

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

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# **PHA Plans**

5 Year Plan for Fiscal Years 2000 - 2004  
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: JOHNSTOWN HOUSING AUTHORITY**

**PHA Number: PA019**

**PHA Fiscal Year Beginning: (mm/yyyy) 01/2001**

**Public Access to Information**

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

- 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)**

- 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)**

- Main business office of the PHA**
- PHA development management offices**
- Other (list below)**

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

**A. Mission**

State the PHA's mission for serving the needs of low-income, very low income, and extremely low-income families in the PHA's jurisdiction (select one of the choices below).

**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)**

The mission of the Johnstown Housing Authority is to provide decent, safe, sanitary, and affordable housing to qualified persons. The vision of the Johnstown Housing Authority is to improve the quality of life for all residents by creating and implementing programs which encourage self-sufficiency, homeownership, greater involvement, responsibility and pride.

**B. Goals**

The goals and objectives listed below are derived from HUD's strategic Goals and Objectives and those emphasized in recent legislation. PHAs may select any of these goals and objectives as their own, or 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 THIS YEAR. (Quantifiable measures would include, for example, numbers of families served or PHAS scores achieved.) PHAs should

**Apply for additional rental vouchers:**

**Reduce public housing vacancies:** Achieve a 3% to 5% vacancy rate by yr.

2004

**Leverage private or other public funds to create additional housing opportunities:**

**Acquire or build units or developments** The JHA or its Non-Profit Corp. will acquire/build at least 5 units by yr. 2004

**Other (list below)**

**PHA Goal: Improve the quality of assisted housing**

**Objectives:**

**Improve public housing management: (PHAS score)** Increase total score by 10 points by yr. 2004

**Improve voucher management: (SEMAP score)**

**Increase customer satisfaction:** Obtain maximum score of 10 points under

Resident

component of PHAS by yr. 2004

**Concentrate on efforts to improve specific management functions:  
(list; e.g., public housing finance; voucher unit inspections)**

**Renovate or modernize public housing units:** Receive 100% of total funding requested under the Capital Improvement Program for the five years.

**Demolish or dispose of obsolete public housing:** Demolish at least 81 units by yr. 2004

**Provide replacement public housing:**

**Provide replacement vouchers:**

**Other: (list below)**

**PHA Goal: Increase assisted housing choices**

**Objectives:**

**Provide voucher mobility counseling:**

**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**

**PHA Goal: Provide an improved living environment**

**Objectives:**

**Implement measures to deconcentrate poverty by bringing higher income public housing households into lower income developments:**

**Implement measures to promote income mixing in public housing by assuring access for lower income families into higher income developments:**

**Implement public housing security improvements:**

**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**

\_\_\_\_\_ **PHA Goal: Promote self-sufficiency and asset development of assisted  
Objectives:**

\_\_\_\_\_ **Increase the number and percentage of employed persons in assisted families:**

\_\_\_\_\_ **Provide or attract supportive services to improve assistance recipients' employability:**

\_\_\_\_\_ **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**

\_\_\_\_\_ **PHA Goal: Ensure equal opportunity and affirmatively further fair housing  
Objectives:**

\_\_\_\_\_ **Undertake affirmative measures to ensure access to assisted housing regardless of race, color, religion national origin, sex, familial status, and disability:**

\_\_\_\_\_ **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:**

\_\_\_\_\_ **Undertake affirmative measures to ensure accessible housing to persons with all varieties of disabilities regardless of unit size required:**

\_\_\_\_\_ **Other: (list below)**

**Other PHA Goals and Objectives: (list below)**

**Annual PHA Plan**  
**PHA Fiscal Year 2001**  
[24 CFR Part 903.7]

**Annual Plan Type:**

Select which type of Annual Plan the PHA will submit.

**Standard Plan**

**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)]

Provide a brief overview of the information in the Annual Plan, including highlights of major initiatives and discretionary policies the PHA has included in the Annual Plan.

The Johnstown 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.

We have adopted the following mission and vision statement to guide the activities of the Johnstown Housing Authority.

The mission of the Johnstown Housing Authority is to provide decent, safe, sanitary, and affordable housing to qualified persons.

The vision of the Johnstown Housing Authority is to improve the quality of life for all residents by creating and implementing programs which encourage self-sufficiency, home ownership, greater involvement, responsibility and pride.

We have adopted the following goals and objectives for the next five years.

**PHA Goal: Expand the supply of assisted housing**

**Objectives:**

**Reduce public housing vacancies**

**The JHA or its Non-Profit Corp. will acquire or build units or developments**

**PHA Goal: Improve the quality of assisted housing**

**Objectives:**

**Improve public housing management:(PHAS score)**

**Increase customer satisfaction**

**Concentrate on efforts to improve specific management functions:**

**Public Housing Finance**

**Renovate or modernize public housing units**

**Demolish or dispose of obsolete public housing**

**PHA Goal: Increase assisted housing choices**

**Objectives:**

**Implement public housing or other homeownership programs**

**Our Annual Plan is based on the premise that if we accomplish our goals and objectives we will be working towards the achievement of our mission.**

**The plans, statements, budget summary, policies, etc. set forth in the Annual Plan all lead towards the accomplishment of our goals and objectives. Taken as a whole, they outline a comprehensive approach towards our goals and objectives and are consistent with the Consolidated Plan. Here are just a few highlights of our Annual Plan:**

**Implementation of Community Service Policy**

**Implementation of Pet Policy**

**In summary, we are on course to improve the condition of affordable housing in the Johnstown Housing Authority.**

**Annual Plan Table of Contents**

**[24 CFR Part 903.79 (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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**Attachments**

Indicate which attachments are provided by selecting all that apply. Provide the attachment's name (A, B, etc.) in the space to the left of the name of the attachment. Note: If the attachment is provided as a SEPARATE file submission from the PHA Plans file, provide the file name in parentheses in the space to the right of the title.

- (F) Admissions Policy for Deconcentration
- FY 2001 Capital Fund Program Annual Statement (pa019a01)
- Most recent board-approved operating budget (Required Attachment for PHAs that are troubled or at risk of being designated troubled ONLY)
- (A) Implementation of Public Housing Resident Community Service Requirement
- (E) Pet Policy
- (B) Resident Membership of the PHA Governing Board
- (C) Membership of the Resident Advisory Board/s
- (D) Progress Report: Meeting goals and objectives reflected in 5-Year Plan

**Optional Attachments:**

- PHA Management Organizational Chart (pa019d01)
- FY 2001 Capital Fund Program 5 Year Action Plan (pa019b01)
- Public Housing Drug Elimination Program (PHDEP) Plan (pa019c01)
- Comments of Resident Advisory Board or Boards (must be attached if not included in PHA Plan text)
- Other (List below, providing each attachment name)

**Supporting Documents Available for Review**

Indicate which documents are available for public review by placing a mark in the "Applicable & On Display" column in the appropriate rows. All listed documents must be on display if applicable to the program activities conducted by the PHA.

Applicable & On Display	Supporting Document	Applicable Plan Component
x	PHA Plan Certifications of Compliance with the PHA Plans and Related Regulations	5 Year and Annual Plans
x	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	5 Year and Annual Plans



Applicable & On Display	Supporting Document	Applicable Plan Component
	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.	
x	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
x	Most recent board-approved operating budget for the public housing program	Annual Plan: Financial Resources;
x	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
x	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 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 X check here if included in the public housing A & O Policy	Annual Plan: Rent Determination
x	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

Applicable & On Display	Supporting Document	Applicable Plan Component
x	Public housing grievance procedures check here if included in the public housing A & O Policy	Annual Plan: Grievance Procedures
x	Section 8 informal review and hearing procedures <b>X</b> check here if included in Section 8 Administrative Plan	Annual Plan: Grievance Procedures
x	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
x	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
x	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
x	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
x	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
x	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
x	The most recent fiscal year audit of the PHA conducted under section 5(h)(2) of the U.S. Housing Act of 1937 (42 U. S.C. 1437c(h)), the results of that audit and the PHA's response to any findings	Annual Plan: Annual Audit
	Troubled PHAs: MOA/Recovery Plan	Troubled PHAs

Applicable & On Display	Supporting Document	Applicable Plan Component
	Other supporting documents (optional) (list individually; use as many lines as necessary)	(specify as needed)
x	Public Housing Resident Community Service Requirements X check here if included in the public housing A & O Policy	

## 1. Statement of Housing Needs

[24 CFR Part 903.79 (a)]

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

Based upon the information contained in the Consolidated Plan/s applicable to the jurisdiction, and/or

other data available to the PHA, provide a statement of the housing needs in the jurisdiction by 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

Family Type	Overall	1 being "severe impact."	2 being "moderate impact."	3 being "minor impact."	4 being "no impact"	5 being "no impact"	Size
Income <= 30% of AMI	3124	5	1	1	4*	1	1*
Income >30% but <=50% of AMI	1636	5	1	1	NA	1	NA
Income >50% but <80% of AMI	834	3	1	1	NA	1	NA
Elderly	1864	3	3*	3*	3*	2*	NA
Families with Disabilities	NA	3*	3*	3*	3*	2*	2*
Race/Black	335	4**	NA	2**	NA	2**	NA
Race/Hispanic	82	4**	NA	2**	NA	2**	NA
Race/White	5265	4**	NA	2**	NA	2**	NA
Race/Ethnicity							

\*Estimate Based on limited survey data

\*\*Estimate based on limited related census data

What sources of information did the PHA use to conduct this analysis? (Check all

that apply; all materials must be made available for public inspection.)

Consolidated Plan of the Jurisdiction/s

Indicate year: 1995

U.S. Census data: the Comprehensive Housing Affordability Strategy (“CHAS”) dataset

American Housing Survey data

Indicate year: \_\_\_\_\_

Other housing market study

Indicate year: \_\_\_\_\_

Other sources: (list and indicate year of information)

1999 Direct Surveys (Agencies that serve the elderly, disabled and low income residents)

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

State the housing needs of the families on the PHA’s waiting list/s. Complete one table for each type of PHA-wide waiting list administered by the PHA. PHAs may provide separate tables for site-based or sub-jurisdictional public housing waiting lists at their option.

Housing Needs of Families on the Waiting List			
<b>Waiting list type: (select one)</b> <input type="checkbox"/> Section 8 tenant-based assistance <input checked="" type="checkbox"/> Public Housing <input type="checkbox"/> Combined Section 8 and Public Housing <input type="checkbox"/> Public Housing Site-Based or sub-jurisdictional waiting list (optional) If used, identify which development/subjurisdiction:			
	# of families	% of total families	Annual Turnover
Waiting list total	58		350
Extremely low income <=30% AMI	43	74%	
Very low income (>30% but <=50%)	9	16%	

<b>AMI)</b>			
<b>Low income (&gt;50% but &lt;80% AMI)</b>	<b>6</b>	<b>10%</b>	
<b>Families with children</b>	<b>13</b>	<b>22%</b>	
<b>Elderly families</b>	<b>11</b>	<b>19%</b>	
<b>Families with Disabilities</b>	<b>12</b>	<b>21%</b>	
<b>White</b>	<b>52</b>	<b>90%</b>	
<b>Black</b>	<b>6</b>	<b>10%</b>	
<b>American Indian/native Alaskan</b>	<b>0</b>	<b>0%</b>	
<b>Hispanic</b>	<b>0</b>	<b>0%</b>	
<b>Characteristics by Bedroom Size (Public Housing Only) 0BR</b>			
	<b>Total</b>		
	<b>58</b>		
	<b>16</b>	<b>28%</b>	<b>59</b>
<b>1BR</b>	<b>26</b>	<b>45%</b>	<b>83</b>
<b>2 BR</b>	<b>10</b>	<b>17%</b>	<b>121</b>
<b>3 BR</b>	<b>6</b>	<b>10%</b>	<b>73</b>
<b>4 BR</b>	<b>0</b>	<b>0%</b>	<b>12</b>
<b>5 BR</b>	<b>0</b>	<b>0%</b>	<b>2</b>
<b>5+ BR</b>			
<p><b>Is the waiting list closed (select one)? No</b></p> <p><b>If yes:</b></p> <p><b>B. How long has it been closed (# of months)?</b></p> <p><b>Does the PHA expect to reopen the list in the PHA Plan year?</b></p> <p><b>Does the PHA permit specific categories of families onto the waiting list, even if generally closed?</b></p>			

**Housing Needs of Families on the Waiting List**

**Waiting list type: (select one)**

**Section 8 tenant-based assistance**

**Public Housing**

**Combined Section 8 and Public Housing**

**Public Housing Site-Based or sub-jurisdictional waiting list (optional)**

**If used, identify which development/subjurisdiction:**

<b>Section 8 Waiting List</b>	<b># of families</b>	<b>% of total families</b>	<b>Annual Turnover</b>
<b>Waiting list total</b>	<b>161</b>		<b>118</b>
<b>Extremely low income &lt;=30% AMI</b>	<b>136</b>	<b>84.5%</b>	
<b>Very low income (&gt;30% but &lt;=50% AMI)</b>	<b>25</b>	<b>15.5%</b>	
<b>Low income (&gt;50% but &lt;80% AMI)</b>	<b>0</b>	<b>0%</b>	
<b>Families with children</b>	<b>94</b>	<b>58%</b>	
<b>Elderly families</b>	<b>4</b>	<b>3%</b>	
<b>Families with Disabilities</b>	<b>38</b>	<b>24%</b>	
<b>White</b>	<b>128</b>	<b>79.5%</b>	
<b>Black</b>	<b>29</b>	<b>18%</b>	
<b>American Indian/Native Alaskan</b>	<b>1</b>	<b>0.6%</b>	
<b>Hispanic</b>	<b>3</b>	<b>1.9%</b>	
<b>Characteristics by Bedroom Size (Public Housing Only)</b>			
<b>1BR</b>			

<b>2 BR</b>			
<b>3 BR</b>			
<b>4 BR</b>			
<b>5 BR</b>			
<b>5+ BR</b>			
<b>Is the waiting list closed (select one)? No</b> <b>If yes:</b> <b>B. How long has it been closed :</b> <b>Does the PHA expect to reopen the list in the PHA Plan year?</b> <b>Does the PHA permit specific categories of families onto the waiting list, even if generally closed?</b>			

**C. Strategy for Addressing 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, and the Agency's reasons for choosing this strategy.

