-50075.1, *Capital Fund Program Annual Statement/Performance and Evaluation Report (Must be attached electronically for PHAs receiving CFP grants only)*. See instructions in 8.1.
- (i) Form HUD-50075.2, *Capital Fund Program Five-Year Action Plan (Must be attached electronically for PHAs receiving CFP grants only)*. See instructions in 8.2.



**PHA Certifications of Compliance with the PHA Plans and Related Regulations:  
Board Resolution to Accompany the PHA 5-Year and Annual PHA Plan**

*Acting on behalf of the Board of Commissioners of the Public Housing Agency (PHA) listed below, as its Chairman or other authorized PHA official if there is no Board of Commissioners, I approve the submission of the \_\_\_ 5-Year and/or  Annual PHA Plan for the PHA fiscal year beginning 07/01/2011, hereinafter referred to as "the Plan", of which this document is a part and make the following certifications and agreements with the Department of Housing and Urban Development (HUD) in connection with the submission of the Plan and implementation thereof:*

1. The Plan is consistent with the applicable comprehensive housing affordability strategy (or any plan incorporating such strategy) for the jurisdiction in which the PHA is located.
2. The Plan contains a certification by the appropriate State or local officials that the Plan is consistent with the applicable Consolidated Plan, which includes a certification that requires the preparation of an Analysis of Impediments to Fair Housing Choice, for the PHA's jurisdiction and a description of the manner in which the PHA Plan is consistent with the applicable Consolidated Plan.
3. The PHA certifies that there has been no change, significant or otherwise, to the Capital Fund Program (and Capital Fund Program/Replacement Housing Factor) Annual Statement(s), since submission of its last approved Annual Plan. The Capital Fund Program Annual Statement/Annual Statement/Performance and Evaluation Report must be submitted annually even if there is no change.
4. The PHA has established a Resident Advisory Board or Boards, the membership of which represents the residents assisted by the PHA, consulted with this Board or Boards in developing the Plan, and considered the recommendations of the Board or Boards (24 CFR 903.13). The PHA has included in the Plan submission a copy of the recommendations made by the Resident Advisory Board or Boards and a description of the manner in which the Plan addresses these recommendations.
5. The PHA made the proposed Plan and all information relevant to the public hearing available for public inspection at least 45 days before the hearing, published a notice that a hearing would be held and conducted a hearing to discuss the Plan and invited public comment.
6. The PHA certifies that it will carry out the Plan in conformity with Title VI of the Civil Rights Act of 1964, the Fair Housing Act, section 504 of the Rehabilitation Act of 1973, and title II of the Americans with Disabilities Act of 1990.
7. The PHA will affirmatively further fair housing by examining their programs or proposed programs, identify any impediments to fair housing choice within those programs, address those impediments in a reasonable fashion in view of the resources available and work with local jurisdictions to implement any of the jurisdiction's initiatives to affirmatively further fair housing that require the PHA's involvement and maintain records reflecting these analyses and actions.
8. For PHA Plan that includes a policy for site based waiting lists:
  - The PHA regularly submits required data to HUD's 50058 PIC/IMS Module in an accurate, complete and timely manner (as specified in PIH Notice 2006-24);
  - The system of site-based waiting lists provides for full disclosure to each applicant in the selection of the development in which to reside, including basic information about available sites; and an estimate of the period of time the applicant would likely have to wait to be admitted to units of different sizes and types at each site;
  - Adoption of site-based waiting list would not violate any court order or settlement agreement or be inconsistent with a pending complaint brought by HUD;
  - The PHA shall take reasonable measures to assure that such waiting list is consistent with affirmatively furthering fair housing;
  - The PHA provides for review of its site-based waiting list policy to determine if it is consistent with civil rights laws and certifications, as specified in 24 CFR part 903.7(c)(1).
9. The PHA will comply with the prohibitions against discrimination on the basis of age pursuant to the Age Discrimination Act of 1975.
10. The PHA will comply with the Architectural Barriers Act of 1968 and 24 CFR Part 41, Policies and Procedures for the Enforcement of Standards and Requirements for Accessibility by the Physically Handicapped.
11. The PHA will comply with the requirements of section 3 of the Housing and Urban Development Act of 1968, Employment Opportunities for Low-or Very-Low Income Persons, and with its implementing regulation at 24 CFR Part 135.
12. The PHA will comply with acquisition and relocation requirements of the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970 and implementing regulations at 49 CFR Part 24 as applicable.



13. The PHA will take appropriate affirmative action to award contracts to minority and women's business enterprises under 24 CFR 5.105(a).
14. The PHA will provide the responsible entity or HUD any documentation that the responsible entity or HUD needs to carry out its review under the National Environmental Policy Act and other related authorities in accordance with 24 CFR Part 58 or Part 50, respectively.
15. With respect to public housing the PHA will comply with Davis-Bacon or HUD determined wage rate requirements under Section 12 of the United States Housing Act of 1937 and the Contract Work Hours and Safety Standards Act.
16. The PHA will keep records in accordance with 24 CFR 85.20 and facilitate an effective audit to determine compliance with program requirements.
17. The PHA will comply with the Lead-Based Paint Poisoning Prevention Act, the Residential Lead-Based Paint Hazard Reduction Act of 1992, and 24 CFR Part 35.
18. The PHA will comply with the policies, guidelines, and requirements of OMB Circular No. A-87 (Cost Principles for State, Local and Indian Tribal Governments), 2 CFR Part 225, and 24 CFR Part 85 (Administrative Requirements for Grants and Cooperative Agreements to State, Local and Federally Recognized Indian Tribal Governments).
19. The PHA will undertake only activities and programs covered by the Plan in a manner consistent with its Plan and will utilize covered grant funds only for activities that are approvable under the regulations and included in its Plan.
20. All attachments to the Plan have been and will continue to be available at all times and all locations that the PHA Plan is available for public inspection. All required supporting documents have been made available for public inspection along with the Plan and additional requirements at the primary business office of the PHA and at all other times and locations identified by the PHA in its PHA Plan and will continue to be made available at least at the primary business office of the PHA.
21. The PHA provides assurance as part of this certification that:
  - (i) The Resident Advisory Board had an opportunity to review and comment on the changes to the policies and programs before implementation by the PHA;
  - (ii) The changes were duly approved by the PHA Board of Directors (or similar governing body); and
  - (iii) The revised policies and programs are available for review and inspection, at the principal office of the PHA during normal business hours.
22. The PHA certifies that it is in compliance with all applicable Federal statutory and regulatory requirements.

Housing Authority of the County of Riverside

CA027


PHA Name

PHA Number/HA Code

\_\_\_\_\_ 5-Year PHA Plan for Fiscal Years 20\_\_\_\_ - 20\_\_\_\_

X \_\_\_\_\_ Annual PHA Plan for Fiscal Years 20<sup>11</sup> - 20<sup>12</sup>

I hereby certify that all the information stated herein, as well as any information provided in the accompaniment herewith, is true and accurate. **Warning:** HUD will prosecute false claims and statements. Conviction may result in criminal and/or civil penalties. (18 U.S.C. 1001, 1010, 1012; 31 U.S.C. 3729, 3802)

Name of Authorized Official	Title
Bob Buster	Chairman, Board of Commissioners
Signature	Date
	MAR 15 2011

FORM APPROVED COUNTY COUNSEL

BY:  ANITA C. WILLIS DATE

ATTEST:

KECIA HARPER-IHEM, Clerk

By:  DEPUTY



BOARD OF COMMISSIONERS

HOUSING AUTHORITY OF  
THE COUNTY OF RIVERSIDE

**RESOLUTION NO. 2011-01  
APPROVE THE ANNUAL PLAN AND SUPPORTING DOCUMENTS FOR THE  
HOUSING AUTHORITY OF THE COUNTY OF RIVERSIDE**

**WHEREAS**, The Housing Authority of the County of Riverside ("Authority") is authorized by the U.S. Department of Housing And Urban Development to administer 8677 Housing Choice Vouchers and 469 Affordable Public Housing units throughout Riverside County; and

**WHEREAS**, Chapter 24 of the Code of Federal Regulations, Part 903, requires the Authority to submit an Annual Plan at least 75 days prior to the beginning of the Authority's fiscal year; and

**WHEREAS**, the Annual Plan submittal must include Form HUD-50077 certifying the Authority's compliance with PHA Plans and Related Regulations; and

**WHEREAS**, the Authority's fiscal year begins on July 1, 2011; and

**WHEREAS**, the Authority is in compliance with Public Housing Authority (PHA) plans and related regulations.

**NOW THEREFORE, BE IT RESOLVED, FOUND, DETERMINED, AND ORDERED** by the Board of Commissioners of the Housing Authority of the County of Riverside, State of California, in regular session assembled on March 15, 2011, as follows:

1. That the Board of Commissioners hereby finds and declares that the above recitals are true, correct and incorporated herein.
2. That the Board of Commissioners hereby approves the Authority's Annual Agency Plan and supporting documents.

**ROLL CALL:**

Ayes: Buster, Stone and Ashley  
 Nays: None  
 Absent: Tavaglione and Bennett

The foregoing is certified to be a true copy of a resolution duly adopted by said Board of Supervisors on the date therein set forth.

KECIA HARPER-HEM Clerk of said Board  
By *[Signature]* Deputy

FORM APPROVED COUNTY COUNSEL  
BY: *[Signature]*  
ANITA C. WILLIS  
DATE: 2-23-11

**Part I: Summary**

PHA Name: **Housing Authority of the County of Riverside**

Grant Type and Number

Capital Fund Program Grant No: **CA16 P027-50106**

Replacement Housing Factor Grant No:

FFY of Grant: **2006**

FFY of Grant Approval: **2006**

Original Annual Statement  Reserve for Disasters/ Emergencies  Revised Annual Statement (revision no: 5)  
 Performance and Evaluation Report for Period Ending:  Final Performance and Evaluation Report

Line	Summary by Development Account	Original	Total Estimated Cost	Revised <sup>2</sup>	Obligated	Total Actual Cost <sup>1</sup>	Expended
1	Total non-CFP Funds						
2	1406 Operations (may not exceed 20% of line 20) <sup>3</sup>	137,131.00		137,131.00		137,131.00	137,131.00
3	1408 Management Improvements	50,000.00		50,000.00		50,000.00	50,000.00
4	1410 Administration (may not exceed 10% of line 20)	68,405.00		68,405.00		68,405.00	68,405.00
5	1411 Audit	1,000.00		1,000.00		1,000.00	1,000.00
6	1415 Liquidated Damages						
7	1430 Fees and Costs	20,347.00		27,799.00		27,799.00	27,799.00
8	1440 Site Acquisition						
9	1450 Site Improvement	120,097.73		117,165.96		117,165.96	117,165.96
10	1460 Dwelling Structures	346,688.27		342,168.04		342,168.04	342,168.04
11	1465.1 Dwelling Equipment—Nonependable						
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						
18b	9000 Collateralization or Debt Service paid Via system of Direct Payment						
19	1502 Contingency (may not exceed 8% of line 20)						
20	<b>Amount of Annual Grant: (sum of lines 2 to 19)</b>		<b>743,669.00</b>	<b>743,669.00</b>	<b>743,669.00</b>	<b>743,669.00</b>	<b>743,669.00</b>
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	375,509.00		375,509.00		375,509.00	375,509.00

<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  
 OMB No. 2577-0226  
 Expires 4/30/2011

**Part I: Summary**

PHA Name: Housing Authority of the County of Riverside		Grant Type and Number Capital Fund Program Grant No: CA16 P027-50106 Date of CFFP: _____		Replacement Housing Factor Grant No: _____		FFY of Grant: 2006	
Type of Grant <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Performance and Evaluation Report for Period Ending: _____		<input type="checkbox"/> Reserve for Disasters/ Emergencies		<input type="checkbox"/> Revised Annual Statement (revision no: 5) <input checked="" type="checkbox"/> Final Performance and Evaluation Report		FFY of Grant Approval: 2006	
Line	Summary by Development Account	Total Estimated Cost	Revised <sup>2</sup>	Obligated	Total Actual Cost <sup>1</sup>	Expended	Date
	Signature of Executive Director <i>John Starob</i>			Signature of Public Housing Director			Date 3/29/2011



**Part II: Supporting Pages**

PHA Name: Housing Authority of the County of Riverside		Grant Type and Number Capital Fund Program Grant No: CA16 P027 50106 CFFP: (Yes/No): No		Federal FFY of Grant: 2006		Status of Work		
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost	Total Actual Cost	Funds Obligated <sup>2</sup>	Funds Expended <sup>2</sup>	Status of Work
				Original	Revised <sup>1</sup>			
	Operations	1406		137,131.00	137,131.00	137,131.00	137,131.00	
Management Improvement	Management Improvement Items- computers, hardware & software, upgrade video conferencing, digital camera. Preventive Maintenance Program. Employee Training, Resident Services	1408(a)		50,000.00	50,000.00	50,000.00	50,000.00	Completed
Salaries	Staff, management including benefits	1410		68,405.00	68,405.00	68,405.00	68,405.00	Completed
	Audit	1411		1,000.00	1,000.00	1,000.00	1,000.00	Completed
Consultant Fees	Energy Audit, Architect & Engineering	1430		20,347.00	20,347.00 +7,452.00 27,799.00	27,799.00	27,799.00	Energy Audit Completed
AMP 210 - CA027007 El Dorado Garden Apts	Door replacements and sliding glass doors	1460		32,481.27	32,481.27	32,481.27	32,481.27	Completed - Work in 50106
AMP 210 - CA027006, CA027012 Rabidoux Apts	A/C replacement, dual pack	1460	28 x \$7,000	0	0	0	0	Also in 50107
AMP 210 - CA027022 Scattered Sites: Highland	Remove and replace seepage pit and septic tank	1460	1	0	0	0	0	
AMP 220 - CA02721 Midway Capri Apts	A/C replacement, dual pack	1460	40 x \$7,000	225,000.00	225,000.00	225,000.00	225,000.00	Completed (Est 280K, rem f/ CatC & Ald)
AMP 230 - CA027010 Corregidor Apts	Concrete work for playground area	1450		24,500.00	24,500.00	24,500.00	24,500.00	Completed
AMP 230 - CA027010 Corregidor Apts	A/C - heat pumps	1460		17,030.00	17,030.00 -1,760.23 15,269.77	15,269.77	15,269.77	Was also in 50104/50105
AMP 230 - CA027041 Aladdin Apts	Remove fencing and landscape	1450	20 x \$5,000	95,597.73	95,597.73 -2,931.77 92,665.96	92,665.96	92,665.96	Also in 50107/8
AMP 230 - CA027041 Aladdin Apts	A/C - heat pumps	1460		5,400.00	5,400.00 -2,760.00 2,640.00	2,640.00	2,640.00	Was also in 50104/50105
AMP 230 - CA027041 Aladdin Apts	Color coat and paint	1460		66,777.00	66,777.00	66,777.00	66,777.00	Completed
Contingency	Contingency	1502		0	0	0	0	



