PHAPlans 5-YearPlanforFiscalYears2000 -2004 AnnualPlanforFiscalYear2001

NOTE: THISPHAPLANSTEMPLATE (HUD50075) ISTOBECOMPLETED IN ACCORDANCE WITHINSTRUCTIONSLOCATED IN APPLICABLE PIHNOTICES

OMBApprovalNo:2577 -0226 Expires:03/31/2002

PHAPlan AgencyIdentification

PHAName:GrangerHousingAuthority

PHANumber: TX281

PHAFiscalYearBeginning: Ja nuary2001 **PublicAccesstoInformation**

Informationregardinganyactivitiesoutlinedinthisplancanbeobtainedby contacting:(selectallthatapply)

- X MainadministrativeofficeofthePHA
- ___ PHAdevelopmentmanagementoffices

DisplayLocationsF orPHAPlansandSupportingDocuments

ThePHAPlans(includingattachments)areavailableforpublicinspectionat:(selectall thatapply)

- X MainadministrativeofficeofthePHA
 - _ PHAdevelopmentmanagementoffices
- **X** Mainadministrativeofficeofthel ocalgovernment
- _____ MainadministrativeofficeoftheCountygovernment
- _____ MainadministrativeofficeoftheStategovernment
- ____ Publiclibrary
- _____ PHAwebsite
- ____ Other(listbelow)

PHAPlanSupportingDocumentsareavailableforinspectionat:(

selectallthatapply)

- **X** MainbusinessofficeofthePHA
- **X** PHAdevelopmentmanagementoffices
- ____ Other(listbelow)

5-YEAR PLAN PHAF ISCAL YEARS 2000 -2004 [24CFRPart903.5]

A.Mission

X ThemissionofthePHAisthesameasthatoftheDepa rtmentofHousingand UrbanDevelopment:Topromoteadequateandaffordablehousing,economic opportunityandasuitablelivingenvironmentfreefromdiscrimination.

B.Goals

HUDStrategicGoal:Increasetheavailabilityofdecent,safe,andafford able housing.

- **X** PHAGoal:Expandthesupplyofassistedhousing Objectives:
 - Applyforadditionalrentalvouchers:
 - **X**____ Reducepublichousingvacancies:
 - Leverageprivateorotherpublicfundstocreateadditionalhousing opportunities:
 - _____ Acquireorbuildunitsordevelopments
 - ____ Other(listbelow)

X PHAGoal:Improve the quality of assisted housing Objectives:

- X Improvepublichousingmanagement:(PHASscore)highperformer
- Improvevouchermanagement:(SEMAPsc ore)
- X____ Increasecustomersatisfaction:
- ____ Concentrateoneffortstoimprovespecificmanagementfunctions:
- (list;e.g.,publichousingfinance;voucherunitinspections)
- X____ Renovateormodernizepublichousingunits:
- _____ Demolishordisposeofobsoletepublichousing:
- _____ Providereplacementpublichousing:
- ____ Providereplacementvouchers:
- ____ Other:(listbelow)

PHAGoal:Increase assistedhousingchoices Objectives:

- _____ Providevouchermobilitycounseling:
- _____ Conductoutreacheffortstopotentialvoucherlandlords
- Increasevoucherpaymentstandards
- Implementvoucherhomeownershipprogram:
- Implementpublich ousingorotherhomeownershipprograms:
- Implementpublichousingsite -basedwaitinglists:
- ____ Convertpublichousingtovouchers:
- ____ Other:(listbelow)

HUDStrategicGoal:Improvecommunityqualityoflifeandeconomicvitality

PHAGo al:Provideanimprovedlivingenvironment

Objectives:

- **X** Implementmeasurestode -concentratepovertybybringinghigherincome publichousinghouseholdsintolowerincomedevelopments:
- X Implementmeasurestopromoteincomemixinginpub lichousingby assuringaccessforlowerincomefamiliesintohigherincome developments:
- Implementpublichousingsecurityimprovements:
- Designatedevelopmentsorbuildingsforparticularresidentgroups (elderly,personswithdisabilities)
- ____ Other:(listbelow)

HUDStrategicGoal:Promoteself -sufficiencyandassetdevelopmentoffamilies and individuals

X____ PHAGoal:Promoteself -sufficiencyandassetdevelopmentofassisted households

Objectives:

- _____ Increase the number and percentage of employed persons in assisted families:
- ____ Provideorattractsupportiveservicestoimproveassistancerecipients' employability:
- **X** Provideorattractsupportiveservicestoincreaseindependenceforthe elderlyorfamilieswithdis abilities.
- ____ Other:(listbelow)

HUDStrategicGoal:EnsureEqualOpportunityinHousingforallAmericans

- X PHAGoal:Ensureequalopportunityandaffirmativelyfurtherfairhousing Objectives:
 X Undertaineeffirmativereequations
 - **X** Undertakeaffirmativemeasurestoensur eaccesstoassistedhousing regardlessofrace,color,religionnationalorigin,sex,familialstatus,and disability:
 - X
 Undertakeaffirmativemeasurestoprovideasuitablelivingenvironment
 forfamilieslivinginassistedhousing,regardlessofr
 ace,color,religion

 nationalorigin,sex,familialstatus,anddisability:
 Undertakeaffirmativemeasurestoensureaccessiblehousingtopersons

 withallvarietiesofdisabilitiesregardlessofunitsizerequired:
 Other:(listbelow)

OtherPHA GoalsandObjectives:(listbelow)

TheGrangerHousingAuthority'sfirstobjectiveistoprovidedecent,safeand affordablehousingforallfamilies,includingtheelderlyanddisabled.Weintendto improve the overall appearance of the deve lopment, and encourage equal opport unities for all residents.

AnnualPHAPlan PHAFiscalYear2001 [24CFRPart903.7]

AnnualPlanType:

X StandardPlan

StreamlinedPlan:

- _ HighPerformingPHA
- **____** SmallAgency(<250PublicHousingUnits)
- ____ AdministeringSection8Only

AnnualPlanTableofContents

TableofContents

AnnualPlan

ExecutiveSummary

i. TableofContents

HousingNeeds

- 1. FinancialResources
- 2. PoliciesonEligibility,SelectionandAdmissions
- 3. RentDeterminationPolicies
- 4. OperationsandManagementPolicies
- 5. GrievanceProcedures
- 6. CapitalImprovementNeeds
- 7. DemolitionandDisposition
- 8. DesignationofHousing
- 9. ConversionsofPublicHousing
- 10. Homeownership
 - 11. CommunityServicePrograms
 - 12. CrimeandSafety
 - 13. Pets(InactiveforJanuary1PHAs)
 - 14. CivilRightsCertifications(includedwithPHAPlanCertifications)
 - 15. Audit
 - 16. AssetManagem ent
 - 17. OtherInformation

Attachments

RequiredAttachments:

- X AdmissionsPolicyforDeconcentration
- **X** FY2000CapitalFundProgramAnnualStatement
- X_____Mostrecentboard -approvedoperatingbudget(RequiredAttachmentforPHAs thataretroubledoratriskofbeingdesignatedtroubledONLY)

OptionalAttachments:

- X PHAManagementOrganizationalChart
- **X** FY2000CapitalFundProgram5YearActionPlan
- _____ PublicHousingDrugEliminationProgram(PHDEP)Plan
- includedinPHAPlantext)
- **X**____Other(Listbelow,providingeachattachmentname)

SeelistincludedinPlan,p age44(AttachmentsmailedtoMemphis)

ListofSupportingDocumentsAvailableforReview			
Applicable & OnDisplay	SupportingDocument	ApplicablePlan Component	
Х	PHAPlanCertificationsofCompliancewiththePHAPlans andRelatedRegulations	5Yeara ndAnnualPlans	
Х	State/LocalGovernmentCertificationofConsistencywith theConsolidatedPlan	5YearandAnnualPlans	
Х	FairHousingDocumentation: RecordsreflectingthatthePHAhasexamineditsprograms orproposed programs,identifiedanyimpedimentstofair housingchoiceinthoseprograms,addressedoris addressingthoseimpedimentsinareasonablefashioninview oftheresourcesavailable,andworkedorisworkingwith localjurisdictionstoimplementanyoft hejurisdictions' initiativestoaffirmativelyfurtherfairhousingthatrequire thePHA'sinvolvement.	5YearandAnnualPlans	
Х	ConsolidatedPlanforthejurisdiction/sinwhichthePHAis located(whichincludestheAnalysisofImpedimentst oFair HousingChoice(AI)))andanyadditionalbackupdatato supportstatementofhousingneedsinthejurisdiction	AnnualPlan: HousingNeeds	
Х	Mostrecentboard -approvedoperatingbudgetforthepublic	AnnualP lan:	

Applicable	ListofSupportingDocumentsAvailableforReview SupportingDocument ApplicablePla				
& OnDisplay		Component			
Х	housingprogram	FinancialResources;			
X	PublicHousingAdmissionsand(Continued)Occupancy Policy(A&O),whichincludestheTenantSelectionand AssignmentPlan[TSAP]	AnnualPlan:Eligibility, Selection,andAdmissions Policies			
	Section8Administ rativePlan	AnnualPlan:Eligibility, Selection,andAdmissions Policies			
x	PublicHousingDeconcentrationandIncomeMixing Documentation: PHAboardcertificationsofcompliancewithdeconcentration requirements(section16(a)oftheUSHous ingActof1937, asimplementedinthe2/18/ 99QualityHousingandWork ResponsibilityActInitialGuidance;Notice andanyfurther HUDguidance)and 18. Documentationoftherequireddeconcentrationand	AnnualPlan:Eligibility, Selection,andAdmissions Policies			
X	incomemixinganalysis Publichousingrentdeterminationpolicies,includingthe methodologyforsettingpublichousingflatrents checkhereifincludedinthepublichousing A&OPolicy	AnnualPlan:Rent Determination			
X	Scheduleofflatrentsofferedateachpublichousing AnnualPlan:Ren development Determination checkhereifincludedinthepublichousing A&OPolicy				
	Section8rentdetermination(paymentstandard)policies checkhereifincl udedinSection8Administrative Plan	AnnualPlan:Rent Determination			
X	Publichousingmanagementandmaintenancepolicy documents,includingpoliciesforthepreventionor eradicationofpestinfestation(includingcockroach infestation)	AnnualPlan:Operations andMaintenance			
X	Publichousinggrievanceprocedures checkhereifincludedinthepublichousing A&OPolicy	AnnualPlan:Grievance Procedures			
	Section8informalreviewandhearingprocedures checkhereifi ncludedinSection8Administrative Plan	AnnualPlan:Grievance Procedures			
Х	TheHUD -approvedCapitalFund/ComprehensiveGrant ProgramAnnualStatement(HUD52837)fortheactivegrant year	AnnualPlan:CapitalNeeds			
Х	MostrecentCIAPBud get/ProgressReport(HUD52825)for anyactiveCIAPgrant	AnnualPlan:CapitalNeeds			

