PHA 5-Year and	U.S. Department of Housing and Urban	
	Development	
Annual Plan	Office of Public and Indian Housing	

1.0	PHA Information         PHA Name: Housing Authority of Douglas County       PHA Code: 003         PHA Type:       Small       High Performing       Standard         PHA Fiscal Year Beginning: (MM/YYYY): 2012       2012					
2.0	<b>Inventory</b> (based on ACC units at time of Number of PH units: <u>154</u>	of FY beginning	g in 1.0 above) Number of HCV units: <u>6</u>	51 plus 85 VASH		
3.0	Submission Type	🛛 Annua	l Plan Only	5-Year Plan Only		
4.0	PHA Consortia	PHA Consor	tia: (Check box if submitting a joi	nt Plan and complete table be		
	Participating PHAs	PHA Code	Program(s) Included in the Consortia	Programs Not in the Consortia	No. of Unit Program PH	ts in Each HCV
	PHA 1:					
	PHA 2: PHA 3:					
5.0	5-Year Plan. Complete items 5.1 and 5.2	2 only at 5-Year	r Plan update.			
5.1	<b>Mission.</b> State the PHA's Mission for se jurisdiction for the next five years: The Housing Authority of Dougl affordable housing that is safe, d	as County's ecent, sanita	Mission is as follows: We ry and free from discrimina	e are committed to prov ation.	ide the oppor	rtunity for
5.2	Goals and Objectives. Identify the PHA low-income, and extremely low-income t and objectives described in the previous t Please see attached goals.	families for the	goals and objectives that will ena next five years. Include a report	ble the PHA to serve the nee on the progress the PHA has	ds of low-incom made in meeting	e and very g the goals
6.0	<ul> <li>PHA Plan Update</li> <li>(a) Identify all PHA Plan elements that have been revised by the PHA since its last Annual Plan submission: None</li> <li>(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.</li> <li>1. Housing Authority Administrative Office 902 West Stanton Street, Roseburg, OR 2. Douglas County Library 1409 NE Diamond Land Blvd, Roseburg, OR 3. Reedsport Public Library 395 Winchester, Reedsport, OR</li> </ul>					
7.0	Hope VI, Mixed Finance Modernization Programs, and Project-based Voucher N/A				Housing, Homed	ownership
8.0	Capital Improvements. Please complet	e Parts 8.1 thro	ugh 8.3, as applicable.			
8.1	<b>Capital Fund Program Annual Statem</b> complete and submit the <i>Capital Fund P</i> open CFP grant and CFFP financing. Attached					
8.2	Capital Fund Program Five-Year Acti Program Five-Year Action Plan, form H for a five year period). Large capital iter Attached	UD-50075.2, ai	nd subsequent annual updates (on	a rolling basis, e.g., drop cur		
8.3	Capital Fund Financing Program (CF) Check if the PHA proposes to use any finance capital improvements.		Capital Fund Program (CFP)/Rep	lacement Housing Factor (RF	IF) to repay deb	t incurred to

9.0	Housing Needs. 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.
	Please see attached
9.1	Strategy for Addressing Housing Needs. Provide a brief description of the PHA's strategy for addressing the housing needs of families in the jurisdiction and on the waiting list in the upcoming year. Note: Small, Section 8 only, and High Performing PHAs complete only for Annual Plan submission with the 5-Year Plan. The Housing Authority of Douglas County Housing Authority has vacant land that has density to add more units of affordable housing. The County is in serious need of 1 bedroom units. The occupancy of the Public Housing is 99%. HADCO did purchase vacant land to build affordable
	units in Riddle, Oregon. The Housing Authority of Douglas county has identified a need for use of project basing FCV and VASH vouchers from their current budget authority.
	Additional Information. Describe the following, as well as any additional information HUD has requested.
10.0	(a) Progress in Meeting Mission and Goals. Provide a brief statement of the PHA's progress in meeting the mission and goals described in the 5- Year Plan. The Housing Authority of Douglas County has reached 5 out of 5 goals or 100% completed by providing mobility counseling to Section 8 participants, receiving and expanding the supply of assisted housing through VASH vouchers, provided outreach to landlords, promote self sufficiency and ensure equal opportunity and affirmatively further fair housing.
	<ul> <li>(b) Significant Amendment and Substantial Deviation/Modification. Provide the PHA's definition of "significant amendment" and "substantial deviation/modification"</li> <li>Please see attached</li> </ul>
11.0	<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.
	(a) Form HUD-50077, PHA Certifications of Compliance with the PHA Plans and Related Regulations (which includes all certifications relating to Civil Rights)
	<ul> <li>(b) Form HUD-50070, <i>Certification for a Drug-Free Workplace</i> (PHAs receiving CFP grants only)</li> <li>(c) Form HUD-50071, <i>Certification of Payments to Influence Federal Transactions</i> (PHAs receiving CFP grants only)</li> <li>(d) Form SE LLL Disclosure of Laboratory (Dubas receiving CFD grants only)</li> </ul>
	<ul> <li>(d) Form SF-LLL, <i>Disclosure of Lobbying Activities</i> (PHAs receiving CFP grants only)</li> <li>(e) Form SF-LLL-A, <i>Disclosure of Lobbying Activities Continuation Sheet</i> (PHAs receiving CFP grants only)</li> </ul>
	<ul><li>(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.</li><li>(g) Challenged Elements</li></ul>
	<ul> <li>(h) Form HUD-50075.1, Capital Fund Program Annual Statement/Performance and Evaluation Report (PHAs receiving CFP grants only)</li> <li>(i) Form HUD-50075.2, Capital Fund Program Five-Year Action Plan (PHAs receiving CFP grants only)</li> </ul>

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 off ice 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: <u>http://www.hud.gov/offices/pih/centers/sac/demo\_dispo/index.c</u> <u>fm</u>

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 5year 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.

Par	t I: Summary					
PHA	PHA Name/Number OR003 Housing Authority of		Locality (City/	County & State)	Original 5-Year Plan	Revision No:
Doug	glas County, Oregon		Roseburg, Orego	n/Douglas County		
	Development Number and	Work Statement	Work Statement for Year 2	Work Statement for Year 2 Work Statement for Year 3		Work Statement for Year 5
A.	Name	for Year 1	FFY <u>2012</u>	FFY <u>2014</u>	FFY <u>2015</u>	FFY <u>2016</u>
		FFY <u>2012</u>				
	OR003000001 Roseburg		\$103,000	\$113,000	\$112,000	\$123,000
	OR003000001 Oakland		\$0.00	\$0.00	\$6,000	\$0
	OR003000001 Riddle		\$5,000	\$0.00	\$0	\$18,000
	OR003000001 Winston		\$25,000	\$25,000	\$25,000	\$0
	OR003000001Yoncalla		\$0.00	\$8,000	\$0	\$0
	OR003002007 Reedsport		\$31,600	\$24,000	\$20,600	\$31,500
В.	Physical Improvements	Annual Statement	\$164,600	\$170,000	\$163,600	\$172,500
	Subtotal					
С.	Management Improvements		\$5,000	\$5,000	\$5,000	\$5,000
D.	PHA-Wide Non-dwelling					
	Structures and Equipment					
E.	Administration		\$15,000	\$15,000	\$15,000	\$15,000
F.	Other		\$20,500	\$20,500	\$20,500	\$20,500
G.	Operations		\$79,000	\$76,000	\$72,600	\$72,600
H.	Demolition					
I.	Development					
J.	Capital Fund Financing –					
	Debt Service					
Κ.	Total CFP Funds		\$284,100	\$286,500	\$276,700	\$285,600
L.	Total Non-CFP Funds		0	0	0	0
М.	Grand Total		\$284,100	\$286,500	\$276,700	\$285,600

Part II: Sup	porting Pages – Physical	Needs Work State	ement(s)			
Work	Work Statement for Year 2			Work Statement for Year: <u>3</u>		
Statement for		FFY 2013			FFY 2014	
Year 1 FFY	Development	Quantity	Estimated Cost	Development	Quantity	Estimated Cost
<u>2011</u>	Number/Name			Number/Name		
	General Description of			General Description of		
	Major Work Categories			Major Work Categories		
See	OR003000001 Roseburg	3	\$6,000	OR003000001 Roseburg	3	\$6,000
	Replace flooring			Replace flooring		
Annual	OR003000001 Roseburg	12	\$30,000	OR003000001 Roseburg	12	\$20,000
	Replace sewer lines			Replace sewer lines		
Statement	OR003000001 Roseburg	6	\$30,000	OR003000001 Roseburg	6	\$30,000
	Replace siding			Replace siding		
	OR003000001 Roseburg	6	\$15,000	OR003000001 Roseburg	6	\$15,000
	Replace Elec Boxes			Replace Elec Boxes		
	OR003000001 Roseburg	6	\$12,000	OR003000001 Roseburg	6	\$12,000
	Replace waterlines			Replace waterlines		
	OR003000001 Roseburg	7	\$10,000	OR003000001 Roseburg	12	\$25,000
	Replace Heaters			Replace Heaters		
	OR003000001 Riddle	3	\$5,000	OR00300001Roseburg	12	\$5,000
	Replace Heaters			Replace bathroom sink		
				and faucets		
	OR003000001 Winston	4	\$10,000	OR003000001 Winston	4	\$10,000
	Replace Heaters			Replace Heaters		
	1 I					
	OR003000001 Winston	4	\$15,000	OR003000001 Winston	4	\$15,000
	Replace flooring			Replace flooring		
	OR003002007 Reedsport	9	\$18,000	OR003002007 Reedsport	7	\$17,000
	Replace heaters in last			Paint Exterior of 7 elderly		
	nine units			buildings		
	OR003002007 Reedsport	17	\$13,600	OR003002007 Reedsport	4	\$7,000
	Replace washer drains in			Replace gutters and facia		
	17 units			boards on family units		

					Expires =/ 50/ 200
			OR003000001 Yoncalla	8	\$8,000
			Replace kitchen cabinets		
			in elderly units		
Subto	otal of Estimated Cost	\$164,600.00	Subto	otal of Estimated Cost	\$170,000.00
	Subto	Subtotal of Estimated Cost	Subtotal of Estimated Cost \$164,600.00	Replace kitchen cabinets in elderly units	Replace kitchen cabinets in elderly units

Part II: Sup	porting Pages – Physica	l Needs Work State	ement(s)			
Work	Work Statement for Year <u>4</u>			Work Statement for Year: 5		
Statement for		FFY 2015			FFY 2016	
Year 1 FFY	Development	Quantity	Estimated Cost	Development	Quantity	Estimated Cost
<u>2011</u>	Number/Name			Number/Name		
	General Description of			General Description of		
	Major Work Categories			Major Work Categories		
See	OR003000001Roseburg	13	\$5,000	OR003000001Roseburg	3	\$6,000
	Replace bathroom sink			Replace flooring		
	and faucets					
Annual	OR003000001 Roseburg	12	\$20,000	OR003000001 Roseburg	12	\$20,000
	Replace sewer lines			Replace sewer lines		
Statement	OR003000001 Roseburg	6	\$30,000	OR003000001 Roseburg	6	\$30,000
	Replace siding			Replace siding		
	OR003000001 Roseburg	6	\$15,000	OR003000001 Roseburg	6	\$10,000
	Replace Elec Boxes			Replace Elec Boxes		
	OR003000001 Roseburg	6	\$12,000	OR003000001 Roseburg	6	\$12,000
	Replace waterlines			Replace waterlines		
	OR003000001 Roseburg	15	\$30,000	OR003000001 Roseburg	15	\$30,000
	Replace heaters			Replace heaters		
	OR003000001 Winston	4	\$10,000	OR003000001 Roseburg	1	\$15,000
	Replace heaters			Foundation Repair		
	OR003000001 Winston	4	\$15,000	OR003000001 Riddle	8	\$18,000
	Replace flooring			Replace flooring		
	OR003002007 Reedsport	5	\$15,000	OR003002007 Reedsport	5	\$15,000
	Replace kitchen cabinets			Replace kitchen cabinets		
	countertops, range hoods,			countertops, range		
	sinks			hoods, sinks		
	OR003002007 Reedsport	8	\$2,000	OR003002007 Reedsport	10	\$1,500
	Replace 8 light posts-			Replace sliding closet		
	area lights			doors with bi-fold doors		