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 III: Implementation Schedule for Capital Fund Financing Program**

PHA Name: Housing Authority of the County of Riverside  
 Grant Type and Number: Capital Fund Program No: CA16 P027 - 50106  
 Replacement Housing Factor No:

Federal FY of Grant:  
 2006

Development Number Name/HA-Wide Activities	All Fund Obligated (Quarter Ending Date)		Actual	All Funds Expended (Quarter Ending Date)		Actual	Reasons for Revised Target Dates
	Original	Revised		Original	Revised		
Operations	7/17/2008		09/30/2006	7/17/2010	06/30/2009		
Management Improvements	7/17/2008		06/30/2008	7/17/2010	06/30/2009		
Administration	7/17/2008		06/30/2008	7/17/2010	03/31/2009		
Audit	7/17/2008	06/30/2010	04/30/2010	7/17/2010	06/30/2010		Audit not obligated until projects are completed.
007 - Jackson	7/17/2008		06/30/2008	7/17/2010	03/31/2008		
021-Midway	7/17/2008		07/15/2008	7/17/2010	12/31/2008		
041- Aladdin	7/17/2008		11/30/2006	7/17/2010	06/30/2010		
041- Aladdin	7/17/2008		06/30/2008	7/17/2010	03/31/2007		
041- Aladdin	7/17/2008		06/30/2008	7/17/2010	12/31/2008		
010-Cat City	7/17/2008		11/30/2006	7/17/2010	07/15/2008		

<sup>1</sup> Obligation and expenditure end dates 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**

PHA Name: **Housing Authority of the County of Riverside**

Grant Type and Number  
 Capital Fund Program Grant No: **CA16 P027-50107** Replacement Housing Factor Grant No:  
 Date of CFFP: \_\_\_\_\_

FFY of Grant: **2007**  
 FFY of Grant Approval: **2007**

Original Annual Statement  Reserve for Disasters/ Emergencies  Revised Annual Statement (revision no: ) 3  
 Performance and Evaluation Report for Period Ending:  Final Performance and Evaluation Report

Line	Summary by Development Account	Original	Total Estimated Cost	Revised <sup>2</sup>	Obligated	Total Actual Cost <sup>1</sup>	Expended
1	Total non-CFP Funds						
2	1406 Operations (may not exceed 20% of line 20) <sup>3</sup>	144,515.00		144,515.00	144,515.00		144,515.00
3	1408 Management Improvements	50,000.00		50,000.00	50,000.00		50,000.00
4	1410 Administration (may not exceed 10% of line 20)	72,258.00		72,258.00	72,258.00		72,258.00
5	1411 Audit	1,000.00		1,000.00	1,000.00		1,000.00
6	1415 Liquidated Damages						
7	1430 Fees and Costs						
8	1440 Site Acquisition						
9	1450 Site Improvement	159,803.00		93,976.10	93,976.10		93,976.10
10	1460 Dwelling Structures	295,000.00		360,826.90	360,826.90		360,826.90
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						
18b	9000 Collateralization or Debt Service paid Via system of Direct Payment						
19	1502 Contingency (may not exceed 8% of line 20)	0		0	0		0
20	<b>Amount of Annual Grant: (sum of lines 2 to 19)</b>	<b>722,576.00</b>		<b>722,576.00</b>	<b>722,576.00</b>		<b>722,576.00</b>
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	414,803.00		360,826.90	360,826.90		360,826.90

<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  
 OMB No. 2577-0226  
 Expires 4/30/2011

**Part I: Summary**

PHA Name: Housing Authority of the County of Riverside		Grant Type and Number Capital Fund Program Grant No. CA16 P027-50107		Replacement Housing Factor Grant No.		FFY of Grant: 2007	
		Date of CFPP:				FFY of Grant Approval: 2007	
Type of Grant <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Performance and Evaluation Report for Period Ending: <input type="checkbox"/> Reserve for Disasters/ Emergencies		<input type="checkbox"/> Revised Annual Statement (revision no: 3) <input checked="" type="checkbox"/> Final Performance and Evaluation Report					
Line	Summary by Development Account	Total Estimated Cost	Revised <sup>2</sup> Cost	Obligated	Total Actual Cost <sup>1</sup>	Expended	Date
	Signature of Executive Director <i>Heidi Sparks</i>	Original 3/29/2011		Signature of Public Housing Director			



**Part II: Supporting Pages**

PHA Name: Housing Authority of the County of Riverside		Grant Type and Number		Capital Fund Program Grant No.: CA16 P027 - 50107		CEFP (Yes/No): No		Federal FFY of Grant: 2007		Status of Work
Development Number	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost	Revised <sup>1</sup>	Funds Obligated <sup>2</sup>	Funds Expended <sup>2</sup>			
	Operations	1406		Original 144,515.00	Revised <sup>1</sup> 144,515.00	Funds Obligated <sup>2</sup> 144,515.00	Funds Expended <sup>2</sup> 144,515.00	Completed		
Management Improvement	Management Improvement Items- computers, hardware & software, upgrade video conferencing, digital camera. Preventive Maintenance Program, Energy Audit, Employee Training, Resident Services	1408(a)		50,000.00	50,000.00	50,000.00	50,000.00	Completed		
Salaries	Staff, management including benefits	1410		72,258.00	72,258.00	72,258.00	72,258.00	Completed		
	Audit	1411		1,000.00	1,000.00	1,000.00	1,000.00	Completed		
AMP 210 - CA027006, CA027012 Rubidoux Apts	A/C replacement, dual pack (bid received came in lower than anticipated due to current economic situation of the county)	1460	29 units @ \$5,344.83	252,000.00	252,000.00	154,900.94	154,900.94	Completed		
						155,000.00				
						-99.06				
						<b>154,900.94</b>				
AMP 210 - CA027006, CA027012 Rubidoux Apts	Carports including electrical	1450	29	0.00	0.00	73,576.00	73,576.00	Completed		
						+119,803.00				
						119,803.00				
						-46,227.00				
						<b>73,576.00</b>				
AMP 210 - CA027007 El Dorado Gardens Apts	Pool fence replacement	1450	1	40,000.00	40,000.00	20,400.10	20,400.10	Completed		
						-19599.90				
						<b>20,400.10</b>				
AMP 210 - CA027022 Scattered Sites: Highland	Remove and replace seepage pit and septic tank	1460	1	10,000.00	10,000.00	0.00	0.00			
						-10,000.00				
						<b>0.00</b>				
AMP 230 - CA027018 Desert Hot Springs Apts	Water heater replacements to on-demand units, includes upgrading plumbing to units	1460	42 units @ \$3,500 ea	105,000.00	105,000.00	114,674.00	114,674.00	Bd approved contract on 9/1/09. Completed		
						+35,000.00				
						140,000.00				
						-25326.00				
						<b>114,674.00</b>				



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**

AMP 230 - CA027027 Mecca	Water heater replacements to on-demand units (work approximately \$105,000, part of work in ARRA \$13,748.04)	1460	40 units @ 1400.08 1 unit @1800	47,803.00	0.00	47,803.00 -47,803.00 0.00 +99.06 +25,326.00 +19,599.90 +46,227.00 <u>91,251.96</u>	0.00	91,251.96	91,251.96	0.00	0.00	Wk item Moved to ARRA & part of wk moved back from Stimulus- ARRA
Contingency	Contingency	1502			0.00	0.00	0.00	0.00	0.00			

**Part III: Implementation Schedule for Capital Fund Financing Program**

Development Number Name/HA-Wide Activities	All Fund Obligated (Quarter Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates
	Original	Revised	Actual	Original	Revised	Actual	
Operations	9/12/2009		05/12/2009	09/12/2011	06/30/2009	05/12/2009	
Management Improvements	9/12/2009		11/30/2009	09/12/2011	12/31/2009	12/31/2009	Grant was over 90% obligated before deadline of 9/12/2009
Administration	9/12/2009		11/30/2009	09/12/2011	12/31/2009	10/23/2009	Grant was over 90% obligated before deadline of 9/12/2009
Audit	9/12/2009		06/30/2010	09/12/2011	06/30/2010	06/30/2010	
Energy Audit	9/12/2009		n/a	n/a	n/a	n/a	
006/012 Rubidoux	9/12/2009		03/31/2009	09/12/2011	06/30/2009	06/05/2009	Obligated 03/24/2009
007 - Jackson	9/12/2009		07/08/2009	09/12/2011	09/30/2009	07/31/2009	Obligated 05/31/2009
018- DHS	9/12/2009		09/01/2009	09/12/2011		06/30/2010	Obligated 09/01/2009
022- Highland	9/12/2009		n/a	n/a	n/a	n/a	Removed work item
027 - Mecca	9/12/2009		09/01/2009	09/12/2011		06/30/2010	Obligated 09/01/2009
Contingency	n/a		n/a	n/a	n/a	n/a	

Grant Type and Number  
 Capital Fund Program No. CA16 P027 - 50107  
 Replacement Housing Factor No.

Federal FY of Grant:  
 2007

Obligation and expenditure end dates 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: **Housing Authority of the County of Riverside**

Grant Type and Number  
 Capital Fund Program Grant No: **CA16 P027-50108** Replacement Housing Factor Grant No:  
 Date of CFFP: \_\_\_\_\_

FFY of Grant: **2008**  
 FFY of Grant Approval: **2008**

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 20) <sup>3</sup>	152,525.00	152,525.00	152,525.00	152,525.00
3	1408 Management Improvements	50,000.00	50,000.00	50,000.00	50,000.00
4	1410 Administration (may not exceed 10% of line 20)	76,262.00	76,262.00	76,262.00	76,262.00
5	1411 Audit	1,000.00	1,000.00	0.00	0.00
6	1415 Liquidated Damages	0.00	0.00		
7	1430 Fees and Costs	30,000.00	30,000.00	30,000.00	30,000.00
8	1440 Site Acquisition	0.00	0.00		
9	1450 Site Improvement	45,000.00	45,000.00	45,000.00	33,760.80
10	1460 Dwelling Structures	407,838.00	407,838.00	407,838.00	407,838.00
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				
18b	9000 Collateralization or Debt Service paid Via system of Direct Payment				
19	1502 Contingency (may not exceed 8% of line 20)				
20	<b>Amount of Annual Grant: (sum of lines 2 to 19)</b>	<b>762,625.00</b>	<b>762,625.00</b>	<b>761,625.00</b>	<b>750,385.80</b>
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.

