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

PHA Plans 5 Year Plan for Fiscal Years 2001 - 2005 Annual Plan for Fiscal Year 2001

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

PHA Plan Agency Identification

PHA Name: Red Bank Housing Authority

PHA Number: NJ 46

PHA Fiscal Year Beginning: (mm/yyyy) __January 1, 2001

Public Access to Information

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

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

Display Locations For PHA Plans and Supporting Documents

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

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

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

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

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

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

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

A. Mission

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

B. Goals

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

- _X___ PHA Goal: Expand the supply of assisted housing Objectives:
 - _X___ Apply for additional rental vouchers: 100-150
 - _X___ Reduce public housing vacancies: maintain at zero
 - _X___ Leverage private or other public funds to create additional housing opportunities: **dollar for dollar**
 - _____ Acquire or build units or developments
 - ____ Other (list below)

PHA Goal: Improve the quality of assisted housing Objectives:

- _X___ Improve public housing management: (PHAS score) To 95-100%
- _X___ Improve voucher management: (SEMAP score) To 100%
- _X___ Increase customer satisfaction: maintain at 95-100%
- _X___ Concentrate on efforts to improve specific management functions: (list; e.g., public housing finance; voucher unit inspections)
- _X___ Renovate or modernize public housing units:

100% of units in need of same

_____ Demolish or dispose of obsolete public housing:

- _____ Provide replacement public housing:
- _____ Provide replacement vouchers:
- ____ Other: (list below)
- _X___ PHA Goal: Increase assisted housing choices Objectives:
 - _X___ Provide voucher mobility counseling:
 - to 100% of participants in need of same
 - _X___ Conduct outreach efforts to potential voucher landlords
 - _____ Increase voucher payment standards
 - _____ Implement voucher homeownership program:
 - _____ Implement public housing or other homeownership programs:
 - _____ Implement public housing site-based waiting lists:
 - _____ Convert public housing to vouchers:
 - ____ Other: (list below)

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

- _X___ PHA Goal: Provide an improved living environment Objectives:
 - _X____ Implement measures to deconcentrate poverty by bringing higher income public housing households into lower income developments: 100% as needed
 _____ Implement measures to promote income mixing in public housing by assuring access for lower income families into higher income developments:
 - _X___ Implement public housing security improvements: **100% as needed**
 - ____ Designate developments or buildings for particular resident groups (elderly, persons with disabilities)
 - ____ Other: (list below)

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

- _X___ PHA Goal: Promote self-sufficiency and asset development of assisted Objectives:
 - _X___ Increase the number and percentage of employed persons in assisted families: by 100%
 - _X___ Provide or attract supportive services to improve assistance recipients' employability: **by 100%**

_X___ Provide or attract supportive services to increase independence for the elderly or families with disabilities. Other: (list below)

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

- ___X__ PHA Goal: Ensure equal opportunity and affirmatively further fair housing Objectives:
 - __X__ Undertake affirmative measures to ensure access to assisted housing regardless of race, color, religion national origin, sex, familial status, and disability: maintain at 100%
 - ___X___Undertake affirmative measures to provide a suitable living environment for families living in assisted housing, regardless of race, color, religion national origin, sex, familial status, and disability: **maintain at 100%**
 - __X__ Undertake affirmative measures to ensure accessible housing to persons with all varieties of disabilities regardless of unit size required:
 __Maintain at 100%
 Other: (list below)

Other PHA Goals and Objectives: (list below)

Annual PHA Plan PHA Fiscal Year 2000 [24 CFR Part 903.7]

Annual Plan Type:

__X__ Standard Plan ** Although the Red Bank Housing Authority has less than 250 public housing units, it is submitting a standard plan in that it fails to meet the criteria for submission of a "Small PHA Plan Update" (set forth in Notice 2000-43) due to having more than 250 Section 8 vouchers/certificates.

Streamlined Plan:

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

_ Troubled Agency Plan

Executive Summary of the Annual PHA Plan

[24 CFR Part 903.7 9 (r)]

See Attachment "A"

Annual Plan Table of Contents

[24 CFR Part 903.7 9 (r)]

Provide a table of contents for the Annual Plan, including attachments, and a list of supporting documents available for public inspection.

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Display column in the appropriate rows. An instea documents must be on display if applicable to the program activities conducted by the PHA. the right of the title.

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Attachments

Required Attachments:

- A Executive Summary
- B Five Year Plan: Progress Statement
- C Summary of Policy and Program Changes
- D Capital Fund Program Annual Statement
- E Capital Fund Program 5 Year Action Plan
- F Comments of Resident Advisory Board or Boards and Authority's Responses (must be attached if not included in PHA Plan text)
- G Membership of Resident Advisory Board
- H Resident Membership on the PHA Governing Board
- I Admissions Policy for Deconcentration
- J PHA Management Organizational Chart
- K Consistency with Consolidated Plan
- L PHA Criteria for Amendments to Plan
- M Summary of Pet Policy
- N Community Service Requirements

Supporting Documents Available for Review

| List of Supporting Documents Available for Review | | | | | |
|---|---------------------|---------------------------|--|--|--|
| Applicable & On Display | Supporting Document | Applicable Plan Component | | | |

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

| X | Public housing management and maintenance policy documents, including policies for the prevention or eradication of pest infestation (including cockroach infestation) | Annual Plan: Operations and Maintenance |
|---|--|--|
| Х | Public housing grievance procedures X check here if included in the public housing | Annual Plan: Grievance Procedures |
| | A & O Policy | |
| Х | Section 8 informal review and hearing procedures X check here if included in Section 8 Administrative | Annual Plan: Grievance Procedures |
| X | Plan The HUD-approved Capital Fund/Comprehensive Grant Program Annual Statement (HUD 52837) for the active grant year | Annual Plan: Capital Needs |
| | Most recent CIAP Budget/Progress Report (HUD 52825) for any active CIAP grant | Annual Plan: Capital Needs |
| | Most recent, approved 5 Year Action Plan for the Capital Fund/Comprehensive Grant Program, if not included as an attachment (provided at PHA option) | Annual Plan: Capital Needs |
| | Approved HOPE VI applications or, if more recent, approved or submitted HOPE VI Revitalization Plans or any other approved proposal for development of public housing | Annual Plan: Capital Needs |
| | Approved or submitted applications for demolition and/or disposition of public housing | Annual Plan: Demolition and Disposition |
| | Approved or submitted applications for designation of public housing (Designated Housing Plans) | Annual Plan: Designation of Public Housing |
| | Approved or submitted assessments of reasonable revitalization of public housing and approved or submitted conversion plans prepared pursuant to section 202 of the 1996 HUD Appropriations Act | Annual Plan: Conversion of Public Housing |
| | Approved or submitted public housing homeownership programs/plans | Annual Plan: Homeownership |
| | Policies governing any Section 8 Homeownership program check here if included in the Section 8 Administrative Plan | Annual Plan: Homeownership |
| | Any cooperative agreement between the PHA and the TANF agency | Annual Plan: Community Service & Self-Sufficiency |
| | FSS Action Plan/s for public housing and/or Section 8 | Annual Plan: Community Service & Self-Sufficiency |
| | Most recent self-sufficiency (ED/SS, TOP or ROSS or other resident services grant) grant program reports | Annual Plan: Community Service & Self-Sufficiency |
| | The most recent Public Housing Drug Elimination Program (PHEDEP) semi-annual performance report for any open grant and most recently submitted PHDEP application (PHDEP Plan) | Annual Plan: Safety and Crime Prevention |
| Х | The most recent fiscal year audit of the PHA conducted under section 5(h)(2) of the U.S. Housing Act of 1937 (42 U. S.C. 1437c(h)), the results of that audit and the PHA's | Annual Plan: Annual Audit |
| | response to any findings Troubled PHAs: MOA/Recovery Plan | Troubled PHAs |
| | Other supporting documents (optional) (list individually; use as many lines as necessary) | (specify as needed) |

completing the following table. In the "Overall" Needs column, provide the estimated number of renter families that have housing needs. For the remaining characteristics, rate the impact of that factor on the housing needs for each family type, from 1 to 5, with 1 being "no impact" and 5 being "severe impact." Use N/A to indicate that no information is available upon which the PHA can make this assessment.

| Х | Community Service Requirement (in Admissions & Occupancy Policy) | Annual Plan: Community Service |
|---|--|-----------------------------------|
| Х | Pet Policy | Annual Plan: Pet Policy |

<u>1. Statement of Housing Needs</u>

[24 CFR Part 903.7 9 (a)]

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

| Housing Needs of Families in the Jurisdiction | | | | | | | |
|---|----------------|--------------------|--------|---------|--------------------|------|----------|
| | by Family Type | | | | | | |
| Family Type | Over all | Afford- ability | Supply | Quality | Access- ibility | Size | Location |
| Income <= 30% of AMI | 378 | 5 | 5 | 4 | 5 | 4 | 3 |
| Income >30% but <=50% of AMI | 345 | 5 | 5 | 4 | 5 | 4 | 3 |
| Income >50% but <80% of AMI | 360 | 4 | 4 | 4 | 4 | 4 | 3 |
| Elderly | 678 | 4 | 4 | 4 | 4 | 3 | 3 |
| Families with Disabilities | 615 | 5 | 4 | 4 | 5 | 3 | 3 |
| White | 1678 | 3 | 4 | 4 | 4 | 3 | 3 |
| Black (Non- Hispanic) | 418 | 4 | 4 | 4 | 4 | 4 | 3 |
| Hispanic | 111 | 4 | 4 | 4 | 4 | 4 | 3 |
| Native American, Asian & Other | 47 | 3 | 4 | 4 | 4 | 3 | 3 |

What sources of information did the PHA use to conduct this analysis? (Check all that apply; all materials must be made available for public inspection.)