**(1) Strategy**  
**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:**

Select all that apply

- Employ effective maintenance and management policies to minimize the number of public housing units off-line**
- Reduce turnover time for vacated public housing units**
- Reduce time to renovate public housing units**
- Seek replacement of public housing units lost to the inventory through mixed finance development**
- Seek replacement of public housing units lost to the inventory through section 8 replacement housing resources**
- Maintain or increase section 8 lease-up rates by establishing payment standards that will enable families to rent throughout the jurisdiction**
- Undertake measures to ensure access to affordable housing among families assisted by the PHA, regardless of unit size required**
- Maintain or increase section 8 lease-up rates by marketing the program to owners, particularly those outside of areas of minority and poverty concentration**
- Maintain or increase section 8 lease-up rates by effectively screening Section 8 applicants to increase owner acceptance of program**
- 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:**

Select all that apply

\_\_\_\_\_ Apply for additional section 8 units should they become available

Leverage affordable housing resources in the community through the creation of mixed - finance housing

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**

Select all that apply

\_\_\_\_\_ 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 tenant-based section 8 assistance

\_\_\_\_\_ Employ admissions preferences aimed at families with economic hardships

\_\_\_\_\_ Adopt rent policies to support and encourage work

Other: (list below)

Maintain adopted rent policy

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

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

Select all that apply

\_\_\_\_\_ Employ admissions preferences aimed at families who are working

\_\_\_\_\_ Adopt rent policies to support and encourage work

Other: (list below)

Maintain adopted rent policy

**B. Need: Specific Family Types: The Elderly**

**Strategy 1: Target available assistance to the elderly:**

Select all that apply

\_\_\_\_\_ Seek designation of public housing for the elderly

\_\_\_\_\_ Apply for special-purpose vouchers targeted to the elderly, should they become available



**Other: (list below)**

**The Johnstown Housing Authority will continue to follow the HUD approved Allocation Plan for Fulton Connor Tower and Town House Tower, which is designated as Elderly Only Occupancy.**

**Need: Specific Family Types: Families with Disabilities**

**Strategy 1: Target available assistance to Families with Disabilities:**

Select all that apply

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

**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

- 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

- Counsel section 8 tenants as to location of units outside of areas of poverty or minority concentration and assist them to locate those units**
- Market the section 8 program to owners outside of areas of poverty /minority concentrations**
- Other: (list below)**

**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:

- Funding constraints
- Staffing constraints
- Limited availability of sites for assisted housing
- Extent to which particular housing needs are met by other organizations in the community
- Evidence of housing needs as demonstrated in the Consolidated Plan and other information available to the PHA
- Influence of the housing market on PHA programs
- Community priorities regarding housing assistance
- Results of consultation with local or state government
- Results of consultation with residents and the Resident Advisory Board
- Results of consultation with advocacy groups
- Other: (list below)

**Statement of Financial Resources**

[24 CFR Part 903.7 9 (b)]

List the financial resources that are anticipated to be available to the PHA for the support of Federal public housing and tenant-based Section 8 assistance programs administered by the PHA during the Plan year. Note: the table assumes that Federal public housing or tenant based Section 8 assistance grant funds are expended on eligible purposes, therefore, uses of these funds need not be stated. For

Sources	Planned \$	Planned Uses
1. Federal Grants (FY 2001 grants)		
a) Public Housing Operating Fund	4,500,000.	
b) Public Housing Capital Fund	3,278,448.	
c) HOPE VI Revitalization		
d) HOPE VI Demolition		
e) Annual Contributions for Section 8 Tenant-Based Assistance	2,075,451.	
f) Public Housing Drug Elimination Program (including any Technical Assistance funds)	396,327.	
g) Resident Opportunity and Self-Sufficiency Grants		
h) Community Development Block Grant		
i) HOME		

Sources	Planned \$	Planned Uses
Other Federal Grants (list below)		
<b>2. Prior Year Federal Grants (unobligated funds only) (list below)</b>		
a) Public Housing Capital Fund	3,078,448.	PH Capital Improve.
b) Public Housing Drug Elimination Program	266,250.	Public Housing Safety/Security
<b>3. Public Housing Dwelling Rental Income</b>	2,448,150.	Public Housing Operations
<b>4. Other income (list below)</b>		
a) Invest. Income - Public Housing	187,230.	PH Operations
b) Other Operating Receipts	64,200.	PH Operations
c) Administrative Reserve Interest Income - Section 8-Based Assistance	6,000.	Section 8 Tenant - Based Assistance
<b>4. Non-federal sources (list below)</b>		
<b>Total resources</b>	<b>16,300,504.</b>	

### **3. PHA Policies Governing Eligibility, Selection, and Admissions**

[24 CFR Part 903.79 (c)]

#### **A. Public Housing**

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

#### **(1) Eligibility**

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

that apply)

- When families are within a certain number of being offered a unit: (state number)
- When families are within a certain time of being offered a unit:  
We begin the verification process when an applicant is to be scheduled an interview.
- Other: (describe)

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

- Criminal or Drug-related activity
- Rental history
- Housekeeping
- Other : Any action that may adversely affect the health, safety, or welfare of other residents. Ability to adhere to the lease.

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

d.  Yes  No: Does the PHA request criminal records from State law enforcement agencies for screening purposes?

e.  Yes  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)

- Community-wide list
- Sub-jurisdictional lists
- Site-based waiting lists
- Other (describe)

b. Where may interested persons apply for admission to public housing?

- 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)?

- 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
- Two
- Three or More

b.  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) Admissions Preferences**

a. Income targeting:

Yes  No: Does the PHA plan to exceed the federal targeting requirements by targeting more than 40% of all new

admissions to public housing to families at or below 30% of median area income?

**b. Transfer policies:**

**In what circumstances will transfers take precedence over new admissions? (list below)**

- Emergencies**
- Overhoused**
- Underhoused**
- Medical justification**
- Administrative reasons determined by the PHA (e.g., to permit modernization work)**
- Resident choice: (state circumstances below)**
- Other: Repair of defects hazardous to life, health, or safety.**

**a. Preferences**

**1.  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)**

**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:**

- Involuntary Displacement (Disaster, Government Action, Action of Housing Owner, Inaccessibility, Property Disposition)**
- Victims of domestic violence**
- Substandard housing**
- Homelessness**
- High rent burden (rent is > 50 percent of income)**

**Other preferences: (select below)**

- Working families and those unable to work because of age or disability**
- Veterans and veterans' families**
- Residents who live and/or work in the jurisdiction**
- Those enrolled currently in educational, training, or upward mobility programs**

- Households that contribute to meeting income goals (broad range of incomes)
- Households that contribute to meeting income requirements (targeting)
- Those previously enrolled in educational, training, or upward mobility programs
- Victims of reprisals or hate crimes
- Other preference(s) (list below)

**3. If the PHA will employ admissions preferences, please 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:**

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

**Other preferences (select all that apply)**

- Working families and those unable to work because of age or disability
- Veterans and veterans’ families
- Residents who live and/or work in the jurisdiction
- Those enrolled currently in educational, training, or upward mobility programs
- Households that contribute to meeting income goals (broad range of incomes)
- Households that contribute to meeting income requirements (targeting)
- Those previously enrolled in educational, training, or upward mobility programs
- Victims of reprisals or hate crimes
- Other preference(s) (list below)

**4. Relationship of preferences to income targeting requirements:**

The PHA applies preferences within income tiers  
**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)**

- The PHA-resident lease  
 The PHA's Admissions and (Continued) Occupancy policy  
 PHA briefing seminars or written materials  
 Other source (list)

**b. How often must residents notify the PHA of changes in family composition? (select all that apply)**

- At an annual reexamination and lease renewal  
 Any time family composition changes  
 At family request for revision  
 Other (list)

**(6) Deconcentration and Income Mixing**

**a.  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.  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:



**Employing waiting list “skipping” to achieve deconcentration of poverty or income mixing goals at targeted developments**  
If selected, list targeted developments below:  
All public housing developments have average incomes at or below the Very Low Income Limits

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

**Other (list policies and developments targeted below)**  
Deconcentration Policy  
All public housing developments

d.  Yes  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)

Additional affirmative marketing  
 Actions to improve the marketability of certain developments  
 Adoption or adjustment of ceiling rents for certain developments  
 Adoption of rent incentives to encourage deconcentration of poverty and income-mixing

Establishment of reasonable flat rents as an incentive to attract higher income families.

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:  
All public housing developments

g. Based on the results of the required analysis, in which developments will the PHA make special efforts to assure access for lower-income families? (select all that apply)

Not applicable: results of analysis did not indicate a need for such efforts

List (any applicable) developments below:

**B. Section 8**

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)**

- 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)**
- Rental history with any previous assisted housing**
- Income Eligibility**

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

**c.  Yes  No: Does the PHA request criminal records from State law enforcement agencies for screening purposes?**

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

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

- Criminal or drug-related activity**
- Other (describe below)**  
**Current and previous landlords**

**(2) Waiting List Organization**

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

- None**
- Federal public housing**
- Federal moderate rehabilitation**
- Federal project-based certificate program**
- Other federal or local program (list below)**

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

- PHA main administrative office  
 Other (list below)

**(3) Search Time**

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

**If yes, state circumstances below:**

**When the family provides documentation that they are unable to find a suitable unit and in all cases of reasonable accommodation.**

**(4) Admissions Preferences**

**a. Income targeting**

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

**b. Preferences**

**1.  Yes  No: Has the PHA established preferences for admission to section 8 tenant-based assistance? (other than date and time of application) (if no, skip to subcomponent (5) Special purpose section 8 assistance programs)**

**2. Which of the following admission preferences does the PHA plan to employ in the coming year? (select all that apply from either former Federal preferences or other preferences)**

**Former Federal preferences**

- Involuntary Displacement (Disaster, Government Action, Action of Housing Owner, Inaccessibility, Property Disposition)  
 Victims of domestic violence  
 Substandard housing  
 Homelessness  
 High rent burden (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
- 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
- Other preference(s) (list below)

**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**

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

**Other preferences (select all that apply)**

- Working families and those unable to work because of age or disability
- Veterans and veterans' families
- Residents who live and/or work in 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. Among applicants on the waiting list with equal preference status, how are applicants selected? (select one)**

- 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)**

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

**(5) Special Purpose Section 8 Assistance Programs**

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

- The Section 8 Administrative Plan
- Briefing sessions and written materials
- Other (list below)
- N/A

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

- Through published notices
- Other (list below)
- N/A

**4. PHA Rent Determination Policies**

[24 CFR Part 903.79(d)]

**A. Public Housing**

Exemptions: PHAs that do not administer public housing are not required to complete sub-component

**(A) Income Based Rent Policies**

Describe the PHA's income based rent setting policy/ies for public housing using, including discretionary (that is, not required by statute or regulation) income disregards and exclusions, in the appropriate spaces below.  
**a. Use of discretionary policies: (select one)**

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)

- \$0
- \$1-\$25
- \$26-\$50

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

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

**c. Rents set at less than 30% than adjusted income**

1.  Yes  No: Does the PHA plan to charge rents at a fixed amount or

percentage less than 30% of adjusted income?