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**

PHA Name: Housing Authority of the County of Riverside		Grant Type and Number Capital Fund Program Grant No: CA16 P027-50108 Date of CFEP: _____		Replacement Housing Factor Grant No: _____		FFY of Grant: <u>2008</u>	
Type of Grant <input type="checkbox"/> Original Annual Statement <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 12/31/2010		<input type="checkbox"/> Reserve for Disasters/ Emergencies		<input type="checkbox"/> Revised Annual Statement (revision no: 2)		<input type="checkbox"/> Final Performance and Evaluation Report	
Line	Summary by Development Account	Total Estimated Cost	Revised <sup>2</sup>	Obligated	Total Actual Cost <sup>1</sup>	Expended	Date
Signature of Executive Director <i>Alan Spauld</i>				Signature of Public Housing Director			<i>3/29/2011</i>



**Part II: Supporting Pages**

PHA Name: Housing Authority of the County of Riverside		Grant Type and Number Capital Fund Program Grant No: CA16 P027 50108		CFEP (Yes/No): No		Federal FY of Grant: 2008		Status of Work
Development Number/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost	Total Actual Cost	Funds Obligated <sup>2</sup>	Funds Expended <sup>2</sup>	Status of Work
	Operations	1406		Original 152,525.00	Revised <sup>1</sup> 152,525.00	Funds Obligated <sup>2</sup> 152,525.00	Funds Expended <sup>2</sup> 152,525.00	Completed
Management Improvement	Management Improvement Items- computers, hardware & software, upgrade video conferencing, digital camera, Preventive Maintenance Program, Energy Audit, Employee Training, Resident Services	1408(a)		50,000.00	50,000.00	50,000.00	50,000.00	Completed
Salaries	Staff, management including benefits	1410		76,262.00	76,262.00	76,262.00	76,262.00	Completed
	Audit	1411		1,000.00	1,000.00	0.00	0.00	Completed
Consultant Fees	Architect & Engineering	1430		30,000.00	30,000.00	30,000.00	30,000.00	Completed
AMP 220 - CA027001 Beaumont Apts	Walkway ADA compliance (REAC deficiency) - Convert / Improve any needed thresholds / step-downs / walkways to handicapped accessible	1450		45,000.00	45,000.00	45,000.00	33,760.80	Move Playground to 50110
AMP 230 - CA027027 Mecca	Kitchen & bath remodel-cabinets, vanities, countertops, floors and appliances	1460	40 units @ apptx 10,196	407,838.00	407,838.00	407,838.00	407,838.00	Completed
Contingency	Contingency	1502		0.00	0.00	0.00	0.00	

**Part III: Implementation Schedule for Capital Fund Financing Program**

Development Number Name/HA-Wide Activities	All Fund Obligated (Quarter Ending Date)		Actual	All Funds Expended (Quarter Ending Date)		Actual	Reasons for Revised Target Dates
	Original	Revised		Original	Revised		
Operations	06/12/2010		05/19/2009	06/12/2012		05/21/2009	
Management Improvements	06/12/2010		06/12/2010	06/12/2012		02/28/2010	
Administration	06/12/2010		06/12/2010	06/12/2012		02/28/2010	
Audit	06/12/2010			06/12/2012			
Energy Audit/Arch & Eng	06/12/2010		05/31/2009	06/12/2012		06/29/2009	
AMP 220 - Site 224 (001 - Beaumont)	06/12/2010		11/04/2010	06/12/2012			Grant was over 90% obligated before deadline of 6/12/2010
AMP 230 - Site 235 (027 - Mecca)	06/12/2010		10/31/2009	06/12/2012		04/30/2010	
Contingency	n/a	n/a	n/a	n/a			

PHA Name: **Housing Authority of the County of Riverside**  
 Grant Type and Number: **Capital Fund Program No: CA16 P027 - 50108**  
 Replacement Housing Factor No:

Federal FY of Grant:  
**2008**

<sup>1</sup> Obligation and expenditure end dates 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 Housing and Urban Development  
 OMB No. 2577-0226  
 Expires 4/30/2011

**Part I: Summary**

PHA Name: **Housing Authority of the County of Riverside**

Grant Type and Number  
 Capital Fund Program Grant No: **CA16 P027-50109**  
 Date of CFFP: \_\_\_\_\_

Replacement Housing Factor Grant No:

FFY of Grant: **2009**  
 FFY of Grant Approval: **2009**

Line	Original	Revised <sup>2</sup>	Total Actual Cost <sup>1</sup>	
			Obligated	Expended
1	Total non-CFP Funds			
2	1406 Operations (may not exceed 20% of line 20) <sup>3</sup>	152,139.00	152,139.00	0.00
3	1408 Management Improvements	44,000.00	38,000.00	29,096.75
4	1410 Administration (may not exceed 10% of line 20)	76,069.00	25,000.00	21,286.02
5	1411 Audit	1,000.00	0.00	0.00
6	1415 Liquidated Damages	0.00	0.00	0.00
7	1430 Fees and Costs	0.00	0.00	0.00
8	1440 Site Acquisition	0.00	0.00	0.00
9	1450 Site Improvement	0.00	0.00	0.00
10	1460 Dwelling Structures	487,487.00	487,487.00	0.00
11	1465.1 Dwelling Equipment—Nonexpendable	0.00	0.00	0.00
12	1470 Non-dwelling Structures	0.00	0.00	0.00
13	1475 Non-dwelling Equipment	0.00	0.00	0.00
14	1485 Demolition	0.00	0.00	0.00
15	1492 Moving to Work Demonstration	0.00	0.00	0.00
16	1495.1 Relocation Costs	0.00	0.00	0.00
17	1499 Development Activities <sup>4</sup>	0.00	0.00	0.00
18a	1501 Collateralization or Debt Service paid by the PHA	0.00	0.00	0.00
18b	9000 Collateralization or Debt Service paid Via system of Direct Payment	0.00	0.00	0.00
19	1502 Contingency (may not exceed 8% of line 20)	0.00	0.00	0.00
20	<b>Amount of Annual Grant: (sum of lines 2 to 19)</b>	<b>760,695.00</b>	<b>760,695.00</b>	<b>50,382.77</b>
21	Amount of line 20 Related to LBP Activities	0.00	0.00	0.00
22	Amount of line 20 Related to Section 504 Activities	0.00	0.00	0.00
23	Amount of line 20 Related to Security – Soft Costs	0.00	0.00	0.00
24	Amount of line 20 Related to Security – Hard Costs	0.00	0.00	0.00
25	Amount of line 20 Related to Energy Conservation Measures	228,487.00	273,487.00	0.00

<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  
 OMB No. 2577-0226  
 Expires 4/30/2011

**Part I: Summary**

PHA Name: Housing Authority of the County of Riverside		Grant Type and Number Capital Fund Program Grant No: CA16 P027-50109		Replacement Housing Factor Grant No:		FFY of Grant: 2009	
		Date of CFFP: _____				FFY of Grant Approval: 2009	
Type of Grant <input type="checkbox"/> Original Annual Statement <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 12/31/2010 <input type="checkbox"/> Reserve for Disasters/ Emergencies				<input type="checkbox"/> Revised Annual Statement (revision no:1 ) <input type="checkbox"/> Final Performance and Evaluation Report			
Line	Summary by Development Account	Original	Total Estimated Cost	Revised <sup>2</sup>	Obligated	Total Actual Cost <sup>1</sup>	Expended
Signature of Executive Director		Date		Signature of Public Housing Director		Date	
<i>Steph. Sparks</i>		3/29/2011					



**Part II: Supporting Pages**

PHA Name: Housing Authority of the County of Riverside		Grant Type and Number Capital Fund Program Grant No. CA16 P027 50109		CEFP (Yes/No): No		Federal FY of Grant: 2009		Status of Work
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost	Total Actual Cost	Funds Obligated <sup>2</sup>	Funds Expended <sup>2</sup>	
	Operations	1406		Original 152,139.00	Revised <sup>1</sup> 152,139.00	152,139.00	0.00	
Management Improvement	Management Improvement Items- computers, hardware & software; upgrade video conferencing, digital camera, Preventive Maintenance Program, Energy Audit, Employee Training, Resident Services	1408(a)		44,000.00	44,000.00	38,000.00	29,096.75	
Salaries	Staff, management including benefits	1410		76,069.00	76,069.00	25,000.00	21,286.02	
Consultant Fees	Audit	1411		1,000.00	1,000.00	0.00	0.00	
	Energy Audit	1430		0.00	0.00	0.00	0.00	
AMP 210 - CA027019 Scattered Sites: Fort Dr	Carpet/vinyl floor replacement in 3 of 9 units 3974 #1-3 (3974 #4, 3990, 3992, 3986, 3996 & 3998 Fort already done)	1460	3 @ 6,000 ea	18,000.00	18,000.00	0.00	0.00	
AMP 210 - CA027019 Scattered Sites: Fort Dr	Replace swamp coolers w/ A/C dual pack For 6 of 9 units (3990, 3992, 3974 #1-4)	1460	6 @ 7,000	42,000.00	42,000.00	0.00	0.00	
AMP 220 - CA027008 Banning Apts	Replace swamp coolers w/ A/C dual pack	1460	14 units @ \$7,070 ea	98,987.00	98,987.00	0.00	0.00	
AMP 230 - CA027009, CA027017, CA027031 Church & Polk Apts	Water heater replacements to on-demand units	1460	53 @ 2500	132,500.00	132,500.00	0.00	0.00	
AMP 230 - CA027041 Aladdin Apartments	Remodel cabinets throughout units (kitchen, baths, hall, etc.)	1460	20 @ 9800	196,000.00	196,000.00	0.00	0.00	
Contingency	Contingency	1502		0.00	0.00	0.00	0.00	

**Part III: Implementation Schedule for Capital Fund Financing Program**

Development Number Name/HA-Wide Activities	All Fund Obligated (Quarter Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates
	Original	Revised	Actual	Original	Revised	Actual	
Operations	09/14/2011		01/31/2010	09/14/2013			
Management Improvements	09/14/2011			09/14/2013			
Administration	09/14/2011			09/14/2013			
Audit	09/14/2011			09/14/2013			
AMP 210 - CA027019 Scattered Sites: Fort Dr	09/14/2011			09/14/2013			
AMP 220 - CA027008 Banning Apts	09/14/2011			09/14/2013			
AMP 230 - CA027009, CA027017, CA027031 Church & Polk Apts	09/14/2011			09/14/2013			
AMP 230 - CA027041 Aladdin Apartments	09/14/2011			09/14/2013			
Contingency							

Grant Type and Number  
 Capital Fund Program No. CA16 P027 - 50109  
 Replacement Housing Factor No.

Federal FY of Grant:  
 2009

<sup>1</sup> Obligation and expenditure end dates 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 Housing and Indian Housing  
 OMB No. 2577-0226  
 Expires 4/30/2011

**Part I: Summary**

PHA Name: **Housing Authority of the County of Riverside** Grant Type and Number: **Capital Fund Recovery Grant No: CA16 S027-50109** Replacement Housing Factor Grant No: **FFY of Grant: 2009**

Date of CFFP: **2009**  Revised Annual Statement (revision no: 3)  Final Performance and Evaluation Report

Type of Grant:  Original Annual Statement  Reserve for Disasters/ Emergencies

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	0.00	0.00	0.00	0.00
2	1406 Operations (may not exceed 20% of line 20) <sup>3</sup>	0.00	0.00	0.00	0.00
3	1408 Management Improvements	0.00	0.00	0.00	0.00
4	1410 Administration (may not exceed 10% of line 20)	0.00	0.00	0.00	0.00
5	1411 Audit	0.00	0.00	0.00	0.00
6	1415 Liquidated Damages	0.00	0.00	0.00	0.00
7	1430 Fees and Costs	98,000.00	97,272.73	97,272.73	97,272.73
8	1440 Site Acquisition	0.00	0.00	0.00	0.00
9	1450 Site Improvement	863,739.96	864,467.23	864,467.23	864,467.23
10	1460 Dwelling Structures	13,748.04	13,748.04	13,748.04	13,748.04
11	1465.1 Dwelling Equipment—Nonexpendable	0.00	0.00	0.00	0.00
12	1470 Non-dwelling Structures	0.00	0.00	0.00	0.00
13	1475 Non-dwelling Equipment	0.00	0.00	0.00	0.00
14	1485 Demolition	0.00	0.00	0.00	0.00
15	1492 Moving to Work Demonstration	0.00	0.00	0.00	0.00
16	1495.1 Relocation Costs	0.00	0.00	0.00	0.00
17	1499 Development Activities <sup>4</sup>	0.00	0.00	0.00	0.00
18a	1501 Collateralization or Debt Service paid by the PHA	0.00	0.00	0.00	0.00
18b	9000 Collateralization or Debt Service paid Via system of Direct Payment	0.00	0.00	0.00	0.00
19	1502 Contingency (may not exceed 8% of line 20)	0.00	0.00	0.00	0.00
20	<b>Amount of Annual Grant: (sum of lines 2 to 19)</b>	<b>975,488.00</b>	<b>975,488.00</b>	<b>975,488.00</b>	<b>975,488.00</b>
21	Amount of line 20 Related to LBP Activities	0.00	0.00	0.00	0.00
22	Amount of line 20 Related to Section 504 Activities	0.00	0.00	0.00	0.00
23	Amount of line 20 Related to Security – Soft Costs	0.00	0.00	0.00	0.00
24	Amount of line 20 Related to Security – Hard Costs	0.00	0.00	0.00	0.00
25	Amount of line 20 Related to Energy Conservation Measures	430,000.00	430,000.00	430,000.00	430,000.00

<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  
 OMB No. 2577-0226  
 Expires 4/30/2011

**Part 1: Summary**

PHA Name:  
 Housing Authority of the County of Riverside

Grant Type and Number  
 Capital Fund Program Grant No: CA16 S027-50109  
 Date of CFFP: \_\_\_\_\_

Replacement Housing Factor Grant No:

FFY of Grant: 2009  
 FFY of Grant Approval: 2009

Type of Grant  
 Original Annual Statement  
 Performance and Evaluation Report for Period Ending:  
 Reserve for Disasters/ Emergencies

Revised Annual Statement (revision no: 3 )  
 Final Performance and Evaluation Report

Line	Summary by Development Account	Total Estimated Cost	Revised <sup>2</sup>	Obligated	Total Actual Cost <sup>1</sup>	Date	Expended
	Signature of Executive Director <i>[Signature]</i>					3/29/2011	



**Part II: Supporting Pages**

PHA Name: Housing Authority of the County of Riverside		Grant Type and Number		Capital Fund Program Grant No: CA16 S027 50109		CFPP (Yes/No): No		Federal FFY of Grant:		2009		Status of Work
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost	Original	Revised	Funds Obligated	Funds Expended				
	Operations	1406		0	0		0.00	0.00				
	Management Improvement	1408		0	0		0.00	0.00				
Salaries	Staff, management including benefits	1410		1,000.00	1,000.00	-1,000.00	0.00	0.00				
	Audit	1411		0.00	0.00	0.00		0.00				
	Architect and Engineering	1430		98,000.00	98,000.00	-727.27	97,272.73	97,272.73			Completed	
AMP 230 - CA027027 Mecca	Remove, relocation and replacement of playground; Convert old playground area to add additional handicapped parking spaces; Resurface all parking areas and re-stripe; Carports: Upgrade amenities to the community to compete with surrounding areas; Energy & Water Conversation Measures to xeriscape the landscaping areas including side walks, modifications of irrigation lines; Neighborhood block wall separating West side of property off of Seventh; Remove and Replace exterior lighting with energy efficient lighting; Texture coat	1450		755,000.00	755,000.00	+1,000.00 +91,251.96 +16,488.00 863,739.96 +727.27 864,467.23	864,467.23	864,467.23			Completed	
AMP 230 - CA027027 Mecca	Water heater replacements to on-demand units (Est. \$105,000) (\$91,251.96 of work being done in 50107)	1460	1 @ 5,000 40 @ 2,500	105,000.00	105,000.00	-91,251.96 13,748.04	13,748.04	13,748.04			Wk moved to ARRA from 50107 and part moved back to 50107	
Contingency	Contingency	1502		16,488.00	16,488.00	-16,488.00 0.00	0.00	0.00				