_X___ Consolidated Plan of the Jurisdiction/s

Indicate year: 1995

_X___ U.S. Census data: the Comprehensive Housing Affordability Strategy ("CHAS")

dataset

_ American Housing Survey data

Indicate year:

_ Other housing market study

Indicate year:

___X__ Other sources: (list and indicate year of information)

1995 Master Plan for the Borough of Red Bank

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

| I | Housing Needs of Fa | milies on the Waiting l | List |
|---|-------------------------|------------------------------|-----------------|
| Waiting list type: (selec | t one) | | |
| • • • • | t-based assistance | | |
| Public Housing | | | |
| Combined Sectio | n 8 and Public Housin | g | |
| Public Housing S | ite-Based or sub-jurisd | ictional waiting list (optic | onal) |
| | which development/s | | |
| | # of families | % of total families | Annual Turnover |
| Waiting list total | 250 | | 10-12 |
| Extremely low income | 206 | 82.4% | |
| <=30% AMI | 20 | 12.00/ | |
| Very low income $(> 20\%)$ but $(= 50\%)$ | 30 | 12.0% | |
| (>30% but <=50% | | | |
| AMI) Low income | 14 | 5 60/ | |
| | 14 | 5.6% | |
| (>50% but <80% | | | |
| AMI) Families with children | 177 | 70.90/ | |
| | | 70.8% | |
| Elderly families | 21 | 8.4% | |
| Families with | 14 | 5.6% | |
| Disabilities | 97 | 38.8% | |
| White Diask (Nor | | | |
| Black (Non- | 123 | 49.2% | |
| Hispanic) | 30 | 12% | |
| Hispanic | | | |
| Asian, American Indian, Eskimo | 0 | 0% | |
| inulan, eskiino | <u> </u> | | |
| Characteristics by | | | |
| Bedroom Size (Public | | | |
| Housing Only) | | | |
| 1BR | n/a | | |
| 2 BR | n/a | | |
| 3 BR | n/a | | |

| | 1 | | | | | | |
|--|---|------------------------------|-----------------|--|--|--|--|
| 4 BR | n/a | | | | | | |
| 5 BR | n/a | | | | | | |
| 5+ BR | n/a | | | | | | |
| Is the waiting list close | Is the waiting list closed? YES | | | | | | |
| | ong has it been closed (# expect to reopen the lis | t in the PHA Plan year? | NO | | | | |
| | | es of families onto the wai | | | | | |
| generally closed? NO | | | 8 , | | | | |
| | | nilies on the Waiting List | | | | | |
| | | | | | | | |
| Combined Sectio | based assistance ublic Housing n 8 and Public Housing | ctional waiting list (option | nal) | | | | |
| | # of families | % of total families | Annual Turnover | | | | |
| | | | | | | | |
| Waiting list total | 124 | | 3-4 | | | | |
| Extremely low income <=30% AMI | 101 | 81.5% | | | | | |
| Very low income (>30% but <=50% AMI) | 16 | 12.9% | | | | | |
| Low income (>50% but <80% AMI) | 7 | 5.6% | | | | | |
| Families with children | 81 | 65.3% | | | | | |
| Elderly families | 31 | 25.0% | | | | | |
| Families with | 8 | 6.5% | | | | | |
| Disabilities | | | | | | | |
| White | 47 | 37.9% | | | | | |
| Black (Non- | 62 | 50% | | | | | |
| Hispanic) | | | | | | | |
| Hispanic | 15 | 12.1% | | | | | |
| Asian, American | 0 | 0% | | | | | |
| Indian, Eskimo | | | | | | | |

jurisdiction and on the waiting list in the orcoving teak, and the Agency's reasons for choosing) () 75 this strategy.

| Characteristics by | | | | | |
|--|---------------------------|----------------|--|--|--|
| Bedroom Size (Public | | | | | |
| Housing Only) | | | | | |
| 1BR | 43 | 34.6% | | | |
| 2 BR | 45 | 36.3% | | | |
| 3 BR | 34 | 27.4% | | | |
| 4 BR | 2 | 1.6% | | | |
| 5 BR | n/a | | | | |
| 5+ BR | n/a | | | | |
| Is the waiting list close | d? YES | | | | |
| | | | | | |
| If yes: | | | | | |
| B. How le | ong has it been closed (# | of months)? 40 | | | |
| Does the PHA expect to reopen the list in the PHA Plan year? YES | | | | | |
| Does the PHA permit specific categories of families onto the waiting list, even if | | | | | |
| generally closed? NO | | | | | |

C. Strategy for Addressing Needs

(1) <u>Strategies</u> Need: Shortage of affordable housing for all eligible populations

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

_X___ Employ effective maintenance and management policies to minimize the number of public housing units off-line X Reduce turnover time for vacated public housing units _X___ Reduce time to renovate public housing units Seek replacement of public housing units lost to the inventory through mixed finance development Seek replacement of public housing units lost to the inventory through section 8 replacement housing resources _X___ Maintain or increase section 8 lease-up rates by establishing payment standards that will enable families to rent throughout the jurisdiction _X___ Undertake measures to ensure access to affordable housing among families assisted by the PHA, regardless of unit size required X Maintain or increase section 8 lease-up rates by marketing the program to owners, particularly those outside of areas of minority and poverty concentration _X___ Maintain or increase section 8 lease-up rates by effectively screening Section 8 applicants to increase owner acceptance of program OM B Approval No: 2577-0226 Expires:03/31/2002

_X___ Participate in the Consolidated Plan development process to ensure coordination with broader community strategies _____ Other (list below)

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

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

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

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

_____ Exceed HUD federal targeting requirements for families at or below 30% of AMI in public housing

_____ Exceed HUD federal targeting requirements for families at or below 30% of AMI in tenantbased section 8 assistance

____ Employ admissions preferences aimed at families with economic hardships __X___ Adopt rent policies to support and encourage work

____ Other: (list below)

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

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

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

B. Need: Specific Family Types: The Elderly

Strategy 1: Target available assistance to the elderly:

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

Need: Specific Family Types: Families with Disabilities

Strategy 1: Target available assistance to Families with Disabilities:

_____ Seek designation of public housing for families with disabilities _X___ Carry out the modifications needed in public housing based on the section 504 Needs Assessment for Public Housing _X__ Apply for special-purpose vouchers targeted to families with disabilities, should they become available _X__ Affirmatively market to local non-profit agencies that assist families with disabilities _____ Other: (list below)

| Need: Specific Family Types: Races or ethnicities with disproportionate housing needs | | | |
|--|--|--|--|
| Strategy 1: Increase awareness of PHA resources among families of races and ethnicities with disproportionate needs: Select if applicable | | | |
| _X Affirmatively market to races/ethnicities shown to have disproportionate housing needs Other: (list below) | | | |
| Strategy 2: Conduct activities to affirmatively further fair housing Select all that apply | | | |
| _X Counsel section 8 tenants as to location of units outside of areas of poverty or minority concentration and assist them to locate those units _X Market the section 8 program to owners outside of areas of poverty /minority concentrations Other: (list below) | | | |
| Other Housing Needs & Strategies: (list needs and strategies below) | | | |
| (2) Reasons for Selecting Strategies Of the factors listed below, select all that influenced the PHA's selection of the strategies it will pursue: | | | |
| _X Funding constraints _X Staffing constraints _X Limited availability of sites for assisted housing _X Extent to which particular housing needs are met by other organizations in the community _X Evidence of housing needs as demonstrated in the Consolidated Plan and other information available to the PHA X Influence of the housing market on PHA programs X Community priorities regarding housing assistance X Results of consultation with local or state government X Results of consultation with residents and the Resident Advisory Board Results of consultation with advocacy groups Other: (list below) | | | |
| <u>Statement of Financial Resources</u> [24 CFR Part 903.7 9 (b)] | | | |