					Expires 4/30/20
OR003002007 Reedsport	6	\$3,600	OR003002007 Reedsport	10	\$2,000
Replace metal exterior			Remove pedastal sinks		
door in elderly units			and replace with vanity		
			and wall sink		
OR003000001 Oakland	7	\$6,000	OR003002007 Reedsport	10	\$13,000
Upgrade closet doors to			Paint exterior of family		
standard size			buildings		
Subtotal of Est	imated Cost	\$163,600	Subtotal of Est	imated Cost	\$172,500
	Replace metal exterior door in elderly units OR003000001 Oakland Upgrade closet doors to standard size	Replace metal exterior door in elderly units         OR003000001 Oakland         Upgrade closet doors to	Replace metal exterior door in elderly units          OR003000001 Oakland Upgrade closet doors to standard size       7       \$6,000	Replace metal exterior door in elderly units       Remove pedastal sinks and replace with vanity and wall sink         OR003000001 Oakland Upgrade closet doors to standard size       7       \$6,000       OR003002007 Reedsport Paint exterior of family buildings         Image: Construction of the standard size       Image: Construction of the standard size       Image: Construction of the standard size	Replace metal exterior door in elderly units       Remove pedastal sinks and replace with vanity and wall sink         OR003000001 Oakland Upgrade closet doors to standard size       7       \$6,000       OR003002007 Reedsport Paint exterior of family buildings         Image: Control of the standard size       Image: Control of the standard size       Image: Control of the standard size       Image: Control of the standard size

Part III: Su	oporting Pages – Management Needs Worl	k Statement(s)		
Work	Work Statement for Year 2		Work Statement for Year: <u>3</u>	
Statement for	FFY 2012		FFY 2013	
Year 1 FFY	Development Number/Name	Estimated Cost	Development Number/Name	Estimated Cost
2011	General Description of Major Work Categories		General Description of Major Work Categories	
See	Training	\$5,000	Training	\$5,000
Annual				
Statement				
	Subtotal of Estimated Cost	\$5,000	Subtotal of Estimated Cost	\$5,000
	Subtour of Estimated Cost	42,000	Subtour of Estimated Cost	, ~

Part III: Su	oporting Pages – Management Needs Worl	x Statement(s)			
Work	Work Statement for Year 4		Work Statement for Year: 5		
Statement for	FFY 2014		FFY 2015		
Year 1 FFY	Development Number/Name	Estimated Cost	Development Number/Name	Estimated Cost	
	General Description of Major Work Categories		General Description of Major Work Categories		
See	Training	\$5,000	Training	\$5,000	
Annual					
Statement					
	Caluard of Easter (1.0.)	¢5,000	California (Early 1.0.1)	\$5,000	
	Subtotal of Estimated Cost	\$5,000	Subtotal of Estimated Cost	\$5,000	

# A. PHA Progress in Meeting the Mission and Goals Described in the 5-Year Plan

(Provide a statement of the PHA's progress against the goals and objectives established in the previous 5-Year Plan for the period FY 2012 – 2016.

#### Goal 1

Expand the supply of assisted housing;				
Objective:	Apply for additional rental vouchers			
Progress:	HADCO will continue to apply for vouchers when available.			
Objective:	Leverage private or other public funds to create additional housing opportunities.			
Progress:	HADCO will continue to research additional housing opportunities.			

#### Goal 2

Increase assisted housing choices.			
Objective:	Provide voucher mobility counseling		
Progress:	Continue to provide information at briefings & in briefing packet/family handbook		
Objective:	Conduct outreach efforts to potential voucher landlords		
Progress:	Second Chance Renters, Homeless Coalition, CSC Coordinator, HADCO staff		
Objective:	Allocate 5 more home ownership vouchers		
Progress:	HADCO has 5 homeowners with vouchers.		
-			

#### Goal 3

Promote self-sufficiency and asset development of assisted households.

Objective: Progress:	Provide or attract supportive services to improve assistance recipients' employability. HADCO staffs a FSS Coordinator at our Administrative office and a CSC Coordinator at the Orchard Knoll complex. This individual provides support in providing referrals to tenants and participants.
Goal 4	
Objective:	Ensure equal opportunity and affirmatively further fair housing.
·	Undertake affirmative measures to ensure access to assisted housing regardless of race, color, religion national origin, sex, familial status, and disability.
Progress:	HADCO provides ADA & visitable units. HADCO has a Reasonable Accommodation
	Process and partners with community organizations to sponsor the Fair Housing Council of Oregon to present training at the Myers Center.
Progress:	HADCO provides ADA & visitable units. HADCO has a Reasonable Accommodation Process and partners with community organizations to sponsor the Fair Housing Count

#### Goal 5

Expand the supply of project based assisted housing;		
Objective:	Apply for project based rental vouchers.	
Progress:	HADCO will continue to apply for vouchers when available.	

#### HADCO STRATEGY FOR ADDESSING HOUSING NEEDS

#### Annual Plan 2012

The preliminary strategy is to develop new construction on current public housing land. The Housing Authority has vacant land that has the density to build more units. The funding will come from other sources such as Rural Development, competitive tax credits and non competitive tax credits. By tapping into the Rural Development funds, it would provide subsidy to assist with rental payments.

The availability of housing for single, couples or elderly is little to none. There is little turnover in our housing for those type of units. Building one bedroom units would be the priority and two bedrooms are secondary.

The Housing Authority of Douglas County has indentified a need to project base up to 54 VASH vouchers and or Family Choice Vouchers from our current budget authority. These vouchers would be used at a proposed building project in Douglas County, Oregon to aid in providing vital housing to veterans in Douglas County, Oregon.

# HADCO Response to RAB Comments: ACOP

# RAB Page 1

Sect II Page 10

<u>RAB:</u> Change policy to acknowledge exempt income. <u>HADCO</u>: Agrees to change ACOP. HADCO will add: Applicants with exempt income will not be required to complete minimum zero expense form. <u>HADCO BOARD RESPONSE</u>: Agrees and approves HADCO response.

<u>RAB</u>: Zero income families should not have to report for six months from the time they initially report zero income.

<u>HADCO</u>: Agrees that those with exempt income should not be required, however all others should be required to complete minimum zero expense form.

HADCO BOARD RESPONSE: Agrees and approves HADCO response.

Page 13

<u>RAB</u>: (h) Change policy regarding HADCO completing home visits during eligibility process.

<u>HADCO</u>: Agrees to remove from the ACOP. (h) HADCO may complete a home visit on all applicants that have passed criminal history screening and have incomplete or questionable landlord references to determine if the applicant's housekeeping would create healthier or sanitation problems. Staff completing the home visit will consider whether the conditions they observe are the result of the applicant's treatment of the unit or are caused by the unit's overall substandard condition. HADCO will also remove under (h) housekeeping criteria and other lease compliance criteria along with advance written notice of home visit. HADCO BOARD RESPONSE: Agrees and approves HADCO response.

<u>RAB</u>: (j) Language seems too vague.

<u>HADCO</u>: HADCO agrees it is vague however language is directly from HUD ACOP guidebook. <u>HADCO BOARD RESPONSE</u>: Reviewed. Not changes will be made.

Page 13 Line 1

<u>RAB</u>: Allow families to apply for different size units when placed on wait list. <u>HADCO</u>: Agrees to update pre-application to allow for multiple bedroom size wait list placement while following occupancy standards. Occupancy standards will be included with preapplication.

HADCO BOARD RESPONSE: Agrees and approves HADCO's response.

<u>RAB:</u> Parents with children a great deal of time but less than 51% should be allowed to rent a unit with sufficient room for children.

<u>HADCO</u>: HADCO is concerned with the amount of households that would be over housed more than 51% of the year. With that amount of families currently on the wait list HADCO would need to continue to follow current eligibility and occupancy standards.

HADCO BOARD RESPONSE: Agrees to place on agenda for further discussion and decision this calendar year.

Sec IV Leasing Policies Page 20 General Leasing Policies Paragraph 6

<u>RAB</u>: Seven days seems to be an intrusive and awkward time limit. <u>HADCO</u>: Agrees to change ACOP from seven days to thirty days. <u>HADCO BOARD RESPONSE</u>: Agrees and approves HADCO response.

Sec IV Leasing Polices Additions to the household and visitors Page 21 Paragraph 5

<u>RAB</u>: Visitors more than twenty four hours and less than fourteen day are permitted provided they are reported prior to visit.

<u>HADCO</u>: Agrees to change ACOP to remove requirement to report prior to the visit. Change ACOP to read visits of less than thirteen days are permitted without approval. <u>HADCO BOARD RESPONSE</u>: Agrees and approves HADCO response.

Sec IV Leasing Policies Additions to the household and visitors Page 22 Paragraph 2

<u>RAB</u>: Why can't the individual family members over 17 or emancipated minors return once removed from unit may not be readmitted to the unit and must apply as a new applicant from the waiting list.

<u>HADCO</u>: HADCO agrees to remove from ACOP. These individuals may not be readmitted to the unit and must apply as a new applicant household for placement on the waiting list. Medical hardship or other extenuating circumstances shall be considered by HADCO in making determinations under this paragraph.

HADCO BOARD RESPONSE: Agrees and approves HADCO response.

#### RAB Page 3 and 4

Sec IV Leasing Policies Security Deposits Page 22

<u>RAB</u>: Requests security deposit payments are changed to make it affordable to resident. <u>HADCO</u>: Agrees to change ACOP security deposit down payment to \$100.00 and the monthly payment to \$100.00 per month with the first payment due beginning the following month after move in. The down payment amount and monthly payment amount will apply to all units. <u>HADCO BOARD RESPONSE</u>: Agrees and approves HADCO response.

<u>RAB</u>: If HADCO requires the transfer, then HADCO should not charge a new/higher security deposit.

<u>HADCO</u>: HADCO has agreed to lower the down payment and monthly payment requirement for security deposits. HADCO would require if applicable the current policy be used when determining the amount of security deposit for the new unit.

Sec. V Transfer Policy Types of Transfer Page 23

<u>RAB</u>: RAB agrees to provide a suggested revised policy. <u>HADCO</u>: Agrees to review once received from the RAB. <u>HADCO BOARD RESPONSE</u>: Has reviewed RAB's suggested policy. Board does not agree with suggested policy however agrees currently policy need revision. Board agrees to place on agenda to be discussed within calendar year.