ListofSupportingDocumentsAvailableforReview			
Applicable & OnDisplay	SupportingDocument	ApplicablePlan Component	
Х	Fund/ComprehensiveGrantProgram,ifnotincludedasan attachment(providedatPHA option)		
	ApprovedHOPEVIapplicationsor, if more recent, approvedor submittedHOPEVIRevitalizationPlansorany other approved proposal for development of public housing	AnnualPlan:CapitalNeeds	
	Approvedorsubmitte dapplicationsfordemolitionand/or dispositionofpublichousing	AnnualPlan:Demolition andDisposition	
	Approvedorsubmittedapplicationsfordesignationofpublic housing(DesignatedHousingPlans)	AnnualPlan:Designationof PublicHousing	
	Approvedorsubmittedassessmentsofreasonable revitalizationofpublichousingandapprovedorsubmitted conversionplanspreparedpursuanttosection2020fthe 1996HUDAppropriationsAct	AnnualPlan:Conversionof PublicHousing	
	Approvedorsubmitted publichousinghomeownership programs/plans	AnnualPlan: Homeownership	
	PoliciesgoverninganySection8Homeownershipprogram checkhereifincludedintheSection8 AdministrativePlan	AnnualPlan: Homeownership	
	Anycooperativeagreementbetw eenthePHAandtheTANF agency	AnnualPlan:Community Service&Self -Sufficiency	
	FSSActionPlan/sforpublichousingand/orSection8	AnnualPlan:Community Service&Self -Sufficiency	
	Mostrecentself -sufficiency(ED/SS,TOPorROSSorother residentservicesgrant)grantprogramreports	AnnualPlan:Community Service&Self -Sufficiency	
	ThemostrecentPublicHousingDrugEliminationProgram (PHEDEP)semi -annualperformancereportforanyopen grantandmostrecentlysubm ittedPHDEPapplication (PHDEPPlan)	AnnualPlan:Safetyand CrimePrevention	
X	ThemostrecentfiscalyearauditofthePHAconducted undersection5(h)(2)oftheU.S.HousingActof1937(42U. S.C.1437c(h)),theresultsofthatauditandthe PHA's responsetoanyfindings	AnnualPlan:AnnualAudit	
	TroubledPHAs:MOA/RecoveryPlan Othersupportingdocuments(optional) (listindividually;useasmanylinesasnecessary)	TroubledPHAs (specifyasneeded)	

1.StatementofHou singNeeds

[24CFRPart903.79(a)]

HousingNeedsofFamiliesintheJurisdiction byFamilyType							
FamilyType	Overall	Afford- ability	Supply	Quality	Access- ibility	2. Size	Loca-tion
Income<=30% ofAMI	N/A						
Income>30%but <=50%ofAMI	N/A						
Income>50%but <80%ofAMI	N/A						
Elderly	N/A						
Families with Disabilities	N/A						
Race/Ethnicity	N/A						
Race/Ethnicity	N/A						
Race/Ethnicity	N/A						
Race/Ethnicity	N/A						

A.HousingNeedsofFamiliesintheJurisdiction/sServedbythePHA

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

X ConsolidatedPlanoftheJurisdiction/s

Indicateyear: 2000

U.S.Censusdata:theComprehensiveHousingAffordabilityStrategy("CHAS")

dataset

_____ AmericanHousingSurveydata

Indicateyear:_____

- _____ Otherhousingmarketstudy
 - Indicateyear:
- _____ Othersources:(listandindicateyearofinformation)

A. HousingNeedsofFamiliesonthePublicHousingandSection8 Tenant-BasedAssistanceWaitingLists

E	IousingNeedsofFami	lies ontheWaitingLi	ist
_x_PublicHousing CombinedSectio PublicHousingS	-basedassistance n8andPublicHousing	isdictionalwaitinglist(o /subiurisdiction:	ptional)
	#offamilies	%oftotalfamilies	AnnualTurnover
Waitinglisttotal Extremelylow income<=30%AMI	8 3	37.5	3
Verylowincome (>30%but<=50% AMI)	2	25%	
Lowincome (>50%but<80% AMI)	2	25	
Familieswith children	6	75	
Elderlyfamilies	1	12.5	
Familieswith Disabilities Race/ethnicity			
Race/ethnicity			
Race/ethnicity Race/ethnicity			
Characteristicsby BedroomSize (PublicHousing Only)			
1BR			
2BR			
3BR			
4BR			
5BR			
5+BR	(calactora)?		
Isthewaitinglistclosed Ifyes:		O XYes	

HousingNeedsofFamilies ontheWaitingList
B. Howlonghasitbeenclosed(#ofmonths)?(ClosedJune1 st2002)11/2 months.
DoesthePHAexpecttoreopenthelistinthePHAPlanyear?NoXYes
DoesthePHApermitspecificcategoriesoffamiliesontothewaitinglist,evenif generallyclosed? XNoYes

C.StrategyforAddressingNeeds

(1)Strategies_ Need:Shortageofaffordablehousingforalleligiblepopulations

Strategy1.Max imizethenumberofaffordableunitsavailabletothePHAwithin itscurrentresourcesby:

- **X** Employeffectivemaintenanceandmanagementpoliciestominimizethenumber of publichousingunitsoff -line
- **X**____ Reduceturnovertimeforvacatedpubl ichousingunits
- X Reducetimetorenovatepublichousingunits
- _____ Seekreplacementofpublichousingunitslosttotheinventorythroughmixed financedevelopment
- _____ Seekreplacementofpublichousingunitslosttotheinventorythroughsection replacementhousingresources

8

- <u>Maintainorincreasesection8lease</u> -upratesbyestablishingpaymentstandards thatwillenablefamiliestorentthroughoutthejurisdiction
- X Undertakemeasurestoensureaccesstoaffordablehousingamongfami lies assistedbythePHA,regardlessofunitsizerequired
- <u>Maintainorincreasesection8lease</u> -upratesbymarketingtheprogramtoowners, particularlythoseoutsideofareasofminorityandpovertyconcentration
- Maintainorincreasesection8 lease-upratesbyeffectivelyscreeningSection8 applicantstoincreaseowneracceptanceofprogram
- _____ ParticipateintheConsolidatedPlandevelopmentprocesstoensurecoordination
- withbroadercommunitystrategies
- ____ Other(listbelow)

Strategy2: Increase the number of affordable housing units by:

- _____ Applyforadditionalsection8unitsshouldtheybecomeavailable
- ____ Leverageaffordablehousingresourcesinthecommunitythroughthecreation ofmixed -finance housing
- PursuehousingresourcesotherthanpublichousingorSection8tenant -based

assistance. Other:(listbelow)

Need:SpecificFamilyTypes:Familiesatorbelow30%ofmedian

Strategy1:Targetavailableassistancetofamiliesator below30%ofAMI

- **X** ExceedHUDfederaltargetingrequirementsforfamiliesatorbelow30%ofAMI inpublichousing
- ExceedHUDfederaltargetingrequirementsforfamiliesatorbelow30% of AMI inteant -based section8 assistance
- _____ Employadmissionspreferencesaimedatfamilieswitheconomichardships
- X Adoptrentpoliciestosupportandencouragework
- ____ Other:(listbelow)

Need:SpecificFamilyTypes:Familiesatorbelow50%ofmedi an

Strategy1:Targetavailableassistancetofamiliesatorbelow50% of AMI

- **X** Employadmissionspreferencesaimedatfamilieswhoareworking
- **X** Adoptrentpoliciestosupportandencouragework
- ____ Other:(listbelow)
- **B.** Need:SpecificFamilyTypes:TheElderly

Strategy1:Targetavailableassistancetotheelderly:

- ____ Seekdesignationofpublichousingfortheelderly
- _____ Applyforspecial -purposevouchersta rgetedtotheelderly,shouldtheybecome available
- ____ Other:(listbelow)

Need:SpecificFamilyTypes:FamilieswithDisabilities

Strategy1:Targetavailableassist ancetoFamilieswithDisabilities:

- _____ Seekdesignationofpublichousingforfamilieswithdisabilities
- X Carryoutthemodificationsneededinpublichousingbasedonthesection504 NeedsAssessmentforPublicHousing
- _____ Applyforspecial -purposevoucherstargetedtofamilieswithdisabilities,should theybecomeavailable
- **X** Affirmativelymarkettolocalnon -profitagenciesthatassistfamilieswith disabilities
- ____ Other:(listbelow)

Need:SpecificFamilyTypes:Racesore thnicitieswithdisproportionatehousing needs

Strategy1:IncreaseawarenessofPHAresourcesamongfamiliesofracesand ethnicitieswithdisproportio nateneeds:

- _____ Affirmativelymarkettoraces/ethnicitiesshowntohavedisproportionatehousing needs
- ____ Other:(listbelow)

Strategy 2: Conduct activities to affirm a tively further fairhousing

- <u>Counselsection8tena</u> ntsastolocationofunitsoutsideofareasofpovertyor minorityconcentrationandassistthemtolocatethoseunits
- $\underline{\qquad} Market the section 8 program to owners outside of a reasof poverty/minority$
- concentrations
- ____ Other:(listbelow)

OtherHousi ngNeeds&Strategies:(listneedsandstrategiesbelow)

(2)ReasonsforSelectingStrategies

Of the factors listed below, select all that influenced the PHA's selection of the strategies it will pursue:

- _____ Fundingconstraints
- _____ Staffingconstraints
- _____ Limitedavailabilityofsitesforassistedhousing
- ____ Extenttowhichparticularhousingneedsaremetbyotherorganizationsinthe community
- ____ EvidenceofhousingneedsasdemonstratedintheConsolidatedPlanandother informationavailablet othePHA
- _____ InfluenceofthehousingmarketonPHAprograms
- ____ Communityprioritiesregardinghousingassistance
- _____ Results of consultation with local or stategovernment
- _____ Results of consultation with residents and the Resident Advisory Board
- _____ Resultsofconsultationwithadvocacygroups
- ____ Other:(listbelow)