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

All families pay the greater of 30% of adjusted monthly income, 10% of monthly income or shelter rent. A flat rent schedule has been developed, as follows, in an effort to help us, reduce vacancies, create and keep a population of mixed income families. High vacancy rates were considered when determining these rates.

Flat rent choices are as follows

Prospect, Solomon and Coopersdale - 75 % of the lower of FMR or Comparable Rents

Oakhurst - Oakhurst Extension - 80% of the lower of FMR or Comparable Rents

Vine Street Towers, Nanty Glo, Portage, Connor Towers, Town House Towers and Loughner Plaza - Flat rent will be the lower of the FMR or Comparable Rent

- 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 (required)
- 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)

We are not adding any income exclusions to the statutory ones in the calculation of adjusted

income because we cannot afford to do so at a time when the Federal government is under-funding public housing operations.

**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)**

- Market comparability study**
- Fair market rents (FMR)**
- 95<sup>th</sup> percentile rents**
- 75 percent of operating costs**
- 100 percent of operating costs for general occupancy (family) developments**
- Operating costs plus debt service**
- The "rental value" of the unit**
- Other (list below)**

**f. Rent re-determinations:**

**1. Between income reexaminations, how often must tenants report changes in income or family composition to the PHA such that the changes result in an adjustment to rent? (select all that apply)**



- Never
- At family option
- Any time the family experiences an income increase
- Any time a family experiences an income increase above a threshold amount or percentage: (if selected, specify threshold) \_\_\_\_\_
- Other (list below)

**As an incentive to help our residents, increases in income are not considered for the purpose of determining rent until the next scheduled re-examination.**

- g.  Yes  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**

**1. 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
- Survey of rents listed in local newspaper
- Survey of similar unassisted units in the neighborhood
- Other (list/describe below)

**Fair Market Rents**

**B. Section 8 Tenant-Based Assistance**

**Exemptions:** PHAs that do not administer Section 8 tenant-based assistance are not required to complete sub-component 4B. 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 **(1) Payment Standards**

Describe the voucher payment standards and policies.

**a. What is the PHA's payment standard? (select the category that best describes your standard)**

- At or above 90% but below 100% of FMR
- 100% of FMR
- Above 100% but at or below 110% of FMR
- Above 110% of FMR (if HUD approved; describe circumstances below)

- b. If the payment standard is lower than FMR, why has the PHA selected this standard? (select all that apply)**
- FMRs are adequate to ensure success among assisted families in the PHA's segment of the FMR area
- The PHA has chosen to serve additional families by lowering the payment standard
- Reflects market or submarket
- Other (list below)
- 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)**
- Annually
- Other (list below)
- e. What factors will the PHA consider in its assessment of the adequacy of its payment standard? (select all that apply)**
- Success rates of assisted families
- Rent burdens of assisted families
- Other (list below)
- Comparability to the private rental market and the fair market rents established by HUD

**(2) Minimum Rent**

- a. What amount best reflects the PHA's minimum rent? (select one)**
- \$0
- \$1-\$25
- \$26-\$50

- b.  Yes  No: Has the PHA adopted any discretionary minimum rent**

hardship exemption policies? (if yes, list below)

## **5. Operations and Management**

[24 CFR Part 903.79 (e)]

Exemptions from Component 5: High performing and small PHAs are not required to complete this section. Section 8 only PHAs must complete parts A, B, and C(2)

### **A. PHA Management Structure**

(Select one) Describe the PHA's management structure and organization.

- An organization chart showing the PHA's management structure and organization is provided as an attachment at pa019d01.
- A brief description of the management structure and organization of the PHA follows:

### **B. HUD Programs Under PHA Management**

List Federal programs administered by the PHA, number of families served at the beginning

<b>Program Name</b>	<b>Units or Families Served at Year Beginning</b>	<b>Expected Turnover</b>
<b>Public Housing</b>	<b>1686</b>	<b>372</b>
<b>Section 8 Vouchers</b>	<b>335</b>	<b>72</b>
<b>Section 8 Certificates</b>	<b>179</b>	<b>24</b>
<b>Section 8 Mod Rehab</b>	<b>30</b>	<b>12</b>
<b>Special Purpose Section 8 Certificates/Vouchers (list individually)</b>	<b>NA</b>	
<b>Public Housing Drug Elimination Program (PHDEP)</b>	<b>880</b>	<b>228</b>
<b>Other Federal Programs(list individually)</b>		
<b>Lease-Purchase Homeownership Program</b>	<b>5</b>	<b>5</b>

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**C. Management and Maintenance Policies**

List the PHA's public housing management and maintenance policy documents, manuals and handbooks that contain the Agency's rules, standards, and policies that govern maintenance and 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.

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

- Access Card Policy
- Admissions and Occupancy Policy
- Capitalization Policy
- Deconcentration Policy
- Disposition Policy
- Drug-Free Workplace Policy
- Entrance/Parking Policy (Applicable to Vine Street and Fulton I. Connor Tower)
- Grievance Procedure
- Investment Policy
- "One Strike and Your Out" Policy
- Personnel Policy
- Pest Control Policy (Describes measures necessary for the prevention or eradication of pest infestation, including cockroach infestation)
- Pet Policy
- Procurement Policy
- Public Records Inspection Policy
- Reasonable Accommodations Policy
- Resident Initiatives Policy
- Section 3 Policy
- Sexual Harassment Policy
- Union Contract
- Standards of Conduct Policy

**(2) Section 8 Management: (list below)**

Administrative Plan

**6. PHA Grievance Procedures**  
 [24 CFR Part 903.79 (f)]

Exemptions from component 6: High performing PHAs are not required to complete component 6. Section 8-Only PHAs are exempt from sub-component 6A.

**A. Public Housing**

1.  Yes  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)

- PHA main administrative office  
 PHA development management offices  
 Other (list below)

**B. Section 8 Tenant-Based Assistance**

1.  Yes  No: Has the PHA established informal review procedures for applicants to the Section 8 tenant-based assistance program and informal hearing procedures for families assisted by the Section 8 tenant-based assistance program in addition to federal requirements found at 24 CFR 982?

If yes, list additions to federal requirements below:

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

- PHA main administrative office  
 Other (list below)  
Section 8 Rental Assistance Office

**7. Capital Improvement Needs**

[24 CFR Part 903.79 (g)]

Exemptions from Component 7: Section 8 only PHAs are not required to complete this component and may skip to Component 8.

**A. Capital Fund Activities**

Exemptions from sub-component 7A: PHAs that will not participate in the Capital Fund Program may skip to component 7B. All other PHAs must complete 7A as instructed.

**(I) Capital Fund Program Annual Statement**

Using parts I, II, and III of the Annual Statement for the Capital Fund Program (CFP), identify capital activities the PHA is proposing for the upcoming year to ensure long-term physical and social viability of its public housing developments. This statement can be completed by using the CFP Annual 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.

-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**

Agencies are encouraged to include a 5-Year Action Plan covering capital work items. This statement can be completed by using the 5-Year Action Plan table provided in the table library at the end of the PHA Plan template OR by completing and attaching a properly updated HUD-52834 Capital Fund? (if no, skip to sub-component 7B)

**b. If yes to question a, select one:**

**The Capital Fund Program 5-Year Action Plan is provided as an attachment to the PHA Plan at pa019b01**

**-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)**

Applicability of sub-component 7B: All PHAs administering public housing. Identify any approved HOPE VI and/or public housing development or replacement activities not described in the Capital Fund Program Annual Statement.

Yes  No: **a) Has the PHA received a HOPE VI revitalization grant? (if no, skip to question c; if yes, provide responses to question b for each grant, copying and completing as many times as necessary)**  
**b) Status of HOPE VI revitalization grant (complete one set of questions for each grant)**

**1. Development name:**

**2. Development (project) number:**

**3. Status of grant: (select the statement that best describes the current status)**

- Revitalization Plan under development**
- Revitalization Plan submitted, pending approval**
- Revitalization Plan approved**
- Activities pursuant to an approved Revitalization Plan underway**

Yes  No: **c) Does the PHA plan to apply for a HOPE VI Revitalization grant in the Plan year?**  
**If yes, list development name/s below:**

Yes  No: d) Will the PHA be engaging in any mixed-finance development activities for public housing in the Plan year? If yes, list developments or activities below:

Yes  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 903.79 (h)]

Applicability of component 8: Section 8 only PHAs are not required to complete this section.

1.  Yes  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.)

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

- 7. Timeline for activity:**  
**a. Actual or projected start date of activity:**  
**b. Projected end date of activity:**

<b>Demolition/Disposition Activity Description</b>
<b>1a. Development name:</b>
<b>1b. Development (project) number:</b>
<b>2. Activity type:</b> ___ Demolition ___ Disposition
<b>3. Application status (select one)</b> ___ Approved ___ Submitted, pending approval ___ Planned application
<b>4. Date application approved, submitted, or planned for submission:</b>
<b>5. Number of units affected:</b> <b>Coverage of action (select one)</b> ___ Part of the development ___ Total development
<b>7. Timeline for activity:</b> <b>a. Actual or projected start date of activity:</b> <b>b. Projected end date of activity:</b>

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

[24 CFR Part 903.79 (i)]

Exemptions from Component 9; Section 8 only PHAs are not required to complete this section.

1.  Yes \_\_\_ 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.

<b>Designation of Public Housing Activity Description</b>
<b>1a. Development name: Fulton Connor Tower</b> <b>1b. Development (project) number: PA 28P019008</b>
<b>2. Designation type:</b> <input checked="" type="checkbox"/> Occupancy by only the elderly <input type="checkbox"/> Occupancy by families with disabilities <input type="checkbox"/> Occupancy by only elderly families and families with disabilities
<b>3. Application status (select one)</b> <input checked="" type="checkbox"/> Approved; included in the PHA’s Designation Plan <input type="checkbox"/> Submitted, pending approval <input type="checkbox"/> Planned application
<b>4. Date this designation approved, submitted, or planned for submission: <u>06/02/99</u></b>
<b>5. If approved, will this designation constitute a (select one)</b> <input checked="" type="checkbox"/> New Designation Plan <input type="checkbox"/> Revision of a previously-approved Designation Plan?
<b>1. Number of units affected: 240 minus 13 wheelchair accessible units = 227 units</b> <b>7. Coverage of action (select one)</b> <input type="checkbox"/> Part of the development <input checked="" type="checkbox"/> Total development /With the exception of 13 handicap accessible units

<b>Designation of Public Housing Activity Description</b>
<b>1a. Development name: Town House Tower</b> <b>1b. Development (project) number: PA28P019009</b>
<b>2. Designation type:</b> <input checked="" type="checkbox"/> Occupancy by only the elderly <input type="checkbox"/> Occupancy by families with disabilities <input type="checkbox"/> Occupancy by only elderly families and families with disabilities
<b>3. Application status (select one)</b>

<input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <b>Approved; included in the PHA's Designation Plan</b> <b>Submitted, pending approval</b> <b>Planned application</b>
<b>4. Date this designation approved, submitted, or planned for submission: <u>(06/02/99)</u></b>
<b>5. If approved, will this designation constitute a (select one)</b> <input checked="" type="checkbox"/> <b>New Designation Plan</b> <input type="checkbox"/> <b>Revision of a previously-approved Designation Plan?</b>
<b>1. Number of units affected: 120 minus 6 wheelchair accessible = 116</b> <b>7. Coverage of action (select one)</b> <input type="checkbox"/> <b>Part of the development</b> <input checked="" type="checkbox"/> <b>Total development/With the exception of 6 handicap units</b>

### **10. Conversion of Public Housing to Tenant-Based Assistance**

[24 CFR Part 903.7 9 (j)]

Exemptions from Component 10; Section 8 only PHAs are not required to complete this section.

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

1.  Yes  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**

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.**

<b>Conversion of Public Housing Activity Description</b>
<b>1a. Development name:</b>
<b>1b. Development (project) number:</b>
<b>2. What is the status of the required assessment?</b>

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

**B. Reserved for Conversions pursuant to Section 22 of the U.S. Housing Act of 1937**

**C. Reserved for Conversions pursuant to Section 33 of the U.S. Housing Act of 1937**

**11. Homeownership Programs Administered by the PHA**

[24 CFR Part 903.7 9 (k)]

**A. Public Housing**

Exemptions from Component 11A: Section 8 only PHAs are not required to complete 11A.