# RAB Page 4 and 5

Sec. V Transfer Policy Processing Transfers Page 25

<u>RAB</u>: Why two years of age. If a unit is available let them move to the more accommodating unit.

<u>HADCO</u>: Agrees to remove from ACOP. When a head of household originally housed in a bedroom by him/her has or adopts a child, the family will not be approved for a Category 2 transfer until the child is two years of age.

HADCO BOARD RESPONSE: Agrees and approves HADCO response.

# **RAB Page 5**

<u>RAB</u>: Does not agree residents shall bear the cost of transfers. <u>HADCO</u>: This was addressed at the November 2011 HADCO board meeting and changed to HADCO bearing the cost. Refer to Resolution 1069 <u>HADCO BOARD RESPONSE</u>: Addressed at November 2011 board meeting.

Sec V Transfer Policy Incentive Transfers Page 5

<u>RAB</u>: Why three years. Need more explanation of repayment agreement. Violations based on unsubstantiated claim. Should allow a good cause exception.

<u>HADCO</u>: Agrees to revise (b) 2. Add: based on retro rent. (3) Remove: no history of disturbances that resulted in lease violations. Remove: no exceptions will be granted to the good record requirement for incentive transfers. Add: in cases when a resident places a complaint

against another resident, each resident will be contacted. Add: Exceptions will be made on a case by case basis. HADCO BOARD RESPONSE: Agrees and approves HADCO response.

# **RAB Page 6**

RAB: Residents should not bear cost of transfers HADCO: Answered above. HADCO will bear the cost of transfer. Approved by resolution at the November 17, 2011 board meeting. HADCO BOARD RESPONSE: Addressed at November 17, 2011 board meeting.

RAB: Remaining family members 18 years or older should not be liable for things their parents did.

HADCO: This is directly from the ACOP Guidebook. Remaining adult household members would need to be responsible for the debt.

HADCO BOARD RESPONSE: Agrees with HADCO. No change.

Sec. VI Eligibility for Cont. Occupancy Reexaminations Page 26

RAB: Would like to allow residents to change their reexamination month. HADCO: HADCO is at an impasse on this topic. HADCO BOARD RESPONSE: Has reviewed comment. No change will be made to the current policy.

# **RAB Page 7**

Sec. VI Eligibility for Continued Occupancy **Reexamination Procedures Page 27** 

RAB: Does not agree with anticipated income for future employment. HADCO: Future anticipated income applies to seasonal employment income. The word "seasonal" is used in this paragraph however the seasonal will also be added to the sentence. (e) Residents with a history of seasonal employment.

<u>RAB</u>: Nothing is Section VI is stated regarding the 10 day reporting of income. <u>HADCO</u>: This is the heading for reexamination. There is a separate heading for interims which is where the 10 day reporting would be applicable.

HADCO BOARD RESPONSE: Accepts HADCO's response. No action is required.

# RAB Page 7

Sec. VI Eligibility of Continued Occupancy Community Service Requirement CFR 960.600 Page 27

<u>RAB</u>: Requests to add serving on HADCO Board or Resident Council meets community service requirement.

<u>HADCO</u>: Agrees. HADCO will add serving on HADCO Board or Resident Council meets the community service requirement.

HADCO BOARD RESPONSE: Agrees and approves HADCO response.

Sec. VII Inspections Move In Inspection Page 28

<u>RAB:</u> Requests to add stating security deposit will not be used to repair any damages due to wear and tear or that were not unreasonable caused by the resident.

<u>HADCO</u>: Agrees to add to ACOP security deposit will not be used to repair normal wear and tear.

HADCO BOARD RESPONSE: Agrees and approves HADCO response.

<u>RAB:</u> Request residents are informed in writing immediately following the inspection if they pass or fail.

<u>HADCO</u>: Currently HADCO verbally informs resident if they are present if a pass or fail. If resident fails inspection HADCO does currently leave a list of fail items with the resident. <u>HADCO BOARD RESPONSE</u>: Agrees with HADCO response. No change in policy or action is needed.

# **RAB Page 8**

<u>RAB</u>: Requests if maintenance work is done when resident is not present, that something left in the home stating who was in the unit, and what was done.

HADCO: Already does this.

HADCO BOARD RESPONSE: Agrees with HADCO response. No change in policy or action is needed.

<u>RAB</u>: Recommends a list of standard routine maintenance be distributed to residents. <u>HADCO</u>: Agrees. HADCO will distribute list on an annual basis. <u>HADCO BOARD RESPONSE</u>: Agrees and approves HADCO response.

# **RAB Page 8**

Sec VIII Pet Policy Page 30

<u>RAB</u>: Why a resident can't have a cat or a dog and fish/birds.

<u>HADCO</u>: Agrees. Will revise ACOP to read a resident can have a dog or a cat and one of the following: one rabbit or one fish aquarium not to exceed 30 gallons or two small birds or two gerbils or hamsters. Other animals not listed may be approved at the discretion of HADCO. <u>HADCO BOARD RESPONSE</u>: Agrees and approves HADCO response.

<u>RAB</u>: Service animal is not a pet. Suggests having a separate policy for service animals. <u>HADCO</u>: Agrees. HADCO will review RAB's proposed policy. <u>HADCO BOARD RESPONSE</u>: Reviewed and approved proposed policy.

<u>RAB</u>: Why not refund the 50.00 fumigation fee.

<u>HADCO</u>: HADCO agrees to remove the requirement for a fumigation fee from the ACOP. <u>HADCO BOARD RESPONSE</u>: Agrees and approves HADCO response.

# RAB Page 9

Occupancy Requirements #2:

<u>RAB</u>: Requirement is not practical.

<u>HADCO</u>: Agrees to revise the ACOP to add the word "or" and remove the word "direct "to read be on a leash or in a carrier and under the control of the owner. <u>HADCO BOARD RESPONSE</u>: Agrees and approves HADCO response.

Sec. VIII Pet Policy VI Resident agrees that:

<u>RAB</u>: 12 hours is not a reasonable time. Why would HADCO need to enter unit. <u>HADCO</u>: Agrees to remove the wording "in excess of 12 hours" and add the wording if animal shows signs of distress and HADCO is unable to contact resident or emergency contact. <u>HADCO BOARD RESPONSE</u>: Agrees and approves HADCO response. <u>RAB</u>: Does not seem right to insist on vaccinations.

<u>HADCO</u>: HADCO is at an impasse. Vaccinations are for the protection of the animal and other animals on the property and should be required.

HADCO BOARD RESPONSE: Agrees with HADCO response. No change will be made to current policy.

# RAB Page 9, Page 10 and Page 11

Adjusting Rent between Regular Reexaminations Page 31

<u>RAB</u>: Opposed to10 day reporting timeline for changes. <u>HADCO</u>: HADCO and RAB are at an impasse. Could create a financial burden for HADCO. <u>HADCO BOARD RESPONSE</u>: Agrees with HADCO. No change will be made to current policy.

<u>RAB</u>: Extend the due date of change forms.

<u>HADCO</u>: Agrees to change forms due by the  $20^{th}$  of the month rather than the  $15^{th}$  of the month. <u>HADCO BOARD RESPONSE</u>: Agrees and approves HADCO response.

Sec. X Lease Termination Procedures General Policy: Lease Terminations Page 33

<u>RAB</u>: Lease termination for certain actions are not eligible for grievance. <u>HADCO</u>: Agrees to change ACOP so all residents have the right for grievance regardless of the violation. HADCO BOARD RESPONSE: Agrees and approves HADCO response.

RAB: What constitutes above definitions.

<u>HADCO</u>: Agrees to provide a list that is illustrative but not all inclusive at the resident's request. <u>HADCO BOARD RESPONSE</u>: Agrees and approves HADCO response.

Repayment Agreements.

<u>RAB</u>: Current policy creates a financial burden on resident. <u>HADCO</u>: Agrees to change ACOP to no minimum down, divide balance by 12 months to determine amount of monthly payment. Residents will have12 months to repay amounts under \$500.00. Residents will have 18 months to repay amounts over \$500.00. <u>HADCO BOARD RESPONSE</u>: Agrees and approves HADCO response.

Abandonment Page 34

<u>RAB</u>: Unit will be considered abandoned if HADCO has reason to believe no one is residing in unit and has received no notice of temporary absence.

HADCO: Will revise policy to quote ORS regarding abandoned property.

**\*90.410 Effect of tenant failure to give notice of absence; absence; abandonment.** (1) If the rental agreement requires the tenant to give actual notice to the landlord of an anticipated extended absence in excess of seven days as permitted by ORS 90.340 and the tenant willfully fails to do so, the landlord may recover actual damages from the tenant.

(2) During any absence of the tenant in excess of seven days, the landlord may enter the dwelling unit at times reasonably necessary.

(3) If the tenant abandons the dwelling unit, the landlord shall make reasonable efforts to rent it for a fair rental. If the landlord rents the dwelling unit for a term beginning before the expiration of the rental agreement, the rental agreement terminates as of the date of the new tenancy. If the landlord fails to use reasonable efforts to rent the dwelling unit at a fair rental or if the landlord accepts the abandonment as a surrender, the rental agreement is deemed to be terminated by the landlord as of the date the landlord knows or should know of the abandonment. If the tenancy is from month to month or week to week, the term of the rental agreement for this purpose is deemed to be a month or a week, as the case may be.

HADCO BOARD RESPONSE: Agrees and approves HADCO response.

# RAB Page 12

Copies of File Documents

<u>RAB</u>: Copies of entire file should be provided without cost when a hearing is involved. <u>HADCO</u>: Will revise ACOP so when a hearing is requested any documentation in the file that has not already been provided (update letters, lease agreements, lease modifications, tenant signed paperwork) will be provided at no cost to the resident. <u>HADCO BOARD RESPONSE</u>: Agrees and approves HADCO response.

Sec. XI Utilities Page 34

<u>RAB</u>: Change wording in failure to pay utilities is grounds for termination and eviction. <u>HADCO</u>: Agrees to change ACOP to read failure to pay utilities resulting in a shut off notice and utilities being put in the HA name is grounds for lease termination and eviction. <u>HADCO BOARD RESPONSE</u>: Agrees and approves HADCO response.

<u>RAB</u>: Residents should be allowed to choose which utility to pay. <u>HADCO</u>: Currently allows residents to choose and if necessary request up to two utility companies paid with allowance. HADCO BOARD RESPONSE: Agrees with HADCO response. No change in policy or action

HADCO BOARD RESPONSE: Agrees with HADCO response. No change in policy or action is required.

Sec. XII Flat Rents Page 35

<u>RAB</u>: Why can't resident choose to go on or off flat rent?

<u>HADCO</u>: HADCO agrees to change ACOP to read: Families who opt for the flat rent may request to have a reexamination and return to the income based method at any time for any of the following reasons; 1. Families income has decreased. 1. Families circumstances have changed increasing their expense for child care. 3. Other circumstances creating a hardship on the family such that the income method would be more financially feasible for the family. <u>HADCO BOARD RESPONSE</u>: Agrees and approves HADCO response.

Sec. XIII Definitions and Procedures to be used in determine income and rent Page 36

<u>RAB</u>: Funds HUD does not consider income should not be required to be reported. <u>HADCO</u>: Agrees to quote CFR on this topic.\*See attached. <u>HADCO BOARD RESPONSE</u>: Agrees and approves HADCO response.