StatementofFinancialResources [24CFRPart903.79(b)]

FinancialResources: PlannedSourcesandUses				
Sources	Planned\$	PlannedUses		
1. FederalGr ants(FY2000grants)				
a) PublicHousingOperatingFund	\$13,917			
b) PublicHousingCapitalFund	\$41,680			
c) HOPEVIRevitalization				
d) HOPEVIDemolition				
e) AnnualContributionsforSection 8Tenant -BasedAssistance				
f) PublicHousingD rugEliminationProgram(includinganyTechnicalAssistancefunds)				
g) ResidentOpportunityandSelf - SufficiencyGrants				
h) CommunityDevelopmentBlock				
Grant				
i) HOME				
OtherFederalGrants(listbelow)				
2.PriorYearFederalGrants (unobligatedfundsonly)(list below)				
3.PublicHousingDwellingRental Income	\$40,902			
4.Otherincome (listbelow)				
4.Non -federalsources (listbelow)				
Totalresources	\$96,499			

3.PHAPoliciesGoverningEl igibility,Selection,andAdmissions [24CFRPart903.79(c)]

A.PublicHousing

(1)Eligibility

a.WhendoesthePHAverifyeligibilityforadmissiontopublichousing?(selectallthat apply)

- X Whenfamiliesare within 120days of being off eredaunit:(statenumber)
- _____ Whenfamiliesarewithinacertaintimeofbeingofferedaunit:(statetime)
- **X**____ Other:(describe)

When the GHA is preparing to house the applicant.

- b.Whichnon -income(screening)factorsdoesth ePHAusetoestablisheligibilityfor admissiontopublichousing(selectallthatapply)?
- X CriminalorDrug -relatedactivity
- **X** Rentalhistory
- **X** Housekeeping
- ____ Other(describe)
- c. X_yes___No:DoesthePHArequestcriminalrecor dsfromlocallawenforcement agenciesforscreeningpurposes?
- d. Yes X_No:DoesthePHArequestcriminalrecordsfromStatelaw enforcementagenciesforscreeningpurposes?
- e. Yes X No:DoesthePHAaccessFBIcriminalrecordsfrom theFBIfor screeningpurposes?(eitherdirectlyorthroughanNCIC authorizedsource)

(2)WaitingListOrganization

a. Which methods does the PHA plantous eto organize its public housing waiting list (select all that apply)

- **X** Community-widelist
- _____ Sub-jurisdictionallists
- _____ Site-basedwaitinglists
- ____ Other(describe)

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

- **X**____ PHAmainadministrativeoffice
- _____ PHAdevelopmentsitemanagementoffice
- ____ Other(lis tbelow)

c.IfthePHAplanstooperateoneormoresite -basedwaitinglistsinthecomingyear, answereachofthefollowingquestions;ifnot,skiptosubsection 3)Assignment

1.Howmanysite -basedwaitinglistswillthePHAoperateinthecomingye ar?

2. Yes No:AreanyorallofthePHA'ssite -basedwaitinglistsnewforthe upcomingyear(thatis,theyarenotpartofapreviously -HUDapprovedsitebasedwaitinglistplan)? Ifyes,howmanylists?

3. Yes No:May familiesbeonmorethanonelistsimultaneously Ifyes, 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)?
 - **X__**PHAmainadministrativ eoffice

____AllPHAdevelopmentmanagementoffices

____Managementofficesatdevelopmentswithsite -basedwaitinglists

_____Atthedevelopmenttowhichtheywouldliketoapply

____Other(listbelow)

(3)Assignment

a.Howmanyvacantunitc hoicesareapplicantsordinarilygivenbeforetheyfalltothe bottomoforareremovedfromthewaitinglist?(selectone)

One One

X Two

____ ThreeorMore

b.X___yes___No:Isthispolicyconsistentacrossallwaitinglisttypes?

c. If answertobisno, list variations for any other than the primary public housing waiting list/sforthe PHA:

(4)AdmissionsPreferences

a.Incometargeting:

Yes X___No:DoesthePHAplantoexceedthefederaltargetingrequirementsby targetingmorethan40% of all new admissionstopublic housing to families at or below 30% of median area income?

b.Transferpolicies:

Inwhatcircumstanceswilltransferstakeprecedenceovernewadmissions?(listbelow)

- **X**_Emergencies
- X Overhoused
- X Underhoused
- **X**_____Medicaljustification
- X AdministrativereasonsdeterminedbythePHA(e.g.,topermitmodernization work)
- _____ Residentchoice:(statecircumstancesbelow)
- ____ Other:(listbelow)
- a. Preferences

1.___Yes X___No:HasthePHAestablishedpreferencesforadmissiontopublic housing(otherthandateandtimeofapplication)?(If"no"is selected,skiptosubsection (5)Occupancy)

1. WhichofthefollowingadmissionpreferencesdoesthePHAplantoemployinthe comingyear?(selectallthatapplyfromeitherformerFederalpreferencesorother preferences)

FormerFederalpreferences:

- _____ InvoluntaryDisplacement(Disaster,GovernmentAction,ActionofHousing
- ____ Owner,Inaccessibility,PropertyDisposition)
- _____ Victimsofdomesticviolence
- _____ Substandardhousing
- _____ Homelessness
- _____ Highrentburden(rentis>50percentofincome)

Otherpreferences:(selectbelow)

- Workingfamiliesandthoseunabletoworkbecauseofageordisability
- _____ Veterans andveterans' families
- _____ Residentswholiveand/orworkinthejurisdiction
- _____ Those enrolled currently ineducational, training, or upward mobility programs
- _____ Householdsthatcontributetomeetingincomegoals(broadrangeofincomes)
- _____ Householdsthatcontributetomeetingincomerequirements(targeting)
- _____ Thosepreviouslyenrolledineducational,training,orupwardmobility programs
- _____ Victimsofreprisalsorhatecrimes
- ____ Otherpreference(s)(listbelow)

3.If the PHA will employ yadmission spreferences, please prioritize by placing a "1" in the spacethat represent syour first priority, a "2" in the box representing your second priority, and soon. If you give equal weight to one or more of the sechoices (either

throughanabso lutehierarchyorthroughapointsystem), placethesamenumbernextto each. That meansy ou can use "1" more than once, "2" more than once, etc.

DateandTime

FormerFederalpreferences:

- _____ InvoluntaryDisplacement(Disaster,GovernmentAction, ActionofHousing
- ____ Owner,Inaccessibility,PropertyDisposition)
- _____ Victimsofdomesticviolence
- _____ Substandardhousing
- ____ Homelessness
- ____ Highrentburden

Otherpreferences(selectallthatapply)

- _____ Workingfamiliesandthoseunablet oworkbecauseofageordisability
- _____ Veteransandveterans' families
- _____ Residentswholiveand/orworkinthejurisdiction
- _____ Those enrolled currently ineducational, training, or upward mobility programs
- _____ Householdsthatcontributetomeetin gincomegoals(broadrangeofincomes)
- _____ Householdsthatcontributetomeetingincomerequirements(targeting)
- ____ Thosepreviouslyenrolledineducational,training,orupwardmobility programs
- _____ Victimsofreprisalsorhatecrimes
- ____ Otherpreference(s)(listbelow)
- 4. Relationshipofpreferencestoincometargetingrequirements:
 - ____ ThePHAappliespreferenceswithinincometiers

Notapplicable: The pool of applicants on the Waiting Listensures that the PHA will meet income-targeting requirements.

(5)Occupancy

a. What reference materials can applicants and resident sus eto obtain information about the rules of occupancy of public housing (select all that apply)

- **X** ThePHA -residentlease
- X ThePHA'sAdmissio nsand(Continued)Occupancypolicy
- **X**____ PHAbriefingseminarsorwrittenmaterials
- ____ Othersource(list)

b.HowoftenmustresidentsnotifythePHAofchangesinfamilycomposition? (select allthatapply)

- **X** Atanannualreexaminationandl easerenewal
- **X** Anytimefamilycompositionchanges
- **X** Atfamilyrequestforrevision
- ____ Other(list)

(6)DeconcentrationandIncomeMixing

- a. Yes X No:DidthePHA'sanalysisofitsfamily(generaloccupancy) developmentstodetermi neconcentrationsofpovertyindicate theneedformeasurestopromotede -concentrationofpovertyor incomemixing?
- b. Yes X No:DidthePHAadoptanychangestoits admissionspolicies basedon theresultsoftherequiredanalysisoftheneed topromotede concentrationofpovertyortoassureincomemixing?

c.If the answer to bwasyes, what changes we read opted? (select all that apply)

- _____ Adoptionofsite basedwaitinglists
- _____ Ifselected,listtargeteddevelopmentsbelow:

Employingwaitinglist"skipping"toachievede -concentrationofpovertyor incomemixinggoalsattargeteddevelopmentsIfselected,listtargeted developmentsbelow:

- _____ Employingnewadmissionpreferencesattargeteddevelopments Ifselected,listtargeted developmentsbelow:
- ____ Other(listpoliciesanddevelopmentstargetedbelow)
- d. Yes X No:DidthePHAadoptanychangesto otherpoliciesbasedonthe resultsoftherequiredanalysisoftheneedforde -concentrationof povertyandincomemi xing?
- e.If the answer to dwereyes, how would you describe these changes? (select all that apply)
- _____ Additionalaffirmativemarketing
- _____ Actionstoimprove themarket ability of certain developments
- _____ Adoptionoradjustmentofceilingrentsfor certaindevelopments
- _____ Adoptionofrentincentivestoencouragede -concentrationofpovertyandincome -

mixing Other(listbelow)

f.Basedontheresultsoftherequiredanalysis,inwhichdevelopmentswillthePHA makespecialeffortstoattra ctorretainhigher -incomefamilies?(selectallthat apply)

- **X** Notapplicable:resultsofananalysisdidnotindicateaneedforsuchefforts
- List(anyapplicable)developmentsbelow:
- g.Basedontheresultsoftherequiredanalysis,inwhic makespecialeffortstoassureaccessforlower apply) hdevelopmentswillthePHA -incomefamilies?(selectallthat

X_____ Notapplicable:resultsofanalysisdidnotindicateaneedforsuchefforts ______ List(anyapplicable)developmentsbelow:

B.Se ction8

(1)Eligibility

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

- Criminalordrug -relatedactivityonlytotheextentrequiredbylaworregulation
- <u>Criminalanddrug</u> -relatedactivity,moreextensivelyt hanrequiredbylawor regulation
- _____ Moregeneralscreeningthancriminalanddrug -relatedactivity(listfactorsbelow)
- ____ Other(listbelow)

b. Yes No: Does the PHA request criminal records from local law enforcement agencies for screen in gpurposes?

c.___Yes___No:DoesthePHArequestcriminalrecordsfromStatelaw enforcementagenciesforscreeningpurposes?

d. Yes No:DoesthePHAaccessFBIcriminalrecordsfromtheFBIfor screeningpurposes?(eitherdirectlyor throughanNCIC authorizedsource)

e.Indicatewhatkindsofinformationyousharewithprospectivelandlords?(selectall thatapply)

____ Criminalordrug -relatedactivity

____ Other(describebelow)

(2)WaitingListOrganization

- a.Withwhichofth efollowingprogramwaitinglistsisthesection8tenant -based assistancewaitinglistmerged?(selectallthatapply)
 - None
- _____ Federalpublichousing
- _____ Federalmoderaterehabilitation
- _____ Federalproject -basedcertificateprogram
- _____ Otherfed eralorlocalprogram(listbelow)
- b.Wheremayinterestedpersonsapplyforadmissiontosection8tenant -based assistance?(selectallthatapply)
- _____ PHAmainadministrativeoffice
- ____ Other(listbelow)

(3)SearchTime

a. Yes No:Doest hePHAgiveextensionsonstandard60 -dayperiodtosearch foraunit?