**Part III: Implementation Schedule for Capital Fund Financing Program**

PHA Name: Housing Authority of the County of Riverside	Grant Type and Number Capital Fund Program No: CA16 S027 – 50109 (ARRA)		Replacement Housing Factor No:		Federal FFY of Grant: 2009		Reasons for Revised Target Dates
	All Fund Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)				
Development Number Name/HA-Wide Activities	Original	Revised	Actual	Original	Revised	Actual	
Operations	n/a	n/a	n/a	n/a	n/a	n/a	
Management Improvements	n/a	n/a	n/a	n/a	n/a	n/a	
Administration	n/a	n/a	n/a	n/a	n/a	n/a	
Audit	n/a	n/a	n/a	n/a	n/a	n/a	
Fees and Costs	03/17/2010	06/30/2009	05/31/2009	03/17/2012	06/30/2010	04/30/2010	Listed revised date to show end of quarter
Site Improvement	03/17/2010	03/31/2010	01/31/2010	03/17/2012	06/30/2010	04/30/2010	Listed revised date to show end of quarter
Dwelling Structures	03/17/2010	06/30/2010	04/30/2010	03/17/2012	06/30/2010	04/30/2010	Listed revised date to show end of quarter

<sup>1</sup> Obligation and expenditure end dates 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 Housing and Indian Development  
 OMB No. 2577-0226  
 Expires 4/30/2011

**Part 1: Summary**

PHA Name: **Housing Authority of the County of Riverside**

Grant Type and Number  
 Capital Fund Program Grant No: **CA16 P027-50110**  
 Date of CFFP: \_\_\_\_\_

Replacement Housing Factor Grant No:

FFY of Grant: **2010**  
 FFY of Grant Approval: **2010**

Type of Grant  
 Original Annual Statement  
 Performance and Evaluation Report for Period Ending: **12/31/2010**

Revised Annual Statement (revision no: )  
 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	0.00			
2	1406 Operations (may not exceed 20% of line 20) <sup>3</sup>	148,193.00			
3	1408 Management Improvements	50,000.00			
4	1410 Administration (may not exceed 10% of line 20)	74,096.00			
5	1411 Audit	1,000.00			
6	1415 Liquidated Damages	0.00			
7	1430 Fees and Costs	6,000.00			
8	1440 Site Acquisition	0.00			
9	1450 Site Improvement	270,660.00			
10	1460 Dwelling Structures	191,016.00			
11	1465.1 Dwelling Equipment—Nonexpendable	0.00			
12	1470 Non-dwelling Structures	0.00			
13	1475 Non-dwelling Equipment	0.00			
14	1485 Demolition	0.00			
15	1492 Moving to Work Demonstration	0.00			
16	1495.1 Relocation Costs	0.00			
17	1499 Development Activities <sup>4</sup>	0.00			
18a	1501 Collateralization or Debt Service paid by the PHA	0.00			
18b	9000 Collateralization or Debt Service paid Via system of Direct Payment	0.00			
19	1502 Contingency (may not exceed 8% of line 20)	0.00			
20	<b>Amount of Annual Grant: (sum of lines 2 to 19)</b>	<b>740,965.00</b>			
21	Amount of line 20 Related to LBP Activities	0.00			
22	Amount of line 20 Related to Section 504 Activities	205,660.00			
23	Amount of line 20 Related to Security – Soft Costs	0.00			
24	Amount of line 20 Related to Security – Hard Costs	0.00			
25	Amount of line 20 Related to Energy Conservation Measures	11,200.00			

<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  
 OMB No. 2577-0226  
 Expires 4/30/2011

**Part 1: Summary**

PHA Name: Housing Authority of the County of Riverside		Grant Type and Number Capital Fund Program Grant No: CA16 P027-50110 Date of CFFP: _____		Replacement Housing Factor Grant No: _____		FFY of Grant: 2010	
Type of Grant <input type="checkbox"/> Original Annual Statement <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 12/31/2010		<input type="checkbox"/> Reserve for Disasters/ Emergencies		<input type="checkbox"/> Revised Annual Statement (revision no: ) <input type="checkbox"/> Final Performance and Evaluation Report		FFY of Grant Approval: 2010	
Line	Summary by Development Account	Total Estimated Cost	Revised <sup>2</sup>	Obligated	Total Actual Cost <sup>1</sup>	Expended	
	Signature of Executive Director <i>Neil Fardlo</i>	Date <i>3/29/2011</i>	Signature of Public Housing Director		Date		



**Part II: Supporting Pages**

PHA Name: Housing Authority of the County of Riverside		Grant Type and Number Capital Fund Program Grant No: CA16 P027 50110 CFFP (Yes/No): No Replacement Housing Factor Grant No:		Federal FY of Grant: 2010		Status of Work	
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost	Total Actual Cost		
				Original	Revised	Funds Obligated	Funds Expended
	Operations	1406		\$148,193.00			
	Management Improvement	1408		\$50,000.00			
	Staff, management including benefits	1410		\$74,096.00			
	Audit	1411		\$1,000.00			
	Consultant Fees and Reviews	1430		\$6,000.00			
AMP 210 - CA027007 - Jackson	Walkway ADA compliance (REAC deficiency) - Convert / Improve any needed thresholds / step-downs / walkways to handicapped accessible	1450	68 units	\$148,660.00			
AMP 220 - CA027001 - Beaumont	Remove / Replace Playground equipment and base including re-route sprinkler lines	1450		\$65,000.00			
AMP 220 - CA027008 - Banning	Walkway ADA compliance (REAC deficiency) - Convert / Improve any needed thresholds / step-downs / walkways to handicapped accessible	1450	14 units	\$57,000.00			
AMP 230 - CA027009, CA027017 - Thermal	Kitchen remodel- cabinets, counters, floors and appliances, excluding tenant provided refrigerator	1460	28 @ 6822	\$191,016.00			
Contingency	Contingency	1502		0.00			

**Part III: Implementation Schedule for Capital Fund Financing Program**

Development Number Name/HA-Wide Activities	All Fund Obligated (Quarter Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates <sup>1</sup>
	Original	Revised	Actual	Original	Revised	Actual	
Operations	07/14/2012			07/14/2014			
Management Improvements	07/14/2012			07/14/2014			
Administration	07/14/2012			07/14/2014			
Audit	07/14/2012			07/14/2014			
Fees and Costs	07/14/2012			07/14/2014			
Site Improvement	07/14/2012			07/14/2014			
Dwelling Structures	07/14/2012			07/14/2014			

Grant Type and Number  
 Capital Fund Program No: CA16 P027 - 50110  
 Replacement Housing Factor No:

Federal FY of Grant:  
 2010

<sup>1</sup> Obligation and expenditure end dates 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 Housing and Indian Housing  
 OMB No. 2577-0226  
 Expires 4/30/2011

**Part I: Summary**

PHA Name:  
 Housing Authority of the County of Riverside

Grant Type and Number  
 Capital Fund Program Grant No: CA16 P027-50111  
 Date of CFFP: \_\_\_\_\_

Replacement Housing Factor Grant No:

FFY of Grant: 2011  
 FFY of Grant Approval: 2011

Type of Grant  
 Original Annual Statement  
 Reserve for Disasters/ Emergencies  
 Performance and Evaluation Report for Period Ending:  
 Revised Annual Statement (revision no: )  
 Final Performance and Evaluation Report

Line	Summary by Development Account	Total Estimated Cost	Original	Revised <sup>2</sup>	Obligated	Total Actual Cost <sup>1</sup>	Expended
1	Total non-CFP Funds	0.00					
2	1406 Operations (may not exceed 20% of line 20) <sup>3</sup>	150,000.00					
3	1408 Management Improvements	50,000.00					
4	1410 Administration (may not exceed 10% of line 20)	75,000.00					
5	1411 Audit	1,000.00					
6	1415 Liquidated Damages	0.00					
7	1430 Fees and Costs	15,000.00					
8	1440 Site Acquisition	0.00					
9	1450 Site Improvement	49,000.00					
10	1460 Dwelling Structures	406,000.00					
11	1465.1 Dwelling Equipment—Nonexpendable	0.00					
12	1470 Non-dwelling Structures	0.00					
13	1475 Non-dwelling Equipment	0.00					
14	1485 Demolition	0.00					
15	1492 Moving to Work Demonstration	0.00					
16	1495.1 Relocation Costs	0.00					
17	1499 Development Activities <sup>4</sup>	0.00					
18a	1501 Collateralization or Debt Service paid by the PHA	0.00					
18b	9000 Collateralization or Debt Service paid Via system of Direct Payment	0.00					
19	1502 Contingency (may not exceed 8% of line 20)	4,000.00					
20	Amount of Annual Grant: (sum of lines 2 to 19)	750,000.00					
21	Amount of line 20 Related to LBP Activities	0.00					
22	Amount of line 20 Related to Section 504 Activities	49,000.00					
23	Amount of line 20 Related to Security - Soft Costs	0.00					
24	Amount of line 20 Related to Security - Hard Costs	0.00					
25	Amount of line 20 Related to Energy Conservation Measures	0.00					

<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.

**Part 1: Summary**

PHA Name:  
 Housing Authority of the County of Riverside

Grant Type and Number  
 Capital Fund Program Grant No: CA16 P027-50111  
 Date of CFFP: \_\_\_\_\_

Replacement Housing Factor Grant No:

FFY of Grant: 2011  
 FFY of Grant Approval: 2011

Type of Grant

Original Annual Statement  
 Reserve for Disasters/ Emergencies

Revised Annual Statement (revision no: )  
 Final Performance and Evaluation Report

Line	Summary by Development Account	Original Date	Total Estimated Cost	Revised <sup>2</sup>	Obligated	Total Actual Cost <sup>1</sup>	Expended
	Signature of Executive Director	<u>3/29/2011</u>					

*[Handwritten Signature]*



**Part II: Supporting Pages**

PHA Name: Housing Authority of the County of Riverside		Grant Type and Number Capital Fund Program Grant No: CA16 P027 50111 CFFP (Yes/No): No		Replacement Housing Factor Grant No:		Federal FFY of Grant: <b>2011</b>		Status of Work
Development Number/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost	Revised	Funds Obligated	Funds Expended	
	Operations	1406		150,000.00				
	Management Improvement	1408		50,000.00				
	Salaries	1410		75,000.00				
	Staff management including benefits	1411		1,000.00				
	Audit							
Consultant Fees and Costs	Architect and Engineering, Environmental Reviews	1430		15,000.00				
<b>AMP 220: CA16-P027-015</b> Site 223 Idyllwild SAN JACINTO	Kitchen remodel-cabinets, counters, floors, & appliances	1460	14 units @ 7000 ca.	98,000.00				
<b>AMP 220: CA16-P027-013</b> Site 221 Fairview LAKE ELSINORE	Air Conditioning replacement-dual-pack	1460	16 units @ 7000 ca.	112,000.00				
<b>AMP 230: CA16-P027-041</b> Site 233 Aladdin INDIO	Walkway ADA compliance (REAC deficiency) - Convert / Improve any needed thresholds / step-downs / walkways to handicapped accessible	1450		49,000.00				
<b>AMP 210: CA16-P027-018-1</b> Site 213 Dracaca MORENO VALLEY	Air conditioning replacement-dual-pack	1460	28 units on roof @ 7000 ca.	196,000.00				
Contingency	Contingency	1502		4,000.00				

**Part III: Implementation Schedule for Capital Fund Financing Program**

PHA Name: Housing Authority of the County of Riverside	Grant Type and Number Capital Fund Program No: CA16 P027 - 50111 Replacement Housing Factor No:		Federal FFY of Grant: 2011			
	All Fund Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Reasons for Revised Target Dates <sup>1</sup>	
Development Number Name/HA-Wide Activities	Original	Revised	Actual	Original	Revised	Actual
Operations						
Management Improvements						
Administration						
Audit						
Fees and Costs						
Site Improvement						
Dwelling Structures						

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

# Certification for a Drug-Free Workplace

U.S. Department of Housing and Urban Development

Applicant Name

Housing Authority County of Riverside

Program/Activity Receiving Federal Grant Funding

Capital Fund Program

Acting on behalf of the above named Applicant as its Authorized Official, I make the following certifications and agreements to the Department of Housing and Urban Development (HUD) regarding the sites listed below:

I certify that the above named Applicant will or will continue to provide a drug-free workplace by:

a. Publishing a statement notifying employees that the unlawful manufacture, distribution, dispensing, possession, or use of a controlled substance is prohibited in the Applicant's workplace and specifying the actions that will be taken against employees for violation of such prohibition.

b. Establishing an on-going drug-free awareness program to inform employees ---

(1) The dangers of drug abuse in the workplace;

(2) The Applicant's policy of maintaining a drug-free workplace;

(3) Any available drug counseling, rehabilitation, and employee assistance programs; and

(4) The penalties that may be imposed upon employees for drug abuse violations occurring in the workplace.

c. Making it a requirement that each employee to be engaged in the performance of the grant be given a copy of the statement required by paragraph a.;

d. Notifying the employee in the statement required by paragraph a. that, as a condition of employment under the grant, the employee will ---

(1) Abide by the terms of the statement; and

(2) Notify the employer in writing of his or her conviction for a violation of a criminal drug statute occurring in the workplace no later than five calendar days after such conviction;

e. Notifying the agency in writing, within ten calendar days after receiving notice under subparagraph d.(2) from an employee or otherwise receiving actual notice of such conviction. Employers of convicted employees must provide notice, including position title, to every grant officer or other designee on whose grant activity the convicted employee was working, unless the Federal agency has designated a central point for the receipt of such notices. Notice shall include the identification number(s) of each affected grant;

f. Taking one of the following actions, within 30 calendar days of receiving notice under subparagraph d.(2), with respect to any employee who is so convicted ---

(1) Taking appropriate personnel action against such an employee, up to and including termination, consistent with the requirements of the Rehabilitation Act of 1973, as amended; or

(2) Requiring such employee to participate satisfactorily in a drug abuse assistance or rehabilitation program approved for such purposes by a Federal, State, or local health, law enforcement, or other appropriate agency;

g. Making a good faith effort to continue to maintain a drug-free workplace through implementation of paragraphs a. thru f.