1.  Yes  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.)

<b>Public Housing Homeownership Activity Description (Complete one for each development affected)</b>
<b>1a. Development name: Wood Street</b> <b>1b. Development (project) number: PA28P0100017</b>
<b>2. Federal Program authority:</b> <input type="checkbox"/> HOPE I <input checked="" type="checkbox"/> 5(h) <input type="checkbox"/> Turnkey III <input type="checkbox"/> Section 32 of the USHA of 1937 (effective 10/1/99)
<b>3. Application status: (select one)</b> <input checked="" type="checkbox"/> Approved; included in the PHA’s Homeownership Plan/Program <input type="checkbox"/> Submitted, pending approval <input type="checkbox"/> Planned application
<b>4. Date Homeownership Plan/Program approved, submitted, or planned for submission: (04/30/98)</b>
<b>5. Number of units affected:</b> <b>6. Coverage of action: (select one)</b> <input type="checkbox"/> Part of the development <input checked="" type="checkbox"/> Total development

<b>Public Housing Homeownership Activity Description</b>
--

<b>(Complete one for each development affected)</b>
<b>1a. Development name:</b> <b>1b. Development (project) number:</b>
<b>2. Federal Program authority:</b> <input type="checkbox"/> HOPE I <input type="checkbox"/> 5(h) <input type="checkbox"/> Turnkey III <input type="checkbox"/> Section 32 of the USHA of 1937 (effective 10/1/99)
<b>3. Application status: (select one)</b> <input type="checkbox"/> Approved; included in the PHA's Homeownership Plan/Program <input type="checkbox"/> Submitted, pending approval <input type="checkbox"/> Planned application
<b>4. Date Homeownership Plan/Program approved, submitted, or planned for submission:</b>
<b>5. Number of units affected:</b> <b>6. Coverage of action: (select one)</b> <input type="checkbox"/> Part of the development <input type="checkbox"/> Total development

**B. Section 8 Tenant Based Assistance**

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

2. Program Description:

a. Size of Program

Yes  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  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 903.79 (l)]

Exemptions from Component 12: High performing and small PHAs are not required to complete this component C.  
PHAs Coordinating With the Welfare (TANF) Agency

**1. Cooperative agreements:**

Yes  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? 09/18/00

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

- Client referrals
- Information sharing regarding mutual clients (for rent determinations and otherwise)
- Coordinate the provision of specific social and self-sufficiency services and programs to eligible families
- Jointly administer programs
- Partner to administer a HUD Welfare-to-Work voucher program
- Joint administration of other demonstration program
- Other (describe)

**B. Services and programs offered to residents and participants**

**(1) General**

**a. Self-Sufficiency Policies**

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

- Public housing rent determination policies**
- Public housing admissions policies**
- Section 8 admissions policies**
- Preference in admission to section 8 for certain public housing families**
- Preferences for families working or engaging in training or education programs for non-housing programs operated or coordinated by the PHA**
- Preference/eligibility for public housing homeownership option participation**
- Preference/eligibility for section 8 homeownership option participation**
- Other policies (list below)**

**b. Economic and Social self-sufficiency programs**

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

<b>Services and Programs</b>				
<b>Program Name &amp; Description (including location, if appropriate)</b>	<b>Estimated Size</b>	<b>Allocation Method (waiting list/random selection/specific criteria/other)</b>	<b>Access (development office / PHA main office / other provider name)</b>	<b>Eligibility (public housing or section 8 participants or both)</b>
<b>Child Care Prospect-Oakhurst-Solomon</b>	<b>71 enrolled</b>	<b>specific criteria</b>	<b>Cambria County Child Development Corp.</b>	<b>both</b>
<b>Lease Purchase Home Ownership</b>	<b>5 units</b>	<b>specific criteria</b>	<b>JHA main office</b>	<b>both</b>
<b>Step-Up Program/Job Training</b>	<b>10</b>	<b>specific criteria</b>	<b>JHA main office</b>	<b>public housing</b>
<b>Bridge Housing Program</b>	<b>17</b>	<b>specific criteria</b>	<b>JHA main office</b>	<b>both</b>
<b>Towers Medical Center</b>	<b>165</b>	<b>specific criteria</b>	<b>development office</b>	<b>public housing</b>

Summer Feeding Program	200 meals per day	other	Johnstown School District/ development office	both
Meals on Wheels	56	specific criteria	Cambria Co. Area Agency on Aging	both
Security Services	601	other	Johnstown Police Dept	public housing
Petry/Weaver Scholarship Program	1	specific criteria	JHA main office	both
Summer Recreation Program	94 per day	other	development office	public housing
Winter Recreation Program	115 per week	other	development office	public housing
Senior Crafts Program	61	other	development office	public housing
Section III Program/employment	11	specific criteria	JHA main office	public housing
YMCA Senior Exercise Program	26 per week	other	development office	public housing
Social Service Intake and Referral	48	other	Family Resource Center/development office	both
Girl Scouts	30	specific criteria	Girl Scout Office/ development office	both
Mom's Store		other	other	both
Drug Elimination Program	1504	other	development offices	public housing

**(2) Family Self Sufficiency program/s**

**a. Participation Description**

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

**b. \_\_\_ Yes \_\_\_ No: If the PHA is not maintaining the minimum program size required by HUD, does the most recent FSS Action Plan address the steps the PHA plans to take to achieve at least the minimum program size?  
If no, 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 of 1937 (relating to the treatment of income changes resulting from welfare program requirements) by: (select all that apply)**

- Adopting appropriate changes to the PHA's public housing rent determination policies and train staff to carry out those policies**
- Informing residents of new policy on admission and reexamination**
- Actively notifying residents of new policy at times in addition to admission and reexamination.**
- Establishing or pursuing a cooperative agreement with all appropriate TANF agencies regarding the exchange of information and coordination of services**
- Establishing a protocol for exchange of information with all appropriate TANF agencies**
- Other: (list below)**

**D. Community Service Requirement**

**Our Community Service Policy has been made a part of our Admissions and Occupancy Policy. See attachment to this plan for our statement on the implementation of the Community Service Requirement.**

**13. PHA Safety and Crime Prevention Measures**

[24 CFR Part 903.79 (m)]

Exemptions from Component 13: High performing and small PHAs not participating in PHDEP and Active Choice PHAs may elect to ensure the safety of public housing residents. PHAs that are participating in PHDEP and are submitting a PHDEP Plan with this PHA Plan may skip to sub-component D.

**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)**

**Prospect (19-1) Oakhurst (19-2/3) Solomon (19-4a) Coopersdale (19-4b)**

**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)**

**Prospect (19-1) Oakhurst (19-2/3) Solomon (19-4a) Coopersdale (19-4b)**

**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)**

**All**

**D. Additional information as required by PHDEP/PHDEP Plan**

PHAs eligible for FY 2000 PHDEP funds must provide a PHDEP Plan meeting specified requirements prior to receipt of PHDEP funds.

**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 2001 in this PHA Plan?**

**Yes**  **No: This PHDEP Plan is an Attachment. (File name: pa019c01)**

**14. RESERVED FOR PET POLICY**

**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.  **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.  **Yes**  **No: Was the most recent fiscal audit submitted to HUD?**
3.  **Yes**  **No: Were there any findings as the result of that audit?**
4.  **Yes**  **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**

[24 CFR Part 903.7 9 (q)]

Exemptions from component 17: Section 8 Only PHAs are not required to complete this component.

High performing and small PHAs are not required to complete this component.  
1.  Yes  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) Conversion of 42 Efficiency Units into 21 (1) Bedroom Units at the Vine Street Tower PA 19-5.

3.  Yes  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.  Yes  No: Did the PHA receive any comments on the PHA Plan from the Resident Advisory Board/s?

2. If yes, the comments are: (if comments were received, the PHA MUST select one)

Attached at Attachment (File name)

Provided below:

**They felt the Plan was a very good Plan.**

**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.**

**The PHA changed portions of the PHA Plan in response to comments**

**List changes below:**

**Other: (list below)**

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

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

2.  **Yes**  **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**

For each applicable Consolidated Plan, make the following statement (copy questions as many times as necessary)

**1. Consolidated Plan jurisdiction: City of Johnstown**

**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)**

- The PHA has based its statement of needs of families in the jurisdiction on the needs expressed in the Consolidated Plan/s.**
- The PHA has participated in any consultation process organized and offered by the Consolidated Plan agency in the development of the Consolidated Plan.**
- The PHA has consulted with the Consolidated Plan agency during the development of this PHA Plan.**
- Activities to be undertaken by the PHA in the coming year are consistent with the initiatives contained in the Consolidated Plan. (list below)**  
**Homeownership**  
**Conversion of efficiency apartments to one-bedroom units**
- Other: (list below)**

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

**The City of Johnstown has established Homeownership as a high priority with the Consolidated Plan. The City and the Johnstown Housing Authority will work together in developing additional homes under the Johnstown Housing Authority's Lease-Purchase Homeownership Program.**

**D. Other Information Required by HUD**

**24 CFR 903.7 (r) Requirement that the Housing Authority provide a definition of "substantial deviation" and "significant amendment or modification"**

**Substantial deviations or significant amendments or modifications are defined as discretionary changes in the plans or policies of the Johnstown Housing Authority that fundamentally change the mission, goals, objectives, or plans of our agency and which require formal approval of the Board of Commissioners.**

**Use this section to provide any additional information requested by HUD.**

## ATTACHMENT A

### IMPLEMENTATION OF PUBLIC HOUSING RESIDENT COMMUNITY SERVICE REQUIREMENTS

The Johnstown Housing Authority has taken the following steps to prepare for the implementation of the Community Service Requirement.

The Community Service Requirement has been introduced to residents at several resident/management meetings.

Our lease has been updated to include the Community Service Requirement. Residents will sign this revised lease in accordance with the current reexamination schedule for reexaminations with January 1, 2001 and after effective dates.

A letter has been prepared and will be mailed to all residents 30 days prior to the beginning of our reexamination process notifying them of the Community Service Requirement, of the exemptions to the requirement and the status of each resident. A description of the Service Requirement will also be part of our revised Admission and Occupancy Policy.

The Authority has entered into a cooperation agreement with our local welfare agency to reinforce the working relationship currently in place and to assist in verifying resident status.

The JHA will administer the Community Service Requirement. We have discussed a process for verification of Community Service activities; as part of our regular reexamination of income and family composition.

We will consider volunteer service with local hospitals, libraries, schools, social service agencies, or any other service, as long as the service is in line with the definition of Community Service.....is of public benefit, serves to improve the quality of life and enhance resident self sufficiency or increase resident self responsibility in the community.

If an agreement for cure is needed, the JHA will work closely with individuals to help them fulfill their obligation over the next 12 month lease term. We will assist by working with a social service agency to provide a site, we will monitor the requirement quarterly and continue to develop relationships with agencies that will provide a site for residents performance of community service.

ATTACHMENT B

RESIDENT MEMBERSHIP OF THE PHA GOVERNING BOARD

Kathleen A. Tullis  
Prospect Community - PA 19-1  
340 Gray Avenue  
Johnstown PA 15901

Method of Selection: Appointment

Date of Appointment: 10-9-96  
Date of Commencement of Term of Office: 8-1-96  
Date of Expiration of Term of Office: 8-1-2001



ATTACHMENT C

MEMBERSHIP OF THE RESIDENT ADVISORY BOARD/s

Kathleen A. Tullis  
Prospect Resident Council  
340 Gray Avenue  
Johnstown PA 15901

Sharon Coleman  
Oakhurst Resident Council  
Apt. 13E  
Johnstown PA 15906

Theresa Holliday  
Apt. 33B  
Oakhurst  
Johnstown PA 15906

Ray McAfee  
Solomon Resident Council  
Bldg. 8 Apt. 151  
Solomon  
Johnstown PA 15902

Lillian Black  
Past President - Vine Street Tower Resident Council  
Apt. 614  
Vine Street Tower  
Johnstown PA 15901

Othelia Gates  
Connor Tower  
Resident Council  
Apt. 821  
Connor Tower  
Johnstown PA 15901

Cheryl Durbin  
Section 8 Participant  
P O Box 228  
Hastings PA 16646  
(Resigned Effective June, 2000  
JHA currently searching for  
Section 8 representative)

ATTACHMENT D

PROGRESS REPORT  
MEETING GOALS AND OBJECTIVES REFLECTED IN 5-YEAR PLAN

Goal/Objective: Expand the supply of assisted housing by reducing public housing vacancies and acquiring or building units or development. Since the time that the JHA's Agency Plan was submitted (November, 1999) we have decreased our vacancy rate from 10% (November, 1999) to the current vacancy rate of 8% (June, 2000). We had indicated that we would achieve a 3% to 5% vacancy rate by 2004. We reflected that the JHA or its Non-Profit Corp. would acquire/build at least 5 units by 2004. The Johnstown Housing Authority's Non-Profit purchased two (2) homes that will be rehabilitated and sold under the Lease-Purchase Homeownership Program.