(4)AdmissionsPreferences

a.Incometargeting

Yes____No:DoesthePHAplantoexceedthefederaltargetingrequirementsby targetingmorethan75% of all new admissions to the section8 program to families at or below 30% of median area income?

b.Preferences

1. Yes No:HasthePHAestablishedpreferencesforadmissiontosection8 tenant-basedassistance?(otherthandateandtimeofapplication) (ifno,skipto subcomponent (5)Specialpurposesection8 assistanceprograms)

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

FormerFederalpreferences

- _____ InvoluntaryDisplacement(Disaster,GovernmentAction,ActionofHousing Owner,Inaccessibility,PropertyDisposition)
- _____ Victimsofdomesticviolence
- _____ Substandardhousing
- ____ Homelessness
- _____ Highrentburden(rentis> 50percentofincome)

Otherpreferences(selectallthatapply)

- _____ Workingfamiliesandthoseunabletoworkbecauseofageordisability
- _____ Veteransandveterans' families
- _____ Residentswholiveand/orworkinyourjurisdiction
- _____ Those enrolle dcurrently ineducational, training, or upward mobility programs
- _____ Householdsthatcontributetomeetingincomegoals(broadrangeofincomes)
- _____ Householdsthatcontributetomeetingincomerequirements(targeting)
- _____ Those previously enrolledi neducational, training, or upward mobility programs
- _____ Victimsofreprisalsorhatecrimes
- ____ Otherpreference(s)(listbelow)

3. If the PHA will employ admission spreferences, please prioritize by placing a "1" in

thespacethatrepresentsyourfirstpriority,a"2"intheboxrepresentingyoursecondpriority,andsoon.Ifyougiveequalweighttooneormoreofthesechoices(eitherthroughanabsolutehierarchyorthroughapointsystem),placethesamenumbernexttoeach.Thatmeansyoucanuse"1"morethanonce,"2"morethanonce,etc.

____ DateandTime

FormerFederalpreferences

- InvoluntaryDisplacement(Disaster,GovernmentAction,ActionofHousing
- Owner, Inaccessibility, Property Disposition)
- _____ Victimsofdomestic violence
- _____ Substandardhousing
- _____ Homelessness
- _____ Highrentburden

Otherpreferences(selectallthatapply)

- Workingfamiliesandthoseunabletoworkbecauseofageordisability
- _____ Veteransandveterans' families
- _____ Residentswhol iveand/orworkinyourjurisdiction
- _____ Those enrolled currently ineducational, training, or upward mobility programs
- _____ Householdsthatcontributetomeetingincomegoals(broadrangeofincomes)
- _____ Householdsthatcontributetomeetingincomereq uirements(targeting)
- _____ Thosepreviouslyenrolledineducational,training,orupwardmobility programs
- _____ Victimsofreprisalsorhatecrimes
- ____ Otherpreference(s)(listbelow)

4.Amongapplicantsonthewaitinglistwithequalpreferences tatus,howare applicantsselected?(selectone)

- Dateandtimeofapplication
- _____ Drawing(lottery)orotherrandomchoicetechnique

- 5. If the PHA planstoem ploy preferences for "residents who live and/or work in the jurisdiction" (selectone)
- _____ ThispreferencehaspreviouslybeenreviewedandapprovedbyHUD
- _____ ThePHArequestsapprovalforthispreferencethroughthisPHAPlan

6. Relationship of preferences to income targeting requirements: (selectone)

- _____ ThePHAappliespreferencesw ithinincometiers
- _____ Notapplicable:thepoolofapplicantfamiliesensuresthatthePHAwillmeet incometargetingrequirements

(5)SpecialPurposeSection8AssistancePrograms

a.Inwhichdocumentsorotherreferencematerialsarethepolicies governingeligibility, selection, and admission stoany special -purpose section 8 program administered by the PHA contained? (select all that apply)

- TheSection8AdministrativePlan
- _____ Briefingsessionsandwrittenmaterials
- ____ Other(listbelow)
- a. HowdoesthePHAannouncetheavailabilityofanyspecial -purposesection8 programstothepublic?
- _____ Throughpublishednotices
- ____ Other(listbelow)

4.PHARentDeterminationPolicies

[24CFRPart903.79(d)]

A.PublicHousing

(1)Inco_meBasedRentPolicies

a.Useofdiscretionarypolicies:(selectone)

X ThePHAwillnotemployanydiscretionaryrent -settingpoliciesforincomebased rentinpublichousing.Income -basedrentsaresetatthehigherof30% of adjustedmonthlyin come,10% of unadjustedmonthlyincome,thewelfarerent,or minimumrent(lessHUDmandatorydeductionsandexclusions).(Ifselected, skiptosub -component(2))

---or---

ThePHAemploysdiscretionarypoliciesfordeterminingincomebasedrent(If

selected, continue toquestionb.)

b.MinimumRent

1. Whatamountbestreflects the PHA's minimum rent? (selectone)

- \$0 \$1-\$25 X \$26-\$50
- 2.___Yes X___No:HasthePHAadoptedanydiscretionaryminimumrenthardship exemptionpolic ies?
- 3.Ifyestoquestion2,listthesepoliciesbelow :
- 1.___Yes X__No:DoesthePHAplantochargerentsatafixedamountor percentagelessthan30%ofadjustedincome?
- 2.Ifyestoabove,listtheamountsorpercentageschargedandthe circumstancesunder which these will be used below:
- d.Whichofthediscretionary(optional)deductionsand/orexclusionspoliciesdoesthe PHAplantoemploy(selectallthatapply)
 - _____ Fortheearnedincomeofapreviouslyunemployedhouseholdmember
- _____ Forincreasesinearnedincome
- _____ Fixedamount(otherthangeneralrent -settingpolicy)
 - Ifyes, state amount/sand circumstances below:
- ____ Fixedpercentage(otherthangeneralrent -settingpolicy)
 - Ifyes,statepercentage/sandcircumstances below:
- _____ Forhouseholdheads
- _____ Forotherfamilymembers
- _____ Fortransportationexpenses
- _____ Forthenon -reimbursedmedicalexpensesofnon -disabledornon -elderly families
- ____ Other(describebelow)

e.Ceilingrents

- 1. Doyouhaveceilingre nts?(rentssetatalevellowerthan30% of adjusted income) (selectone)
- Yesforalldevelopments
- Yesbutonlyforsomedevelopments
- X No
- 2. Forwhichkindsofdevelopmentsareceilingrentsinplace?(selectallthatapply)
- ____ Fora lldevelopments
- ____ Forallgeneraloccupancydevelopments(notelderlyordisabledorelderlyonly)
- _____ Forspecifiedgeneraloccupancydevelopments
- ____ Forcertainpartsofdevelopments;e.g.,thehigh -riseportion
- ____ Forcertainsizeunits;e.g.,l argerbedroomsizes
- ____ Other(listbelow)
- 3. Selectthespaceorspacesthatbestdescribehowyouarriveatceilingrents(selectall thatapply)
- Marketcomparabilitystudy
- Fairmarketrents(FMR)
- ____ 95thpercentilerents
- ____ 75percent of operating costs
- 100percentofoperatingcostsforgeneraloccupancy(family)developments
- _ Operatingcostsplusdebtservice
- The"rentalvalue" of the unit
- Other(listbelow)

f.Rentre -determinations:

- 1.Betweenincomereexamin ations, how often must ten ants report changes in income orfamilycompositiontothePHAsuchthatthechangesresultinanadjustmentto rent?(selectallthatapply)
- Never
- ____ Atfamilyoption
- _ Anytimethefamilyexperiencesanincomeincrea se
- **X** Anytimeafamilyexperiencesanincomeincreaseaboveathresholdamountor percentage:(ifselected,specifythreshold) Above <u>\$200permonth.</u>
- Other(listbelow)

g. Yes X No:DoesthePHAplantoimplementindividualsavingsa ccountsfor residents(ISAs) as an alternative to the required 12 month disallow ance of earned income and phasing in of rentincreases in the next year?