# RAB Page 14

Anticipating Annual Income Page 40

<u>RAB:</u> Anticipate income for 12 months period not feasible. <u>HADCO</u>: This is the same topic discussed and addressed on RAB page 7. <u>HADCO BOARD RESPONSE</u>: Address on RAB page 7.

Adjusted Income Page 40

RAB: Anticipated income refunded.

<u>HADCO</u>: Residents with seasonal incomes are reviewed quarterly. It is the resident's responsibility to report decreases. HADCO would not issue a refund unless it is a administrative error. HADCO BOARD RESPONSE: Agrees with HADCO. No change in policy

<u>RAB</u>: Deductions submitted before annual recertifications are not given the full 12 months. <u>HADCO</u>: HADCO will change ACOP to read: when applying medical deductions based on anticipated expenses paid by the resident deductions will be calculated by remaining months until their next annual recertification.

HADCO BOARD RESPONSE: Agrees and approves HADCO response.

<u>RAB</u>: If flat rent is chosen will resident never pay more if income increases? <u>HADCO</u>: Correct. <u>HADCO BOARD RESPONSE</u>: Question only. No action required by Board.

#### RAB Page 15

IVX Attachments Grievance Procedures Page 1

This has already been addressed. HADCO agrees to change ACOP. HADCO BOARD RESPONSE: Addressed under terminations.

Sec III Informal settlement of a grievance 966.54 Page 2

<u>RAB</u>: RAB Suggests To Add: or received by certified mail. <u>HADCO</u>: Agrees to change ACOP to add: or received by certified mail. <u>HADCO BOARD RESPONSE</u>: Agrees and approves HADCO response.

#### **RAB Page 16**

<u>RAB</u>: Resident does not receive notice until after 10 day period <u>HADCO</u>: HADCO will change ACOP to read: Must contact manager with 10 days after the initial deadline. HADCO will then mail grievance packet giving resident 10 days to return. <u>HADCO BOARD RESPONSE</u>: Agrees and approves HADCO response.

<u>RAB</u>: Does HADCO have a Civil Rights Administrator <u>HADCO</u>: Yes. Public Housing Director. <u>HADCO BOARD RESPONSE</u>: Question. No response needed by Board. Sec. IV Formal Grievance Hearing Page 3

<u>RAB</u>: Change timeline from five to ten working days to request review of informal hearing. <u>HADCO</u>: Agrees to change ACOP from five to ten days to schedule a hearing. <u>HADCO BOARD RESPONSE</u>: Agrees and approves HADCO response.

# RAB Page 17

Sec V Selecting the Hearing Officer or Hearing Panel 966.5(b)(2) Page 3

<u>RAB</u>: States current language is incorrect for hearings officer. <u>HADCO</u>: Will review and change to wording in CFR. <u>HADCO BOARD RESPONSE</u>: Agrees and approves HADOC response.

Page 3 <u>RAB</u>: Escrow deposit required for hearing. <u>HADCO</u>: Directly from ACOP Guidebook. <u>HADCO BOARD RESPONSE</u>: Will continue to follow Guidebook. No change in current policy.

Sec VI Escrow deposit required for a hearing

<u>RAB:</u> Seems Confusing. <u>HADCO:</u> Directly from ACOP Guidebook. <u>HADCO BOARD RESPONSE</u>: Will continue to follow Guidebook. No change in current policy.

Sec VII scheduling hearing

<u>RAB</u>: requests to add certified mail. <u>HADCO</u>: Agrees to change ACOP to add sent by certified mail. <u>HADCO BOARD RESPONSE</u>: Agrees and approves HADCO response.

# RAB Page 18

Sec VIII Procedures governing the hearing Page 4

<u>RAB</u>: Does not agree charging for residents copies for hearing. <u>HADCO</u>: This has been addressed. <u>HADCO BOARD RESPONSE</u>: Addressed under grievances. Sec X Decision of the hearing panel or officer 966.57 Page 5 & 6

<u>RAB</u>: Previous Executive Director set terms that were not official policies. <u>HADCO</u>: HADCO will only follow approved polices. HADCO will not apply unapproved policies.

HADCO Response to RAB Comments: Hearings Officer

<u>RAB</u>: Start process to move forward with reviewing hiring of hearings officer. <u>HADCO</u>: Agrees to start process <u>HADCO BOARD RESPONSE</u>: Agrees to review hiring of hearings officer.

<u>RAB</u>: Review and update job description. <u>HADCO</u>: Agrees to update job description. <u>HADCO BOARD RESPONSE</u>: Agrees to review job description.

<u>RAB</u>: Move supervision of hearings officer from executive director or HADCO board. <u>HADCO</u>: Agrees to consult HADCO board for direction in this decision. <u>HADCO BOARD RESPONSE</u>: Will leave current supervision of hearings office with executive director. No change will be made.

<u>RAB</u>: Independent contractor, hearings officer should have not have contact with staff regarding any resident or participate.

<u>HADCO</u>: Agrees to review industry standard, CFR and current policy for direction in this decision.

HADCO BOARD RESPONSE: No change will be made.

<u>RAB</u>: Executive Director reviews the decision of hearings officer and can overturn or modify decisions that are favorable to the resident.

<u>HADCO</u>: Agrees to review industry standard, CFR and current policy for direction in this decision.

HADCO BOARD RESPONSE: No change will be made.

<u>RAB</u>: Give preference to a lawyer that demonstrates a working knowledge of PHA laws. <u>HADCO</u>: Agrees to select the most qualified candidate that demonstrates working knowledge of PHA law.

HADCO BOARD RESPONSE: Will select most qualified candidate.

<u>RAB</u>: HADCO board should weigh heavily in final decision as to who is contracted for this position.

<u>HADCO</u>: Agrees to consult HADCO board for direction in this decision. <u>HADCO BOARD RESPONSE</u>: Agrees to hear comments from RAB.

<u>RAB</u>: Position goes out for RFP annually.

<u>HADCO</u>: Agrees to consult HADCO board for direction in this decision. <u>HADCO BOARD RESPONSE</u>: Does not agree. No change will be made.

<u>RAB:</u>HADCO to provide copies without charge.

<u>HADCO</u>: Agrees to provide copies without charge of correspondence in file that has not already been provided to the resident or participant by HADCO.

RAB: Only evidence considered at hearing is evidence that is perpetuate to case and given to both parties.

HADCO: Agrees. HADCO currently only considers evidence regarding the noncompliance that resulted in requiring a hearing. At anytime a resident or participate may review their file and obtain information in their file.

# HADCO RESPONSE TO RAB COMMENTS: Lease

Page 1 Part 1 <u>RAB</u>: ACOP doesn't reflect the minimum rent. <u>HADCO</u>: Added to the ACOP <u>HADCO BOARD RESPONSE</u>: Agrees and approves HADCO response.

Part III (a)

<u>RAB</u>: Define negligent and allow tenant to make or allow someone to make the repairs. <u>HADCO</u>: Agrees to research and more clearly define negligent. Disagrees to allow the tenant to make own repairs.

HADCO BOARD RESPONSE: Agrees and approves HADCO's response.

#### (c)

<u>RAB:</u> No charge for first installation of installed air conditioner and when installed use material that is not see through.

<u>HADCO</u>: Agrees to not charge for first installation of installed air conditioner and use smoked plexi-glass. \* Installation charges for tenant-supplied air conditioners. The first install of a tenant supplied air conditioner there will be no charge. After the first install all other installs will be charged according to the maintenance schedule.

HADCO BOARD RESPONSE: Agrees and approves HADCO's response.

#### Page 4 IV Payment location

<u>RAB</u>: By mail or hand delivery for rent. Remove if returned all future payments by cashiers check or money order and define the charge for returned check.

<u>HADCO:</u> Agreed to accept hand delivery. Agree to remove returned check language. Defined bank incurred charge for a returned check.

\*Rent and other charges can be paid by mail or hand delivered the Main Office located at 902 W. Stanton, Roseburg, OR 97471. HADCO will **not** accept cash. Tenants who have submitted a check that is returned for insufficient funds shall be required to pay the bank incurred fees.

Page 2 part V <u>RAB</u>: Set new requirements for security deposit. <u>HADCO</u>: Agrees and address the change in the ACOP. HADCO BOARD RESPONSE: Agrees and approves HADCO response.

#### (b)

<u>RAB</u>: Funigation deposit is paid and not done, the fee should be returned to resident. <u>HADCO</u>: No funigation fee is collected. Resident is charged actual cost at move out. <u>HADCO BOARD RESPONSE</u>: Agrees and approves HADCO's response.

Page 5 VI (C)

RAB: Restricted use of space heaters.

<u>HADCO</u>: Agrees to approve standard space heaters with prior written approval. \* Space heaters will only be permitted with prior written approval to insure that the heater is safe. <u>HADCO BOARD RESPONSE</u>: Agrees and approves HADCO's response.

Page 5 VII

RAB: Notify of guest after twenty four hours.

HADCO: Agrees and addressed in the ACOP; changed in lease.

\*(2)] This provision permits reasonable accommodation of Tenant's guests or visitors for a period not exceeding fourteen (14) days each year. Permission may be granted, upon written request to the Manager, for an extension of this provision. [966.4 (d)(1)]. <u>HADCO BOARD RESPONSE</u>: Agrees and approves HADCO's response.

Page 3 section VIII

<u>RAB</u>: Change decrease day to the  $20^{\text{th.}}$ 

<u>HADCO</u>: Agrees. \*(4) All changes in family composition must be reported to the Housing Manager within 10 days of the occurrence. Failure to report within the 10 days may result in a retroactive rent charge. [966.4 (c) (2)] Decreases in rent must be reported by the  $20^{\text{th}}$  of the month in order for the rent to be reduced for the upcoming month. <u>HADCO BOARD RESPONSE</u>: Agrees and approves HADCO's response.

4 (d) page 7

<u>RAB</u>: Notice tenant with more than 7 days.

<u>HADCO</u>: Addressed in ACOP reworded in lease. \* In the case of involuntary transfers, HADCO will provide a 30 day notice of the intent to transfer. Tenant shall be required to move into the dwelling unit made available by HADCO. Tenant shall be given 7 days time in which to move from the current occupied unit to the unit of transfer. If Tenant refuses to move, HADCO may terminate the Lease. [966.4 (c)(3)]

HADCO BOARD RESPONSE: Agrees and approves HADCO's response.

Section VIII page 8

<u>RAB</u>: Add preventative maintenance schedule.

HADCO: Agrees to add preventative maintenance schedule.

\*(i) Perform routine preventative maintenance not limited to the following items:

- (1) Clean and replace furnace filters
- (2) Cover foundation air vents
- (3) Clean out gutter and downspouts
- (4) Clean out storm drains
- (5) Power wash units
- (6) Clean out dryer vents

Page 4 Page 10 (m) <u>RAB:</u> Remove notifies HADCO of guest. Remove the word prompt. <u>HADCO</u>: HADCO agrees remove guest and the word prompt. <u>HADCO BOARD RESPONSE</u>: Agrees and approves HADCO's response.

Page 11 Section X <u>RAB:</u> Questions about the internal process <u>HADCO</u>: Discussed the questions. <u>HADCO BOARD RESPONSE</u>: Agrees and approves HADCO response. Page 5

Section XII page 12

<u>RAB</u>: during an inspection if repairs are noted to be done no further action is required <u>HADCO</u>: Didn't find this language in the lease.

HADCO BOARD RESPONSE: Approves HADCO response.