List the financial resources that are anticipated to be avail@MotheAlpoptorone apply for a apply for a apply of a far pop a fa

| Sources | | Planned Uses |
|-------------------------------------|-----------|---------------------|
| 1. Federal Grants (FY 2000 grants) | | |
| a) Public Housing Operating Fund | 200,020 | |
| b) Public Housing Capital Fund | 140,873 | |
| c) HOPE VI Revitalization | | |
| d) HOPE VI Demolition | | |
| e) Annual Contributions for Section | 2,112,770 | |
| 8 Tenant-Based Assistance | | |
| f) Public Housing Drug Elimination | | |
| Program (including any Technical | | |
| Assistance funds) | | |
| g) Resident Opportunity and Self- | | |
| Sufficiency Grants | | |
| h) Community Development Block | | |
| Grant | | |
| i) HOME | | |
| Other Federal Grants (list below) | | |
| CIAP/CPG | | |
| | | |
| | | |
| | | |
| | | |
| 3. Public Housing Dwelling Rental | 308,772 | Public Housing |
| Income | , | Operations |
| Excess Utilities | 3,500 | Public Housing |
| | , | Operations (utility |
| | | expenses) |
| | | |
| 4. Other income (list below) | | |
| Interest Income | 29,620 | Public Housing |
| | | Operations |
| Misc. Income | 1,200 | Public Housing |
| | | Operations |
| 4. Non-federal sources (list below) | | |
| | | |
| | | |
| | | |
| Total resources | 2,796,755 | |
| | | |
| | | |

3. PHA Policies Governing Eligibility, Selection, and Admissions

[24 CFR Part 903.7 9 (c)]

A. Public Housing

Exemptions: PHAs that do not administer public housing are not required to complete subcomponent 3A.

(1) Eligibility

a. When does the PHA verify eligibility for admission to public housing? (select all that apply)

_X___ When families are within a certain number of being offered a unit: one

_____ When families are within a certain time of being offered a unit: (state time)

_____ Other: (describe)

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

_X___ Criminal or Drug-related activity

_X__ Rental history

_X___ Housekeeping

____ Other (describe)

- c. _X_Yes ____ No: Does the PHA request criminal records from local law enforcement agencies for screening purposes?
- d. _X___ Yes ____No: Does the PHA request criminal records from State law enforcement agencies for screening purposes?

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

(2)Waiting List Organization

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

- apply)
 __X__ Community-wide list
 ____ Sub-jurisdictional lists
 ____ Site-based waiting lists
 Other (describe)
- b. Where may interested persons apply for admission to public housing?

X PHA main administrative office

____ PHA development site management office _____ Other (list below)

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

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

2.___Yes ____No: Are any or all of the PHA's site-based waiting lists new for the upcoming year (that is, they are not part of a previously-HUD-approved site based waiting list plan)? If yes, how many lists?

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

4. Where can interested persons obtain more information about and sign up to be on the site-based waiting lists (select all that apply)? N/A
_____ PHA main administrative office
_____ All PHA development management offices
_____ Management offices at developments with site-based waiting lists
_____ At the development to which they would like to apply
_____ Other (list below)

(3) Assignment

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

____ One __X___ Two ____ Three or More

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

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

(4) Admission Preferences

____Yes __X__ No: Does the PHA plan to exceed the federal targeting requirements by targeting

Expires:03/31/2002

more than 40% of all new admissions to public housing to families at or below 30% of median area income?

b. Transfer policies: In what circumstances will transfers take precedence over new admissions? (list below) _____ Emergencies __X___ Overhoused __X___ Underhoused __X___ Medical justification _X___ Administrative reasons determined by the PHA (e.g., to permit modernization work) _____ Resident choice: (state circumstances below) _____ Other: (list below)

Preferences

1. _X___ Yes ____ No: Has the PHA established preferences for admission to public housing (other than date and time of application)? (If "no" is selected, skip to subsection (5) Occupancy)

a.

- 1. Which of the following admission preferences does the PHA plan to employ in the coming year? (select all that apply from either former Federal preferences or other preferences)
- Former Federal preferences: Х Involuntary Displacement (Disaster, Government Action, Action of Housing Owner, Inaccessibility, Property Disposition) X Victims of domestic violence Substandard housing Homelessness High rent burden (rent is > 50 percent of income) Other preferences: (select below) Working families and those unable to work because of age or disability Veterans and veterans' families X Residents who live and/or work in the jurisdiction Those enrolled currently in educational, training, or upward mobility programs Households that contribute to meeting income goals (broad range of incomes) Households that contribute to meeting income requirements (targeting) Those previously enrolled in educational, training, or upward mobility programs Victims of reprisals or hate crimes X Other preference(s) (list below) Non-Residents who work in jurisdiction OMB Approval No: 2577-0226

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

____ Date and Time

Former Federal preferences:

- _1__ Involuntary Displacement (Disaster, Government Action, Action of Housing
 - ____ Owner, Inaccessibility, Property Disposition) Residents
 - _2___ Victims of domestic violence Residents
 - _____ Substandard housing
 - _____ Homelessness
 - _ High rent burden

5____ Involuntary Displacement - Non-Residents

6____ Victims of Domestic Violence - Non-Residents

Other preferences (select all that apply)

_____ Working families and those unable to work because of age or disability

Veterans and veterans' families

- _3__ Residents who live and work in the jurisdiction
- _____ Those enrolled currently in educational, training, or upward mobility programs
- _____ Households that contribute to meeting income goals (broad range of incomes)
 - Households that contribute to meeting income requirements (targeting)
- _____ Those previously enrolled in educational, training, or upward mobility programs
 - _____ Victims of reprisals or hate crimes
 - ____ Other preference(s) (list below)
 - 4____ Residents who live in jurisdiction
- 7____ Non-Residents who work in jurisdiction
 - 4. Relationship of preferences to income targeting requirements:
 - ____ The PHA applies preferences within income tiers

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

(5) Occupancy

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

_X___ The PHA-resident lease

_X___ The PHA's Admissions and (Continued) Occupancy policy _X___ PHA briefing seminars or written materials _____ Other source (list)

b. How often must residents notify the PHA of changes in family composition? (select all that apply)
_X____ At an annual reexamination and lease renewal
_X____ Any time family composition changes
_____ At family request for revision
_____ Other (list)
(6) Deconcentration and Income Mixing

a. _X__Yes ____ No: Did the PHA's analysis of its family (general occupancy)
 developments to determine concentrations of poverty indicate the need for measures to promote deconcentration of poverty or income mixing?

b. _X__Yes ____ No: Did the PHA adopt any changes to its **admissions policies** based on the results of the required analysis of the need to promote deconcentration of poverty or to assure income mixing?

c. If the answer to b was yes, what changes were adopted? (select all that apply) _____ Adoption of site-based waiting lists

_____ If selected, list targeted developments below:

_X___ Employing waiting list "skipping" to achieve deconcentration of poverty or income mixing goals at targeted developments

If selected, list targeted developments below:

Evergreen Terrace and Montgomery Terrace

_ ____ Employing new admission preferences at targeted developments If selected, list targeted developments below:

_____ Other (list policies and developments targeted below)

d. ____Yes _X___No: Did the PHA adopt any changes to **other** policies based on the results of the required analysis of the need for deconcentration of poverty and income mixing?