Goal/Objective: Improve the quality of assisted housing by improving public housing management: (PHAS score), increase customer satisfaction, concentrate on efforts to improve specific management functions: Public Housing Finance, renovate or modernize public housing units and demolish or dispose of obsolete public housing. We reflected that we would increase our total PHAS score by 10 points by 2004, obtain the maximum score of 10 points for the Resident component of PHAS by 2004, improve the Financial Component under PHAS by 3 points by 2004, receive 100% of total funding under the Capital Improvement Program for the next five years and demolish at least 81 units by 2004. Our PHAS Advisory score for 1999 was 81.7; the resident component was 9.1; and the Financial Component was 24.7. Since the Agency Plan was submitted in 1999 and the PHAS Advisory score is for 1999, we do not have a comparison to relay at this point in time. We received 100% of the Formula Amount under the Capital Improvement Program for 2000 and we have demolished 81 units of public housing to date.

Goal/Objective: Increase assisted housing choices by implementing public housing or other homeownership programs. We have a lease-purchase homeownership program that was implemented at our South Fork Development and Wood Street Development.

ATTACHMENT E

**PET RIDER TO LEASE NO. \_\_\_\_\_**

This Rider is made and entered into by and between the Johnstown Housing Authority (the "Landlord") and \_\_\_\_\_ (the "Tenant") for attachment to the Lease by and between Landlord and Tenant, dated \_\_\_\_\_ (the "Lease").

This Rider is incorporated into and constitutes an integral part of the Lease to which it is attached. The terms used herein, which are defined or specified in the Lease, shall have the meanings indicated in the Lease where the context permits unless otherwise indicated herein, and definitions of terms set forth herein shall apply to the Lease where the context permits. If there are any inconsistencies between the provisions of this Rider and the provisions of the Lease, the provisions of this Rider shall control.

This policy does not apply to animals that are necessary as reasonable accommodation to assist, support or provide service to persons with disabilities. This exclusion applies to such animals that reside in public housing and such animals that visit these developments

Nothing in this policy limits or impairs or gives the Johnstown Housing Authority the rights to limit or impair the rights of persons with disabilities; nor affect any authority that the Johnstown Housing Authority may have to regulate service animals that assist, support or provide service to persons with disabilities under Federal, State or local law.

**ENABLING REGULATIONS**

**QUALITY HOUSING AND WORK RESPONSIBILITY ACT OF 1998**

These "Reasonable Pet Rules" incorporate the various state and local laws governing pets that include inoculation, licensing, and restraint, and provide sufficient flexibility to protect the right and privileges of other residents who choose not to own pets.

**SECTION 1. TYPE OF DWELLING UNITS WHERE PETS ARE PERMITTED**

Units specifically designed and built for the elderly and handicapped are permitted pets according to the "Pet Policy and Rules for Communities for the Elderly and Disabled" which include: PA 19-5 Vine Street Tower, PA 19-8 Connor Tower, PA 19-9 Town House Tower and PA 19-12 Loughner Plaza.

All other public housing developments are governed by this policy.

**SECTION 2. DEFINITION OF PET AND NUMBER PER UNIT**

A common household pet is defined, for the purpose of this document, as a domesticated

animal, such as a cat, dog, bird, rodent (including a rabbit), fish or turtle that is traditionally kept in the home for pleasure rather than for commercial purposes. Common household pet does not include reptiles (except turtles). No other type of pet will be permitted and registration will be refused for any other type of pet.

Only one cat or dog will be permitted in a unit. Only one aquarium, not larger than 10 gallons, is permitted in a unit. Only one cage with no more than 2 birds is permitted. Each request to have more than one pet will be considered for approval by the management office.

### **SECTION 3. PRE-REGISTRATION REQUIRED PRIOR TO ADMISSION**

No less than ten (10) days before pet is to be brought into the building, such pet must be registered with the Landlord by the Tenant delivering to the Management Office the completed Pet Registration form attached as Exhibit I. Registration must show type of pet, recent picture, name, age, and if applicable, license number and current inoculation information, name and address of pet's veterinarian, plus a signed responsibility card showing the name of three (3) persons that will remove the pet from the unit, in the event of the Tenant's illness or death (see Section 5). Pet registration must be updated annually at re-certification.

A pet deposit at the time of submission of the "Pet Permit Application" of \$99.00 must accompany the application. If financial problems exist the deposit can be paid in three installments of \$33.00 each. The first payment of \$33.00 must accompany the "Pet Permit Application". The additional payments must be made within the next two months. The pet deposit is to be used to cover the costs of damages or fumigation as the result of the pet ownership. The pet deposit will be refunded minus any applicable charges within thirty (30) days after the resident vacates the unit or the pet is permanently removed from the unit.

If the Tenant fails to update the pet registration annually, at re-certification, the pet will not be permitted on the premises. Residents will be refused a pet registration if management determines that the tenant has been unable to fulfill past obligations as a pet owner, is unable to adhere to the terms of the lease, or house pet rules, if the animal does not meet the definition of a common household pet, or the temperament of the animal is considered dangerous.

Furthermore, if Landlord reasonably determines, based on a pet application or the Tenant's housekeeping habits and practices or the Tenant's health, that such person will be unable to comply fully with all of these Pet Regulations, the pet will be denied registration admission or continued occupancy. A notice in accordance with Section 17 will be sent to the Tenant stating the basis for Landlord's determination.

### **SECTION 4 REQUIRED UPDATE OF REGISTRATION**

Each pet's registration must be updated once each year at the time of the annual re-certification. Updated annual registration will include:

- a. Verification that, where applicable, the pet's license is in effect and has been

renewed for the current year;

- bc. Proof of any inoculations that are required for such pet are current;
- d. Proof of annual veterinary care, if applicable.

At this time, the Pet Responsibility Card will be reviewed with the Tenant to see that the 3 persons listed are still correct and that there has been no change in either address or phone number.

**SECTION 5. PET RESPONSIBILITY CARD**

Prior to pet admission, the Tenant must complete and sign a written responsibility form set forth on Exhibit II showing the name, address, and phone number of three (3) local persons who will remove the pet in the event of the Tenant's illness, vacation, or death. The responsibility form must be renewed each year at annual re-certification at the same time the pet's registration is updated. If the responsible person resides within the JHA community, the pet WILL NOT BE permitted to stay with the responsible person it must remain in the pet approved unit.

**SECTION 6. SECURITY DEPOSIT**

A pet security deposit is not required for birds, fish or rodents.

The resident will be required to reimburse the Authority for the real cost of any and all damages caused by his or her pet.

The pet security deposit of \$99.00 will be held in an account as part of the lease. Upon vacating or removal of the pet the security deposit will be refunded minus costs for repairs or damages or necessary fumigation incurred because of the pet.

The resident's liability for damages caused by his/her pet is not limited to the amount of the pet deposit. The resident will be required to reimburse the Authority for the real cost of any and all damages caused by his/her pet when they exceed the amount of the pet deposit.

All units occupied by a dog or cat will be fumigated upon being vacated. The cost will be deducted from the pet security deposit any cost in excess of the security deposit will be billed to the resident.

**SECTION 7. DOG OWNER REQUIREMENTS**

No dangerous or intimidating dogs are permitted.

A monthly maintenance charge of \$5.00 will be billed to the resident each month and is due and payable with the rent on the first of each month.

Dog may not exceed 14 inches at the shoulder or 20 pounds when fully grown. Proof that the dog is neutered or spayed must be furnished by the time the dog is six months old or at the time of admission. Dog must also be housebroken at this time.

In the case of a 6 month old dog, a statement from a veterinarian will be required verifying that, normally, the type of dog will not be over the size requirement, as listed, when fully grown.

Each dog must be licensed by the County and proof of license renewal must be furnished each year by resident at the time of annual re-examination of income.

Dog must wear a collar at all times showing license and owner's name and address. A flea collar is also suggested.

Each year at annual re-examination, tenant must show proof that the dog has had the proper Parvo, Distemper and Rabies shots. This proof must be signed by a veterinarian.

A dog must be on a leash at all times when outside of the owner's apartment unless it is in an approved locked pet carrier. Dogs should be held and carried through common areas of buildings even if on a leash. Dogs must only be taken out of the main entrance door.

Pet owner must have a utensil to remove any waste that his pet deposits on Johnstown Housing Authority property or other property. The waste must then be placed in double plastic bags, sealed tightly, and deposited in an outside receptacle for pet refuse.

No dog may stay alone in an apartment overnight unless it is under the care of the designated person listed on the pet responsibility form. It is the responsibility of the resident if they have to leave suddenly and be away overnight to take the pet elsewhere until they return.

No dog will be left unattended or tied outside of the apartment or building.

#### **SECTION 8. CAT OWNER REQUIREMENTS**

A monthly maintenance charge of \$5.00 will be billed to the resident each month and is due and payable with the rent on the first of each month.

Cats must be trained to use a litter box in the apartment. When removing the cat from the apartment, a pet carrier must be used or the cat must be carried and remain under the resident's control.

The cat must be of normal size (approximately 8 lb).

Proof that the cat has been and spayed or neutered must be shown by the time the cat reaches the age of six months old or at the time of admission.

The cat must wear a collar at all times showing owner's name and address. A flea collar is also suggested. Proof must be shown before admission or when cat reaches age six months old and at annual re-examination of income that the cat has had the proper distemper, calici, herpes and rabies shots. This proof must be signed by a veterinarian.

The resident must use a cat litter box which is cleaned daily. Litter cannot be disposed of inside the building. Litter must be put in sealed double plastic bags and deposited in an outside receptacle for pet refuse.

No cat may stay alone in an apartment overnight unless it is under the care of the designated person listed on the pet responsibility form. It is the responsibility of the tenant if they have to leave suddenly and be away overnight to take the pet elsewhere until they return.

#### **SECTION 10. BIRD OWNER REQUIREMENTS**

No more than two (2) birds to a unit will be permitted, canaries, parakeets, lovebirds, cockatiels or birds of a similar size. Birds must be caged at all times and must be healthy and free of disease. The cage must be no larger than three feet high and two feet wide. The cage must be cleaned daily. The debris from the cage must be disposed of in sealed plastic double bags and deposited in an outside receptacle for pet refuse. If for any reason the bird or birds are suspected of being infested with mites, the tenant will be requested to immediately take the bird or birds to the veterinarian for his opinion. If mites are found, the tenant will be responsible for debugging the unit within 5 days. If debugging does not work, extermination will be ordered by the JHA at the pet owner's expense. Birds are not permitted to be left alone in an apartment longer than two (2) days unless arrangements for daily care have been made by the owner.

#### **SECTION 11 FISH OWNER REQUIREMENTS**

Only one fish tank per apartment will be permitted. The size of the tank cannot exceed 10 gallons. The fish tank should be cleaned regularly. Waste water from the tank must be flushed down the commode. Fish may not be alone in the unit over one (1) week unless arrangements for daily care have been made by the owner. Pet owner must be aware when cleaning or filling fish tanks that water damage done to the apartment or apartments below will be charged to the pet owner. These charges are due and payable in accordance with the dwelling lease.

#### **SECTION 12. OTHER PET REQUIREMENTS**

Follow applicable requirements

**SECTION 13. PETS - GENERAL CONDITIONS**

The Tenant agrees to comply with these rules. Violation of these rules may be grounds for removal of the pet or termination of the Tenant's tenancy, or both.

B.

- A. No pet may be left unattended, whether tied or tethered, outside of the Tenant's unit or building.
- B. Pets are not to be taken into other tenants' apartment for any reason.
- c) Pets are never permitted in the building's public rooms such as the offices, laundry room, lounges, or community rooms or in the Landlord's community buildings. Pets are also never permitted on common grounds areas such as playgrounds, basketball courts etc.
- d) Tenants shall not alter their unit, porch, balcony or hallway in any way as to create an enclosure for their pets.
- e) Apartments, patios, balconies and hallways must be kept clean and free of hair, feathers, seeds, droppings, urine, feces and odors at all times.
- F. Costs of extermination from fleas, ticks, or other animal related pests caused by a tenant's pet will be the responsibility of such tenant.
- G. Tenants shall not permit any disturbance by their pet, which would interfere with other tenants' quiet enjoyment of their accommodations. This includes disturbances such as loud barking, howling, scratching, whining, loud chirping, yowling, screeching, or other such activities.
- H. Any incident of vicious pet behavior will not be tolerated. JHA shall take all necessary action under the law to remove a pet that causes bodily injury to any tenant, guest, visitor, or staff member at pet owner's expense.
- II. No pet shall be left unattended in any unit for longer than 12 hours, unless as indicated above. All resident pet owners shall provide adequate care, nutrition, exercise and medical attention for his/her pet. Pets which appear to be poorly cared for or which are left unattended for longer than 12 hours will be reported to the humane society and will be removed from the premises at the pet owner's expense.
- J. Pet waste must be properly disposed of as specified in the specific pet regulations applying to the type of pet in question. At no time will pet waste of any type be permitted to be placed in any trash chute, wastebaskets, or garbage cans inside the building.  
Pet waste of all types, including cage cleanings, must be put in tightly fastened, heavy duty plastic bags and placed outside in special receptacles of pet waste. A \$5.00 charge will be levied each time the Tenant fails to remove pet waste in accordance with the rules.