Section XIV page 13

<u>RAB</u>: Change 1.2. reference the lease in another section.5. not to count against tenant if delay is not the tenants fault. 8. change "offensive" 9. remove unattended cooking.

<u>HADCO</u>: Agrees to 1.,2,5. 8 are at an impasse. Agrees to change to illegal 9. Agrees to remove unattended cooking. \* The failure to pay rent or other payments when due; as applicable to section III (d) of this lease. [966.4 (l)(2)]

\* Illegal weapons or illegal drugs seized in a HADCO unit by a law enforcement officer; [966.4 (l)(2)]

\* Any fire on HADCO premises caused by carelessness. [966.4 (l)(2)] HADCO BOARD RESPONSE: Agrees and approves HADCO's response.

Section XIV page 14 ( c) 5. <u>RAB</u>: Question if evicted how much notice <u>HADCO</u>: Responded 30 days <u>HADCO BOARD RESPONSE</u>: No response needed. PAGE 6 Section XV page 15 & 16 ( c) 3. 7. <u>RAB:</u> Remove heavy pots and pans. Require a covered trash can. <u>HADCO</u>: Agrees remove heavy pots and reword covered trash can. <u>HADCO BOARD RESPONSE</u>: Agrees and approves HADCO response.

Last comment no section

<u>RAB</u>: Add to the lease board has to approve policy.

<u>HADCO</u>: Agrees added language to reflect this on page 8 bottom finishing at the top of page 9 of the lease.

\*HADCO is responsible for complying with all changes in HUD regulation pertaining to these programs. If such changes conflict with this lease, HUD regulations will have precedence. HADCO will revise this lease as needed to comply with changes, in HUD regulations. All significant changes or amendments that can impact and or cause financial hardship to the resident or HADCO must be made available to the public for a 45 day comment period. Any changes must be approved by the Board of Commissioner of the agency, the pertinent sections included in the Agency Plan, and a copy provided to HUD

# HADCO RESPONSE TO RAB COMMENTS: Service animal policy

<u>RAB</u>: Created a service animal policy.

HADCO: Agrees made minor grammar changes to the RAB created policy.

HADCO BOARD RESPONSE: Approves proposed Service Animal Policy with grammar changes.

# HADCO RESPONSE TO RAB COMMENTS: Reasonable Accommodation Policy

#### PAGE 1

Page 5 1.

<u>RAB</u>: Not a requirement to complete HADCO form for certification of disability. HADCO: Agrees can use but not required.

\* Notification to Applicants/Residents Regarding Reasonable Accommodation Requests Information on the availability of HADCO's reasonable accommodation procedure will be posted in the HADCO business offices and will be provided at application, intake, notice of rejection, notice of lease violation, and notice of lease termination. The applicant or resident may make a request for reasonable accommodation in any manner, which is convenient to him or her. Several forms and letters have been developed to conveniently allow an applicant or resident the opportunity to request a reasonable accommodation. (These forms are listed in the appendix.) If an applicant/resident cannot use a form, HADCO will still respond to the request for a reasonable accommodation and assist the applicant/resident in acquiring the information needed to make a decision on his or her request.

HADCO BOARD RESPONSE: Agrees and approves HADCO response.

Page 6 2.

<u>RAB:</u> Was listed as 2 however after review it was 3 that was asked to be removed. <u>HADCO:</u> Agreed and removed.
PAGE 2

Page 7

<u>RAB</u>: Not a requirement to complete forms.

<u>HADCO</u>: Agreed not required but suggested. \* The application may be mailed to the applicant or picked up at the HADCO office. The application may make the request easier, but is not required

HADCO BOARD RESPONSE: Agrees and approves response.

Page 7 intake <u>RAB</u>: Remove bottom of page 7 and top of page 8. <u>HADCO</u>: Agrees remove. <u>HADCO BOARD RESPONSE</u>: Agrees and approves response.

Page 8 <u>RAB:</u> Remove 3<sup>rd</sup> paragraph from the bottom of page 8. <u>HADCO</u>: Agrees to remove. <u>HADCO BOARD RESPONSE</u>: Agrees and approves response.

Page 9

<u>RAB</u>: Remove #4 bullet in regards to a service animal being trained. <u>HADCO</u>: Agrees to remove. HADCO BOARD RESPONSE: Agrees and approves HADCO response.

Page 7,8,9

<u>RAB:</u> Change pet policy to service animal policy. Add resident may have a companion animal and pet.

<u>HADCO</u>: Agrees to change to service animal policy. Agrees to add resident may have a companion animal and pet.

\* Resident may have a companion animal and an authorized pet

HADCO BOARD RESPONSE: Agrees and approves HADCO response.

PAGE 3

Appendix certification of disability page 2

<u>RAB</u>: Remove top header and add to the bottom to be filled out by the doctor it is my belief that the following accommodation would best accommodate the above mentioned disability.

<u>HADCO</u>: Agrees to remove and change form. See attached. HADCO BOARD RESPONSE: Agrees and approves HADCO response.

Appendix page 2 <u>RAB:</u> Remove bullet #4. <u>HADCO</u>: Agreed remove bullet #4. See attached. HADCO BOARD RESPONSE: Agrees and approves HADCO response.

Appendix page 1 Section 5.

<u>RAB</u>: Change release of information to certification of disability. <u>HADCO</u>: Agrees to change to certification of disability. See attached. <u>HADCO BOARD REPONSE</u>: Agrees and approves HADCO response.

# HADCO RESPONSE TO RAB COMMENTS: Transfer Policy

## Page 1 Bullet #1

**RAB:** Transfer list ascending from least number of years housed to greatest.

**HADCO:** Disagrees with this. HADCO would meet with the RAB to discuss a transfer policy.

HADCO BOARD RESPONSE: Agrees with HADCO. Will place on agenda to review and update this calendar year.

# Bullet #2

**RAB:** 15 year residents would not be required to transfer at all.

**HADCO:** Disagrees with this. HADCO would be willing to meet with the RAB to discuss a transfer policy.

HADCO BOARD RESPONSE: Agrees with HADCO. Will place on agenda to review and update this calendar year.

# Bullet #3

**RAB:** The ratio of transfers is 4:1. Four families pulled and housed from the waitlist to one resident transfer.

**HADCO:** Agrees that this would be good policy. HADCO would meet with RAB to discuss putting this in a transfer policy.

HADCO BOARD RESPONSE: Agrees with HADCO. Will place on agenda to review and update this calander year.

## Bullet #4

**RAB:** Notify each family has to their placement on a over housed transfer list. **HADCO:** Disagrees with this. HADCO would be willing to meet with the RAB to discuss a transfer policy.

HADCO BOARD RESPONSE: Agrees with HADCO. Will place on agenda to review and update this calendar year.

# Bullet #5

**RAB:** notice the resident 30 days when the unit is ready for occupancy. In the same housing project as the family current resides, with exception based on request. **HADCO:** Disagrees with this. HADCO would be willing to meet with the RAB to discuss a transfer policy.

HADCO BOARD RESPONSE: Agrees with HADCO. Will place on agenda to review and update this calendar year.

# PAGE 2

### Bullet #6

**RAB:** HADCO will consider reasonable request for help with the cost incurred as a result of the move.

**HADCO:** Agrees that this would be good policy. HADCO would meet with RAB to discuss putting this in a transfer policy.

HADCO BOARD RESPONSE: Will place on agenda to review and update this calendar year.

## **COMMENTS:**

**RAB:** longer term residents thinking of their units as their homes. Downsizing them would create hardship. If the newer residents transfer first then they will not have refilled the position and the long term residents will no longer be on the transfer list.

**HADCO:** Disagrees with this. HADCO would be willing to meet with the RAB to discuss a transfer policy.

HADCO BOARD RESPONSE: Will place on agenda to review and update this calendar year.

### HADCO Response to RAB Comments: Section 8

1. <u>**RAB**</u>: Opposed to 10 day reporting requirement.

**<u>HADCO</u>**: Is at an impasse with this topic. This change could create financial hardship to Section 8 budget.

**HADCO BOARD RESPONSE**: Will not take action to make any changes. Current policy remains unchanged.

2. <u>**RAB**</u>: Opposed to any policy requiring participants to report monies received from sources that are exempt from consideration when calculating participant TTP.

HADCO: Agrees. HADCO will change Section 8 Administrative Plan. See Attached.

**HADCO BOARD RESPONSE**: Agrees and approves HADCO to change S8 Admin Plan with attached change.

3. <u>**RAB**</u>: Opposed to providing HADCO 6 months bank statements or six month average.

**HADCO**: Following HUD Section 8 Guidebook, HADCO agrees to change Section 8 Administrative Plan to read: Acceptable methods of checking account verification include: 1. Copies of bank statements that are no older than 60 days reviewing current balance. 2. PHA verification forms completed by financial institution.

**HADCO BOARD RESPONSE**: Agrees and approves HADCO to change S8 Administrative Plan to follow Section 8 Guidebook.

4. <u>**RAB**</u>: People who claim truly zero income, not exempt income should be required to fill out survival statement for at least 6 months after they report such a change.

**<u>HADCO</u>**: Is at an impasse with this topic. HUD requires Housing Authorities to implement procedures to ensure compliance with verification of family income, however HADCO would follow proposed change RAB Comment #2 if approved by the board.

**HADCO BOARD RESPONSE**: Will not take action to make any changes to current policy. Does agree and approves HADCO to add to Section 8 Administrative Plan definition of CFR annual income .

5. <u>**RAB**</u>: Participants must report to HADCO if they are going to be away from their home for more than 14 days. It is hard to imagine why HADCO would even need to know this information as they are not the landlord.

**HADCO**: The voucher issued to the participate does state under Obligations of the family (B)(4) Promptly notify the PHA in writing when the family is away from the unit for an extended period of time in accordance with PHA policies. Since HADCO does need a policy regarding this subject HADCO suggests revising the current policy to 30 days.