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

f. Based on the results of the required analysis, in which developments will the PHA make special efforts to attract or retain higher-income families? (select all that apply)
 _____ Not applicable: results of analysis did not indicate a need for such efforts
 _____ List (any applicable) developments below:

Evergreen Terrace and Montgomery Terrace

g. Based on the results of the required analysis, in which developments will the PHA make special efforts to assure access for lower-income families? (select all that apply)
 _X____ Not applicable: results of analysis did not indicate a need for such efforts
 _____ List (any applicable) developments below:

B. Section 8

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

(1) Eligibility

a. What is the extent of screening conducted by the PHA? (select all that apply)

__X__ Criminal or drug-related activity only to the extent required by law or regulation
 Criminal and drug-related activity, more extensively than required by law or regulation
 ____ More general screening than criminal and drug-related activity (list factors below)

____ Other (list below)

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

- c. __X_Yes ____ No: Does the PHA request criminal records from State law enforcement agencies for screening purposes?
- d. ____Yes _X___ No: Does the PHA access FBI criminal records from the FBI for screening purposes? (either directly or through an NCIC-authorized source)

e. Indicate what kinds of information you share with prospective landlords? (select all that apply)

X Criminal or drug-related activity

____ Other (describe below)

(2) Waiting List Organization

a. With which of the following program waiting lists is the section 8 tenant-based assistance waiting list merged? (select all that apply)

| 5 | A: (select all that apply) | |
|---|----------------------------|--|
| | | |
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_____X___None _____Federal public housing _____Federal moderate rehabilitation OMB Approval No: 2577-0226 Expires: 03/31/2002 _____ Federal project-based certificate program

_____ Other federal or local program (list below)

b. Where may interested persons apply for admission to section 8 tenant-based assistance? (select all that

apply)

_X___ PHA main administrative office

____ Other (list below)

(3) Search Time

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

If yes, state circumstances below:

Extensions: A family may request an extension of the Certificate/Voucher time period. All requests for extensions must be received prior to the expiration date of the Certificate/Voucher. Extensions are permissible at the discretion of the Authority up to a maximum of 120 days, primarily for these reasons:

* Extenuating circumstances such as hospitalization or a family emergency for an extended period of time which has affected the family's ability to find a unit within the initial sixty-day period. Verification is required.

* The Authority is satisfied that the family has made reasonable efforts to locate a unit, including seeking the assistance of the Authority, throughout the initial sixty-day period. A completed search record is required.

* The family was prevented from finding a unit due to disability accessibility requirements. The Search Record is part of the required verification.

The Authority grants extensions in one or more increments. Unless approved by the Executive Director, no more than two extensions of thirty days or less will be granted.

The Authority will not request HUD approval to extend Certificate or Voucher beyond an additional 60 days.

(4) Admissions Preferences

a. Income targeting

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

b. Preferences

X_Yes ____ No: Has the PHA established preferences for admission to section 8 tenant-based assistance? (other than date and time of application) (if no, skip to subcomponent (5)

Special purpose section 8 assistance programs)

2. Which of the following admission preferences does the PHA plan to employ in the coming

HUD 50075

year? (select all that apply from either former Federal preferences or other preferences)

Former Federal preferences

_X___ Involuntary Displacement (Disaster, Government Action, Action of Housing Owner,

Inaccessibility, Property Disposition)

_X___ Victims of domestic violence

_____ Substandard housing

_ Homelessness

_____ High rent burden (rent is > 50 percent of income)

Other preferences (select all that apply)

____ Working families and those unable to work because of age or disability

_ Veterans and veterans' families

_X__ Residents who live and/or work in your jurisdiction

_____ Those enrolled currently in educational, training, or upward mobility programs

- Households that contribute to meeting income goals (broad range of incomes)
- Households that contribute to meeting income requirements (targeting)
- _____ Those previously enrolled in educational, training, or upward mobility programs

_____ Victims of reprisals or hate crimes

_X__ Other preference(s) (list below)

Non-Residents who work in jurisdiction

3. If the PHA will employ admissions preferences, please prioritize by placing a "1" in the space that represents your first priority, a "2" in the box representing your second priority, and so on.

If you give equal weight to one or more of these choices (either through an absolute hierarchy or through a point system), place the same number next to each. That means you can use "1" more than once, "2" more than once, etc.

____ Date and Time

Former Federal preferences

_1__ Involuntary Displacement (Disaster, Government Action, Action of Housing Owner,

Inaccessibility, Property Disposition) - Residents

_2__ Victims of domestic violence - Residents

_____ Substandard housing

_____ Homelessness

_____ High rent burden

_5__ Involuntary Displacement - Non-Residents

_6__ Victims of Domestic Violence - Non-Residents

Other preferences (select all that apply)

_ Working families and those unable to work because of age or disability

Veterans and veterans' families

__3_ Residents who live and work in your jurisdiction

_____ Those enrolled currently in educational, training, or upward mobility programs

Households that contribute to meeting income goals (broad range of incomes)

Households that contribute to meeting income requirements (targeting)

_____ Those previously enrolled in educational, training, or upward mobility programs

____ Victims of reprisals or hate crimes

____ Other preference(s) (list below)

____4_ Residents who live in jurisdiction

Non-residents who work in jurisdiction

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

_X__ Date and time of application

_____ Drawing (lottery) or other random choice technique

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

_X__ This preference has previously been reviewed and approved by HUD

_ The PHA requests approval for this preference through this PHA Plan

6. Relationship of preferences to income targeting requirements: (select one) ______ The PHA applies preferences within income tiers

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

(5) Special Purpose Section 8 Assistance Programs N/A

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

(select all that apply)

____ The Section 8 Administrative Plan

____ Briefing sessions and written materials

____ Other (list below)

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

_____ Through published notices

____ Other (list below)

4. PHA Rent Determination Policies

[24 CFR Part 903.7 9 (d)]

A. Public Housing

(1) Income Based Rent Policies

a. Use of discretionary policies: (select one)

_X___ The PHA will not employ any discretionary rent-setting policies for income based rent in public housing. Income-based rents are set at the higher of 30% of adjusted monthly income, 10% of unadjusted monthly income, the welfare rent, or minimum rent (less HUD mandatory deductions and exclusions). (If selected, skip to sub-component (2))

---or---

____ The PHA employs discretionary policies for determining income based rent (If selected, continue to question b.)

b. Minimum Rent

1. What amount best reflects the PHA's minimum rent? (select one)

2. ____Yes _X___ No: Has the PHA adopted any discretionary minimum rent hardship exemption policies?

3. If yes to question 2, list these policies below:

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

1. ____Yes _X___No: Does the PHA plan to charge rents at a fixed amount or percentage less than 30% of adjusted income?

HUD 50075

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

| d. | . Which of the discretionary (optional) deductions and/or exclusions policies does the PHA plan to | | |
|----|--|--|--|
| | employ (select all that apply) | | |
| | For the earned income of a previously unemployed household member | | |
| | For increases in earned income | | |
| | Fixed amount (other than general rent-setting policy) | | |
| | If yes, state amount/s and circumstances below: | | |
| | Fixed percentage (other than general rent-setting policy) | | |
| | If yes, state percentage/s and circumstances below: | | |
| | For household heads | | |
| | For other family members | | |
| | For transportation expenses | | |
| | For the non-reimbursed medical expenses of non-disabled or non-elderly families | | |
| | Other (describe below) | | |

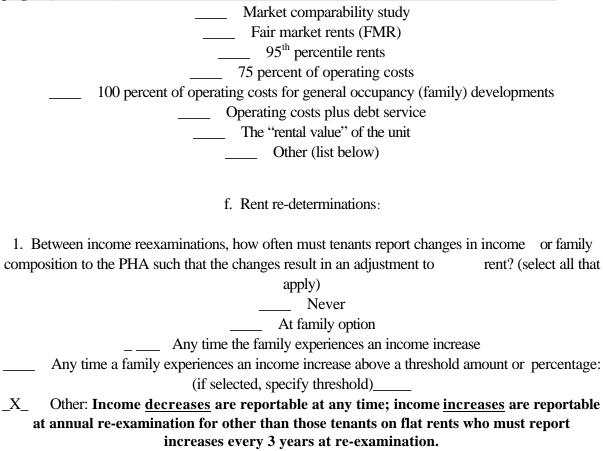
e. Ceiling rents 1. Do you have ceiling rents? (rents set at a level lower than 30% of adjusted income) (select one) Yes for all developments ______Yes but only for some developments ______No

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

For all developments
For all general occupancy developments (not elderly or disabled or elderly only)
For specified general occupancy developments
For certain parts of developments; e.g., the high-rise portion
For certain size units; e.g., larger bedroom sizes
Other (list below)

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

complete sub-component 4B. Oness otherwise specified, an questions in this section apply only to the tenant-based section 8 assistance program (vouchers, and until completely merged into the voucher program, certificates).



g. ____Yes _X___ No: Does the PHA plan to implement individual savings accounts for residents (ISAs) as an alternative to the required 12 month disallowance of earned income and phasing in of rent increases in the next year?