(2)FlatRents

- 1. Insettingthemarket -basedflatrents, what sources of information did the PHA use to establish comparability?(select all that apply.)
- _____ Thesection8rentreasonablenessstudyofcomparablehousing
- _____ Surveyofrentslistedinlocalnewspaper
- X Surveyofsimilarunassistedunitsintheneighborhood
- ____ Other(list/de scribebelow)

B.Section8Tenant -BasedAssistance

(1)PaymentStandards

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

- _____ Atorabove90%butbelow100%ofFMR
- _____ 100% of FMR
- _____ Above100% butat orbelow110% of FMR
- _____ Above110% of FMR (if HUD approved; describe circumstances below)
- b.IfthepaymentstandardislowerthanFMR,whyhasthePHAselectedthisstandard? (selectallthatapply)
- _____ FMRsareadequatetoensuresuccessamongass istedfamiliesinthePHA's segmentoftheFMRarea
- _____ ThePHAhaschosentoserveadditionalfamiliesbyloweringthepayment standard
- _____ Reflectmarketorsub -market
- ____ Other(listbelow)

c.IfthepaymentstandardishigherthanFMR,whyhasth ePHAchosenthislevel? (selectallthatapply)

- _____ FMRsarenotadequatetoensuresuccessamongassistedfamiliesinthePHA's segmentoftheFMRarea
- _____ Reflectmarketorsub -market
- _____ Toincreasehousingoptionsforfamilies
- ____ Other(listbelo w)

d.Howoftenarepaymentstandardsreevaluatedforadequacy?(selectone)

____ Annually

____ Other(listbelow)

- e.WhatfactorswillthePHAconsiderinitsassessmentoftheadequacyofitspayment standard?(selectallthatapply)
- _____ Successratesofassistedfamilies
- _____ Rentburdensofassistedfamilies
- ____ Other(listbelow)

(2)MinimumRent

a.WhatamountbestreflectsthePHA'sminimumrent?(selectone)

- \$0 \$1- \$25 X___\$26-\$50
- b. Yes X_No:HasthePHAadopt edanydiscretionaryminimumrenthardship exemptionpolicies?(ifyes,listbelow)

5.OperationsandManagement

[24CFRPart903.79(e)]

A.PHAManagementStructure

(selectone)

- X AnorganizationchartshowingthePHA'smanagementstructur eandorganization isattached.
- X AbriefdescriptionofthemanagementstructureandorganizationofthePHA follows:ThePHAoperatesonaparttimebasis,andisopen5daysaweek.The GHAacceptsapplicationsonWednesdayswhentheWaitingLis tisopen.Rentis duringthefirstfivedaysofthemonthandsubsequentlyduringofficehoursifrent isnotpaidduringthedesignatedtimeperiod.Themaintenanceoftheunitsand systemsarehandledonadailybasis.

B.HUDProgramst ProgramName	UnitsorFamilies ServedatYear	Expected Turnover
PublicHousing	Beginning 26	1
Section8Vouchers	N/A	
Section8Certificates	N/A	
Section8ModRehab	N/A	
SpecialPurposeSection 8Certificates/Vouchers (listindivi dually)	N/A	
PublicHousingDrug EliminationProgram (PHDEP)	N/A	
OtherFederalPrograms (listindividually)	N/A	

B.HUDProgramsUnderPHAMan agement

C. ManagementandMaintenancePolicies

- D.
- (1) PublicHousingMaintenanceandManagement:(listbelow)TheGHAhasa parttimemain tenanceperson,whoreceivesworkordersastheyarecalled intotheOffice.TheExecutiveDirectorthentrackstheworkorders.
- (2) Thelistedpolicieshavebeenadoptedandareinplace: ThePersonnelPolicy, TheAdmissionandOccupancyPolicy, TheProcurem entPolicy, A MaintenancePlan, GrievancePolicy, TravelPolicy, TheDisposition; etc.

(2)Section8Management:(listbelow)

6. PHAGrievanceProcedures

[24CFRPart903.79(f)]

A. PublicHousing

1. Yes X_No:HasthePHAestablishedany writtengrievanceproceduresin additiontofederalrequirementsfoundat24CFRPart966,Subpart B,forresidentsofpublichousing? Ifyes,listadditionstofederalrequirementsbelow:

2.WhichPHAofficeshouldresidentsorapplicantstopublich ousingcontacttoinitiate thePHAgrievanceprocess?(selectallthatapply)
 X PHAmainadministrativeoffice PHAdevelopmentmanagementoffices Other(listbelow)

B.Section8Tenant -BasedAssistance

1. Yes No:HasthePHAestab lishedinformalreviewproceduresforapplicants totheSection8tenant -basedassistanceprogramandinformal hearingproceduresforfamiliesassistedbytheSection8tenant basedassistanceprograminadditiontofederalrequirementsfound at24CFR982 ?

If yes, list additions to federal requirements below:

- 2. Which PHA offices hould applicants or assisted families contact to initiate the informal review and informal hearing processes? (select all that apply)
 - PHAmainadministrativeoffice
- ____ Other(listbelow)

7.CapitalImprovementNeeds

[24CFRPart903.79(g)]

A.CapitalFundActivities

(1)CapitalFundProgramAnnualStatement

Selectone:

X TheCapitalFundProgramAnnualStatementisprovidedasanattachmenttothe PHAPlanatAttachment(statename)

-or-

TheCapitalFundProgramAnnualStatementisprovidedbelow:(ifselected, copytheCFPAnnualStatementfromtheTableLibraryandinserthere)

(2)Optional5 -YearActionPlan

a. X_yes___N o:IsthePHAprovidinganoptional5 -YearActionPlanfortheCapital Fund?(ifno,skiptosub -component7B)

b.Ifyestoquestiona, selectone:

- ____ TheCapitalFundProgram5 -YearActionPlanisprovidedasanattachmenttothe PHAPlanatAttachmen t(statename
- -or-
- X_____TheCapitalFundProgram5 -YearActionPlanisprovidedbelow:(ifselected, copytheCFPoptional5YearActionPlanfromtheTableLibraryandinserthere)

B.HOPEVIandPublicHousingDevelopmentandReplacement Activities(Non -CapitalFund)

Yes X___No:a)HasthePHAreceivedaHOPEVIrevitalizationgrant?(ifno, skiptoquestionc;ifyes,provideresponsestoquestionbforeach grant,copyingandcompletingasmanytimesasnecessary) b)Statuso fHOPEVIrevitalizationgrant(completeonesetof questionsforeachgrant)

1.Developmentname:

- 2.Development(project)number:
- 3.Statusofgrant:(selectthestatementthatbestdescribesthecurrent status)
 - _____ RevitalizationPlanunde rdevelopment
 - _____ RevitalizationPlansubmitted,pendingapproval
 - _____ RevitalizationPlanapproved
 - _____ ActivitiespursuanttoanapprovedRevitalizationPlan underway
- ____Yes X___No:c)DoesthePHAplantoapplyforaHOPEVIRevital izationgrant inthePlanyear? Ifyes,listdevelopmentname/sbelow:

Yes X___No:d)WillthePHAbeengaginginanymixed -financedevelopment activitiesforpublichousinginthePlanyear? Ifyes,listdevelopmentsoractivitiesbel ow: Yes X___No:e)WillthePHAbeconductinganyotherpublichousing developmentorreplacementactivitiesnotdiscussedintheCapital FundProgramAnnualStatement? Ifyes,listdevelopmentsoractivitiesbelow:

8. DemolitionandDi sposition

[24CFRPart903.79(h)]

1. Yes X_No:DoesthePHAplantoconductanydemolitionordisposition activities(pursuanttosection18oftheU.S.HousingActof1937 (42U.S.C.1437p))intheplanFiscalYear?(If"No",skipto component9;if"yes",completeoneactivitydescriptionforeach development.)

2.ActivityDescription

_Yes___No:

HasthePHAprovided the activities description information in the optional Public Housing Asset Management Table? (If "yes", skiptoco mponent 9. If "No", complete the Activity Description table below.)

Demolition/DispositionActivityDescription
1a.Developmentname:
1b.Development(project)number:
2.Activitytype:Demolition
Disposition
3.Applications tatus(selectone)
Approved
Submitted, pending approval
Plannedapplication
4.Dateapplicationapproved, submitted, or planned for submission: (DD/MM/YY)
5.Numberofunitsaffected:
Coverageofaction(selectone)
Partofthedevelopment
Totaldevelopment
7.Timelineforactivity:
a.Actualorprojectedstartdateofactivity:
b.Projectedenddateofactivity:

- 9. DesignationofPublicHousingforOccupancybyElderlyFamiliesor FamilieswithDisabil_itiesorElderlyFamiliesandFamilieswith Disabilities
- 1. Yes X___No:HasthePHAdesignatedorappliedforapprovaltodesignate ordoesthePHAplantoapplytodesignateanypublichousing foroccupancyonlybytheelderlyfamiliesoronlyby families with disabilities, or by elderly families and families with disabilities or will apply for designation for occupancy by only elderlyfamiliesoronlyfamilieswithdisabilities,orbyelderly familiesandfamilieswithdisabilitiesasprovided by section7 oftheU.S.HousingActof1937(42U.S.C.1437e)inthe upcomingfiscalyear? (If"No", skiptocomponent10.If "yes",completeoneactivitydescriptionforeachdevelopment, unlessthePHAiseligibletocompleteastreamlined submission; PHAscompletingstreamlinedsubmissionsmay skiptocomponent10.)

2.ActivityDescription

____Yes____No:

HasthePHAprovidedallrequiredactivitydescriptioninformation forthiscomponentinthe **optional**PublicHousingAsset ManagementTable?If "yes",skiptocomponent10.If"No", completetheActivityDescriptiontablebelow .

Designation of Public Housing Activity Description
1a.Developmentname:
1b.Development(project)number:
2.Designationtype:
Occupancybyonlyt_heelderly_
<u> Occupancybyfamilieswithdisabilities </u>
<u>Occupancybyonlyelderlyfamiliesandfamilieswithdisabilities</u>
3.Applicationstatus(selectone)
Approved;includedinthePHA'sDesignationPlan
Submitted,pendingapprov_al
Plannedapplication_
4.Datethisdesignationapproved, submitted, orplanned for submission: (DD/MM/YY)
5.Ifapproved, will this designation constitute a (selectone)
NewDesignationPlan
Revisionofapreviously -approvedDesi gnationPlan?
1. Numberofunitsaffected:
7.Coverageofaction(selectone)
Partofthedevelopment
Totaldevelopment

10.ConversionofPublicHousingtoTenant -BasedAssistance [24CFRPart903.79(j)]

A.AssessmentsofReaonableRevitalizationPursuanttosection202oftheHUD FY1996HUDAppropriationsAct

- 1. Yes X No: HaveanyofthePHA'sdevelopmentsorportionsofdevelopments beenidentifiedbyHUDorthePHAascoveredundersection202 oftheHUDFY19 96HUDAppropriationsAct?(If 'No",skipto component11;if 'yes",completeoneactivitydescriptionforeach identifieddevelopment,unlesseligibletocompleteastreamlined submission.PHAscompletingstreamlinedsubmissionsmayskip tocomponent11.)
- 2. Activity Description
- Yes_No: HasthePHAprovidedallrequiredactivitydescriptioninformation forthiscomponentinthe **optional**PublicHousingAsset ManagementTable?If"yes",skiptocomponent11.If"No", completetheActivityDescrip tiontablebelow.