**HADCO BOARD RESPONSE**: Will not take action to make any changes to current policy.

Waiting list type: (select one)       a         Section 8 tenant-based assistance       Public Housing         Combined Section 8 and Public Housing       Combined Section 8 and Public Housing         Combined Section 8 and Public Housing       families         Waiting list total       495         Extremely low income       429         <30% AMI       87%         Very low income       60         (-30% but <50% AMI)       1%         Low income       6         (-30% but <50% AMI)         Families with children       136         Families with children       136         Families with bisabilities       167         Families with Disabilities       167         Race/ethnicity - White       421         Race/ethnicity - Black       4         Ind.       1%         Race/ethnicity - Hispanic       62         Characteristics by Bedroom       371         Size (Public Housing Only)       1         IBR (closed)       371       75%         2 BR (closed)       104       21%         3 BR       19       3%         4 BR       1       .2%         5 F BR       1       .2%	HADCO Housing Needs of Families on the PHA's Waiting Lists 2012 Fiscal Year										
Section 8 tenant-based assistance         Public Housing         Combined Section 8 and Public Housing         Public Housing Site-Based or sub-jurisdictional waiting list (optional) If used, identify which development/sub jurisdiction         Waiting list total       495         Extremely low income       429         <=30% AMI											
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□       Public Housing Site-Based or sub-jurisdictional waiting list (optional) If used, identify which development/sub jurisdiction:       Annual Turnover         Waiting list total       495       Annual Turnover         Waiting list total       495       Annual Turnover         Extremely low income       429       87%         <=30% AMI											
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Elderly families       130       200         Families with Disabilities       167       13%         Race/ethnicity - White       421       85%         Race/ethnicity - Black       4       1%         Race/ethnicity - Amer. /       8       1%         Ind.       62       13%         Race/ethnicity - Hispanic       62       13%         Characteristics by Bedroom       62       13%         Size (Public Housing Only)       62       13%         IBR (closed)       371       75%         2 BR (closed)       104       21%         3 BR       19       3%         4 BR       1       .2%         5 BR           Is the waiting list closed (select one)? □ No ⊠ Yes One and Two bedrooms       If yes:         How long has it been closed (# of months)? 19       Does the PHA expect to reopen the list in the PHA Plan year? ⊠ No □ Yes         Does the PHA permit specific categories of families onto the waiting list, even if generally closed?											
Families with Disabilities       167       34%         Race/ethnicity - White       421       85%         Race/ethnicity - Black       4       1%         Race/ethnicity - Amer. /       8       1%         Ind.       8       1%         Race/ethnicity - Hispanic       62       13%         Characteristics by Bedroom       62       13%         Size (Public Housing Only)       104       21%         JBR (closed)       371       75%         2 BR (closed)       104       21%         3 BR       19       3%         4 BR       1       .2%         5 BR       5       5         Is the waiting list closed (select one)? □ No ⊠ Yes One and Two bedrooms       If yes:         How long has it been closed (# of months)? 19       Does the PHA expect to reopen the list in the PHA Plan year? ⊠ No □ Yes         Does the PHA permit specific categories of families onto the waiting list, even if generally closed?		136	28%								
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Race/ethnicity – Hispanic       62       13%         Characteristics by Bedroom	2	8	1%								
Characteristics by Bedroom Size (Public Housing Only)       1         1BR (closed)       371       75%         2 BR (closed)       104       21%         3 BR       19       3%         4 BR       1       .2%         5 BR       5       5         5+ BR       1       .2%         1 s the waiting list closed (select one)? □ No ⊠ Yes One and Two bedrooms       1         If yes:       How long has it been closed (# of months)? 19       19         Does the PHA expect to reopen the list in the PHA Plan year? ⊠ No □ Yes       Yes Does the PHA permit specific categories of families onto the waiting list, even if generally closed?											
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3 BR       19       3%         4 BR       1       .2%         5 BR       1       .2%         5 HR       1       .2%         5 BR       1       .2%         5 starting list closed (select one)?       No ⊠ Yes One and Two bedrooms         If yes:       How long has it been closed (# of months)? 19       Does the PHA expect to reopen the list in the PHA Plan year? ⊠ No □ Yes         Does the PHA permit specific categories of families onto the waiting list, even if generally closed?	· /										
4 BR       1       .2%         5 BR	. ,										
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		specific categories of f	annues onto the waiting list	, even il generally closed?							

HADCO Housing Needs of Families on the Section 8 Waiting Lists 2011 Fiscal Year							
Waiting list type: (select one) Section 8 tenant-based as Public Housing Combined Section 8 and Public Housing Site-Base If used, identify which	sistance Public Housing d or sub-jurisdictiona	l waiting list (optional)					
	# of families	% of total families	Annual Turnover				
Waiting list total	51						
Extremely low income <=30% AMI	42	82%					
Very low income (>30% but <=50% AMI)	9	18%					
Low income (>50% but <80% AMI)	0	0%					
Families with children	41	80%					
Elderly families	10	19%					
Families with Disabilities	17	33%					
Race/ethnicity - White	51	100%					
Race/ethnicity - Black	0	0%					
Race/ethnicity – Amer. / Ind.	0	0%					
Race/ethnicity – Hispanic	0	0%					
Characteristics by Bedroom Size (Public Housing Only) 1BR							
2 BR							
3 BR							
4 BR							
5 BR 5+ BR							
Is the waiting list closed (select If yes: How long has it been c Does the PHA expect t	losed (# of months)? o reopen the list in the	es One and Two bedrooms PHA Plan year?  No amilies onto the waiting list					

# Certification by State or Local Official of PHA Plans Consistency with the Consolidated Plan

I, \_\_\_\_\_\_ the \_\_\_\_\_\_ certify that the Five Year and Annual PHA Plan of the \_\_\_\_\_\_\_ is consistent with the Consolidated Plan of \_\_\_\_\_\_ prepared pursuant to 24 CFR Part 91.

Signed / Dated by Appropriate State or Local Official

Attachment 10.0 (b)

# Definition of Substantial Deviation /Modification and Significant Amendment

It is the intent of the Housing Authority of Douglas County PHA Plan to adhere to the mission, goals and objective outlined in the Five-year Annual Plan. The plan, however, will be modified and re-submitted to HUD should a substantial deviation from program goals and objectives occur.

The Housing Authority of Douglas County defines substantial deviations as:

- Any change in the planned or actual use of federal funds for activities that would prohibit or redirect the Housing Authority's strategic goals of increasing availability of safe, decent and affordable housing for the citizens of Douglas County,Oregon.
- A need to respond immediately to an act beyond the control of the Housing Authority, such as floods, earthquakes or other unforeseen significant event.
- A mandate from the governing board of the Housing Authority, to modify, revise, or delete the long-range goals and objectives of the program.

A substantial deviation does not include any changes in HUD rules and regulations, which require or prohibit changes to activities listed herein.

A Significant Amendment or Modification to the Annual Plan and Five- Year Plan is defined as:

- Changes of a significant nature to the rent or admissions policies, or the organization of the waiting list not required by federal regulatory requirements as to effect a change in the Section 8 Administrative Plan or the Public Housing Admissions and Continued Occupancy Policy (ACOP).
- A change in the planned or use of replacement reserve funds under the Capital Fund Program.

Safety and Crime Prevention

HADCO recognizes the need to have a plan for safety and crime prevention to ensure the safety of the public housing residents. Currently, the public housing neighborhoods are not experiencing excessive crime or drug activities. The neighborhoods are currently monitored by the property managers, neighbors, residents and maintenance staff.

When needed measures arise to ensure the safety of public housing residents HADCO will request local law enforcement to engage an officer to drive through the public housing neighborhood. This practice will deter crime in the area.

The lease agreement provides clauses to address criminal activity on the premises. This would also included guests of the tenants. When there are complaints or concerns the police will be contacted to conduct a "knock and talk" to the household.

HADCO has properties in the rural areas of Douglas County. The jurisdiction of these areas would be the local or city police and the Douglas County Sheriff's office.

Applicant Name

The Housing Au	thority of	Douglas	County	OREG	ത	
				<u> </u>	<u> </u>	
Program/Activity Receiving Federal Grant Funding	J	<u> </u>			/	

# Public Housing OR 003

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 Federalagency 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 drugfree 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.)

902 W. Stanton Roseburg, OR 97471

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)

× 1741)
WUR,

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

pplicant Name
The Housing Authority of Drugas County, Oregon
Program/Activity Receiving Federal Grant Funding
Public Housing OR003
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 baid, by or on behalf of the undersigned, to any person for nfluencing or attempting to influence an officer or employee of n agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connecion with the awarding of any Federal contract, the making of any Federal grant, the making of any Federal loan, the entering into if any cooperative agreement, and the extension, continuation, enewal, amendment, or modification of any Federal contract, irant, loan, or cooperative agreement.

(2) If any funds other than Federal appropriated funds have een paid or will be paid to any person for influencing or ttempting to influence an officer or employee of an agency, a Aember of Congress, an officer or employee of Congress, or an mployee of a Member of Congress in connection with this 'ederal contract, grant, loan, or cooperative agreement, the indersigned shall complete and submit Standard Form-LLL, Disclosure Form to Report Lobbying, in accordance with its nstructions. (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 sub recipients 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.

hereby certify that all the information stated herein, as well as any information provided in the accompaniment herewith, is true and accurate. **Varning:** HUD will prosecute false claims and statements. Conviction may result in criminal and/or civil penalties. (18 U.S.C. 1001, 1010, 012; 31 U.S.C. 3729, 3802)

Name of Authorized Official	Title
Jamie Ambrosuni	Interim Executive Director
Signature	Date (mm/dd/yyyy)
Jame Anbrosine	2-10-12

DISCLOSURE OF LO Complete this form to disclose lobbying (See reverse for pul	g activities pursuant	to 31 U.S.C. 1352	Approved by OMB 0348-0046
1. Type of Federal Action:       2. Status of Federal         B       a. contract         b. grant       b. grant         c. cooperative agreement       c. post-         d. loan       e. loan guarantee         f. loan insurance       f. loan insurance	ffer/application I award	3. Report Type: a. initial filing b. material change For Material Change Ou year quan date of last report	rter
4. Name and Address of Reporting Entity:	and Address of	itity in No. 4 is a Subawardee Prime:	e, Enter Name
Thefterising Authority of Dougras Co. Or 902 W Stantin Roxburg OK 97470 Congressional District, <i>if known</i> : 4c 6. Federal Department/Agency:	Congressional	District, <i>if known</i> : m Name/Description:	
Housing Elliban Development	CFDA Number,	an Submissim if applicable:	
8. Federal Action Number, if known:	9. Award Amount \$	t, if known :	
10. a. Name and Address of Lobbying Registrant ( if individual, last name, first name, MI):	b. Individuals Per different from N (last name, firs	•	address if
11. 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.	Print Name: Title:	McAnbrosini) amie-Ambrosuni in Executive Direct 4-673-6548 Di	
Federal Use Only:			r Local Reproduction rm LLL (Rev. 7-97)

# Certification by State or Local Official of PHA Plans Consistency with the Consolidated Plan

I, Margaret S. Van Vliet, the Director, Oregon Housing and Community Services, certify that the 2012 Annual PHA Plan of the Housing Authority of Douglas County is consistent with the Consolidated Plan of Oregon 2011-2015 prepared pursuant to 24 CFR Part 91.