(2) Flat Rents

In setting the market-based flat rents, what sources of information did the PHA use to establish comparability? (select all that apply.)
 The section 8 rent reasonableness study of comparable housing X Survey of rents listed in local newspaper

X Survey of similar unassisted units in the neighborhood

____ Other (list/describe below)

B. Section 8 Tenant-Based Assistance

(1) Payment Standards

| a. What is the PHA's payment standard? (select the category that best describes your standard) At or above 90% but below100% of FMR 100% of FMR | | | |
|--|--|--|--|
| Above 100% but at or below 110% of FMR Above 110% of FMR (if HUD approved; describe circumstances below) | | | |
| b. If the payment standard is lower than FMR, why has the PHA selected this standard? (select all that apply) | | | |
| FMRs are adequate to ensure success among assisted families in the PHA's segment of the FMR area | | | |
| The PHA has chosen to serve additional families by lowering the payment standard Reflects market or submarket Other (list below) | | | |
| c. If the payment standard is higher than FMR, why has the PHA chosen this level? (select all that apply) | | | |
| FMRs are not adequate to ensure success among assisted families in the PHA's segment of the FMR area | | | |
| Reflects market or submarket | | | |
| To increase housing options for families Other (list below) | | | |
| d. How often are payment standards reevaluated for adequacy? (select one) X Annually Other (list below) | | | |
| e. What factors will the PHA consider in its assessment of the adequacy of its payment standard? (select all that apply) X Success rates of assisted families X Rent burdens of assisted families Other (list below) | | | |

(2) Minimum Rent

upcoming fiscal year, and expected turnover in each. (Use "NA" to indicate that the PHA does not operate any of the programs listed below.)

a. What amount best reflects the PHA's minimum rent? (select one) ______ \$0

______\$1-\$25 __X___\$26-\$50

b. ____Yes __X__ No: Has the PHA adopted any discretionary minimum rent hardship exemption policies? (if yes, list below)

5. Operations and Management

[24 CFR Part 903.7 9 (e)]

A. PHA Management Structure

(select one)

_X___ An organization chart showing the PHA's management structure and organization is attached. See Attachment "J"

_____ A brief description of the management structure and organization of the PHA follows:

| Program Name | Units or Families | Expected |
|-----------------------------|-------------------|----------|
| | Served at Year | Turnover |
| | Beginning | |
| Public Housing | 90 | 3-4 |
| Section 8 Vouchers | 96 | 5-6 |
| Section 8 Certificates | 165 | 5-6 |
| Section 8 Mod Rehab | n/a | |
| Special Purpose Section | n/a | |
| 8 Certificates/Vouchers | | |
| (list individually) | | |
| Public Housing Drug | n/a | |
| Elimination Program | | |
| (PHDEP) | | |
| | | |
| | | |
| Other Federal | n/a | |
| Programs(list individually) | | |
| | | |
| | | |

B. HUD Programs Under PHA Management

Section 8-Only PHAs are exempt from sub-component oA.

management of public housing, including a description of any measures necessary for the prevention or eradication of pest infestation (which includes cockroach infestation) and the policies governing Section 8 management.

C. Management and Maintenance Policies

 (1) Public Housing Maintenance and Management: (list below) Maintenance Policy Pet Policy Pest Control Policy

Admissions and Continued Occupancy Policy

(2) Section 8 Management: (list below) Section 8 Administrative Plan

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

A. Public Housing

1. ____Yes ___x__No: Has the PHA established any written grievance procedures in addition to federal requirements found at 24 CFR Part 966, Subpart B, for residents of public housing?

If yes, list additions to federal requirements below:

2. Which PHA office should residents or applicants to public housing contact to initiate the PHA grievance

process? (select all that apply)

___X__ PHA main administrative office

PHA development management offices

____ Other (list below)

B. Section 8 Tenant-Based Assistance

1. ____Yes ___x__No: Has the PHA established informal review procedures for applicants to the Section 8 tenant-based assistance program and informal hearing procedures for families assisted by the Section 8 tenant-based assistance program in addition to federal requirements found at 24 CFR 982?

can be completed by using the 5 Tear Action Fian table provided in the table horary at the end of the PHA Plan template **OR** by completing and attaching a properly updated HUD-52834. Statement tables provided in the table library at the end of the PHA Plan template **OR**, at the PHA's option, by completing and attaching a properly updated HUD-52837.

If yes, list additions to federal requirements below:

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

_X___ PHA main administrative office ____ Other (list below)

7. Capital Improvement Needs

[24 CFR Part 903.7 9 (g)]

A. Capital Fund Activities

(1) Capital Fund Program Annual Statement

Select one:

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

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

(2) Optional 5-Year Action Plan

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

b. If yes to question a, select one:

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

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

B. HOPE VI and Public Housing Development and Replacement

Activities (Non-Capital Fund)

Yes X No: a) Has the PHA received a HOPE VI revitalization grant? (if no, skip to question c; if yes, provide responses to question b for each grant, copying and completing as many times as necessary) b) Status of HOPE VI revitalization grant (complete one set of questions for each grant) 1. Development name: 2. Development (project) number: 3. Status of grant: (select the statement that best describes the current status) Revitalization Plan under development Revitalization Plan submitted, pending approval Revitalization Plan approved Activities pursuant to an approved Revitalization Plan underway Yes X No: c) Does the PHA plan to apply for a HOPE VI Revitalization grant in the Plan year? If yes, list development name/s below: d) Will the PHA be engaging in any mixed-finance development activities Yes X No: for public housing in the Plan year? If yes, list developments or activities below: Yes X No: e) Will the PHA be conducting any other public housing development or replacement activities not discussed in the Capital Fund Program Annual Statement? If yes, list developments or activities below: 8. **Demolition and Disposition** [24 CFR Part 903.7 9 (h)] 1. ____Yes _X___ No: Does the PHA plan to conduct any demolition or disposition activities (pursuant to section 18 of the U.S. Housing Act of 1937 (42 U.S.C. 1437p)) in the plan Fiscal Year? (If "No", skip to component 9; if "yes", complete one activity description for each development.)

2. Activity Description

_Yes ____ No: Has the PHA provided the activities description information in the optional Public Housing Asset Management Table? (If "yes", skip to component 9. If "No", complete the Activity Description table below.)

| Demolition/Disposition Activity Description | | | |
|--|--|--|--|
| 1a. Development name: | | | |
| 1b. Development (project) number: | | | |
| 2. Activity type:Demolition | | | |
| Disposition | | | |
| 3. Application status (select one) | | | |
| Approved | | | |
| Submitted, pending approval | | | |
| Planned application | | | |
| 4. Date application approved, submitted, or planned for submission: (DD/MM/YY) | | | |
| | | | |
| 5. Number of units affected: | | | |
| Coverage of action (select one) | | | |
| Part of the development | | | |

____ Part of the development

Total development

7. Timeline for activity:

a. Actual or projected start date of activity:

b. Projected end date of activity:

<u>9. Designation of Public Housing for Occupancy by Elderly Families or</u> <u>Families with Disabilities or Elderly Families and Families with</u> <u>Disabilities</u>

[24 CFR Part 903.7 9 (i)]

 Yes _X _____ No: Has the PHA designated or applied for approval to designate or does the PHA plan to apply to designate any public housing for occupancy only by the elderly families or only by families with disabilities, or by elderly families and families with disabilities or will apply for designation for occupancy by only elderly families or only families with disabilities, or by elderly families and families with disabilities as provided by section 7 of the U.S. Housing Act of 1937 (42 U.S.C. 1437e) in the upcoming fiscal year? (If "No", skip to component 10. If "yes", complete one activity description for each development,

unless the PHA is eligible to complete a streamlined submission; PHAs completing streamlined submissions may skip to component 10.)

2. Activity Description

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

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

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

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

1. ____Yes __X__ No: Have any of the PHA's developments or portions of developments been identified by HUD or the PHA as covered under section 202 of the HUD FY 1996 HUD Appropriations Act? (If "No", skip to component 11; if "yes", complete one activity description for each identified development, unless

eligible to complete a streamlined submission. PHAs completing streamlined submissions may skip to component 11.)