ConversionofPublicHousingActivityDescription
1a.Developmentname:
1b.Development(project)number:
2. What is the status of the required assessment?
Assessmentunderway
AssessmentresultssubmittedtoH UD
AssessmentresultsapprovedbyHUD(ifmarked,proceedtonextquestion)
Other(explainbelow)
3. Yes No:IsaConversionPlanrequired?(Ifyes,gotoblock4;ifno,goto
block5.)
4.StatusofConversionPlan(selec tthestatementthatbestdescribesthecurrent
status)
ConversionPlanindevelopment
ConversionPlansubmittedtoHUDon:(DD/MM/YYYY)
ConversionPlanapprovedbyHUDon:(DD/MM/YYYY)
ActivitiespursuanttoHUD -approvedConver sionPlanunderway
5. Description of how requirements of Section 202 are being satisfied by means other
thanconversion(selectone)
Unitsaddressedinapendingorapproveddemolitionapplication(date
submittedorapproved:

 Unitsa ddressedinapendingorapprovedHOPEVIdemolitionapplication		
(datesubmittedorapproved:)		
 UnitsaddressedinapendingorapprovedHOPEVIRevitalizationPlan(date		
submittedorapproved:)		
 Requirementsnolongerapplicable: vacancyratesarelessthan10percent		
 Requirementsnolongerapplicable:sitenowhaslessthan300units		
 Other:(describebelow)		

11.HomeownershipProgramsAdministeredbythePHA

A.PublicHousing

1Yes X_N	administeredbythePHAunderanapprovedsection5(h)
	homeownershipprogram(42U.S.C.1437c(h)),oranapproved
	HOPE Iprogram(42U.S.C.1437aaa)orhasthePHAappliedor
	plantoapplytoadministeranyhomeowner shipprogramsunder section5(h),theHOPEIprogram,orsection32oftheU.S.
	HousingActof1937(42U.S.C.1437z -4).(If"No",skipto
	component11B;if"yes",completeoneactivitydescriptionfor
	eachapplicableprogram/plan,unlesseligibletoco mpletea
	streamlinedsubmissiondueto smallPHA or highperforming
	PHA status.PHAscompletingstreamlinedsubmissionsmayskip
	tocomponent11B.)
2.ActivityDescrip	
YesNo	HasthePHAprovidedallrequiredactivitydescriptioninforma ti

No: HasthePHAprovidedallrequiredactivitydescriptioninforma tion forthiscomponentinthe **optional**PublicHousingAsset ManagementTable?(If"yes",skiptocomponent12.If"No", completetheActivityDescriptiontablebelow.)

PublicHousingHomeownershipActivityDescription (Completeoneforeach developmentaffected)		
1a.Developmentname:		
1b.Development(project)number:		
2.FederalProgramauthority:		
HOPEI		
5(h)		
TurnkeyIII		
Section32oftheUSHAof1937(effective10/1/99)		
3.Applicationstatus:(selectone)		
Approved;includedinthePHA'sHomeownershipPlan/Program		
Submitted, pending approval		
Plannedapplication		
4.DateHomeownershipPlan/Programapproved, submitted, orplanned for submission:		
(DD/MM/YYYY)		
5. Numberofunitsaffected :		
6.Coverageofaction:(selectone)		
Partofthedevelopment		
Totaldevelopment		

B.Section8TenantBasedAssistance

1. Yes No: DoesthePHAplantoadministeraSection8Homeownership programpursuanttoSection8(y) oftheU.S.H.A.of1937,as implementedby24CFRpart982?(If"No",skiptocomponent 12;if"yes",describeeachprogramusingthetablebelow(copy andcompletequestionsforeachprogramidentified),unlessthe PHAiseligibletocompleteastreaml inedsubmissionduetohigh performerstatus. **HighperformingPHAs** mayskipto component12.)

2.ProgramDescription:

a.SizeofProgram

____Yes___No: WillthePHAlimitthenumberoffamiliesparticipatinginthe section8homeownershipoption ?

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

_____ 25orfewerparticipants

_____ 26- 50participants
_____ 51to100participants

_____ morethan100participants

b.PHA establishedeligibilitycriteria

Yes____No:WillthePHA'sprogramhaveeligibilitycriteriaforparticipationinits Section8HomeownershipOptionprograminadditiontoHUD criteria? Ifyes,listcriteriabelow:

12.PHACommunityServiceandSelf -sufficiencyPrograms [24CFRPart903.79(1)]

A.PHACoordinationwiththeWelfare(TANF)Agency

1.Cooperativeagreements:

X_Yes __No:HasthePHAenteredintoacooperativeagreementwiththeTANF Agency,toshareinformationand/ortarget supportiveservices(as contemplatedbysection12(d)(7)oftheHousingActof1937)?

Ifyes, what was the date that a greement was signed? 12/15/99

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

- ____ Clientrefer rals
- ____ Informationsharingregardingmutualclients(forrentdeterminationsand otherwise)
- **X** Coordinatetheprovisionofspecificsocialandself -sufficiencyservicesand programstoeligiblefamilies
- _____ Jointlyadministerprograms
- _____ PartnertoadministeraHUDWelfare -to-Workvoucherprogram
- _____ Jointadministrationofotherdemonstrationprogram
- ____ Other(describe)

B. Servicesandprogramsofferedtoresidentsandparticipants

(1)General

a.Self -SufficiencyPolicies

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)

_____ Publichousingrentdeterminationpolicies

_____ Publichousinga dmissionspolicies

	Section8admissionspolicies
	Preferenceinadmissiontosection8forcertainpublichousingfamilies
	Preferencesforfamiliesworkingorengagingintrainingoreducation
	programsfornon -housingprogramsoperatedo rcoordinatedbythePHA
	Preference/eligibilityforpublichousinghomeownershipoption participation
	Preference/eligibilityforsection8homeownershipoptionparticipation
	Otherpolicies(listbelow)
b.Ecor	nomicandSocialself -sufficiencyprograms
Y	YesNo:DoesthePHAcoordinate,promoteorprovideanyprogramsto enhancetheeconomicandsocialself -sufficiencyofresidents? (If 'ves'' complete the following table if 'no''skiptosub -

(If "yes", complete the following table; if "no" skiptosub component 2, Family Self Sufficienc yPrograms. The position of the table may be altered to facilitate its use.)

ServicesandPrograms						
ProgramName&Description (includinglocation,ifappropriate)	Estimated Size	Allocation Method (waiting list/random selection/specific criteria/other)	Access (developmentoffice/ PHAmainoffice/ otherprovidername)	Eligibility (publichousingor section8 participantsor both)		

(2)FamilySelfSufficiency program/s

FamilySelfSufficiency(FSS)Participation					
Program RequiredNumberofParticipants ActualNumberofParticipants (startofFY2000Estimate) (Asof:DD/MM/YY)					
PublicHousing					
Section8					

a.ParticipationDescription

b.____Yes <u>X__</u>No:

N/A

If the PHA is not maintaining the minimum programs is required by HUD, does the most recent FSS Action Planaddress the steps the PHA plans to take to achieve at least the minimum programs is represented by the phase of the pha

C.WelfareBenefitReductions

- 1.ThePHAiscomplyingwiththestatutoryrequirementsofsection12(d)oftheU.S. HousingActof1937(relatingtothetreatmentofincomechangesresultingfrom welfareprogramrequirements) by:(selectallthatapply)
- X AdoptingappropriatechangestothePHA'spublichousingrentdetermination policies and trainstaff to carry out those policies
- **X** Informingresidentsofnewpolicyonadmissionandreexamination
- **X** Activelyno tifyingresidentsofnewpolicyattimesinadditiontoadmissionand reexamination.
- XEstablishingorpursuingacooperativeagreementwithallappropriateTANF
agenciesregardingtheexchangeofinformationandcoordinationofservices
EstablishingaprotocolforexchangeofinformationwithallappropriateTANF
- agencies
- ____ Other:(listbelow)

13.PHASafetyandCrimePreventionMeasures

[24CFRPart903.79(m)]

A.Needformeasurestoensurethesafetyofpublichousingresidents

- 1.Describetheneedformeasurestoensurethesafetyofpublichousingresidents(select allthatapply)
 - Highincidenceofviolentand/ordrug -relatedcrimeinsomeorallofthePHA's developments

TableLibrary

- <u>Highincidenceofviolentand/ordrug</u> -relatedcri meintheareassurroundingor adjacenttothePHA'sdevelopments
- _____ Residentsfearfulfortheirsafetyand/orthesafetyoftheirchildren
- _____ Observedlower -levelcrime, vandalismand/orgraffiti
- Peopleonwaitinglistunwillingtomoveintoone ormoredevelopmentsdueto
 - perceivedand/oractuallevelsofviolentand/ordrug -relatedcrime
- **X**____Other(describebelow)

ThisstrategyisnotapplicabletotheGrangerHousingAuthority.The GHAhasnotexperienced highincidenceofcrimeinitshousing developments.

- 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).
- _____ Safetyandsecuritysurveyofresidents
- X Analysisofcrimestatisticsovertimeforcrimescommitted"inandaround" publichousingauthority
- _____ Analysisofcosttrendsovertimeforrepairofvandalismandremovalof graffiti
- _____ Residentreports
- ____ PHAemployeereports
- ____ Policereports
- ____ Demonstrable,quantifiablesuccesswithpreviousorongoinganticrime/anti drugprograms
- ___ Other(describebelow)

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

TheGHAhasonlyonedevelopment, which has not been affected by incidences of crime.

B. Crime and Drug Prevention activities the PHA has under taken or plans to under take in the next PHA fiscal year

1. List the crime prevention activities the PHA has under taken or planstound er take: (select all that apply)

- Contracting without side and/or resident or ganizations for the provision of crime and/ordrug prevention activities
- ____ CrimePreventionThroughEnvironmentalDesign
- _____ Activitiestargetedtoat -riskyouth,adults,orseniors
- _____ VolunteerResidentPatrol/Block WatchersProgram
- **X**____Other(describebelow)

TableLibrary

Will seek crime prevention activities through our local Police Department and County Sheriff Department.

2. Whichdevelopmentsaremostaffected?(listbelow) TheGrangerHousingAuthoritymanagesonehousingdevelopment.Ifthis developmentisaffectedbyhighincidenceofcrimeandviolence,theGHAwill includeallofitshousingsunitsinanycrimepreventionplans.