- K. Whenever a pet is out of the apartment or house for any reason, such pet will be confined in some way so that it does not become loose in the building or on the grounds. Recapture of a loose pet is the sole responsibility of the Tenant. The Landlord will not be involved or take responsibility for such recapture.

**SECTION 14. VISITING PETS**

Visiting pets are not permitted unless they are dogs aiding the handicapped, i.e., seeing eye dogs, without specific written permission from the Landlord. If such written permission is granted, all rules of this Pet Rider will apply to the visiting pet while on the Landlord's premises.

**SECTION 15. PROTECTION OF THE PET**

Any pet suffering illness must be taken within two (2) days to a veterinarian for diagnosis and treatment. The JHA must, upon demand, be shown a statement from the veterinarian indicating the diagnosis. Any pet suspected of suffering symptoms of rabies or any other disease considered to be a health threat must be immediately removed from the premises until signed evidenced from a veterinarian can be produced to indicate the animal is not so afflicted.

If the health or the safety of a pet is threatened by the death or incapacity of the Tenant or by other factors that render the Tenant unable to care for the pet, the Landlord will contact one of the three persons listed on the Pet Responsibility Card. If none of these three responsible people are willing or able to care for the pet, or after reasonable efforts the Landlord has been unable to contact one of the three persons, the Landlord will contact the appropriate state or local agency and request removal of such pet. If there is no state or local agency authorized to remove a pet under these circumstances, the Landlord will enter the Tenant's unit, remove the pet, and place it in the Animal Shelter for permanent disposition.

**SECTION 16. OWNER'S ABSENCE**

If the Tenant is temporarily absent such as in the hospital or on vacation, the Landlord must be notified as soon as possible before the Tenant leaves with the name of the person who will take total responsibility to regularly care for the pet until the Tenant returns. Such person shall remove the pet from the resident. The responsible person shall not reside in or leave the pet unattended in the Tenant's unit.

Failure to abide by the above regulations will cause the Landlord to arrange for removal and care of the pet as stated in Section 15, with the cost for such care the full responsibility of the Tenant.

## **SECTION 17. PET VIOLATIONS**

1. **Loose Pets** - If a pet gets loose and out of the Tenant's Premises, the Tenant, and not the Landlord is responsible for damages and recapture. The Tenant will immediately clean up any waste and pay the cost of any damages incurred immediately upon presentation of the bill from the Landlord.

2. **Notice of Pet Rule Violation.** If the Landlord determines on the basis of objective facts, supported by written statements, that the Tenant has violated a rule governing the keeping of pets, the Landlord will serve a notice to the Tenant of pet rule violation. The notice of pet rule violation will be in writing and will:

- a. Contain a brief statement of the factual basis for the determination and the pet rule or rules alleged to be violated;
- b. State that the Tenant has 10 days from the effective date of service of the notice to correct the violation ( including, in appropriate circumstances, removal of the pet) or to make a written request for a grievance hearing to discuss the violation with the Landlord.
- c. State that the Tenant's failure to correct the violation, to request a meeting, or to appear at a grievance hearing and may result in initiation of such procedures to have the pet removed or to terminate the Tenant's tenancy, or both.

## **SECTION 18. PET REMOVAL**

If a pet becomes vicious or displays symptoms of severe illness or other behavior that constitutes an immediate threat to the health or safety of the tenants as a whole, the Landlord or an authorized agency will be permitted to enter the Tenant's unit, remove the pet, and take such action with respect to the pet as may be permissible under state and local law. The Landlord is permitted to enter the Premises in such case as above if any of the following situations apply:

- a. The Tenant has refused to remove the pet or if the Landlord is unable to contact the Tenant to make the removal request.
- b. If the Tenant is willing but unable due to accident or illness to remove the pet.
- c. Should the Tenant decide for any reason they no longer want the pet, it is the Tenant's responsibility to remove it and find somewhere to take it themselves at their expense.

1. **Notice for Pet Removal.** If the Landlord determines that the Tenant has failed to correct the pet rule violation, the Landlord may serve a notice to the Tenant requiring the Tenant to remove the pet. The notice

will be in writing and will;

- a. Contain a brief statement of the factual basis for the determination and the pet rule that has been violated;
- b. State that the Tenant must remove the pet; and
- c. State that failure to remove the pet shall result in initiation of procedures to have the pet removed or terminate the Tenant's tenancy, or both.

**SECTION 19. DEATH OF PET**

Should a pet die on the Landlord's property it is the responsibility of the Tenant to dispose of the pet immediately. If this is not done within 1 day and the Landlord must dispose of such pet, the Tenant will be responsible for all costs incurred by the Landlord. The pet may not be disposed of on the Landlord's property or in a dumpster located thereon.

**SECTION 20. UNIT INSPECTION**

Any unit housing a pet will be inspected two times each year or more often if conditions warrant it. The community manager will determine when inspection will be performed. Any unit failing a pet inspection will be placed under eviction for violating the Dwelling Lease.

Any problems noticed at inspection such as damages to the Premises or odors will be rectified by repairs or extermination within ten (10) days of the inspection. If the Tenant has not arranged for repairs or extermination within such ten (10) day period, the Landlord will then make the necessary repairs or extermination at the Tenant's expense. These charges must be paid within thirty (30) days of invoice.

DO NOT SIGN THIS RIDER IF YOU HAVE NOT READ IT CAREFULLY AND HAD ALL QUESTIONS ANSWERED, AS THIS DOCUMENT IS A BINDING PORTION OF YOUR LEASE.

\_\_\_\_\_

Tenant's Signature

\_\_\_\_\_

Employee Name

\_\_\_\_\_

Tenant's Signature

\_\_\_\_\_

Title

---

Signature

*Exhibit I*

JOHNSTOWN HOUSING AUTHORITY  
PET REGISTRATION FORM

As of this date, \_\_\_\_\_ I \_\_\_\_\_ of  
apartment \_\_\_\_\_ am requesting registration of the following type pet,  
a \_\_\_\_\_, named \_\_\_\_\_ age \_\_\_\_\_  
(type)

Picture attached - Bird's vet voluntary, Fish Exempt

My pet's veterinarian is: Name \_\_\_\_\_  
Address \_\_\_\_\_  
Phone \_\_\_\_\_

**\*\*VETERINARIAN TO FILL OUT THE FOLLOWING:**

This pet had the following necessary inoculations:

\_\_\_\_\_  
\_\_\_\_\_

which are effective until \_\_\_\_\_.

I am certifying that this pet is in good health and has been spayed or neutered as required by  
management on \_\_\_\_\_.

\_\_\_\_\_  
Veterinarian's Signature Date

As the pet owner, I hereby certify that I have a pet license and it is in effect until  
\_\_\_\_\_ (copy attached).

As the pet owner, I also have read the Pet Lease Amendment and agree to abide by those  
regulations. My signed Pet Responsibility Card is attached.

\_\_\_\_\_  
\_\_\_\_\_

Signature

Date

All in order, approved by employee: \_\_\_\_\_

Date: \_\_\_\_\_

PET RESPONSIBILITY FORM

(Must be filled in, signed, and submitted with the Registration Form to the Housing Authority before the pet can be approved).

As a pet owner residing in a Johnstown Housing Authority managed building, I have contacted the following three (3) local persons who have agreed by their signatures to accept the responsibility for removal and/or care of my pet if I become ill or for any reason I cannot temporarily care for this pet.

1. I have read the Pet Regulations and agree to abide by these rules and assume responsibility for the pet (name of pet)

owned by: Name \_\_\_\_\_  
Address \_\_\_\_\_

In the event the owner is out of town, or for any reason is not able to continue care of the pet temporarily when called by the owner or Johnstown Housing Authority.

Signature: \_\_\_\_\_  
Address: \_\_\_\_\_  
PHONE: \_\_\_\_\_

2. I have read the Pet Regulations and agree to abide by these rules and assume responsibility for the pet (name of pet)

owned by: Name \_\_\_\_\_  
Address \_\_\_\_\_

In the event the owner is out of town, or for any reason is not able to continue care of the pet temporarily when called by the owner or Johnstown Housing Authority.

Signature: \_\_\_\_\_  
Address: \_\_\_\_\_  
PHONE: \_\_\_\_\_

3. I have read the Pet Regulations and agree to abide by these rules and assume responsibility for the pet (name of pet)

owned by: Name \_\_\_\_\_  
Address \_\_\_\_\_

In the event the owner is out of town, or for any reason is not able to continue care of the pet temporarily when called by the owner or Johnstown Housing Authority.

Signature: \_\_\_\_\_

Address: \_\_\_\_\_

PHONE: \_\_\_\_\_



ATTACHMENT F

**JOHNSTOWN HOUSING AUTHORITY  
DECONCENTRATION POLICY**

It is the Johnstown Housing Authority's policy to provide for deconcentration of poverty and encourage income mixing by bringing higher income families into lower income developments.

The Johnstown Housing Authority has removed the Very Low Income Admissions Limit for Loughner Plaza which had been a restricted admission community by HUD Regulations. The change has been approved by the Board of Commissioners.

The Johnstown Housing Authority has reviewed all the communities and it is determined that there is no concentration of families with higher incomes in one area. All communities have average incomes within or below the Very Low Income Limits. Upon review of all communities in comparison to the census tracts, the families' incomes average approximately 47% of the average incomes for the census areas. They vary from 29% to 92% of the actual average income for each census tract. (See the analysis attached as exhibit A.)

Consideration will be given to applicants in order to meet the requirement of deconcentration of poverty and income mixing. In order to achieve a tenant body composed of families with a broad range of incomes, the housing authority will strive to achieve a distribution of incomes among its residents. The skipping of an applicant on the waiting list, to reach another family to implement this policy shall not be considered an adverse action. This policy will be accomplished in a uniform and non-discriminating manner.

The Johnstown 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 residents will not be steered toward higher income developments. Marketing efforts will be designed to attract applicants from appropriate segments of the lower and very low income population. The Authority will use its marketing program to achieve a more representative income mix of lower income families among those on the waiting list and thereby attain a broad range of income in its communities.

The Johnstown Housing Authority may offer one or more incentives to encourage applicant families whose income classification would help to meet the 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 non-discriminatory manner. A reasonable flat rent has been established as an incentive to attract higher income families.

The Johnstown Housing Authority will annually analyze the income levels of families residing

in each of our developments and the income levels of census tracts in which our developments are located. Based on this analysis, we will determine the level of marketing strategies and deconcentration incentives to implement.

EXHIBIT A

DECONCENTRATION  
PUBLIC HOUSING  
05/31/00

Project	Avg Family Income	Avg Family Members	30% Income Limit	Very Low Income Limit		Census Tract	Census Tract Avg Fam Income	% Project/Census
19-1	\$6028	1.83	\$9150			0010	\$16200	37%
19-2	\$6835	1.41	\$8000			0013	\$17899	38%
19-3	\$7229	2.02	\$9150			0013	\$17899	40%
19-4A	\$4792	1.72	\$9150			0004	\$15017	32%
19-4B	\$5274	2.01	\$9150			0014	\$18465	29%
19-5	\$7589	1.06	\$8000			0001	\$10905	70%
19-6	\$7969	2.14	\$9150			0116	\$24983	32%
19-7	\$9736	2.27	\$9150	\$15300 <		0130	\$23123	42%
19-8	\$7793	1.02	\$8000			0001	\$10905	71%
19-9	\$10006	1.07	\$8000	\$13350 <		0001	\$10905	92%
19-12	\$8084	1.04	\$8000	\$13350 <		0007	\$25582	32%
<b>TOTAL</b>	<b>\$7394</b>	<b>1.60</b>	<b>\$9150</b>			<b>Average</b>	<b>\$17444</b>	<b>47%</b>

**PHA Plan**  
**Table Library** Component 7  
**Capital Fund Program Annual Statement**  
**Parts I, II, and II**

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

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

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

Development Number/Name HA-Wide Activities	General Description of Major Work Categories	Development Account Number	Total Estimated Cost

--	--	--	--



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

<b>Development Number/Name HA-Wide Activities</b>	<b>All Funds Obligated (Quarter Ending Date)</b>	<b>All Funds Expended (Quarter Ending Date)</b>

## 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	
Description of Needed Physical Improvements or Management Improvements			Estimated Cost	Planned Start Date (HA Fiscal Year)
<b>Total estimated cost over next 5 years</b>				





**Annual Statement / Performance and Evaluation Report**  
**Part II: Supporting Pages**  
 Comprehensive Grant Program (CGP)

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

OMB Approval No. 2577-0157 (Exp. 7/31/98)

Development Number/Name HA-Wide Activities	General Description of Major Work Categories	Development Account Number	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work (2)
				Original	Revised (1)	Funds Obligated (2)	Funds Expended (2)	
<b>PA19-1 PROSPECT</b>	Bathroom renovations	1460.00		155,000.00				
	Sidewalks/curbs	1450.00		60,000.00				
	Front/rear entrance roof lines	1460.00		203,224.00				
<b>PA19-2 OAKHURST</b>	Bathroom renovations	1460.00		140,000.00				
	Front/rear entrance roof lines	1460.00		178,224.00				
<b>PA19-4A SOLOMON</b>	Entrance doors/frames	1460.00		100,000.00				
	Entrance doors/frames	1460.00		50,000.00				
<b>PA19-4B COOPERSDALE</b>	Floor tile/units	1460.00		70,000.00				
	Hallway renovation	1460.00		35,000.00				

(1) To be completed for the Performance and Evaluation Report or a Revised Annual Statement

(2) To be completed for the Performance and Evaluation Report.