**2. Sites for Work Performance.** The Applicant shall list (on separate pages) the site(s) for the performance of work done in connection with the HUD funding of the program/activity shown above: Place of Performance shall include the street address, city, county, State, and zip code. Identify each sheet with the Applicant name and address and the program/activity receiving grant funding.)

Check here  if there are workplaces on file that are not identified on the attached sheets.

I hereby certify that all the information stated herein, as well as any information provided in the accompaniment herewith, is true and accurate.

**Warning:** HUD will prosecute false claims and statements. Conviction may result in criminal and/or civil penalties.

(18 U.S.C. 1001, 1010, 1012; 31 U.S.C. 3729, 3802)

Name of Authorized Official

Heidi Marshall

Title

Assistant Director

Signature

X 

Date

3/16/2011



**Housing Authority of the County of Riverside  
5555 Arlington Avenue, Riverside, CA 92504**

**Affordable Public Housing Units**

**A. Street addresses of HA units by area:**

	Location (All are within Riverside County, California)	Bedroom size
Area #1	4675 Jackson St.; Riverside, CA 92503	1, 2
	5571, 5577, 5581, 5587, 5591, 5597 34th Street; Riverside, CA 92509	2
	372 Highland; Riverside, CA 92507	2
	3974, 3986, 3990, 3992, 3996, 3998 Fort Dr.; Riverside, CA 92509	1, 2, 3
	Gloria, Perris Bl.; Moreno Valley, CA 92553 13816, 13836 Perris Bl; 25011, 25025, 25033, 25035, 25037, 25039, 25045, 25051, 25078, 25080, 25103, 25104, 25105, 25106, 25115, 25116, 25117, 25118, 25125, 25126, 25127, 25128 Gloria St	1, 2, 3, 4
	24340, 24346, 24356, 24360, 24366 Dracaca; Moreno Valley, CA 92553	2
	22211, 22215, 22239, 22245 Sherman St.; Moreno Valley, CA 92553	3, 4
	102, 104, 108, 112, 116, 120, 124, 130, 136, 142 Midway; Perris, CA 92570	1, 2, 3
	33051, 33091 Fairview; Lake Elsinore, CA 92530	2
	16366, 16376, 16388, 16400, 16412, 16422, 16436, 16448 Broadway; Lake Elsinore, CA 92530	2
	475, 479 Idyllwild Dr.; San Jacinto, CA 92583	2
Area #2	5 <sup>th</sup> St. / Maple; Beaumont, CA 92223 (478 & 486 Maple; 717, 733, 749, 765, 769, 777, 781, 789, 815 and 837 E. 5 <sup>th</sup> )	3, 4
	975 E. Williams; Banning, CA 92220	2
	13580, 13582, 13584, 13586, 13588, 13590, 13600, 13602, 13604 Don English; Desert Hot Springs, CA 92240	2, 3
	34355 Corregidor Dr.; Cathedral City, CA 92234	2
	45-909 Aladdin, Indio, CA 92201	2, 3, 4
	56-640, 56-660, 56-680 Polk St; Thermal, CA 92274 87-015 and 87-045 Church; Thermal, CA 92274	2
	56-690, 56-700, 56-710, 56-720 Polk; Thermal, CA 92274	3, 4, 5
	91-400 Seventh Street; Mecca, CA 92254	3, 4, 5



# Certification of Payments to Influence Federal Transactions

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

Applicant Name

Housing Authority of the County of Riverside

Program/Activity Receiving Federal Grant Funding

Capital Fund Program

The undersigned certifies, to the best of his or her knowledge and belief, that:

(1) No Federal appropriated funds have been paid or will be paid, by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of an agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the awarding of any Federal contract, the making of any Federal grant, the making of any Federal loan, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any Federal contract, grant, loan, or cooperative agreement.

(2) If any funds other than Federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of an agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this Federal contract, grant, loan, or cooperative agreement, the undersigned shall complete and submit Standard Form-LLL, Disclosure Form to Report Lobbying, in accordance with its instructions.

(3) The undersigned shall require that the language of this certification be included in the award documents for all subawards at all tiers (including subcontracts, subgrants, and contracts under grants, loans, and cooperative agreements) and that all subrecipients shall certify and disclose accordingly.

This certification is a material representation of fact upon which reliance was placed when this transaction was made or entered into. Submission of this certification is a prerequisite for making or entering into this transaction imposed by Section 1352, Title 31, U.S. Code. Any person who fails to file the required certification shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

I hereby certify that all the information stated herein, as well as any information provided in the accompaniment herewith, is true and accurate.

**Warning:** HUD will prosecute false claims and statements. Conviction may result in criminal and/or civil penalties.  
(18 U.S.C. 1001, 1010, 1012; 31 U.S.C. 3729, 3802)

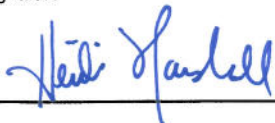
Name of Authorized Official

Heidi Marshall

Title

Assistant Director

Signature



Date (mm/dd/yyyy)

03/16/2011

# DISCLOSURE OF LOBBYING ACTIVITIES

Complete this form to disclose lobbying activities pursuant to 31 U.S.C. 1352

Approved by OMB

0348-0046

(See reverse for public burden disclosure.)

<b>1. Type of Federal Action:</b> <input type="checkbox"/> a. contract <input type="checkbox"/> b. grant <input type="checkbox"/> c. cooperative agreement <input type="checkbox"/> d. loan <input type="checkbox"/> e. loan guarantee <input type="checkbox"/> f. loan insurance	<b>2. Status of Federal Action:</b> <input type="checkbox"/> a. bid/offer/application <input type="checkbox"/> b. initial award <input type="checkbox"/> c. post-award	<b>3. Report Type:</b> <input type="checkbox"/> a. initial filing <input type="checkbox"/> b. material change <b>For Material Change Only:</b> year _____ quarter _____ date of last report _____
<b>4. Name and Address of Reporting Entity:</b> <input type="checkbox"/> Prime <input type="checkbox"/> Subawardee Tier _____, if known:  <b>Congressional District, if known:</b> 4c	<b>5. If Reporting Entity in No. 4 is a Subawardee, Enter Name and Address of Prime:</b>   <b>Congressional District, if known:</b>	
<b>6. Federal Department/Agency:</b>	<b>7. Federal Program Name/Description:</b>  CFDA Number, if applicable: _____	
<b>8. Federal Action Number, if known:</b>	<b>9. Award Amount, if known:</b> \$ _____	
<b>10. a. Name and Address of Lobbying Registrant</b> <i>(if individual, last name, first name, MI):</i>	<b>b. Individuals Performing Services</b> <i>(including address if different from No. 10a)</i> <i>(last name, first name, MI):</i>	
<b>11.</b> Information requested through this form is authorized by title 31 U.S.C. section 1352. This disclosure of lobbying activities is a material representation of fact upon which reliance was placed by the tier above when this transaction was made or entered into. This disclosure is required pursuant to 31 U.S.C. 1352. This information will be available for public inspection. Any person who fails to file the required disclosure shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.	Signature: <u>Heidi Marshall</u> Print Name: <u>Heidi Marshall</u> Title: <u>Assistant Director</u> Telephone No.: <u>951-343-5409</u> Date: <u>03/16/2011</u>	
<b>Federal Use Only:</b>		Authorized for Local Reproduction Standard Form LLL (Rev. 7-97)

**DISCLOSURE OF LOBBYING ACTIVITIES  
CONTINUATION SHEET**

Approved by OMB  
0348-0046

Reporting Entity: Housing Authority of the County of Riverside Page 2 of 2

Standard Forms LLL and LLL-A are not applicable



**Capital Fund Program – Five Year Action Plan**

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**

PHA Name/Number Housing Authority of the County of Riverside/C027		Locality (City/County and State) <b>Riverside/Riverside County, California</b>			<input type="checkbox"/> Original 5-Year Plan <input checked="" type="checkbox"/> Revision No: 7	
A.	Development Number and Name	Work Statement for Year 1 FFY Grant 2011	Work Statement for Year 2 FFY Grant: 2012	Work Statement for Year 3 FFY Grant: 2013	Work Statement for Year 4 FFY Grant: 2014	Work Statement for Year 5 FFY Grant: 2015
210	Site 211 34 <sup>th</sup> Street CA16-P027-006/012 Riverside	<b>Annual Statement</b>	\$203,000	\$107,300	\$70,000	\$120,000
	Site 212 Jackson CA16-P027-007 Riverside		\$557,600	NO WORK	NO WORK	\$476,000
	Site 213 Gloria CA16-P027-016 CA16- P027-020 Moreno Valley		NO WORK	\$228,000	\$327,000	\$70,000
	Site 213 Dracaca CA16-P027-018-1 Moreno Valley		NO WORK	\$60,000	\$292,000	\$85,000
	Site 214 Fort Drive CA16-P027-019-1 Riverside		\$63,000	NO WORK	\$52,000	\$49,000
	Site 214 - Sherman CA16-P027-019-2 Moreno Valley		NO WORK	\$4,800	\$16,000	NO WORK
	Site 214 Highland CA16-P027-022 Riverside		NO WORK	\$28,000	\$10,000	NO WORK
	<b>AMP 210 SUBTOTAL</b>		<b>\$823,600</b>	<b>\$428,100</b>	<b>\$767,000</b>	<b>\$800,000</b>



**Capital Fund Program – Five Year Action Plan**

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**

PHA Name/Number Housing Authority of the County of Riverside/C027		Locality (City/County and State) Riverside/Riverside County, California			<input type="checkbox"/> Original 5-Year Plan <input checked="" type="checkbox"/> Revision No: 7	
A.	Development Number and Name	Work Statement for Year 1 FFY Grant 2011	Work Statement for Year 2 FFY Grant: 2012	Work Statement for Year 3 FFY Grant: 2013	Work Statement for Year 4 FFY Grant: 2014	Work Statement for Year 5 FFY Grant: 2015
AMP 220	Site 221 Broadway CA16-P027-011/014 Lake Elsinore		\$82,000	\$196,000	\$196,000	\$0
	Site 221 Fairview CA16-P027-013 Lake Elsinore		\$39,000	NO WORK	NO WORK	NO WORK
	Site 222 Midway CA16-P027-021 Perris		\$280,000	\$97,000	\$35,000	\$48,000
	Site 223 Idyllwild CA16-P027-015 San Jacinto		NO WORK	\$162,800	NO WORK	\$98,000
	Site 224 5 <sup>th</sup> & Maple CA16-P027-001 Beaumont		NO WORK	NO WORK	NO WORK	\$154,000
	Site 225 – Williams CA16-P027-008 Banning		\$126,000	\$49,000	\$16,800	\$75,000
	<b>AMP 220 SUBTOTAL</b>		<b>\$527,000</b>	<b>\$504,800</b>	<b>\$247,800</b>	<b>\$375,000</b>

**Capital Fund Program – Five Year Action Plan**

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**

PHA Name/Number Housing Authority of the County of Riverside/C027		Locality (City/County and State) <b>Riverside/Riverside County, California</b>			<input type="checkbox"/> Original 5-Year Plan <input checked="" type="checkbox"/> Revision No: 7		
A.	Development Number and Name	Work Statement for Year 1 FFY Grant 2011	Work Statement for Year 2 FFY Grant: 2012	Work Statement for Year 3 FFY Grant: 2013	Work Statement for Year 4 FFY Grant: 2014	Work Statement for Year 5 FFY Grant: 2015	
AMP 230	Site 231 Don English CA16-P027-018-2 Desert Hot Springs Site 232 - Corriganor CA16-P027-010 Cathedral City Site 233 Aladdin CA16-P027-041 Indio Site 234 Polk & Church CA16-P027-009/017/031 Thermal Site 235 Seventh St CA16-P027-027 Mecca		\$102,000	NO WORK	NO WORK	\$342,000	NO WORK
			\$34,000	\$60,000	\$57,000	\$16,800	
			NO WORK	NO WORK	NO WORK	\$74,000	
			NO WORK	\$364,000	\$120,000	\$68,000	
			NO WORK	NO WORK	NO WORK	\$97,000	
	<b>AMP 230 SUBTOTAL</b>		<b>\$136,000</b>	<b>\$424,000</b>	<b>\$519,000</b>	<b>\$255,800</b>	
	<b>TOTAL WORK FOR AMPs</b>		<b>\$1,486,600</b>	<b>\$1,356,900</b>	<b>\$1,533,800</b>	<b>\$1,430,800</b>	
G	Operations		\$155,000	\$155,000	\$155,000	\$155,000	
	Management Improvements		\$50,000	\$50,000	\$50,000	\$50,000	
	Administration		\$75,000	\$75,000	\$75,000	\$75,000	
	Consultant Fees		\$0	\$25,000	\$0	\$0	
	Total CFP Funds (Est.)	\$750,000.00	\$1,766,600	\$1,661,900	\$1,813,800	\$1,710,800	
	Total Replacement Housing Factor Funds	0	0	0	0	0	