C.Coordinat ionbetweenPHAandthepolice

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

- ____ Policeinvolvementindevelopment,implementation ____, and/orongoingevaluation ofdrug -eliminationplan
- _____ Policeprovidecrimedatatohousingauthoritystaffforanalysisandaction
- **X** Policehaveestablishedaphysicalpresenceonhousingauthorityproperty(e.g., communitypolicingoffice,office rinresidence)
- **X**____ Policeregularlytestifyinandotherwisesupportevictioncases
- _____ PoliceregularlymeetwiththePHAmanagementandresidents
- ____ AgreementbetweenPHAandlocallawenforcementagencyforprovisionof above-baselinelawenf orcementservices Otheractivities(listbelow)
- 2. Whichdevelopmentsaremostaffected?(listbelow) Notapplicableatthistime.

D.AdditionalinformationasrequiredbyPHDEP/PHDEPPlan

_Yes X__No:IsthePHAeligibletoparticip ateinthePHDEPinthefiscalyear coveredbythisPHAPlan?

Yes____No:HasthePHAincludedthePHDEPPlanforFY2001inthisPHA Plan?

____Yes____No:ThisPHDEPPlanisanAttachment.

[24CFRPart	t903.79
(n)]	

14.RESERVEDFORPETPOLICY

The PetPolicy is an attachment, which has been mailed to Memphis with the Hard Copy of the PHAP lan.

15.CivilRightsCertifications

[24CFRPart903.79(o)]

CivilrightscertificationsareincludedinthePHA PlanCertificationsofCompliancewith thePHAPlansandRelatedRegulations. (MailedtoMemphiswiththeHardCopyof thePHAPlan)

16.FiscalAudit

[24CFRPart903.79(p)]

1. Yes X No:IsthePHArequiredtohaveanauditconductedunders ection
5(h)(2)oftheU.S.HousingActof1937(42US.C.1437c(h))?
(Ifno,skiptocomponent17.)
2. Yes No: WasthemostrecentfiscalauditsubmittedtoHUD?
3. Yes No: Werethereanyfindingsastheresultofthataudit?
4. Yes X No: Iftherewereanyfindings,doanyremainunresolved?
Ifyes, how many unresolved findings remain?
5. Yes No: Haveresponsestoanyunresolvedfindingsbeensubmittedto
HUD?
Ifnot, when are they due (state below)?

17.PHAAssetManagement

[24CFRPart903.79(q)]

- 1. Yes X No:IsthePHAengaginginanyactivitiesthatwillcontributetothe long-termassetmanagementofitspublichousingstock, includinghowtheAgencywillplanforlong -termope rating, capitalinvestment,rehabilitation,modernization,disposition, andotherneedsthathave **not**beenaddressedelsewhereinthis PHAPlan?
- 2. WhattypesofassetmanagementactivitieswillthePHAundertake?(selectallthat apply)
- **X** Notappl icable
- ____ Privatemanagement
- ____ Development-basedaccounting
- ____ Comprehensivestockassessment
- ____ Other:(listbelow)
- 3. Yes No: HasthePHAincludeddescriptionsofassetmanagement activitiesinthe **optional**PublicHousingAssetManag ement Table?

18.OtherInformation

[24CFRPart903.79(r)]

A.ResidentAdvisoryBoardRecommendations

1.____Yes X___No:DidthePHAreceiveanycommentsonthePHAPlanfromthe ResidentAdvisoryBoard/s?

- 2.Ifyes,thecommentsare:(if commentswerereceived,thePHA MUSTselectone)
- _____ AttachedatAttachment(Filename)
- _____ Providedbelow:

3.InwhatmannerdidthePHAaddressthosecomments?(selectallthatapply)

- Considered comments, but determined that no changest othe PHAP lanwere necessary.
- _____ ThePHAchangedportionsofthePHAPlaninresponsetocomments
- _____ Listchangesbelow:
- ____ Other:(listbelow)

B. Description of Election process for Resident son the PHAB oard

1. Yes X_No:DoestheP HAmeettheexemptioncriteriaprovidedsection2(b)(2) oftheU.S.HousingActof1937?(Ifno,continuetoquestion2; ifyes,skiptosub -componentC.)

2. Yes X No:WastheresidentwhoservesonthePHABoardelectedbythe residents?(Ifye s,continuetoquestion3;ifno,skiptosub componentC.)

3.DescriptionofResidentElectionProcess

a.Nominationofcandidatesforplaceontheballot:(selectallthatapply)

- ____ Candidateswerenominatedbyresidentandassistedfamilyorganizat ions
- <u>CandidatescouldbenominatedbyanyadultrecipientofPHAassistance</u>
- _____ Self-nomination:CandidatesregisteredwiththePHAandrequestedaplaceon ballot
- ____ Other:(describe)

b.Eligiblecandidates:(selectone)

- _____ AnyrecipientofP HAassistance
- _____ AnyheadofhouseholdreceivingPHAassistance

- _____ AnyadultrecipientofPHAassistance
- _____ Anyadultmemberofaresidentorassistedfamilyorganization
- ____ Other(list)

c.Eligiblevoters:(selectallthatapply)

- _____ AlladultrecipientsofPHAassistance(publichousingandsection8tenant -based assistance)
- _____ RepresentativesofallPHAresidentandassistedfamilyorganizations
- X____ Other(list)

 RABMembers: (ResidentMembershipontheGoverningBody)

 MaryYannis
 Instantiago

 IreneSantiago
 MaryYannie

 NormalMays
 Instantiago

 JohnnieWarner
 (Ms.WarnerhasbeenselectedtotheBoard ofCommissioners)

 Elea
 norLopez

 JoycePalla
 Instantiago

C. Statement of Consistency with the Consolidated Plan

- 1. ConsolidatedPlanjurisdiction: StateofTexas
- 2. ThePHAhastakenthefollowingstepstoensureconsistencyofthisPHAPlanwith theConsolidatedP lanforthejurisdiction:(selectallthatapply)
- X ThePHAhasbaseditsstatementofneedsoffamiliesinthejurisdictiononthe needsexpressedintheConsolidatedPlan/s.
- ____ ThePHAhasparticipatedinanyconsultationprocessorganizedandof feredby theConsolidatedPlanagencyinthedevelopmentoftheConsolidatedPlan.
- _____ ThePHAhasconsultedwiththeConsolidatedPlanagencyduringthe developmentofthisPHAPlan.
- _____ ActivitiestobeundertakenbythePHAinthecomingyeararecons istentwiththe initiativescontainedintheConsolidatedPlan.(listbelow)

____ Other:(listbelow)

4. The Consolidated Planof the jurisdiction supports the PHAP lanwith the following actions and commitments: (describe below)

SarahD. AndersonCertifyingOfficialfortheStateofTexas

D.OtherInformationRequiredbyHUD

Attachments

- 1. 2001CapitalFundProgramAnnualStatement(PartsI,II&III)
- 2. 5-YearActionPlanfortheCapitalFundProgram(2000 -2004)
- 3. 2000CapitalFundProgres s&EvaluationReport(PartsI,II&III)
- 4. StatementofProgressinMeeting5 -YearPlanMissionandGoals
- 5. VoluntaryConversionAssessment(OriginalonfileinMemphis)
- 6. GHABoardResolutionofPHAPlan(OriginalonfileinMemphis)
- 7. Drug-FreeCertification(O riginalonfileinMemphis)
- 8. ConsolidatedPlanCertification(N/A)
- 9. CertificateofPaymentstoInfluence(OriginalonfileinMemphis)
- 10. PHACompliancewithPlans&RegulationsCertification(Originalonfilein Memphis)
- 11. DisclosureofLobbyingActivitiesCerti fication(OriginalonfileinMemphis)
- 12. SubstantialDeviation -SignificantAmendmentorModification

Attachment1.(AnnualStatement)

CapitalFundProgramAnnualStatementPartsI,II,andII

AnnualStatement 2001CapitalFundPro gram(CFP)PartI:Summary

LineNo.	SummarybyDevelopmentAccount	TotalEstimated Cost
1	TotalN on-CGPFunds	
2	1406Operations	\$2,173
3	1408ManagementImprovements	\$1.500
4	1410Administration	\$4 837
5	1411 Andit	
6	1415LiquidatedDamages	
7	1430FeesandCosts	
8	1440SiteAcauisition	
9	1450SiteImprovem ent	\$1,000
10	1460DwellingStructures	\$30,750
11	1465 1DwellingEquipment -Nonexpendable	
12	1470NondwellingStructures	
13	1475NondwellingEquipment	\$1.250
14	1485Demolition	
15	1490ReplacementReserve	
16	1492Moving toWorkDemonstration	
17	1495 1RelocationCosts	
18	1498ModUsedforDevelopment	
19	1502Contingency	\$1.000
20	AmountofAnnualGrant(Sumoflines2 -19)	\$42,510
21	Amountofline20RelatedtoLBPActivities	
2.2.	Amountofline20Relat_edtoSection504Compliance	
23	A mount of line 20 Palated to Security	
24	A mountofline?0RelatedtoFnerovConservation	

Development Number/Name HA-Wide Activities	GeneralDescriptionofMajorWork Categories	Development Account Number	Total Estimated Cost
TEX-281-001	ReimburseoperatingaccounttomaximizePHA flexibilityinutilizingCFPfunding.	1406	\$2,173
TEX-281-001	Improveoverallmanagemento fthePHAby attendingseminars,trainings,NAHROactivities, etc.Upgradingofcomputersoftware.	1408	\$1,500
TEX-281-001	AdvertisingandMisc.expensesforCFP ExpenseofadditionalparttimedutiesofED AndmaintenancesupforCFPadministrationdur ing designandconstructionofmod	1410	\$4,837
TEX-281-001	SITEIMPROVEMENTSUpdatesiteaccessibility bymakingimprovementstosidewalks,handrails,& parkingareas,etc.(RequiredtomeetHUDmin. HealthandBuildingstandards)	1450	\$1,000
TEX-281-001	DWELLINGSTRUCTURES Replaceclosetdoors anddoorframesat1and3bedroomunits – existing8'0"highbi -passslidingdoorsdonot functionandareAsafetyhazard(requireto meetHUDmin.Safetyandbuildingstandards.) Installstormdoorsat26un its(requiredtoMeet HUDsafetyandBuildingstandards)	1460	\$30,750
TEX-281-001	NONDWELLINGEQUIPMENTVarious maintenanceequipmenttomaintainminimumsafety standards	1475	\$1,250

2001 Capital FundProgram (CFP) Part II: Supporting Page (s)

2001CapitalFundProgram(CFP)PartIII:Implemen tationSchedule

Development Number/Name HA-WideActivities	AllFundsObligated (QuarterEndingDate)	AllFundsExpended (QuarterEndingDate)
TX281001	30June2003	31June2005

Attachment2.(5 -YearActionPlanforCFP)

OptionalTablef or5 -YearActionPlanforCapitalFund

Completeonetableforeachdevelopmentinwhichworkisplannedinthenext5PHAfiscalyears.Completeatable foranyPHA -widephysicalormanagementimprovementsplannedinthenextfivePHAfiscalyears.Cop ythistable asmanytimesasnecessary.Note:PHAsneednotincludeinformationfromYearOneofthe5 -Yearcycle,because thisinformationisincludedintheCapitalFundProgramAnnualStatement.