Signature of Executive Director and Date

Signature of Public Housing Director/Office of Native American Programs Administrator and Date

X

X

**Annual Statement / Performance and Evaluation Report**  
**Part II: Supporting Pages**  
 Comprehensive Grant Program (CGP)

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

OMB Approval No. 2577-0157 (Exp. 7/31/98)

Development Number/Name HA-Wide Activities	General Description of Major Work Categories	Development Account Number	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work (2)
				Original	Revised (1)	Funds Obligated (2)	Funds Expended (2)	
<b>PA19-5</b> <b>VINE STREET TOWER</b>	Entrance/canopy renovations	1460.00		70,000.00				
	Entrance phone sys/pull stat.	1465.00		23,000.00				
	Garbage compactors	1465.00		25,000.00				
<b>PA19-6</b> <b>NANTY GLO</b>	Bathroom renovations	1460.00		22,000.00				
	Sidewalks/curbs	1450.00		70,000.00				
	Interior door replacement	1460.00		150,000.00				
	Tub replacement	1460.00		42,000.00				
	Front entrance roof lines	1460.00		200,000.00				
<b>PA19-7</b> <b>PORTAGE</b>	Bathroom renovations	1460.00		19,000.00				
	Sidewalks/curbs	1450.00		50,000.00				
	Interior door replacement	1460.00		129,000.00				
	Tub replacement	1460.00		42,000.00				
	Parking lot resurfacing	1450.00		10,000.00				
	Hot water tank replacement	1460.00		15,000.00				

(1) To be completed for the Performance and Evaluation Report or a Revised Annual Statement

(2) To be completed for the Performance and Evaluation Report.

Signature of Executive Director and Date

Signature of Public Housing Director/Office of Native American Programs Administrator and Date

X

X

**Annual Statement / Performance and Evaluation Report**  
**Part II: Supporting Pages**  
 Comprehensive Grant Program (CGP)

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

OMB Approval No. 2577-0157 (Exp. 7/31/98)

Development Number/Name HA-Wide Activities	General Description of Major Work Categories	Development Account Number	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work (2)
				Original	Revised (1)	Funds Obligated (2)	Funds Expended (2)	
<b>PA19-8 CONNOR TOWER</b>	Entrance door/canopy	1460.00		70,000.00				
	Entrance phone/pull station	1465.00		50,000.00				
	Garbage compactor	1465.00		25,000.00				
<b>PA19-9 TOWN HOUSE TOWER</b>	Entrance door/canopy	1460.00		50,000.00				
	Entrance phone/pull station	1465.00		75,000.00				
	Garbage compactor	1465.00		25,000.00				
<b>PA19-12 LOUGHNER PLAZA</b>	Entrance door/canopy	1460.00		100,000.00				
	Entrance phone system	1465.00		30,000.00				
	Carpeting/units	1460.00		25,000.00				
	Common area renovation	1460.00		150,000.00				

(1) To be completed for the Performance and Evaluation Report or a Revised Annual Statement

(2) To be completed for the Performance and Evaluation Report.

Signature of Executive Director and Date

Signature of Public Housing Director/Office of Native American Programs Administrator and Date

X

X

**Annual Statement / Performance and Evaluation Report**  
**Part II: Supporting Pages**  
 Comprehensive Grant Program (CGP)

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

OMB Approval No. 2577-0157 (Exp. 7/31/98)

Development Number/Name HA-Wide Activities	General Description of Major Work Categories	Development Account Number	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work (2)
				Original	Revised (1)	Funds Obligated (2)	Funds Expended (2)	
<b>MANAGEMENT IMPROVEMENTS</b>	Security	1408.00		300,000.00				
	Section 3 Initiatives	1408.00		100,000.00				
<b>DEVELOPMENT</b>	Mixed Finance Development	1498.00		300,000.00				
<b>OTHER</b>	Architectural & Engineering	1430.00		120,000.00				

(1) To be completed for the Performance and Evaluation Report or a Revised Annual Statement

(2) To be completed for the Performance and Evaluation Report.

Signature of Executive Director and Date

Signature of Public Housing Director/Office of Native American Programs Administrator and Date

**X**

**X**

Five-Year Action Plan  
**Part II: Supporting Pages**  
**Physical Needs Work Statement(s)**  
**Comprehensive Grant Program (CGP)**

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

Work Statement for Year 1 <b>FFY:2001</b>	Work Statement for Year <u>  2  </u> <b>FFY:2002</b>			Work Statement for Year <u>  3  </u> <b>FFY:2003</b>			
	Development Number/Name/General Description of Major Work Categories	Quantity	Estimated Cost	Development Number/Name/General Description of Major Work Categories	Quantity	Estimated Cost	
	<b>See Annual Statement</b>	<b>PA 19-3 OAKHURST EXT.</b> Bathroom renovations Kitchen renovations Tile flooring apts. Wood trim New baseboard heating		300,000.00 500,000.00 300,000.00 200,000.00 1,060,000.00	<b>PA 19-1 PROSPECT</b> Landscaping  <b>PA 19-2 OAKHURST</b> Landscaping  <b>PA 19-3 OAKHURST EXT.</b> Landscaping Sidewalks/curbs  <b>PA 19-4A SOLOMON</b> Landscaping  <b>PA 19-4B COOPERSDALE</b> Landscaping  <b>PA 19-5 VINE STREET TOWER</b> Hallway/ common area renovations Electrical system upgrade Mechanical system upgrade Landscaping  <b>PA 19-6 NANTY GLO</b> Landscaping Sidewalks/curbs  <b>PA 19-7 PORTAGE</b> Landscaping  <b>Continued</b>		15,000.00   10,000.00  60,000.00 86,448.00  30,000.00  10,000.00  500,000.00 100,000.00 100,000.00 15,000.00  5,000.00 84,000.00  5,000.00
<b>PA 19-5 VINE STREET TOWER</b> Painting			92,724.00				
<b>PA 19-8 CONNOR TOWER</b> Painting			92,724.00				
<b>PA19-9 TOWN HOUSE TOWER</b> Bathroom renovations			93,000.00				
<b>DEVELOPMENT</b> Mixed finance development			100,000.00				
Subtotal of Estimated Cost			\$2,738,448.00	Subtotal of Estimated Cost			
				\$1,020,448.00			

Five-Year Action Plan  
**Part II: Supporting Pages**  
**Physical Needs Work Statement(s)**  
**Comprehensive Grant Program (CGP)**

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

Work Statement for Year 1 <b>FFY:2001</b>	Work Statement for Year <u>4</u> <b>FFY:2004</b>			Work Statement for Year <u>5</u> <b>FFY:2005</b>		
	Development Number/Name/General Description of Major Work Categories	Quantity	Estimated Cost	Development Number/Name/General Description of Major Work Categories	Quantity	Estimated Cost
	<b>See Annual Statement</b>	<b>PA19-4A SOLOMON</b>			<b>PA 19-3 OAKHURST EXT.</b>	
Bathroom tile			100,000.00	Sidewalks/curbs		100,000.00
Mechanical system upgrade			700,000.00			
Apartment entrance doors			180,000.00	<b>PA 19-4A SOLOMON</b>		
Kitchen backsplashes			50,000.00	Interior door replacement		600,000.00
Hallway lighting renovations			300,000.00	Sidewalks/curbs		50,000.00
Common area drying areas			50,000.00			
Exterior lighting renovations			100,000.00	<b>PA 19-4B COOPERSDALE</b>		
				Interior door replacement		300,000.00
<b>PA19-4B COOPERSDALE</b>				Sidewalks/curbs		10,000.00
Bathroom tile			50,000.00	<b>PA19-5 VINE STREET TOWER</b>		
Mechanical system upgrade			300,000.00	Interior door replacement		300,000.00
Apartment entrance doors			90,000.00	New baseboard heating		250,000.00
Kitchen backsplashes			25,000.00	Replace interior/exterior lighting		100,000.00
Interior wall renovations			200,000.00	Brick repointing		50,000.00
Hallway lighting renovations			150,000.00	Sidewalks/curbs		2,000.00
Common area drying areas			25,000.00	Fire alarms		100,000.00
Exterior lighting renovations			50,000.00	<b>PA19-8 CONNOR TOWER</b>		
				Interior door replacement		300,000.00
<b>PA19-9 TOWN HOUSE TOWER</b>				New baseboard heating		250,000.00
Interior drainage replacement			250,000.00	Replace exterior/interior lighting		100,000.00
Bathroom renovations/commodos			38,500.00	Brick repointing		50,000.00
				Firealarms		100,000.00
<b>DEVELOPMENT</b>				<b>PA 19-9 TOWN HOUSE TOWER</b>		
Mixed finance development		59,948.00	Fire alarms		70,000.00	
			Sidewalks/curbs		4,448.00	
			<b>PA 19-12 LOUGHNER PLAZA</b>			
			Fire alarms		50,000.00	
			Sidewalks/curbs		2,000.00	
	Subtotal of Estimated Cost		\$2,718,448.00	Subtotal of Estimated Cost		\$2,788,448.00

Five-Year Action Plan  
**Part II: Supporting Pages**  
**Physical Needs Work Statement(s)**  
 Comprehensive Grant Program (CGP)

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

Work Statement for Year 1 FFY:2001	Work Statement for Year <u>  3  </u> FFY: 2003			Work Statement for Year _____ FFY: _____		
	Development Number/Name/General Description of Major Work Categories	Quantity	Estimated Cost	Development Number/Name/General Description of Major Work Categories	Quantity	Estimated Cost
<b>See Annual Statement</b>	<b>Continued</b>					
	<b>PA19-8 CONNOR TOWER</b>					
	Hallway/common area renovations		500,000.00			
	Electrical system upgrade		100,000.00			
	Bathroom renovation/flooring/tubs		580,000.00			
	Landscaping		10,000.00			
	Painting		72,000.00			
	<b>PA19-9 TOWN HOUSE TOWER</b>					
	Hallway/common area renovations		400,000.00			
	Electrical system upgrade		75,000.00			
	Bathroom renovations/tubs		36,000.00			
	Landscaping		5,000.00			
	<b>PA 19-12 LOUGHNER PLAZA</b>					
	Landscaping		5,000.00			
Subtotal of Estimated Cost			\$2,803,448.00	Subtotal of Estimated Cost		



Five-Year Action Plan  
**Part III: Supporting Pages**  
**Management Needs Work Statement(s)**  
 Comprehensive Grant Program (CGP)

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

Work Statement for Year 1 <b>FFY:2001</b>	Work Statement for Year <u>  2  </u> <b>FFY:2002</b>			Work Statement for Year <u>  3  </u> <b>FFY:2003</b>		
	General Description of Major Work Categories	Quantity	Estimated Cost	General Description of Major Work Categories	Quantity	Estimated Cost
<b>See Annual Statement</b>	PHA-WIDE SECURITY		\$320,000.00	PHA-WIDE SECURITY		\$325,000.00
	SECTION-3 RESIDENT INITIATIVES		80,000.00			
	Subtotal of Estimated Cost		\$400,000.00	Subtotal of Estimated Cost		\$325,000.00

Five-Year Action Plan  
**Part III: Supporting Pages**  
**Management Needs Work Statement(s)**  
 Comprehensive Grant Program (CGP)

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

Work Statement for Year 1 <b>FFY:2001</b>	Work Statement for Year <u>  4  </u> <b>FFY:2004</b>			Work Statement for Year <u>  5  </u> <b>FFY:2005</b>		
	General Description of Major Work Categories	Quantity	Estimated Cost	General Description of Major Work Categories	Quantity	Estimated Cost
<b>See Annual Statement</b>	PHA-WIDE SECURITY		\$330,000.00	PHA-WIDE SECURITY		\$340,000.00
	SECTION-3 RESIDENT INITIATIVES		80,000.00			
	Subtotal of Estimated Cost		\$410,000.00	Subtotal of Estimated Cost		\$340,000.00

Five-Year Action Plan  
**Part III: Supporting Pages**  
**Management Needs Work Statement(s)**  
 Comprehensive Grant Program (CGP)

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

Work Statement for Year 1 FFY:2001	Work Statement for Year _____ FFY: _____			Work Statement for Year _____ FFY: _____		
	General Description of Major Work Categories	Quantity	Estimated Cost	General Description of Major Work Categories	Quantity	Estimated Cost
<b>See Annual Statement</b>						
	Subtotal of Estimated Cost			Subtotal of Estimated Cost		

# Public Housing Drug Elimination Program Plan

**Note:** THIS PHDEP Plan template (HUD 50075-PHDEP Plan) is to be completed in accordance with Instructions located in applicable PIH Notices.