2. Activity Description N/A

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

| Conversion of Public Housing Activity Description | | | | |
|--|--|--|--|--|
| 1a. Development name: | | | | |
| 1b. Development (project) number: | | | | |
| 2. What is the status of the required assessment? | | | | |
| Assessment underway | | | | |
| Assessment results submitted to HUD | | | | |
| Assessment results approved by HUD (if marked, proceed to next question) | | | | |
| Other (explain below) | | | | |
| | | | | |
| 3YesNo: Is a Conversion Plan required? (If yes, go to block 4; if no, go to | | | | |
| block 5.) | | | | |
| 4. Status of Conversion Plan (select the statement that best describes the current status) | | | | |
| Conversion Plan in development | | | | |
| Conversion Plan submitted to HUD on: (DD/MM/YYYY) | | | | |
| Conversion Plan approved by HUD on: (DD/MM/YYYY) | | | | |
| Activities pursuant to HUD-approved Conversion Plan underway | | | | |
| | | | | |
| 5. Description of how requirements of Section 202 are being satisfied by means other than | | | | |
| conversion (select one) | | | | |
| Units addressed in a pending or approved demolition application (date submitted or | | | | |
| approved: | | | | |
| Units addressed in a pending or approved HOPE VI demolition application (date | | | | |
| submitted or approved:) | | | | |
| Units addressed in a pending or approved HOPE VI Revitalization Plan (date | | | | |
| submitted or approved:) | | | | |
| Requirements no longer applicable: vacancy rates are less than 10 percent | | | | |
| Requirements no longer applicable: site now has less than 300 units | | | | |
| Other: (describe below) | | | | |
| | | | | |

11. Homeownership Programs Administered by the PHA

[24 CFR Part 903.7 9 (k)]

A. Public Housing

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

2. Activity Description

____Yes ____No: Has the PHA provided all required activity description information for this component in the **optional** Public Housing Asset Management Table? (If "yes", skip to component 12. If "No", complete the Activity Description table below.)

| Public Housing Homeownership Activity Description | | | | | |
|--|--|--|--|--|--|
| (Complete one for each development affected) | | | | | |
| 1a. Development name: | | | | | |
| 1b. Development (project) number: | | | | | |
| 2. Federal Program authority: | | | | | |
| HOPE I | | | | | |
| 5(h) | | | | | |
| Turnkey III | | | | | |
| Section 32 of the USHA of 1937 (effective 10/1/99) | | | | | |
| 3. Application status: (select one) | | | | | |
| Approved; included in the PHA's Homeownership Plan/Program | | | | | |
| Submitted, pending approval | | | | | |
| Planned application | | | | | |
| 4. Date Homeownership Plan/Program approved, submitted, or planned for submission: | | | | | |
| (DD/MM/YYYY) | | | | | |

Number of units affected:
 Coverage of action: (select one)
 Part of the development
 Total development

B. Section 8 Tenant Based Assistance

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

2. Program Description:

a. Size of Program

___Yes ____No: Will the PHA limit the number of families participating in the section 8 homeownership option?

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

____25 or fewer participants____26 - 50 participants____51 to 100 participants____more than 100 participants

b. PHA-established eligibility criteria

Yes X_No: Will the PHA's program have eligibility criteria for participation in its Section 8 Homeownership Option program in addition to HUD criteria? If yes, list criteria below:

12. PHA Community Service and Self-sufficiency Programs

[24 CFR Part 903.7 9 (l)]

A. PHA Coordination with the Welfare (TANF) Agency

1. Cooperative agreements:

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

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

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

_X___ Information sharing regarding mutual clients (for rent determinations and otherwise)

_X___ Coordinate the provision of specific social and self-sufficiency services and programs to

eligible families

Jointly administer programs

____ Partner to administer a HUD Welfare-to-Work voucher program

Joint administration of other demonstration program

_X___ Other (describe)

B. Services and programs offered to residents and participants

(1) General

a. Self-Sufficiency Policies

Which, if any of the following discretionary policies will the PHA employ to enhance the economic and social self-sufficiency of assisted families in the following areas? (select all that

apply)

___X__ Public housing rent determination policies

___X__ Public housing admissions policies

___X___ Section 8 admissions policies

Preference in admission to section 8 for certain public housing families

Preferences for families working or engaging in training or education programs for non-

housing programs operated or coordinated by the PHA

____ Preference/eligibility for public housing homeownership option participation

Preference/eligibility for section 8 homeownership option participation

____ Other policies (list below)

b. Economic and Social self-sufficiency programs

Yes X No: Does the PHA coordinate, promote or provide any programs to enhance the economic and social self-sufficiency of residents? (If "yes", complete the following table; if "no" skip to sub-component 2, Family Self Sufficiency Programs. The position of the table may be altered to facilitate its use.)

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

a. Participation Description

| Family Self Sufficiency (FSS) Participation | | | | | | |
|--|--|--|--|--|--|--|
| ProgramRequired Number of Participants (start of FY 2000 Estimate)Actual Number of Participant (As of: DD/MM/YY) | | | | | | |
| Public Housing | | | | | | |
| Section 8 | | | | | | |

Yes _____ No: If the PHA is not maintaining the minimum program size required by HUD, does the most recent FSS Action Plan address the steps the PHA plans to take to achieve at least the

minimum program size?

If no, list steps the PHA will take below:

C. Welfare Benefit Reductions

1. The PHA is complying with the statutory requirements of section 12(d) of the U.S. Housing Act

Section 8 Only PHAS may skip to component 15. High Performing and small PHAS mat are participating in PHDEP and are submitting a PHDEP Plan with this PHA Plan may skip to sub-component D.

of 1937 (relating to the treatment of income changes resulting from welfare program requirements)

- by: (select all that apply)
- __X_ Adopting appropriate changes to the PHA's public housing rent determination policies and train staff to carry out those policies

__X_ Informing residents of new policy on admission and reexamination

- __X_ Actively notifying residents of new policy at times in addition to admission and reexamination.
- __X_ Establishing or pursuing a cooperative agreement with all appropriate TANF agencies regarding the exchange of information and coordination of services
- Establishing a protocol for exchange of information with all appropriate TANF agencies Other: (list below)

See Attachment N <u>13. PHA Safety and Crime Prevention Measures</u> N/A - Authority is not participating in PHDEP

[24 CFR Part 903.7 9 (m)]

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

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

apply)

High incidence of violent and/or drug-related crime in some or all of the PHA's

developments

High incidence of violent and/or drug-related crime in the areas surrounding or adjacent to

the PHA's developments

Residents fearful for their safety and/or the safety of their children

_ Observed lower-level crime, vandalism and/or graffiti

People on waiting list unwilling to move into one or more developments due to perceived

and/or actual levels of violent and/or drug-related crime

____ Other (describe below)

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

_ Safety and security survey of residents

Analysis of crime statistics over time for crimes committed "in and around" public housing authority

_____ Analysis of cost trends over time for repair of vandalism and removal of graffiti Resident reports

PHA employee reports Police reports Demonstrable, quantifiable success with previous or ongoing anticrime/anti drug programs Other (describe below)

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

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

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

_____ Contracting with outside and/or resident organizations for the provision of crime- and/or drug-prevention activities

____ Crime Prevention Through Environmental Design

_____ Activities targeted to at-risk youth, adults, or seniors

Volunteer Resident Patrol/Block Watchers Program

_____ Other (describe below)

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

C. Coordination between PHA and the police

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

_____ Police involvement in development, implementation, and/or ongoing evaluation of drug-

elimination plan

Police provide crime data to housing authority staff for analysis and action

Police have established a physical presence on housing authority property (e.g., community policing office, officer in residence)

Police regularly testify in and otherwise support eviction cases

Police regularly meet with the PHA management and residents

Agreement between PHA and local law enforcement agency for provision of above-

baseline law enforcement services

Other activities (list below)

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

D. Additional information as required by PHDEP/PHDEP Plan

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

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

15. Civil Rights Certifications

[24 CFR Part 903.7 9 (o)]

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

16. Fiscal Audit

[24 CFR Part 903.7 9 (p)]

1. _X___Yes ____ No: Is the PHA required to have an audit conducted under section 5(h)(2) of the U.S. Housing Act of 1937 (42 U S.C. 1437c(h))?

(If no, skip to component 17.)

2. _X_Yes ____ No: Was the most recent fiscal audit submitted to HUD?

3. ____Yes _X__ No: Were there any findings as the result of that audit?

4. <u>Yes</u> No: If there were any findings, do any remain unresolved?

If yes, how many unresolved findings remain?_____

5. ____Yes ____No: Have responses to any unresolved findings been submitted to HUD? If not, when are they due (state below)?

17. PHA Asset Management N/A

[24 CFR Part 903.7 9 (q)]

1. <u>Yes</u> No: Is the PHA engaging in any activities that will contribute to the long-term asset management of its public housing stock , including how the Agency will plan for long-term operating, capital investment, rehabilitation, modernization, disposition, and other needs that have **not** been addressed elsewhere in this PHA Plan?

2. What types of asset management activities will the PHA undertake? (select all that apply) _____ Not applicable

____ Private management

Development-based accounting
 Comprehensive stock assessment
 Other: (list below)

3. <u>Yes</u> No: Has the PHA included descriptions of asset management activities in the **optional** Public Housing Asset Management Table?