Oregon Housing & Community Services

2.12 Date

Part I:	Summary					Explices 4/50/201
	ame: Housing Authority of County, Oregon	Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Gra Date of CFFP:	OR16P00350112 nt No:			FFY of Grant: 2012 FFY of Grant Approval: 2012
Type of Orig	Grant ginal Annual Statement ormance and Evaluation Repo	Reserve for Disasters/Emergen	cies	Revised Annual Staten Final Performance and		
Line	Summary by Developmen			Total Estimated Cost		Fotal Actual Cost 1
1	Total non-CFP Funds		Original	Revised <sup>2</sup>	Obligated	Expended
2	1406 Operations (may not e	exceed 20% of line 21) <sup>3</sup>	\$74223			
3	1408 Management Improve	ments	· · · · · · · · · · · · · · · · · · ·			
4	1410 Administration (may	not exceed 10% of line 21)	\$15,000			
5	1411 Audit		\$1,500			
6	1415 Liquidated Damages					
7	1430 Fees and Costs		\$5,000			
8	1440 Site Acquisition					
9	1450 Site Improvement		\$5,000			
10	1460 Dwelling Structures		\$92,000			
11	1465.1 Dwelling Equipmen	t-Nonexpendable				
12	1470 Non-dwelling Structu	res				
13	1475 Non-dwelling Equipm	lent	\$0			
14	1485 Demolition					
15	1492 Moving to Work Dem	onstration				
16	1495.1 Relocation Costs	and a first and a filter state of the stat	\$4,000			
17	1499 Development Activiti	es <sup>4</sup>				

<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 I: S	ummary					
PHA Nam Housing A of Douglas Oregon	uthority s County,	Grant Type and Number Capital Fund Program Grant No: OR16P00350112 Replacement Housing Factor Grant No: Date of CFFP:		FFY of G FFY of G	rant:2012 rant Approval: 2012	
Type of G	rant inal Annual S	Statement Reserve for Disasters/Emer	gencies	🗌 Revised Annu	al Statement (revision no:	)
		Evaluation Report for Period Ending:		🗌 Final Perform	nance and Evaluation Report	
Line	Summary	by Development Account	Total Es	timated Cost	Total Ac	tual Cost <sup>1</sup>
	1	······································	Original	Revised <sup>2</sup>	Obligated	Expended
18a	1501 Colla	teralization or Debt Service paid by the PHA			,	
18ba	9000 Colla	teralization or Debt Service paid Via System of Direct Payment				
19	1502 Conti	ingency (may not exceed 8% of line 20)	\$10,000			
20	Amount of	Annual Grant:: (sum of lines 2 - 19)	\$206723			· · ·
21	Amount of	fine 20 Related to LBP Activities				
22	Amount of	line 20 Related to Section 504 Activities				
23	Amount of	Fline 20 Related to Security - Soft Costs				
24	Amount of	Tine 20 Related to Security - Hard Costs				
25	Amount of	Fline 20 Related to Energy Conservation Measures				
Signatu	re of Exect	utive Director + I AUDISUU	ate 12 Signa	ture of Public Housing Di	rector	Date

<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 II: Supporting Pages									
PHA Name: Housing Authority of Douglas County, Oregon Capit CFFI		Capital F CFFP (Y	ype and Number Fund Program Grant I Yes/ No): nent Housing Factor		0112	Federal	Federal FFY of Grant: 2012		
Development Number Name/PHA-Wide Activities	General Description of Major Categories	Work	Development Account No.	Quantity	Total Estin	nated Cost	Total Actual	Total Actual Cost	
Activities					Original	Revised <sup>1</sup>	Funds Obligated <sup>2</sup>	Funds Expended <sup>2</sup>	
HA WIDE	OPERATIONS		1406		\$74,223				
	FEES AND COSTS		1430		\$5,000				
	ADMINISTRATION		1410		\$15,000				
	AUDIT		1411		\$1500				
<u></u>	CONTINGENCY		1502		\$10,000				
de contra de la cont	RELOCATION COSTS		1495.1		4,000				
	SUBTOTAL				\$109723				
OR003000001ROSEBURG	REPLACE WATERLINES IN	UNITS	1460	6	12,000				
	REPLACE HEATERS		1460	4	10,000				
	REPLACE SIDING		1460	6	\$30,000				
	UPGRADE ELECTRICAL BO	XES	1460	6	\$15,000				
	REPAIR/REPLACE FENCE		1450	1	\$5000				
· · · · · · · · · · · · · · · · · · ·								···	
	SUBTOTAL				\$72,000				
								1	

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

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

Part II: Supporting Page	s					Federal	FFV of Cranty 2	017		
PHA Name: Housing Authority of Douglas County, Oregon		Capital I CFFP (Y	Grant Type and Number Capital Fund Program Grant No: OR16P00350112 CFFP (Yes/ No): Replacement Housing Factor Grant No:				Federal FFY of Grant: 2012			
Development Number Name/PHA-Wide Activities	General Description of Major Categories	Work	Development Account No.	Quantity	Total Estin	nated Cost	Total Actual	Cost	Status of Work	
					Original	Revised <sup>1</sup>	Funds Obligated <sup>2</sup>	Funds Expended <sup>2</sup>		
OR003000004 OAKLAND	REPLACE HEATERS		1460	3	\$5,000					
	SUBTOTAL				\$5,000		-			
OR003000006 WINSTON	REPLACE HEATERS		1460	3	\$10,000					
	SUBTOTAL				\$10,000					
OR003002007 REEDSPORT	REPLACE ROOF VENTS		1460	13	\$10,000					
	SUBTOTAL				\$10,000					
		·····								
								-		
TOTAL					\$206723					

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

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

# LOW RENT PUBLIC HOUSING PROGRAM NEEDS ASSESSMENT LIST

2012 Annual Plan Submission

#### **Roseburg:** 1. Foundation repair -1952 Bertha Ave \$15,000 2. Electronic Doors HADCO Administrative Office \$10,000 3. Electronic Doors Myers Center \$8,000 4. Replace siding on dwelling units \$300,000 5. Replace Lawn Mower(s) \$10,000 6. Replace Flooring (4 units per year at \$3000/unit \$12,000 7. Security addition lighting and upgrade porch lighting \$9,600 8. Repairfence between Freemont Junior High and Stanton St. \$2500 9. Repair north fence between Bertha and Church \$2500 10.Replace Heaters (46 units) \$35,640 11.Replace Heaters (14 units) \$110,600 \$150,000 12.Replace sewer lines 13.Upgrade and relocate electrical meter boxes from ext. to int. \$150.000 14. Replace and relocate water line from under the foundation to \$120,000 up through the walls. 15.Install patio covers \$12,000 16.Install clothes lines \$12,000 TOTAL \$935,840 **Reedsport** 1. Install storage sheds in 3 and 4 bedroom units \$200,000 \$3,500 2. Ceiling light addition in 2 units on Elm St. 3. Replace kitchen cabinets, counters and range hoods in elderly \$140,000 units 4. Parking addition on Elm Street \$10,300 5. Replace heaters in the last nine units \$18,000 6. Replace 8 light posts in elderly section \$2000 7. Replace metal exterior doors on 6 units un elderly (6 doors) \$3600 8. Replace washer drains in 17 family units \$13,600 9. Remove pedestal sinks and replace with small cabinet \$2000 and wall sink in 10 family units 10.Paint exterior of 7 elderly buildings (28 units) \$17000 11.Paint exterior of 5 family buildings (10 units) \$13,000 12.Replace sliding closet doors with bi fold doors in 10 units \$1500

13.Replace roof vents on 11 one bdrm elderly units and 2 2bd elderly units. 71 total vents for elderly. Replace 40 vents in funits. Grand total of 111 vents	
14.Replace gutters and facial boards on 4 family buildings	\$7,000
TOTAL	\$441,500
<u>Oakland</u>	<b>.</b>
1. Install clotheslines	\$1,600
2. Replace heaters in 3 units	\$5,000
3. Add Security lighting	\$8,000
4. Upgrade closet doors to standard size	\$6,000
TOTAL	\$20,600
Riddle	
1. Clotheslines	\$1,600
2. Update closet doors to standard size	\$6,000
3. Replace porch lighting (7 units)	\$1,500
4. Replace siding (8 units)	\$45,000
5. Replace heaters (3 units)	\$5,000
6. Replace flooring (8 units)	\$18,000
7. Security Lighting Addition	\$4,000
TOTAL	\$81,100
Winston	
1. Patio Covers	\$2,800
2. Clotheslines	\$2,800
3. Replace heaters in 15 units	\$118,500
4. Replace flooring	\$45,000
5. Replace fencing	\$40,000
TOTAL	\$209,100
<u>Yoncalla</u>	
1. Patio Covers	\$2,800
2. Clotheslines	\$2,800
3. Replace flooring in family units only	\$9,000
4. Replace Roofs	\$30,000
2	

5. Replace kitchen cabinets in elderly units only (8 units)	\$8,000
TOTAL	\$52,600
GRAND TOTAL	\$1,740,740
Housing Authority Wide	
1. Training for employees	\$8,000
2. Audit	\$10,000
3. Contingency	\$10,000
4. Relocation	
5. Operations	\$72,600
6. Administration of CFP grant	\$25,000
7. Fee's and Cost's (A & E)	

RAB Members 2012

Cindy Canfield Christine Spain Dorice Thomas Bill Cantwell John Grnat Jamie Sanchez Joy Mayorga Claire Dalzell Rick Hunt Rebecca Coffman

Part I:	Summary	•••••		······································	Expires 4/30/20
PHA Na	me: The Housing Authority of County, Oregon Grant Type and Number Capital Fund Program Grant No: ORI Replacement Housing Factor Grant N Date of CFFP:				FFY of Grant: 2010 FFY of Grant Approval: 2010
Type of ( □ Orig ⊠ Perfo	Grant inal Annual Statement Reserve for Disasters/Emergencies ormance and Evaluation Report for Period Ending: 09-30-2011		Revised Annual Statemen     Final Performan	t (revision no: ) ce and Evaluation Report	
Line	Summary by Development Account		tal Estimated Cost	]	Fotal Actual Cost 1
I	Total non-CFP Funds	Original	Revised <sup>2</sup>	Obligated	Expended
2	1406 Operations (may not exceed 20% of line 21) <sup>3</sup>	\$73,186.00	\$77646.11	\$73,933.00	\$73,186.00
3	1408 Management Improvements	\$8,000.00	\$8,000.00	\$6841.38	\$6841.38
4	1410 Administration (may not exceed 10% of line 21)	\$24,253.00	\$24,253.00	\$24,253.00	\$1695.74
5	I4II Audit	\$1,500.00	\$1,500.00	0	0
6	1415 Liquidated Damages				
7	1430 Fees and Costs	\$5,000.00	\$5,000.00	0	0
8	1440 Site Acquisition				
9	1450 Site Improvement	\$5,000.00	\$5,000.00	0	0
10	1460 Dwelling Structures	\$109,000.00	\$94,649.89	\$49579.89	\$47450.10
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment	\$5,000.00	\$5,000.00	0	0
14	1485 Demolition				
15	1492 Moving to Work Demonstration				·····
16	1495.1 Relocation Costs	\$1,600.00	\$1,600.00	\$587.68	\$587.68
17	1499 Development Activities 4				

<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.