**Annual PHDEP Plan Table of Contents:**

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

**Section 1: General Information/History**

- A. Amount of PHDEP Grant \$ **380,277**
- B. Eligibility type (Indicate with an "x") N1 \_\_\_\_\_ N2 \_\_\_\_\_ R **X** \_\_\_\_\_
- C. FFY in which funding is requested **2001**
- D. Executive Summary of Annual PHDEP Plan

The completion of a Drug Elimination PHDEP Plan is the legal obligation of local law enforcement officers for above baseline services to our targeted communities. Undercover operations and the very successful "Walk & Talk" program, where uniformed officers patrol our communities and talk with our residents, make up the bulk of this above baseline service, however, officers also referee basketball games and chaperon field trips and special events. The Oakhurst Community Resident Council runs a Youth Education & Recreation Program geared toward drug prevention. They also work closely with local agencies to bring needed educational, recreational, and training services to the community. The Oakhurst Resident Council's Voluntary Tenant Patrol is also a part of our Drug Elimination Program.

**E. Target Areas**

Complete the following table by indicating each PHDEP Target Area (development or site where activities will be conducted), the total number of units in each PHDEP Target Area and the total number of individuals expected to participate in PHDEP sponsored activities in each Target Area. The Johnstown Housing Authority plans to work toward getting 2 more of our family communities targeted for the Drug Elimination Program. We have been getting reports that we may have a developing problem in these communities. Our Nanty-Glo Community has 56 units with a population of 118 and our Portage Community has 48 units with a population of 109 residents.

PHDEP Target Areas (Name of development(s) or site)	Total # of Units within the PHDEP Target Area(s)	Total Population to be Served within the PHDEP Target Area(s)

PA 19-1 PROSPECT COMMUNITY	111	193
PA 19-2 OAKHURST COMMUNITY	100	141
PA 19-3 OAKHURST COMMUNITY EXT.	300	592
PA 19-4A SOLOMON COMMUNITY	248	362
PA 19-4B COOPERSDALE COMMUNITY	121	216

**F. Duration of Program**

Indicate the duration (number of months funds will be required) of the PHDEP Program proposed under this Plan (place an “x” to indicate the length of program by # of months. For “Other”, identify the # of months).

6 Months \_\_\_\_\_ 12 Months \_\_\_\_\_ 18 Months \_\_\_\_\_ 24 Months X Other \_\_\_\_\_

**G. PHDEP Program History**

Indicate each FY that funding has been received under the PHDEP Program (place an “x” by each applicable Year) and provide amount of funding received. If previously funded programs have not been closed out at the time of this submission, indicate the fund

Fiscal Year of Funding	PHDEP Funding Received	Grant #	Fund Balance as of Date of this Submission	Grant Extensions or Waivers	Anticipated Completion Date
FY 1994	X \$285,854	PA28DEP0190194	0	GE	COMPLETED
FY 1996	X \$199,660	PA28DEP0190196	0		COMPLETED
FY 1997	X \$244,656	PA28DEP0190197	0		COMPLETED
FY 1998	X \$256,477	PA28DEP0190198	\$31,122.62		11/18/00
FY 1999	X \$380,277	PA28DEP0190199	\$308,669.12		01/19/02

**Section 2: PHDEP Plan Goals and Budget**

**A. PHDEP Plan Summary**

In the space below, summarize the PHDEP strategy to address the needs of the target population/target area(s). Your summary should briefly identify: the broad goals and objectives, the role of plan partners, and your system or process for monitoring and evaluating PHDEP-funded activities. This summary should not exceed 5-10 sentences.

A new goal for our PHDEP plan is to work toward having 2 additional family communities targeted under this program and broad goals of the Drug Elimination Program are to make our communities more safe and secure by reducing drug related and other criminal activities and to educate our young residents as to the dangers of drug use and crime.

The prime partners of the Johnstown Housing Authority’s Drug Elimination Program are the Johnstown Police Department (JPD), the Cambria County Drug Task Force (CCDTF) and the Oakhurst Resident Council (ORC). The JPD and the CCDTF provide the above baseline law enforcement services of our program. These services include the “Walk & Talk” program, undercover investigations, covert surveillance activities, executing search and arrest warrants, court appearances, and conducting public awareness training for residents. Law enforcement officers also referee for the summer basketball program and act as chaperones for youth program field trips and special events. The ORC runs a Youth Education and Recreation Program and a Voluntary Tenant Patrol Program in our Oakhurst Community. The

ORC's youth program offers parenting classes, domestic & dating violence and drug education classes. They use local agencies to provide some of these classes.

The Authority's Drug Elimination Coordinator is charged with monitoring and evaluating the program. The coordinator meets monthly with law enforcement officials, ORC youth program workers and the residents of our targeted communities to discuss program concerns, and to evaluate existing programming.

## B. PHDEP Budget Summary

Enter the total amount of PHDEP funding allocated to each line item.

FY 2001 PHDEP Budget Summary	
Budget Line Item	Total Funding
9110 - Reimbursement of Law Enforcement	\$232,000
9120 - Security Personnel	
9130 - Employment of Investigators	
9140 - Voluntary Tenant Patrol	\$1,327
9150 - Physical Improvements	\$80,000
9160 - Drug Prevention	\$80,000
9170 - Drug Intervention	
9180 - Drug Treatment	
9190 - Other Program Costs	\$3,000
<b>TOTAL PHDEP FUNDING</b>	<b>\$396,327</b>

## C. PHDEP Plan Goals and Activities

In the tables below, provide information on the PHDEP strategy summarized above by budget line item. Each goal and objective should be numbered sequentially for each budget line item (where applicable). Use as many rows as necessary to list proposed activities (additional rows may be inserted in the tables). PHAs are not required to provide information in shaded boxes. Information provided in the shaded boxes will not be included in the PHDEP funding column. Tables for line items in which PHDEP funding is planned goals or activities may be deleted.

Goal(s)	Total PHDEP Funding: \$232,000						
	<b>1. CRIME REDUCTION</b> <b>2. INCREASED RESIDENT SATISFACTION WITH SAFETY AND SECURITY</b> <b>3. CONDUCT RESIDENT DRUG AWARENESS TRAINING AND EDUCATION</b>						
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHDEP Funding	Other Funding (Amount/ Source)	Performance Indicators
1. Walk & Talk			1/02	4/03	\$162,400	\$4,000 in kind	crime stats-resident surveys-monthly meetings
2. Covert Surveillance			1/02	4/03	\$11,600	\$4,000	crime stats-resident

						<b>in kind</b>	surveys-monthly meetings
<b>3. Gather Intelligence</b>			1/02	4/03	\$11,600		crime stats-resident surveys-monthly meetings
<b>4. Execute Search and Arrests Warrants</b>			1/02	4/03	\$11,600		crime stats-resident surveys-monthly meetings
<b>5. Court Appearances</b>			1/02	4/03	\$11,600		crime stats-resident surveys-monthly meetings
<b>6. Conduct Resident Awareness Training</b>			1/02	4/03	\$11,600		crime stats-resident surveys-monthly meetings
<b>7. Referee Basketball</b>			6/02	8/02	\$4,640		attendance records & meetings
<b>8. Chaperone field trips and special events</b>			4/02	10/02	\$6,960		attendance records & meetings

<b>9140 - Voluntary Tenant Patrol</b>	<b>Total PHDEP Funding: \$1,327</b>
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<b>Goal(s)</b>	<b>1. CRIME REDUCTION</b> <b>2. INCREASE COMMUNITY SAFETY AND SECURITY</b> <b>3. INCREASE RESIDENT PARTICIPATION IN THE PROGRAM</b>						
<b>Proposed Activities</b>	<b># of Persons Served</b>	<b>Target Population</b>	<b>Start Date</b>	<b>Expected Complete Date</b>	<b>PHDEP Funding</b>	<b>Other Funding (Amount /Source)</b>	<b>Performance Indicators</b>
<b>1. Community Patrols</b>	733	733	12/02	12/03	\$1,000	0	crime stats-resident survey results
<b>2. Recruit Residents</b>	733	733	12/02	12/03	\$327	0	# of new residents participating in the program

<b>9150 - Physical Improvements</b>	<b>Total PHDEP Funding: \$</b>
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<b>Goal(s)</b>	<b>1. CRIME REDUCTION</b> <b>2. ENHANCE COMMUNITY SAFETY AND SECURITY</b>						
<b>Proposed Activities</b>	<b># of Persons Served</b>	<b>Target Population</b>	<b>Start Date</b>	<b>Expected Complete Date</b>	<b>PHDEP Funding</b>	<b>Other Funding (Amount /Source)</b>	<b>Performance Indicators</b>

1. Security Lighting			5/02	8/02	\$80,000		completion of the work-crime stats- resident surveys
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<b>9160 - Drug Prevention</b>					<b>Total PHDEP Funding: \$80,000</b>		
<b>Goal(s)</b>	<b>1. Provide educational and recreational programming to our targeted communities.</b> <b>2. Provide a Drug Elimination Coordinator to Administer the program.</b> <b>3. Reduce drug use and crime in our targeted communities.</b>						
<b>Proposed Activities</b>	<b># of Persons Served</b>	<b>Target Population</b>	<b>Start Date</b>	<b>Expected Complete Date</b>	<b>PHDEP Funding</b>	<b>Other Funding (Amount /Source)</b>	<b>Performance Indicators</b>
1.Oakhurst Program Personnel	733	733	12/02	12/03	\$44,000	0	employ residents to operate the program
2.Oakhurst Recreational Programming	733	733	12/02	12/03	\$12,500	0	input from residents-participation numbers-specific program results
3.Oakhurst Educational Programming	733	733	12/02	12/03	\$12,500	0	input from residents-participation numbers-specific program results
4. Drug Elimination Coordinator	1504	1504	5/02	5/03	\$11,000	0	crime stats-resident survey-monthly meetings
5. Summer and winter rec program(all family communities except Oakhurst)	998	998	6/02	8/02	0	\$40,000	

<b>9190 - Other Program Costs</b>					<b>Total PHDEP Funds: \$3,000</b>		
<b>Goal</b>	<b>1. Survey Targeted Population</b>						
<b>Proposed Activities</b>	<b># of Persons Served</b>	<b>Target Population</b>	<b>Start Date</b>	<b>Expected Complete Date</b>	<b>PHDEP Funding</b>	<b>Other Funding (Amount /Source)</b>	<b>Performance Indicators</b>
1.Survey all targeted communities			10/02	12/02	\$3,000	0	percent of completed surveys in the targeted communities
2.							



3.							
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**Section 3: Expenditure/Obligation Milestones**

Indicate by Budget Line Item and the Proposed Activity (based on the information contained in Section 2 PHDEP Plan Budget and Goals), the % of funds that will be expended (at least 25% of the total grant award) and obligated (at least 50% of the total grant award) within 12 months of grant execution.

Budget Line Item #	25% Expenditure of Total Grant Funds By Activity #	Total PHDEP Funding Expended (sum of the activities)	50% Obligation of Total Grant Funds by Activity #	Total PHDEP Funding Obligated (sum of the activities)
<i>e.g Budget Line Item # 9120</i>	<i>Activities 1, 3</i>		<i>Activity 2</i>	
<b>9110</b>	<b>activities 1-8</b>	<b>\$50,000</b>	<b>activities 1-8</b>	<b>\$232,000</b>
<b>9120</b>				
<b>9130</b>				
<b>9140</b>				
<b>9150</b>	<b>activity 1</b>	<b>\$80,000</b>	<b>activity 1</b>	<b>\$80,000</b>
<b>9160</b>	<b>activity 4</b>	<b>\$4,000</b>	<b>activity 4</b>	<b>\$11,000</b>
<b>9170</b>				
<b>9180</b>				
<b>9190</b>				
<b>TOTAL</b>		<b>\$134,000</b>		<b>\$323,000</b>

**Section 4: Certifications**

A comprehensive certification of compliance with respect to the PHDEP Plan submission is included in the “PHA Certifications of Compliance with the PHA Plan and Related Regulations.”

# JOHNSTOWN HOUSING AUTHORITY ORGANIZATIONAL CHART