18. Other Information

[24 CFR Part 903.7 9 (r)]

A. Resident Advisory Board Recommendations

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

If yes, the comments are: (if comments were received, the PHA MUST select one)
 __X__ Attached at Attachment F

_____ Provided below:

3. In what manner did the PHA address those comments? (select all that apply)
 Considered comments, but determined that no changes to the PHA Plan were necessary.
 _X___ The PHA changed portions of the PHA Plan in response to comments
 List changes below: Capital Fund Program was altered to address comments of residents as to necessary improvements. See Attachment F

____ Other: (list below)

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

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

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

3. Description of Resident Election Process

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

_ Candidates were nominated by resident and assisted family organizations

____ Candidates could be nominated by any adult recipient of PHA assistance

Self-nomination: Candidates registered with the PHA and requested a place on ballot _____ Other: (describe)

b. Eligible candidates: (select one)
_____ Any recipient of PHA assistance
_____ Any head of household receiving PHA assistance
_____ Any adult recipient of PHA assistance
_____ Any adult member of a resident or assisted family organization
_____ Other (list)

c. Eligible voters: (select all that apply)
 All adult recipients of PHA assistance (public housing and section 8 tenant-based assistance)
 Representatives of all PHA resident and assisted family organizations Other (list)

C. Statement of Consistency with the Consolidated Plan

1. Consolidated Plan jurisdiction: (provide name here) Monmouth County

2. The PHA has taken the following steps to ensure consistency of this PHA Plan with the Consolidated Plan for the jurisdiction: (select all that apply)

___X__ The PHA has based its statement of needs of families in the jurisdiction on the needs expressed in the Consolidated Plan/s.

___X___ The PHA has participated in any consultation process organized and offered by the Consolidated Plan agency in the development of the Consolidated Plan.

___X__ The PHA has consulted with the Consolidated Plan agency during the development of this PHA Plan.

___X__ Activities to be undertaken by the PHA in the coming year are consistent with the initiatives contained in the Consolidated Plan. (list below)

See Attachment K

____ Other: (list below)

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

See Attachment K D. Other Information Required by HUD

HUD 50075

Attachment A

RED BANK HOUSING AUTHORITY AGENCY PLAN --EXECUTIVE SUMMARY--

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

As indicated, the Authority has adopted the following mission of HUD: To promote adequate and affordable housing, economic opportunity and a suitable living environment free from discrimination.

The plans, statements, and policies set forth and/or referenced in this Agency Plan all lead toward the accomplishment of the Authority's goals and objectives as outlined under Section B of the 5 Year Plan. The highlights of the major initiatives of the Authority's Agency Plan are as follows:

- 1. The Authority seeks to continue its outreach program to attract new landlords to participate in the Section 8 program;
- 2. The Authority has applied for and been awarded 25 additional welfare-to-work vouchers in order to provide assistance to more participants.
- 3. The Authority seeks to maintain public housing vacancies at zero.
- 4. The Authority seeks to renovate/modernize public housing sites as needed.
- 5. The Authority intends to re-open its Public Housing Waiting List.

Attachment **B**

Five Year Plan: Progress Statement

The Red Bank Housing Authority has made the following progress in meeting its stated mission and goals as expressed in the previously submitted Agency Plan for FY 2000.

- * The Authority has applied for and been awarded 25 welfare-to-work rental vouchers in its effort to provide assistance to more participants and further encourage economic self-sufficiency.
- * The Authority has maintained its public housing vacancy rate at 0%; thus maximizing the number of on-line units.
- * The Authority has completed necessary improvements/renovations in accordance with its Five Year Plan for Capital Fund spending.

ATTACHMENT C

Summary of Policy and Program Changes

The Red Bank Housing Authority has made no major changes to the policies and programs referenced in is FY 2000 Agency Plan with the following exception(s):

- * The Authority has decided to delay, indefinitely, the implementation of the Section 8 Homeownership Program in order to evaluate the program's feasibility in the Red Bank area and the Authority's capacity to administrate such a program.
- * The Authority has phased out ceiling rents in accordance with the applicable HUD regulations.

Table Library

ATTACHMENT D

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

Annual Statement Capital Fund Program (CFP) Part I: Summary Capital Fund Grant Number: NJ 39 PO46915-01 FFY of Grant Approval

| Line No. | Summary by Development Account | Total Estimated Cost |
|----------|---|----------------------|
| 1 | Total Non-CGP Funds | |
| 2 | 1406 Operations | |
| 3 | 1408 Management Improvements | |
| 4 | 1410 Administration | 14.087 |
| 5 | 1411 Audit | |
| 6 | 1415 Liquidated Damages | |
| 7 | 1430 Fees and Costs | 15.400 |
| 8 | 1440 Site Acquisition | |
| 9 | 1450 Site Improvement | |
| 10 | 1460 Dwelling Structures | 66.386 |
| 11 | 1465.1 Dwelling Equipment-Nonexpendable | |
| 12 | 1470 Nondwelling Structures | |
| 13 | 1475 Nondwelling Equipment | 45.000 |
| 14 | 1485 Demolition | |
| 15 | 1490 Replacement Reserve | |
| 16 | 1492 Moving to Work Demonstration | |
| 17 | 1495.1 Relocation Costs | |
| 18 | 1498 Mod Used for Development | |
| 19 | 1502 Contingency | |
| 20 | Amount of Annual Grant (Sum of lines 2-19) | 140.873 |
| 21 | Amount of line 20 Related to LBP Activities | |
| 22 | Amount of line 20 Related to Section 504 Compliance | |
| 23 | Amount of line 20 Related to Security | |
| 24 | Amount of line 20 Related to Energy Conservation Measures | |

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

| Development Number/Name | General Description of Major Work Categories | Development Account | Total Estimated |
|--|--|------------------------|-----------------------|
| HA-Wide Activities NI 46-1 Evergreen Terrace | Kitchen Renovation Phase 2 | Number 1460 | <u>Cost</u> 66 386 |
| PHA-Wide Activities | *New multi-passenger van with handicapped-accessible entry | 1475 | 45,000 |
| | * Modernization Coordinator | 1430 | 8,000 |
| | * A/E Services | 1430 | 7,400 |
| | Admin Salaries & Benefits & Sundry costs | 1410 | 14,087 |
| | TOTAL | | 140,873 |

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

| Development Number/Name HA-Wide Activities | All Funds Obligated (Quarter Ending Date) | All Funds Expended (Quarter Ending Date) |
|--|--|--|
| NJ 46-1 Evergreen Terrace | 3/31/2002 | 3/31/2004 |
| NJ 46-3 Montgomery Terrace | 3/31/2002 | 3/31/2004 |
| PHA Wide Activities | 3/31/2002 | 3/31/2004 |

Table Library

ATTACHMENT "E"

Optional Table for 5-Year Action Plan for Capital Fund (Component 7) * Figures Reflect spending for FY 2001-2005

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

| Optional 5-Year Action Plan Tables | | | | | | |
|---|---|--|-------------------------|------------|-------------------------------|--------------------------------|
| Development Number | Development Name (or indicate PHA wide) | Number V Units | Number Vacant Units | | % Vacancies in Development | |
| HA-wide | Evergreen Terrace and Montgomery Terrace | 0 | 0 | | | |
| Description of Needed Phys | sical Improvements or Management | Improvements | Esti | mated Cost | | ned Start Date Fiscal Year) |
| Computer Hardware and/or Software Development of Internal Control Systems Training Assistance Resident Programs Architect/Engineer Services Modernization Coordinator Administration (Salaries, Benefits, Sundry costs) | | 10,3 2,50 2,50 4,00 29,6 32,0 56,3 | 0 0 0 08 00 | 2002 | 3 | |
| Total estimated cost over n | next 4 years | | 137, | 256 | | |

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

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

| | Optional 5-Year Action Plan Tables | | | | | | |
|-------|------------------------------------|------------------------|-----------------------|---------------|----------------|--|--|
| | Development Number | Development Name | Number Va | % Vacancies | | | |
| | | (or indicate PHA wide) | | | in Development | | |
| | NJ 46-1 | Montgomery Terrace | 0 | | 0 | | |
| Desci | ription of Needed Physica | ment | Estimated Cost | Planned Start | | | |
| Impr | Improvements | | | | Date | | |
| | | | | | (HA Fiscal | | |
| | | | | | Year) | | |

| Site Improvements: | * Landscaping | 6,000 | 2002 |
|-------------------------|----------------------------------|---------|------|
| - | * Playground and Tot-Lots | 16,000 | 2002 |
| | * Refuse Stations | 6,000 | 2002 |
| | * Exterior Lighting | 12,000 | 2005 |
| Dwelling Units: | * Electrical Upgrades | 15,000 | 2005 |
| | * Painting | 7,000 | 2005 |
| | * Flooring | 15,000 | 2002 |
| | * Bathroom Renovations | 33,384 | 2002 |
| | * Security Services | 34,000 | 2003 |
| Non-Dwelling Structure | es: * Maintenance Building/Space | 8,000 | 2004 |
| | * Community Building/Space | 8,000 | 2004 |
| | * Laundry Facilities | 6,000 | 2004 |
| Non-Dwelling Equipme | ent: * Maintenance Equipment | 8,000 | 2004 |
| | * Community Space Equipment | 2,500 | 2004 |
| | * Computer Equipment | 2,500 | 2004 |
| | * Automotive Equipment | 8,000 | 2004 |
| Total estimated cost ov | er next 4 years | 187,384 | |