**Capital Fund Program – Five Year Action Plan**

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

OMB No. 2577-0226  
Expires 4/30/2011

**Part II: Supporting Pages—Work Activities**

Activities for Year 1	Activities for Year 2 FFY Grant: 2012 PHA FY:	Quantity	Estimated Cost	Activities for Year: 3 FFY Grant: 2013 PHA FY:	Quantity	Estimated Cost
<b>See Annual Statement</b>	<b>AMP 210: CA16-P027-006/012</b> Site 211, 34 <sup>th</sup> Street RIVERSIDE			<b>AMP 210: CA16-P027-006/012</b> Site 211, 34 <sup>th</sup> Street RIVERSIDE		
	Kitchen remodel-cabinets, counters, floors, & appliances	29 units @ \$7000 ea.	\$203,000	Water heater replacement	29 units @ \$2,500 ea.	\$72,500
				Carpet	29 units @ \$1,200 ea	\$34,800
	<b>AMP 210: CA16-P027-007</b> Site 212 Jackson RIVERSIDE			<b>AMP 210: CA16-P027-007</b> Site 212 Jackson RIVERSIDE		
	Carpet	68 units @ \$1,200 ea	\$81,600	NO WORK		\$0
	A/C replacement	68 units x \$7,000 ea	\$476,000			
	<b>AMP 210: CA16-P027-016/020</b> Site 213 Gloria St. MORENO VALLEY			<b>AMP 210: CA16-P027-016/020</b> Site 213 Gloria St. MORENO VALLEY		
	NO WORK		\$0	Kitchen remodel-cabinet, counters, floors & appliances	34 units @ \$7,000 ea.	\$228,000
	<b>AMP 210: CA16-P027-018-1</b> Site 213 Dracaea MORENO VALLEY			<b>AMP 210: CA16-P027-018-1</b> Site 213 Dracaea MORENO VALLEY		
	NO WORK		\$0	Stucco, color-coat and paint trim	5 bldgs, 28 units	\$60,000
	<b>AMP 210: CA16-P027-019-1</b> Site 214 Fort Drive RIVERSIDE			<b>AMP 210: CA16-P027-019-1</b> Site 214 Fort Drive RIVERSIDE		
	Kitchen remodel-cabinets, counters, floors and appliances	9 @ \$7,000 ea.	\$63,000	NO WORK		\$0

**Capital Fund Program – Five Year Action Plan**

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

	AMP 210: CA16-P027-019-2 Site 214 - Sherman MORENO VALLEY			AMP 210: CA16-P027-019-2 Site 214 - Sherman MORENO VALLEY		
	NO WORK		\$0	CARPET	4 units @ \$1200 ea	\$4,800
	AMP 210: CA16-P027-022 Site 214 Highland RIVERSIDE			AMP 210: CA16-P027-022 Site 214 Highland RIVERSIDE		
	NO WORK		\$0	Kitchen replacement-cabinets, counters, floors, & appliances	4 units @ \$ 7000 ea.	\$28,000
	AMP 220: CA16-P027-011/014 Site 221 Broadway LAKE ELSINORE			AMP 220: CA16-P027-011/014 Site 221 Broadway LAKE ELSINORE		
	Water main valve and pressure regulator replacement	28 units	\$14,000	Air Conditioning replacement- dual-pack	28 units @ \$7000 ea.	\$196,000
	Walkway ADA compliance (REAC deficiency) - Convert / Improve any needed thresholds / step-downs / walkways to handicapped accessible		\$68,000			
	AMP 220: CA16-P027-013 Site 221 Fairview LAKE ELSINORE			AMP 220: CA16-P027-013 Site 221 Fairview LAKE ELSINORE		
	Walkway ADA compliance (REAC deficiency) - Convert / Improve any needed thresholds / step-downs / walkways to handicapped accessible		\$39,000	NO WORK		\$0
	AMP 220: CA16-P027-021 Site 222 Midway PERRIS			AMP 220: CA16-P027-021 Site 222 Midway PERRIS		
	Kitchen remove and replace	40 units @ \$7K ea.	280,000	Walkway ADA compliance (REAC deficiency) - Convert / Improve any needed thresholds / step-downs / walkways to handicapped accessible		\$97,000



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	AMP 220: CA16-P027-015 Site 223 Idylwild SAN JACINTO			AMP 220: CA16-P027-015 Site 223 Idylwild SAN JACINTO			
	NO WORK		\$0	Carpet	14 units @ 1200	\$16,800	
				Kitchen Remodel – cabinets, counters, floors and appliances	14 units @ \$8000 ea.	\$112,000	
				Walkway ADA compliance (REAC deficiency) - Convert / Improve any needed thresholds / step-downs / walkways to handicapped accessible		\$34,000	
	AMP 220: CA16-P027-001 Site 224, 5 <sup>th</sup> & Maple BEAUMONT			AMP 220: CA16-P027-001 Site 224, 5 <sup>th</sup> & Maple BEAUMONT			
	NO WORK		\$0	NO WORK		\$0	
	AMP 220: CA16-P027-008 Site 225 – Williams BANNING			AMP 220: CA16-P027-008 Site 225 – Williams BANNING			
	Kitchen remodel-cabinets, counters, floors, and appliances	14 units @ \$9000 ea.	\$126,000	Water heater replacement	14 units @ \$2500 ea.	\$49,000	
	AMP 230: CA16-P027-018-2 Site 231 Don English DESERT HOT SPRINGS			AMP 230: CA16-P027-018-2 Site 231 Don English DESERT HOT SPRINGS			
	Walkway ADA compliance (REAC deficiency) - Convert / Improve any needed thresholds / step-downs / walkways to handicapped accessible		\$102,000.00	NO WORK		\$0	
	AMP 230: CA16-P027-010 Site 232 - Corrigedor CATHEDRAL CITY			AMP 230: CA16-P027-010 Site 232 - Corrigedor CATHEDRAL CITY			
				Roof replacement	5 bldgs	\$60,000	
	Walkway ADA compliance (REAC deficiency) - Convert / Improve any needed thresholds / step-downs / walkways to handicapped accessible		\$34,000.00				

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	AMP 230: CA16-P027-041 Site 233 Aladdin INDIO						
	NO WORK		\$0	NO WORK			\$0
	AMP 230: CA16-P027-009/017/031 Site 234 Polk & Church THERMAL		\$0	AMP 230: CA16-P027-009/017/031 Site 234 Polk & Church THERMAL		4 For T1 x 12=48 8 for T2 x 12=96 Total: 144@ \$1000	\$144,000
	NO WORK			Carports			
				Sewer Pump Improvements		T2	\$50,000
				Color Coat & Paint		T2	\$170,000
	AMP 230: CA16-P027-027 Site 235 Seventh St. MECCA			AMP 230: CA16-P027-027 Site 235 Seventh St. MECCA			
	NO WORK		\$0	NO WORK			\$0

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**Part II: Supporting Pages—Work Activities**

Activities for Year 1	Activities for Year 4 FFY Grant: 2014 PHA FY:	Activities for Year 5 FFY Grant: 2015 PHA FY:					
See	Quantity	Estimated Cost	Quantity	Estimated Cost			
Annual Statement	AMP 210: CA16-P027-006/012 Site 211, 34 <sup>th</sup> Street RIVERSIDE	Walkway ADA compliance (REAC deficiency) - Convert / Improve any needed thresholds / step-downs / walkways to handicapped accessible	\$70,000	AMP 210: CA16-P027-006/012 Site 211, 34 <sup>th</sup> Street RIVERSIDE	Ornamental Fencing	1 unit	\$75,000
					Remove and replace irrigation		\$45,000
	AMP 210: CA16-P027-007 Site 212 Jackson RIVERSIDE			AMP 210: CA16-P027-007 Site 212 Jackson RIVERSIDE			
	NO WORK		\$0	Kitchen and Bath remodel	68 units x \$7000		\$476,000
	AMP 210: CA16-P027-016/020 Site 213 Gloria St. MORENO VALLEY			AMP 210: CA16-P027-016/020 Site 213 Gloria St. MORENO VALLEY			
	alc remove and replace	34 units & 1 Mgr Office/ML Shop @ \$7000 ea.	\$245,000	*Hot water heater & closet enclosures, older section	11 buildings -20 units		\$70,000
	Walkway ADA compliance (REAC deficiency) - Convert / Improve any needed thresholds / step-downs / walkways to handicapped accessible		\$82,000				
	AMP 210: CA16-P027-018-1 Site 213 Dracaca MORENO VALLEY			AMP 210: CA16-P027-018-1 Site 213 Dracaca MORENO VALLEY			
	Carpet	28 units @ \$1000 ea	\$28,000	Ornamental fencing/metal dumpster doors			\$85,000
	Kitchen remodel- cabinets, counters, floors, & appliances	28 units @ \$7000 ea.	\$196,000				
	Walkway ADA compliance (REAC deficiency) - Convert / Improve any needed thresholds / step-downs / walkways to handicapped accessible		\$68,000				

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	<b>AMP 210: CA16-P027-019-1</b> Site 214 Fort Drive RIVERSIDE				<b>AMP 210: CA16-P027-019-1</b> Site 214 Fort Drive RIVERSIDE			
	Remove front wood siding and stucco and remove and replace windows	9 units, 4 bldgs.	\$30,000		Cooler remove and replace to a/c	7 units @ \$7000 ea (2 units excl)	\$49,000	
	Walkway ADA compliance (REAC deficiency) - Convert / Improve any needed thresholds / step-downs / walkways to handicapped accessible		\$22,000					
	<b>AMP 210: CA16-P027-019-2</b> Site 214 - Sherman MORENO VALLEY				<b>AMP 210: CA16-P027-019-2</b> Site 214 - Sherman MORENO VALLEY			
	Remove and replace garage doors	4 units x \$1,500	\$6,000		NO WORK		\$0	
	Walkway ADA compliance (REAC deficiency) - Convert / Improve any needed thresholds / step-downs / walkways to handicapped accessible		\$10,000					
	<b>AMP 210: CA16-P027-022</b> Site 214 Highland RIVERSIDE				<b>AMP 210: CA16-P027-022</b> Site 214 Highland RIVERSIDE			
	Walkway ADA compliance (REAC deficiency) - Convert / Improve any needed thresholds / step-downs / walkways to handicapped accessible		\$10,000		NO WORK		\$0	
	<b>AMP 220: CA16-P027-011/014</b> Site 221 Broadway LAKE ELSINORE				<b>AMP 220: CA16-P027-011/014</b> Site 221 Broadway LAKE ELSINORE			
	Kitchen remodel	28 @ \$7000	\$196,000		NO WORK		\$0	
	<b>AMP 220: CA16-P027-013</b> Site 221 Fairview LAKE ELSINORE				<b>AMP 220: CA16-P027-013</b> Site 221 Fairview LAKE ELSINORE			
	NO WORK		\$0		NO WORK		\$0	
	<b>AMP 220: CA16-P027-021</b> Site 222 Midway PERRIS				<b>AMP 220: CA16-P027-021</b> Site 222 Midway PERRIS			
	Color coat stucco damaged areas	10 bldgs	\$35,000		CARPET	40 units @ \$1200 ea	\$48,000	



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	<b>AMP 220: CA16-P027-015</b> Site 223 Idyllwild SAN JACINTO				<b>AMP 220: CA16-P027-015</b> Site 223 Idyllwild SAN JACINTO			
	NO WORK			\$0	Cooler remove and replace with a/c	14 units @ \$7000 ea		\$98,000
	<b>AMP 220: CA16-P027-001</b> Site 224, 5 <sup>th</sup> & Maple BEAUMONT				<b>AMP 220: CA16-P027-001</b> Site 224, 5 <sup>th</sup> & Maple BEAUMONT			
	NO WORK			\$0	Structural Enhancements: Roof redesign, front porch additions/ remove and replace doors/windows	7 bldgs./ 14 units		\$154,000
	<b>AMP 220: CA16-P027-008</b> Site 225 – Williams BANNING				<b>AMP 220: CA16-P027-008</b> Site 225 – Williams BANNING			
	Carpet	14 units @1200		\$16,800	Playground Front approach at gate replacement	1 unit 1 unit		\$45,000 \$30,000
	<b>AMP 230: CA16-P027-018-2</b> Site 231 Don English DESERT HOT SPRINGS				<b>AMP 230: CA16-P027-018-2</b> Site 231 Don English DESERT HOT SPRINGS			
	Carpet	42 units @ 1200		\$48,000	NO WORK			\$0
	Kitchen remodel	42 units @ \$7000		\$294,000				
	<b>AMP 230: CA16-P027-010</b> Site 232 - Corrigedor CATHEDRAL CITY				<b>AMP 230: CA16-P027-010</b> Site 232 - Corrigedor CATHEDRAL CITY			
	Playground w/cover	1 unit		\$57,000	Carpet	14 units @ \$1200		\$16,800.00
	<b>AMP 230: CA16-P027-041</b> Site 233 Aladdin INDIO				<b>AMP 230: CA16-P027-041</b> Site 233 Aladdin INDIO			
	NO WORK			\$0	Hot water heaters replacement to on-demand	20 @ \$2500		\$50,000
					Carpet	20 units @ \$1200 ea		\$24,000

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<p><b>AMP 230: CA16-P027-009/017/031</b> Site 234 Polk &amp; Church THERMAL</p>	<p>Front porch enhancements on Thermal 1</p>	<p>28 units, 20k x 6 bldgs</p>	<p>\$120,000</p>	<p><b>AMP 230: CA16-P027-009/017/031</b> Site 234 Polk &amp; Church THERMAL</p>	<p>Walkway ADA compliance (REAC deficiency) - Convert / Improve any needed thresholds / step-downs / walkways to handicapped accessible</p>	<p>\$68,000.00</p>
<p><b>AMP 230: CA16-P027-027</b> Site 235 Seventh St. MECCA</p>	<p>NO WORK</p>	<p></p>	<p>\$0</p>	<p><b>AMP 230: CA16-P027-027</b> Site 235 Seventh St. MECCA</p>	<p>Walkway ADA compliance (REAC deficiency) - Convert / Improve any needed thresholds / step-downs / walkways to handicapped accessible</p>	<p>\$97,000.00</p>



**ADMINISTRATIVE PLAN  
FOR THE HOMEOWNERSHIP PROGRAM**

**Housing Authority of the  
County of Riverside**

**2011-FINAL**

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## **GENERAL PROVISIONS**

The Public Housing Reform Act of 1998 includes language that allows the United States Department of Housing and Urban Development (HUD) to assist Section 8 Housing Choice Voucher Program (HCVP) recipients to purchase a home. HUD published the Section 8 Homeownership Program Final Rule that implemented this option under Section 8(y) of the U.S. Housing Act of 1937 that authorized a public housing agency (PHA) to provide tenant-based assistance for an eligible family that purchases a home. The rule became effective on October 12, 2000. CFR 982.625(c)(1)(i) enables the Housing Authority to provide monthly homeownership assistance payments to eligible families.