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

HA Name: he Housing uthority of ouglas County, regon ype of Grant	Grant Type and Number Capital Fund Program Grant No: OR16P00350110 Replacement Housing Factor Grant No: Date of CFFP:		FF	Y of Grant:2010 Y of Grant Approval: 2010	
_ Original Annı ∕∕		ergencies		Annual Statement (revision no:	)
	and Evaluation Report for Period Ending: 09-30-2011			nal Performance and Evaluation	
ne Summ	ary by Development Account		Estimated Cost		otal Actual Cost <sup>1</sup>
		Original	Revised <sup>2</sup>	Obligated	Expended
a   1501 C	ollateralization or Debt Service paid by the PHA				
ba 9000 C	ollateralization or Debt Service paid Via System of Direct Payment				
1502 C	ontingency (may not exceed 8% of line 20)	\$10,000.00	\$10,000.00	0	0
Amoun	it of Annual Grant:: (sum of lines 2 - 19)	\$242,539.00	\$242,539.00	\$155194.95	\$129760.90
Amoun	t of line 20 Related to LBP Activities				
Amoun	t of line 20 Related to Section 504 Activities	· · · · · · · · · · · · · · · · · · ·			······
Amoun	t of line 20 Related to Security - Soft Costs				
Amoun	t of line 20 Related to Security - Hard Costs				
Amoun	t of line 20 Related to Energy Conservation Measures	0	0		
pature of Ex	ecutive Director	Date fizion Sign	ature of Public Housin	ng Director	Date

<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 II: Supporting Pag PHA Name: The Housi County, Oregon	FP (Yes/ No):	al Fund Program Grant No: or16p00350110				Federal FFY of Grant: 2010			
Development Number Name/PHA- Wide Activities	General Description of Major Wo Categories	rk Development Account No.	Quantity	Total Estimated	d Cost	Total Actual	Cost	Status of Work	
				Original	Revised <sup>1</sup>	Funds Obligated <sup>2</sup>	Funds Expended <sup>2</sup>		
HA WIDE	OPERATIONS	1406		\$73,186.00	\$77646.11	\$73,933.00	\$73186.00	0	
	TRAINING	1408		\$8,000.00	\$8,000.00	\$6841.38	\$6841.38	0	
	FEES AND COSTS	1430		\$5,000.00	\$5,000.00				
	ADMINISTRATION	1410		\$24,253.00	\$24,253.00	\$24,253.00	\$1695.74	0	
	AUDIT	1411		\$1,500.00	\$1,500.00	0	0	0	
	CONTINGENCY	1502		\$10,000.00	\$10,000.00	0	0	0	
	REPLACE UTILITY TRAILOR	1475	1	\$5,000.00	\$5,000.00			collecting quotes	
	RELOCATION COSTS	1495.1		\$1,600.00	\$1,600.00	\$587.68	\$587.68	•	
	SUBTOTAL			\$128,539.00	\$132999.11	\$105615.06	\$82310.80		
OR003000001 ROSEBURG	UPGRADE ELECTRICAL BOXES	S 1460	4	\$10,000.00	\$10,000.00	\$9490.00	\$7592.00	Completed	
	REPLACE FLOORING	1460	4	\$12,000.00	\$12,000.00	0	0	Requests for quotes out- pending return	
	REPLACE SIDING	1460	4	\$20,000.00	\$20,379.00	\$20379.00	\$20379.00	Completed	
	SUBTOTAL			\$42,000.00	\$42,379.00	\$29869.00	\$27971.00		
OR003000001 OAKLAND	REPLACE STAIR HANDRAILS C 3 BD UNITS	DN 1460	4	\$12,000.00	\$12,000.00	\$0.00	\$	Preparing request for bid	
	SUBTOTAL		8	\$12,000.00	\$12,000.00	0	0	0	
OR003000001 RIDDLE	UPDATE CLOSET DOORS TO STANDARD SIZE	1460	8	\$6,000.00	\$6,000.00	0	0	Preparing request for bid	
	SUBTOTAL	0	0	\$6,000.00	\$6,000.00	0	0	· · · · ·	

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

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

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

PHA Name: The Housir Oregon	ng Authority of Douglas County,	Capital I CFFP (Y	<b>Grant Type and Number</b> Capital Fund Program Grant No: OR16P00350110 CFFP (Yes/ No): Replacement Housing Factor Grant No:				Federal FFY of Grant: 2010			
Development Number Name/PHA-Wide Activities	General Description of Major Categories	Work	Development Account No.	Quantity Total Estimated		ed Cost	Total Actual Cost		Status of Work	
					Original	Revised <sup>1</sup>	Funds Obligated <sup>2</sup>	Funds Expended <sup>2</sup>		
OR003000001 WINSTON	INSTALL SECURITY FENCE		1450	1	\$5,000.00	\$5,000.00	0	0	Preparing request for bid	
	SUBTOTAL				\$5,000.00	\$5,000.00	\$0.00	\$0.00		
OR003000001 YONCALLA	REPLACE FLOORING	<u>_</u>	1460	6	\$9,000.00	\$9,000.00	\$0.00	\$0.00	Preparing request for bid	
	EXTERIOR PAINT	<u></u>	1460	15	\$10,000.00	15450.00			Contract Signed, work scheduled for Oct 2011	
	SUBTOTAL				\$19,000.00	\$24,450.00	\$0.00		0	
0R003002007 REEDSPORT	REPLACE FLOORING		1460	5	\$18,000.00	\$9890.00	\$9890.00	\$9890.00	Completed	
	REPLACE COUNTERTOPS		1460	14	\$12,000.00	\$9820.89	\$9820.86	\$9589.11	Completed	
	SUBTOTAL		0	0	\$30,000.00	\$19,710.89	\$19710.89	\$19479.10	0	
	TOTAL				\$242,539.00	\$242,539.00	\$155,194.95	\$129,760.90	 	
							· · · · · · · · · · · · · · · · · · ·			

Part I:	Summary					Expires 4/30/20
PHA Na	me: Housing Authority of County, Oregon	Grant Type and Number Capital Fund Program Grant No: O Replacement Housing Factor Grant Date of CFFP:	R16P00350111 No:			FFY of Grant: 2011 FFY of Grant Approval: 2011
	inal Annual Statement	Reserve for Disasters/Emergenci rt for Period Ending: 09-30-2011	es	Revised Annual Statemen	t (revision no: nd Evaluation Report	)
Line	Summary by Developmen			Total Estimated Cost		Total Actual Cost <sup>1</sup>
1	Total non-CFP Funds		Original	Revised <sup>2</sup>	Obligated	Expended
2	1406 Operations (may not e	xceed 20% of line 21) <sup>3</sup>	\$79,100	\$79,100.00		
3	1408 Management Improve	ments	\$8,000	\$8,000.00		
4	1410 Administration (may 1	not exceed 10% of line 21)	\$21,553	\$21,553.00		··
5	1411 Audit	,	\$1,500	\$1,500.00		
6	1415 Liquidated Damages					
7	1430 Fees and Costs		\$4,381	\$4,381.00		· · · · · · · · · · · · · · · · · · ·
8	1440 Site Acquisition					
9	1450 Site Improvement		\$5,000	\$5,000.00		
10	1460 Dwelling Structures	,	\$94,497	\$94,497.00		······································
11	1465.1 Dwelling Equipmen	tNonexpendable				
12	1470 Non-dwelling Structur	es				
13	1475 Non-dwelling Equipm	ent	\$0	\$0.00		
14	1485 Demolition					
15	1492 Moving to Work Dem	onstration		·····		
16	1495.1 Relocation Costs		\$1,500	\$1,500.00`		
17	1499 Development Activitie	es <sup>4</sup>	´			

<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.

PHA Nam Housing A of Douglas Oregon Fype of G	Authority     Grant Type and Number       Capital Fund Program Grant No: OR16P00350111       Replacement Housing Factor Grant No:       Date of CFFP:       rant       Inal Annual Statement         Reserve for Disasters/Emergement/Emergement	ergencies		rant:2011 rant Approval: 2011 	)
	rmance and Evaluation Report for Period Ending: 09-30-2011			rformance and Evaluation Repor	t
Line	Summary by Development Account	Total Original	Estimated Cost Revised <sup>2</sup>	and the second se	ctual Cost <sup>1</sup>
10-	1501 Collectoralization on Data Comics with both a DUA	Original	Keviseu -	Obligated	Expended
18a	1501 Collateralization or Debt Service paid by the PHA				
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment				
19	1502 Contingency (may not exceed 8% of line 20)	\$5,000	\$5,000.00		
20	Amount of Annual Grant:: (sum of lines 2 - 19)	\$215,531.00	\$215,531.00		
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 Activities	•			
.3	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	······································			
ignatur JON	e of Executive Director	Date 13 2012-Sigr	nature of Public Housing Di	rector	Date

<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 II: Supporting Pages	to of Develop County Oregon	Curvet	Course and Niemsham			<b></b>				
PHA Name: Housing Authority of Douglas County, Oregon			rant Type and Number apital Fund Program Grant No: FFP (Yes/ No): eplacement Housing Factor Grant No:				Federal FFY of Grant: 2011			
Development Number Name/PHA-Wide Activities	General Description of Major Categories	Work	Development Quantity Account No.		Total Estir	nated Cost	Total Actual	Cost	Status of Work	
					Original	Revised <sup>1</sup>	Funds Obligated <sup>2</sup>	Funds Expended <sup>2</sup>		
HA WIDE	OPERATIONS		1406		\$79,100	\$79,100.00	\$	\$		
	TRAINING		1408		\$8,000	\$8,000.00	0	0		
	FEES AND COSTS		1430		\$4381	\$4381.00	0	0		
	ADMINISTRATION		1410		\$21553	\$21553.00	0	0		
	AUDIT		1411		\$1,500	\$1500.00	0	0		
	CONTINGENCY		1502		\$5000	\$5000.00	0	0		
	RELOCATION COSTS		1495.1		\$1,500	\$1500.00	0	0		
	REPLACE MAINTENANCE	VAN	1475	1	\$0	\$0.00	0	0		
	SUBTOTAL				\$121034	\$121034.00				
OR003000001ROSEBURG						\$6447.00			ER PENDING	
	REPLACE FLOORING		1460	2	\$6447		0	0		
	REPLACE SEWER LINES		1450	12	\$30,000	\$30000.00	0	0	ER PENDING	
	REPLACE SIDING		1460	2	\$20,000	\$20,000.00	0	0	ER PENDING	
	UPGRADE ELECTRICAL BC	XES	1460	2	\$10,000	\$10,000.00	0	0	ER PENDING	
	SUBTOTAL				\$66447	\$66447.00	0	0		
OR003000001OAKLAND	REPLACE VINYL FLOOR 3 I UNITS	BD	1460	2	\$10,500	\$10,500.00	0	0	ER PENDING	
	SUBTOTAL				\$10,500	\$10,500.00				
OR003000001RIDDLE	BATHROOM VANITY ADDI	TION	1460	7	\$1,550	\$1,550.00			ER PENDING	
	REPLACE FLOORING		1460	4	\$0.00	\$0.000			ER PENDING	
	SUBTOTAL			+ ·	\$1550	\$1550.00				

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

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

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 PHA Name: Housing Authority of Douglas County, Oregon			Grant Type and Number Capital Fund Program Grant No: CFFP (Yes/ No): Replacement Housing Factor Grant No:				Federal FFY of Grant: 2011			
Development Number Name/PHA-Wide Activities	General Description of Majo Categories	r Work	Development Account No.	Quantity	Total Estima	ted Cost	Total Actual	Cost	Status of Work	
					Original	Revised <sup>1</sup>	Funds Obligated <sup>2</sup>	Funds Expended <sup>2</sup>		
OR003000006WINSTON	UPGRADE CLOSET DOOR STANDARD SIZE	S TO	1460		\$0.00	\$0.00			ER PENDING	
	REPLACE BATH SINKS, FA VANITY	ACET,	1460	14	\$3,500	\$3500.00			ER PENDING	
	SUBTOTAL				\$3,500.00	\$3500.00				
OR003002007REEDSPORT	INSTALL PORCH LIGHTS		1460	20	\$3,500	\$3500.00			ER PENDING	
	REPLACE FLOORING SUBTOTAL	<u>_</u>	1460	2	\$9000 \$12,500	\$9,000.00 \$12,500.00			ER PENDING	
Total				··· ·	\$215531.00	\$215531.00				
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<sup>1</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

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

The Housing Authority of Douglas County Oregon does not have any designated housing projects for elderly and disabled families

# Violence Against Women Act of 2005 (VAWA)

The Housing Authority of Douglas County provides information regarding VAWA to all participants and applicants of the Public Housing and Section 8 Programs. The Housing Authority networks with Battered Person's Advocacy, Roseburg Rescue Mission and Woman's Shelter.