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

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

| Optional 5-Year Action Plan Tables | | | | | | | |
|--|--|---------------------|--|-------------------------------|-----------------------------------|---|--|
| Development Number | Development Name (or indicate PHA wide) | Number Vacant Units | | % Vacancies in Development | | | |
| NJ 46-3 | Evergreen Terrace | 0 | | 0 | • | 1 | |
| Description of Needed Physical Improvements or Management Improvements | | ovements | | | Planned Start I (HA Fiscal Yea | | |

HUD 50075

| Site Improvements: * Parking Areas (re-surface) | 16,600 | 2005 |
|--|---------|------|
| * Landscaping | 16,111 | 2003 |
| Dwelling Units: * Kitchens | 35,000 | 2002 |
| * Bathroom Renovation | 40,000 | 2004 |
| * Baseboard Heating (repair/replace) | 28,384 | 2004 |
| * Baseboard Heating (repair/replace) | 36,184 | 2005 |
| Non-Dwelling Structures: * Administrative Building/Space | 14,600 | 2005 |
| * Maintenance Building/Space | 10,000 | 2005 |
| * Laundry Facilities | 4,000 | 2003 |
| Non-Dwelling Equipment: * Office Furniture/Equipment | 13,400 | 2003 |
| * Maintenance Equipment | 9,573 | 2003 |
| * Community Space Equipment | 5,000 | 2003 |
| * Automotive Equipment | 10,000 | 2003 |
| | | |
| | | |
| Total estimated cost over next 4 years | 238,852 | |

HUD 50075

ATTACHMENT F

RESIDENT ADVISORY BOARD RECOMMENDATIONS:

Meeting Date: September 14, 2000

Residents Comments:

- 1. Residents supported the Five Year Action Plan for Capital Fund and suggested certain necessary improvements (i.e., baseboard heating) which were incorporated therein.
- 2. Community Service requirements for all non-exempt residents were discussed.
- 3. Residents were in favor of a restrictive Pet policy.

Authority's Responses:

- 1. Authority's incorporated resident concerns into its Five Year Action Plan for Capital Fund.
- 2. Authority has implemented a comprehensive Pet Policy with reasonable restrictions as permitted under the applicable HUD regulations.

ATTACHMENT G

Membership of Resident Advisory Board

- 1. Marilyn Scott (Public Housing Senior)
- 2. Connie Laing (Public Housing Family)
- 3. Carol Hill (Public Housing Family)
- 4. Sandra Meekins (Public Housing Family)
- 5. Shirley Bingham (Section 8)
- 6. Knoyka Felicie (Section 8)
- 7. Julie Ribot (Section 8)
- 8. Donald Rousell (Section 8)
- 9. Barbara Sheridan (Section 8)
- 10. Melissa Turner (Section 8)

ATTACHMENT H

Resident Membership on the PHA Governing Board

The Red Bank Housing Authority is aware of the recently enacted HUD regulation requiring PHA's to include at least one resident on its governing board. The Authority meets the exemption criteria provided under Section 2(b)(2) of the U.S. Housing Act of 1937 in that:

- * The Authority is a Section 8 only agency; and
- * The Authority has notified its Resident Advisory Board of the availability of a position on the governing board and has waited a reasonable time for a positive response; however, no Section 8 participant has expressed interest in serving said capacity.

The Authority is aware that this recruitment process must be repeated on an annual basis. Decisions regarding appointment to the PHA Governing Board are made by the Borough Mayor and Council. The next position on the Board will be available in December 2000.

ATTACHMENT I

DECONCENTRATION POLICY

It is the Red Bank Housing Authority's policy to provide for deconcentration of poverty and encourage income mixing by bringing higher income families into lower income developments and lower income families into higher income developments. Toward this end, we will skip families on the waiting list to reach other families with lower or higher income. We will accomplish this in a uniform and non-discriminating manner.

The Housing Authority will affirmatively market our housing to all eligible income groups. Lower income residents will not be steered toward lower income developments and higher income people will not be steered toward higher income developments.

Prior to the beginning of each fiscal year, we will analyze the income levels of families residing in each of our developments, the income levels of census tracts in which our developments are located, and the income levels of the families on the applicable waiting list(s). Based on this analysis, we will determine the level of marketing strategies and deconcentration incentives to be implemented.

DECONCENTRATION INCENTIVES

The Housing Authority may offer one or more incentives to encourage applicant families whose income classification would help to meet deconcentration goals of a particular development.

Various incentives may be used at different times, or under different conditions, but will always be provided in a consistent and nondiscriminatory manner.

ATTACHMENT J

RED BANK HOUSING AUTHORITY MANAGEMENT STRUCTURE/ORGANIZATION

Board of Commissioners

Executive Director

Assistant Executive Director

Section 8 Housing Coordinator

Maintenance Supervisor

ATTACHMENT K

CONSISTENCY WITH CONSOLIDATED PLAN

The Red Bank Housing Authority's Agency Plan Is Consistent With The County's Consolidated Plan In That:

- 1. The Authority has recently applied for and received additional welfare-to-work rental vouchers in order to offer assistance to a greater number of participants and encourage economic self-sufficiency.
- 2. The Authority intends to make continued efforts to attract potential landlords to participate in the Section 8 Program in order to increase housing options for program participants.
- 3. The Authority seeks to maintain public housing vacancies at zero in order to minimize the amount of units off-line.
- 4. The Authority seeks to renovate/improve public housing sites as necessary in order to provide more suitable housing.

ATTACHMENT L

PHA Criteria for Amendments to Plan

Pursuant to applicable HUD regulations, a PHA may change or modify its Annual and Five Year Plans and the policies described therein. However, any "significant amendment or modification" to the Annual Plan and any "substantial deviations" from the Five Year Plan would require that the PHA submit a revised Plan that has met full public process requirements, including Resident Advisory Board review.

The Red Bank Housing Authority will consider the following to be significant amendments or modifications:

- * changes to rent or admissions policies or organization of the waiting list
- * changes to Operations and Management Policies
- * changes to Grievance procedures
- * additions of non-emergency work items (items not included in the current Annual Statement or 5 Year Action Plan) or change in use of replacement reserve funds under the Capital Fund
- * additions of new activities not included in the current PHDEP Plan
- * and any change with regard to demolition or disposition, designation, homeownership programs or conversion activities.

The Authority will consider the following to constitute a substantial deviation from the Five Year Plan:

* Any modification to the PHA's mission statement or any substantial modification to the PHA's goals and/or objectives

An exception to these definitions will be made for any of the above that are adopted to reflect changes in HUD regulatory requirements; such changes will not be considered substantial deviations or significant amendments by this Authority.

ATTACHMENT M

Summary of Pet Policy

In accordance with the new HUD regulations, implementing Section 31 of the U.S. Housing Act of 1937, the Red Bank Housing Authority has adopted a formal Pet Policy permitting public housing residents in general occupancy developments to own pets. As expressed in the said Pet Policy, pet ownership is subject to the following "reasonable requirements":

- 1. Limitations on the size of the pet and the number of pets permitted in a given unit
- 2. Issuance of Pet Permit and payment of fee
- 3. Procurance of Insurance policy for liability and property damage
- 4. Registration of pet with municipality
- 5. Posting of security deposit for damage done by pet to apartment
- 6. Inspection of apartment, upon notice, to ensure compliance

ATTACHMENT N

Implementation of Public Housing Resident Community Service Requirement

Pursuant to Section 12 (c) of the U.S. Housing Act of 1937, each adult resident of public housing must participate in eight (8) hours of community service and/or economic self-sufficiency activities per month, unless they meet criteria for an exemption. In response to the implementation of Section 12(c), the Red Bank Housing Authority will take the following administrative steps:

- 1. The Authority's Admissions and Occupancy Policy shall include its full policy on the community service requirement
- 2. The Authority shall identify all adult family members who are apparently not exempt from the community service requirement. The Authority shall notify in writing such family members of the community service requirement and of the categories of individuals who are exempt from the requirement.
- 3. The Authority will coordinate with social service agencies, local schools, and the appropriate Human Resources Office in identifying a list of volunteer community service programs.
- 4. The Authority will assign family members to a volunteer coordinator who will assist the family members in identifying appropriate volunteer positions and in meeting their responsibilities. The volunteer coordinator will track the family members progress monthly and will meet with the family members as needed to bests encourage compliance.