The Housing Choice Voucher (HCV) Homeownership Program (HP) allows qualified participants the option to purchase a home and use the HCV Housing Assistance Payment (HAP) towards mortgage payments and other allowable housing costs.

The purpose of the Homeownership Program Administrative Plan is to establish policies for carrying out the program in a manner consistent with HUD requirements and local objectives. The Plan covers both admission and participation in the program. The HACR is responsible for complying with all changes in HUD regulations pertaining to these programs. If such changes conflict with this Plan, HUD regulations will have precedence.

The HACR's policies and practices are designed to provide assurances that all persons with disabilities will be provided reasonable accommodations so that they may fully access the housing program. Persons requiring special accommodations due to a disability must notify the HACR, in writing, of their needs. The reasonable accommodation request will be verified via a Licensed Professional and then reviewed by the HACR. The HACR will provide written notification of either the approval or denial of the reasonable accommodation request. In matters where the HACR has discretion, waivers to existing policy shall be determined by the Executive Director or designee.

## **A. FAMILY ELIGIBILITY REQUIREMENTS**

The HCV Homeownership Program (HP) of the Housing Authority of the County of Riverside (HACR) is available to qualified Housing Choice Voucher participants. Participation in the Homeownership Program is voluntary. Applicants must meet the following criteria to be considered for the HACR HP.

### **1. First-Time Homeowner**

An eligible Section 8 HCVP family must be considered a first-time home buyer. A first-time home buyer means that no member of the household has had any interest or ownership in any residence during the three years before applying for homeownership assistance or at the commencement of participation in the homeownership program. The purchaser must sign a sworn application attesting that they have not owned a home or have been included on a home loan. In addition, the last three years tax returns will be reviewed to ascertain that no mortgage interest or real estate tax deductions have been claimed.

Single parents or displaced homemakers who owned a home while married or resided in a home owned by a spouse also qualify as first time homebuyers provided that three years have passed since homeownership ended.

### **2. Minimum Income Requirements**

Calculation of income-eligibility for the purpose of admission to the HCV Homeownership Program will be conducted under the guidelines for HCV rental assistance as noted in this Administrative Plan.

The head of household, spouse and/or other adult member(s) of the household that will hold title to the home must have a combined annual gross income of not less than 50% of the Area Median Income (AMI) adjusted for the family size.

A family whose income does not meet the 50% AMI requirement, but does meet all other HP requirements, may request admission provided the family can demonstrate that the annual income is not less than the HUD minimum requirement established below:

- a. In the case of a disabled family, the monthly Federal Supplemental Security Income (SSI) benefit for an individual living alone (or paying his or her share of food and housing costs) multiplied by twelve; or
- b. In the case of other families, the Federal minimum wage multiplied by 2,000.

In addition, a family that meets the applicable HUD minimum income requirement described above, but not the HACR minimum income limit of 50% AMI, shall be considered to satisfy the minimum income requirement only if:

- a. The family demonstrates that it has been pre-qualified or pre-approved for

- financing;
- b. The pre-qualified or pre-approved financing meets any HACR established requirements under 982.632 for financing the purchase of the home (including qualifications of lenders and terms of financing); and
  - c. The pre-qualified or pre-approved financing amount is sufficient to purchase housing that meets HQS in the HACR's jurisdiction.

Welfare assistance may not be included in the minimum gross annual income above, except for elderly or disabled families. Welfare assistance includes payments from Cal Works/TANF (Cash Aid for needy families), Supplementary Security Income (SSI) that is subject to an income eligibility test, food stamps, general assistance (GA); or other welfare assistance as specified by HUD.

### **3. Minimum Employment Requirements**

One or more adult members of the household that will hold title to the home must be currently employed and working not less than an average of 30 hours per week and has been so continuously employed for one year prior to execution of the sales agreement.

Once escrow has closed, employment by the adult member of the household that holds title to the home must continue at least 30 hours per week. Should an event arise that the homeowner loses employment a 90 day grace period will be granted for them to regain fulltime employment.

Employment requirements do not apply to elderly or disabled families that otherwise qualify for HP. A family with a member with disabilities may request an exemption from the work requirements if needed as a reasonable accommodation for the disabled family member. HACR and HUD minimum income requirements still apply.

The HACR's Executive Director and/or designee may also consider whether and to what extent an employment interruption is considered permissible in satisfying the employment requirement. The Executive Director and/or designee may also consider successive employment during the one-year period and self-employment in a business.

The family must still meet the overall minimum income requirements outlined in Section 2.

### **4. Minimum Down Payment Requirements**

- a. The family must demonstrate the ability to provide a minimum of three percent **(3%)** down payment on the home.
- b. At least one percent **(1%)** of the **down payment** must come from the family's personal resources. CFR 982.625(g)(1)
- c. FSS participants may use FSS escrows towards this requirement. Families with an Individual Development Account (IDA) may also count these funds towards the minimum down payment.

## **5. Other Program Requirements**

- a. The family must be under HCV rental assistance in Riverside County for the most recent 12 consecutive months prior to application for HCV Homeownership.
- b. The family must have completed an initial HCV lease term and completed the family's first annual recertification in the HCV Program. The family must terminate a current lease agreement in compliance with the lease when transitioning into homeownership.
- c. The family must verify that no family member has previously defaulted on a mortgage loan assisted under the HCV HP.
- d. All families will be required to complete a series of 15 workshops through Community Action IDA Program and provide verification of workshop completion. Working families will be required to complete the application process to gain entry into the IDA Program so they may earn a 2:1 match of savings. Workshops may include the following:
  - First Time Home Buyers Information
  - Lenders Language and Procedures
  - Home Safety: Fire and Earthquake
  - Selecting a Realtor and the Right Home
  - Basic Repair & Maintenance
  - Budgeting
  - Balancing Your Checkbook
  - Understanding Credit & Credit Cards
  - Credit Repair
  - Debt Management
  - Financial Planning
  - Borrowing Basics (basic concepts of loans)
- d. The head of household and any adult member that will hold title to the home must successfully complete a HUD approved 8 hour homeownership and housing counseling program. At a minimum, the counseling will cover the following:
  - Home Maintenance
  - Budgeting and money management
  - Credit Counseling
  - Financing
  - Locating a home
  - Fair housing, predatory lending
  - Truth in lending, RESPA
- e. Family members may not owe any debt to the HACR or other Housing Authority. EIV will be run to determine if the family has/had owed any debts to any Housing Authority. If it is found that the family owes money to any Housing Authority, they will be disqualified from utilizing this program.
- f. The family must maintain good tenant standing with its landlord and the HACR. The family must provide a letter from their landlord when entering this program. The letter must certify that the family has paid rent on time for the past 12 months, is current



with rent and has kept the rental unit in good repair (ie: no damage beyond normal wear and tear).

g. The designated Head of Household must actively participate in the Family Self-Sufficiency (FSS) program with homeownership as one of the established goals.

h. The family must also:

- Comply with HUD Family Obligations under the HCV Program. If the HA has mailed out one or more pre-termination appointments within the past 3 years for either failing to provide and/or other program violations, the family will be disqualified from utilizing the homeownership program until such time that this requirement is met;
- Adhere to the requirements of their lease agreement;
- Not have outstanding debts to the landlord or to any utility company;
- Report all Household Income;
- Pass the most recent Housing Quality Standards (HQS) inspection with no tenant-caused failure items.

## **B. Eligible Units**

HCV Homeownership assistance may be used to purchase units within the jurisdiction of the HACR that are under construction or already existing at the time the family is approved for homeownership. The family unit size will be determined as it is for the Housing Choice Voucher rental program.

### **1. Unit types**

- a. One unit property (single family residence).
- b. A single dwelling unit in a cooperative, condominium or planned use development.
- c. A manufactured home with a permanent foundation, if the family has the right to occupy the same site for a period of at least forty (40) years.
- d. The unit must be seller occupied or vacant for at least ninety (90) days; an exception is where the tenants are purchasing the unit in which they have been residing.
- e. The unit must pass HQS.

Depending on the unit size selected by the family, the HACR may approve the purchase of a unit up to one bedroom size larger than the authorized payment standard the family qualifies for and the unit must be deemed affordable (the family's portion cannot be higher than 50% of gross income).

### **2. HCV Housing Quality Standards**

The unit must be inspected by the HACR and satisfy the Housing Quality Standards (HQS) for the HCV Program before HP assistance can begin. The HQS inspection will be completed prior to the independent inspection to prevent the family from the added expense of an inspection in the event the home has major damage or necessary repairs

that the Seller will not agree to repair and/or the buyer, made aware of the repairs, no longer wishes to purchase the home.

In the event the subject property receives a public complaint after escrow closes or is visibly in disrepair, the HACR reserves the right to conduct a HQS inspection.

### **3. Independent Inspection**

The unit must be inspected by a certified independent inspector designated and paid by the family, and pre-approved by the HACR. The inspector must be a member of the California Real Estate Inspectors Association, the American Society of Home Inspectors, or the International Conference of Building Officials. This inspection must cover, at a minimum, all major building systems and components including:

- Foundation and structure
- Housing interior and exterior
- Roofing
- Plumbing
- Electrical systems
- Heating systems

The HACR must receive and approve a copy of the inspection report before HP assistance will commence. The HACR may disapprove a unit for assistance under HP because of information obtained through the inspection report, even if the unit passes the HQS inspection. If the HACR or 3<sup>rd</sup> party (such as an entity providing down payment assistance) calls out additional repairs, the buyer will be required to pay a re-inspection fee to the certified inspector who completed the original home inspection.

### **4. Other Requirements for Eligible Units**

The seller of the home may not be on the HUD list of debarred and suspended contractors, or subject to a limited denial of participation under 24 CFR Part 24.

### **C. Homeownership Confirmation Letter**

Once approved for participation in the HCV HP, the family will be issued a confirmation letter subject to the following requirements:

- The family must execute a statement in which the family agrees to comply with all family obligations under the Homeownership Option.
- **Selection Period:** The family will be given **90 calendar days** to locate a home to purchase. Within two weeks prior to the end of the selection period, if the family has not yet selected a home, the family may submit a written request to the HACR for **one 30 day extension**. The extension request must include the reason for the

extension and outline the family's search efforts. The extension request will be reviewed and verified by the HACR and if an extension is granted, the family will receive a revised Confirmation Letter with the new Selection Period expiration date. Any extension granted is at the discretion of the HACR and the availability of funds to provide monthly mortgage assistance.

- After a home is chosen during the 90 day Selection Period, the family will be given **90 calendar days to open and close escrow**. The *opening* of escrow must occur no later than the last day of the Selection Period.
- It is the family's responsibility to find a home that meets the criteria for voucher homeownership assistance.
- The HACR may require families unable to locate a suitable unit during the Selection Period to wait for a period of one (1) year to re-apply for HP.
- The family must report its progress towards locating and purchasing a unit if requested by the HACR.

If the family is unable to locate an acceptable unit for purchase during the Selection Period, the HACR may, at its discretion, allow the family to remain leased up under the HCV rental voucher.

If the family submits a purchase contract to the HACR that is not approved due to reasons other than the family's lack of compliance, the family may request an extension using the process outlined above in this paragraph under Selection Period.

#### **D. Purchase Agreement**

Prior to execution of the offer to purchase, or the Purchase Agreement, the financing terms must be provided by the family to the HACR for approval.

The Purchase Agreement must include the following:

- Specify the price and other terms of the sale by the seller to the purchaser.
- Provide that the purchaser will arrange for a certified inspection of the unit by an independent certified inspector selected by the purchaser.
- State that the purchaser is not obligated to purchase the unit unless such inspections are satisfactory to both the HACR and purchaser.
- Provide that the purchaser is not obligated to pay for any necessary repairs.
- Provide that the purchaser is not obligated to purchase if the mortgage financing terms, or any other terms, are not approved by the HACR, and
- Contain a seller certification from the HACR that the seller has not been debarred, suspended, or subject to a limited denial of participation in accordance with 24 CFR Part 24.

## **E. Affordability**

The purchase price of the home must be affordable to the family, as determined by the HACR and the Lender. The price shall be considered affordable if the monthly homeownership expenses payable by the family do not exceed fifty percent (50%) of the family's total monthly gross income.

## **F. Financing of Purchase**

The family must allow the HACR to review the terms of the mortgage secured to purchase the property before close of escrow. The HACR may disapprove proposed financing, refinancing or other debt if the HACR determines that the debt is unaffordable to the family or if the HACR determines that the lender or the loan terms do not meet HACR or HUD qualifications. The family must locate and qualify for a mortgage that meets the following requirements:

- a. The mortgage must be determined to be affordable by the HACR. The HACR may take into account expenses such as interest, taxes and insurance when determining affordability. The family's portion of the monthly homeownership expenses may not exceed (50%) of the family's total monthly gross income.
- b. Short-term mortgages with large final "balloon payment" will not be allowed.
- c. Interest only mortgages will not be allowed.
- d. Only fully amortized, fixed rate mortgages will be allowed.
- e. The family may not obtain private first mortgage financing from a family member or any other private source.
- f. The mortgage must be provided, insured, or guaranteed by the State or Federal government and comply with secondary mortgage market underwriting requirements.

## **G. Calculation of Homeownership Assistance Payment**

Calculation of income for the purpose of determining income eligibility for admission to the program and/or determining the family's total tenant payment will be conducted under the guidelines for the HCV rental assistance program except as otherwise noted in this section.

### **1. Occupancy of Home**

The HAP will only be paid while the family resides in the home. If the family moves out of the home, the HACR will discontinue payment of the HAP commencing with the month after the family moves out.

- a. Amount of monthly homeownership assistance payment. While the family is residing in the home, the HACR shall pay a monthly homeownership assistance payment on behalf of the family that is equal to the lower of the payment



- standard minus the total tenant payment; or the family's monthly homeownership expenses minus the total tenant payment.
- b. Initial Payment Standard. The initial payment standard for a family is the lower of the payment standard for the family unit size (Voucher size); or the payment standard for the size of the home.
  - c. Payment Standard for subsequent reexaminations. Reexaminations (interims and annual reexaminations) will use a Payment Standard that is the greater of the payment standard as determined in accordance with the initial payment standard at the commencement of homeownership assistance; or the Payment Standard in effect at the time of the reexamination as determined using the requirements of Section F(1)(b) of this plan. At no time will the HACR use a Payment Standard less than the initial Payment Standard at the close of escrow.
  - d. The HACR will use the same Payment Standard schedule, Payment Standard amounts, and Subsidy Standards for the HP as for the rental voucher program.
  - e. Exception rent areas. If the home is located in an exception payment standard area, the HACR must use the appropriate payment standard for the exception payment standard area.
  - f. Affordability of housing costs. Total monthly homeownership expenses payable by the family, as defined in (g) below, must be less than (50%) of the family's total gross income.
  - g. Homeownership expenses. The HACR will use the following expenses to determine the total homeownership expense for calculation of the HAP:
    - Principal, interest, taxes and insurance (PITI) and mortgage insurance/private mortgage insurance (Mi/PMI), if applicable on initial mortgage debt and any refinancing of such debt,
    - Real estate taxes may not exceed 2%.
    - Utility allowance for the home as determined by the HACR.
  - h. If a member of the family is a person with disabilities, such debt may include debt incurred by the family to finance costs needed to make the home accessible for such person, if the HACR has determined that allowance of such costs as homeownership expenses is needed as a reasonable accommodation for the disabled family.

## **2. Cooperative and Condominiums**

For cooperative members only (owners of condos) the following cooperative charges will also be used toward the homeownership expense:

- a. Charges included in the cooperative occupancy agreement including payment for real estate taxes and public assessments on the home;
- b. Cooperative or condominium operating charges or maintenance fees assessed by the condominium or cooperative homeowner association.

### **3. HAP Payment**

- a. The HACR will pay the HAP according to the terms established in the agreement the HACR and Lender have entered into. If the assistance payment exceeds the amount due to the lender, the excess will be paid directly to the family.
- b. The HACR will provide the lender with notice of the amount of the HAP and amount of the family's portion of the total homeownership expenses prior to close of escrow.
- c. Procedure for termination of homeownership assistance.
  - The family shall be entitled to the same termination notice and informal hearing procedures set forth in this Administrative Plan for participants in the HCV rental assistance program.
- d. Automatic termination of HAP.
  - Homeownership assistance for a family terminates automatically 180 calendar days after the last HAP paid on behalf of the family. The HACR has the discretion to grant relief from this requirement in those cases where automatic termination would result in extreme hardship for the family.

### **4. Income Changes**

- a. Changes in income must be reported in writing within 10 days of the occurrence. Changes will be processed if they are anticipated to continue for sixty (60) or more days and is a monthly increase or decrease of \$100 or more. Once these changes have been verified, the HACR will process an interim to be applied, the first of the following month the change was reported.

### **H. Maximum Term of Homeownership Assistance**

The time limits below apply to all family members having an ownership interest in the unit during the time that homeownership payments are made; and, the spouse of any member of the household who has an ownership interest in the unit during the time that homeownership payment are made. Except in the case of a family that qualifies as an elderly or disabled family, all families, including families that become elderly during the term of the homeownership assistance are subject to the following maximum terms:

- Initial mortgage term of twenty (20) years or longer. The maximum term of homeownership assistance will be fifteen (15) years.
- Initial mortgage term of less than twenty (20) years. The maximum term of homeownership assistance will be ten (10) years.

If, during the course of homeownership assistance, the family ceases to qualify as elderly or disabled, the maximum term as defined in Section G will become applicable from the date homeownership assistance commenced. The HACR will provide a family at least six (6) months of homeownership assistance after the maximum term becomes applicable provided the family is otherwise eligible to receive homeownership assistance in accordance with 682.634.

The initial maximum term limit applies if the family receives assistance for more than one home purchase, even if received from another housing authority.

## **I. Portability**

The HACR will permit portability of the homeownership assistance (the HACR's portion) to another jurisdiction, provided the receiving jurisdiction operates a similar homeownership program for which the applicant qualifies and for which the receiving PHA is accepting new homeownership families.

### **1. Incoming Portable Families**

- a. May purchase a unit within the jurisdiction of the HACR, provided the HACR is accepting new homeownership families at the time of the purchase.
- b. Must be under HCV rental assistance in Riverside County for the most recent 12 consecutive months prior to application for HCV Homeownership.
- c. Must meet the education, counseling, and all other HP requirements of the HACR.
- d. Must be certified by initiating Housing Authority that the family is in good standing with that HA and Landlord.

The HACR must promptly notify the initial HA if the Family has purchased an eligible unit under the program, or if the family is unable to purchase a home within the maximum time established by the HACR.

### **2. Outgoing Portable Families**

Outgoing portable families need to adhere to the following:

- a. Purchase a unit within the receiving jurisdiction, provided they operate a homeownership program and they are accepting new homeownership families at the time of the purchase.
- b. Must meet the education, counseling, and all other HP requirements of the receiving Housing Authority.
- c. Must be certified by the initiating HACR that the family is in good standing with the Housing Authority and Landlord.
- d. The initiating HACR must promptly notify the HA, if the Family has purchased an eligible unit under the program, or if the family is unable to purchase a home within the maximum time established by the HA.

## **J. Move with Continued Tenant-Based Assistance**

A family receiving HACR homeownership assistance may purchase and move to a new unit with continued voucher homeownership assistance as long as no family member owns

any title or other interest in the prior home. A family receiving homeownership assistance may move to a new unit with continued voucher homeownership assistance no more than once every five (5) years and the total of such assistance terms is subject to the maximum term described in this paragraph.

#### **1. Purchase of a new unit**

A family receiving homeownership assistance may purchase and move to a new unit with continued assistance, provided that the family fulfills all requirements of the HP at the time of the purchase of the new unit. The following applies to a family purchasing a new unit under the HP:

- a. The family will not be eligible to move with continued assistance for a period of Five (5) years after the initial purchase.
- b. The HACR may, at its discretion, require the family to complete a new housing counseling program or receive additional counseling prior to close of escrow.
- c. The requirement that the family must be a first time homebuyer is not applicable.
- d. The HACR may deny permission to move with continued assistance in the case of lack of funding or if the HACR has denied or terminated assistance to the family under section N below.

#### **2. Sale of Original HP Unit and Return to Tenant-Based Rental Assistance**

The HACR may, at its discretion, allow a family to return to tenant-based rental assistance. The following applies to a family returning to tenant-based rental assistance:

- a. The HACR may deny permission to move with continued assistance in the case of lack of funding or if the HACR has denied or terminated assistance to the family as defined under Section K of this plan.
- b. The HACR will not commence continued tenant-based assistance for occupancy of a rental unit so long as any family member owns any title or other interest in the home previously assisted through the HP. In addition, Eighteen (18) months must have passed since the family's receipt of homeownership assistance.

#### **K. Denial or Termination of Assistance**

The HACR shall deny or terminate homeownership assistance for the family in accordance with the following:

- Failure to report all household income.
- Failure to comply with Housing Authority County of Riverside HCV Homeownership Program requirements.
- Failure to comply with any HUD Family Obligations.
- Failure to meet the Housing Authority of the County of Riverside's Zero Tolerance Policy
- The family defaults on the mortgage(s).



#### **L. Recapture**

The HACR will not recapture any Homeownership Voucher payments unless there was an act of fraud or misrepresentation of material facts in order to obtain a benefit. The HCV HP recapture provision does not apply to any other program funds that may be used in the transaction.

#### **M. Program Size and Waiver or Modification of Homeownership Policies**

The Executive Director (ED) of the HACR, and/or designee shall have the discretion to waive or modify any provision of the Homeownership Program or policies not governed by statute or regulation for good cause or to comply with changes in HUD regulations or directives. The ED and/or designee may limit homeownership assistance to families in accordance of CFR 982.626 (b).

For fiscal year 2011-2012, the HACR has established a homeownership assistance limit of no more than 16 families.



**HOUSING AUTHORITY OF THE COUNTY OF RIVERSIDE**

**Resident/Public Comment Form**

In preparation for the annual update to the Housing Authority of the County of Riverside's (HACR) Administrative Plan and Annual Plan, HACR is seeking input and feedback from residents and other community stakeholders. Please provide any comments or suggestions in the space provided below. Contact information is optional but appreciated. Assistance will be provided to persons with disabilities who require an accommodation to review and comment on the existing plan. If you require such assistance please notify the receptionist, meeting facilitators, or Ed Kreitz, FSS Coordinator, at 951-343-5442.

Name COTIS MACK JR Telephone # 760 329-9903  
Address CALIENTE D.R # A 13998  
Email address NO

*Please circle the appropriate answer.*

Are you a program participant? yes / no      Are you a Waiting List registrant? yes / no

Comments (Please attach additional sheets if necessary) :

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# HOUSING AUTHORITY OF THE COUNTY OF RIVERSIDE

## Resident/Public Comment Form

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Name Miriam Avila Telephone # (951) 2080758  
Address 13532 Hundell Drive Moreno Valley Ca 92553  
Email address \_\_\_\_\_

*Please circle the appropriate answer.*

Are you a program participant? yes / no      Are you a Waiting List registrant? yes / no

Comments (Please attach additional sheets if necessary) :

I have no comments right now  
Thanks.



# HOUSING AUTHORITY OF THE COUNTY OF RIVERSIDE

## Resident/Public Comment Form

HOUSING AUTHORITY  
COUNTY OF RIVERSIDE  
10 NOV 16 PM 12: 5

In preparation for the annual update to the Housing Authority of the County of Riverside's (HACR) Administrative Plan and Annual Plan, HACR is seeking input and feedback from residents and other community stakeholders. Please provide any comments or suggestions in the space provided below. Contact information is optional but appreciated. Assistance will be provided to persons with disabilities who require an accommodation to review and comment on the existing plan. If you require such assistance please notify the receptionist, meeting facilitators, or Ed Kreitz, FSS Coordinator, at 951-343-5442.

Name Angela Chapanar Telephone # 951-870-1713  
Address 4156 Wayne Ct Riverside, CA 92504  
Email address anjchapana@yahoo.com

Please circle the appropriate answer.

Are you a program participant?  yes /  no      Are you a Waiting List registrant?  yes /  no

Comments (Please attach additional sheets if necessary) :

• Everything seems pretty good to me.  
• I do hope that the waiting list opens up very soon.  
I know these programs have helped me out a lot, and I know there are many people out there struggling, especially in these hard economic times.

# HOUSING AUTHORITY OF THE COUNTY OF RIVERSIDE

## Resident/Public Comment Form

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Name Sylvia Del Castillo Telephone # (951) 243-3137

Address 2478 Eucalyptus Ave

Email address Sylvia4refi@aol.com

Please circle the appropriate answer.

Are you a program participant? yes / no Are you a Waiting List registrant? yes / no

10 NOV 22 PM 3:07  
HOUSING AUTHORITY  
COUNTY OF RIVERSIDE

Comments (Please attach additional sheets if necessary):

First of all I'd like to take this time to Thank You!

I believe if it wasn't for this program I would have been dependent on a significant other who was abusing me to help me with my rents. So thanks!

This is a wonderful program. I know that there is a waiting list!

I wish we could raise money to help everybody.

UNTIL we can find more monies or a way to find more jobs I have been looking for a job for two years. And without transportation, it feels impossible. But there is always hope. I will continue to look. My unemployment will be gone soon.