	Optional5 -YearActionI	PlanTables			
Development Number	DevelopmentName (orindicatePHAwide)	Number Vacant Units	%Vaca inDeve	ancies lopment	
TEX281-001	GrangerHousingAuthority	0	0		
DescriptionofNeedo Improvements	edPhysicalImprovementsorMana	gement		Estimated Cost	Plann (HAF
	plumbingat20kitchensinksandfaucen nhealthandbuildingstandards)	thardware(requir	ed	\$25,000	2001
(existingca binetsand	anddamagedkitchencabinetsandcou dcountertopsare32+yearsoldandseri edtomeetHUDmin.safetyandbuilding	ouslyare	5	\$32,500	2001
Replacedeteriorated HUDmin.buildingan	rangehoodswithnewunitsat22kitcher dsafetystandards)	ns(Requiredtome	eet	\$3,080	2001
	asbestosfloortile&masticandinstallr quiredtomeetHUDminimumhealtha		l	\$85,000	2002-
plumbingpipes,i nst	bathtubs/showersandrepair/replaced allnewshowerhead,faucet&valveat7 nealth,safety&buildingstandards)		0	\$14,406	2004
Page1					
basinsarecrackedand	ldete rioratingbathroomlavatories, lbroken)replaceplumbinghardwarea turesandfittingsat21units(Required uildingstandards)	ndundersink	у	\$12,150	2004
	ngandwallboardandpaintinteriorwal damage(RequiredtomeetHUDminir		n	\$4,000	2004
	gwoodscreendoorswit hnewunitsa etHUDminimumbuildingstandardsa	trearentranceof2 ndforenergy	.6	\$7,000	2004

		1
conservation)		
Installenergyconservationmeasures InstalladditionalR -11 atticinsulationat26units Installcaulking,sealant, andweatherstrippingat26units (Unitshavenothadanyadditionalinsulationfor32+years)	\$6,807 \$3,250	2005 2004
Replacewashingmachinevalveanddrainboxesat20units	\$3,500	2005
AlterandexpandexistingMaintenanceandStoragebuilding(Requiredto accommodateminimummaintena nceoperationsandprovideneededstorage capacity)	\$8,100	2005
Replacemissing and damaged window blinds with new blinds at 17 units and office	\$8,250	
Installcentralairconditioningat12elderlyanddisabledunit(Requiredforsafety ofelderlytenantsduetoextremes ummerheat)	\$9,550	
Repairdamagedanddislocatedsidewalks(RequiredtomaintainHUDstandards) Constructhousingauthoritysign –2sidedwithbrickmetalletters	\$5,880. \$2,300	
Purchaserefrigeratorstoreplace8newunits	\$4,000	
Purchaserangestoreplace10rangesat10units	\$5,000	
Costtocoverconsulting and as best os removal, monitoring of as best os	\$14,000	
Tenantmovingexpensesduringasbestosabatementandfloortilereplacement	\$9,500	
Totalestimatedcostovernext5years	\$199,743	

Attachment3.(2000CFPP&Ereport)

CapitalFundProgramProgress&EvaluationReportPartsI,II,andII

PHAN GRAI	ame: NGERHOUSINGAUTHORITY	GrantTypeandNumber CapitalFundProgramGrantN		
		ReplacementHou singFactor		<u></u>
	iginalAnnualStatement	gencies RevisedAnnual <u>)6/30/2002</u> FinalPerform)
Line	SummarybyDevelopmentAccount		matedCost	
No.	Summing 5, 2, 0, 0, 0, 0, 0, 0, 0, 0, 0, 0, 0, 0, 0,			
		Original	Revised	Ol
1	Totalnon -CFPFunds			
2	1406 Operations(nottoexceed20%)	\$0	\$8,336	
3	1408ManagementImprovements(nottoexceed20%)	\$0	\$2,173	
4	1410Administration(nottoexceed10%)	\$4,837	\$4,837	9
5	1411Audit			
6	1415LiquidatedDamages			
7	1430FeesandCos ts			
8	1440SiteAcquisition			
9	1450SiteImprovement	\$1,500	\$3,000	9
10	1460DwellingStructures	\$34,093	\$12,000	\$
11	1465.1DwellingEquipment —Nonexpendable	\$0	\$4,000	
12	1470Non -dwellingStructures			
13	1475 Non-dwellingEquipmentExpendable	\$1,250	\$4,000	9
14	1485Demolition			
15	1490ReplacementReserve			
16	1492MovingtoWorkDemonstration			
17	1495.1RelocationCosts			
18	1499DevelopmentActivities			
19	1501Collateralizatio norDebtService			
20	1502Contingency(nottoexceed8%)	\$0	\$3,334	
21	AmountofAnnualGrant:(sumoflines2 –20)	\$41,680	\$41,680	\$
22	Amountofline21RelatedtoLBPActivities			
23	Amountofline21RelatedtoSection50 4compliance			
24	Amountofline21RelatedtoSecurity –SoftCosts			
25	AmountofLine21RelatedtoSecurity – HardCosts			
26	Amountofline21RelatedtoEnergyConservationMeasures			
			HUDCertification:Inapprovingthisbudgetand notbemorethanisnecessarytomaketheassistedae 12.50).	
0	rExecutiveDirectorandDate Arthur Lopez, Granger Housing Authority 07/09/	12002	SignatureofFieldOfficeManager(orRegionalPu	ıblicHousingDirector

AnnualStatement/PerformanceandEvaluationReport(Rev CapitalFundProgramandCapitalFundProgramReplacementHousingFactor (CFP/CF PartII:SupportingPages

PHAName : GRANGERHOU	GrantTypeandNumber CapitalFundProgramGrantNo: TX59P281501-00 ReplacementHousingFactorGrantNo:				FederalF	
Development GeneralDescriptionofMajorWork Number Categories Name/HA-Wide Activities		Dev.Acct No.	Quantity	TotalEstin	natedCost	Т
				Original	Revised	Fun Oblig
HA-WIDE	OPERATIONS(LRPH)	1406		\$0	\$8,336	\$0
HA-WIDE	VARIOUSMGMTIMPROVEMENTS (Computersoftware, attendtrainings)	1408		\$0	\$2,173	\$0
HA-WIDE	ADMINISTRATION (Pro-ratedsalaryforcontract coordinator)	1410		\$4,837	\$4,837	\$4,8
HA-WIDE	AUDIT	1411				
	FEES&COSTS	1430		\$0	\$0	
TX281-1	SITEIMPROVEMENTS (Repairclotheslines,trimtrees,flag pole)	1450	26-units	\$1,500	\$3,000	\$1,5
TX281-1	DWELLINGSTRUCTURES (Replaceclosetdoors@3 -bedroom units;installstormdoors@allunits, rehabbathsasneeded)	1460	26-units	\$34,093	\$12,000	\$12,0
TX281-1	DWELLINGEQUIPMENT – NONEXPENDABLE (Ranges&Refrigerators)	1465.1		\$0	\$4,000	\$0
TX281-1	NON-DWELLINGEQUIPMENT – EXPENDABLE (Officecabinet,supplies&equipment, lawnmower)	1475		\$1,250	\$4,000	\$1,2
HA-WIDE	CONTINGENCIES	1502		\$0	\$3,334	\$0

AnnualStatement/PerformanceandEvaluationReport(Rev CapitalFundProgramandCapitalFundProgramReplacementHousingFactor(CFP/CFPRHI PartIII:ImplementationSchedule PHAName: GrantTypeandNumber

PHAName:		Grant	i ypeanorvunn	Der			FederalFY
GRANGERHOUSINGAUTHORITY			CapitalFundProgramNo: TX59P281501-00				
ReplacementHousingFactor No:							
DevelopmentNumber	AllFundObligated			AllFundsExpended			
Name/HA-Wide	(QuarterEndingDate)		te)	(QuarterEndingDate)			
Activities							
	Original	Revised	Actual	Original	Revised	Actual	
HA-WIDE	09/30/2000	09/30/2002		09/30/2000	09/30/2004		

Attachment4.(ProgressStatement)

GrangerHousingAuthority

500NorthCommerce 512-859-0207(FAX) Granger,Texas76530 512-859-2797 P.O.Box728 grangerha@thegateway.net

GrangerHousingAuthorityPHAPlan TX281 StatementofProgressinMeeting5 -YearPlanMissionandGoals 5-YearPlan (PHAFiscalYears2000 -2004)

TheGrangerHousing(GHA)ison scheduleinmeetingitsmissiontopromoteadequateand affordablehousing.TheGHA'sgoalsarebeingmet.Wehavereducedthevacancyratesince April2001,changedmanagementinordertoaccomplishamoreeffectivelyrunhousingagency, increasedcust omersatisfactionandrenovateoneunittoaccommodateadisabledfamily.

Inanefforttopromotethequalityoflifeforourresidents,wehaveaccomplishedanadequate numberofhigherincomefamilies,whichnowrepresentsanincomemixinthedevelopm e

ent.

Overall, the GHA is onschedule in its progress towards a higher performing PHA.

ArthurLopez *Arthur Lopez* **ExecutiveDirector -GrangerHousingAuthority** 5/22/2002 Attachment5.(VoluntaryConversionCertification)

GrangerHou singAuthority

500NorthCommerce 512-859-0207(FAX) Granger,Texas76530 512-859-2797 P.O.Box728 grangerha@thegateway.net

GrangerHousingAuthority TX281

VoluntaryConversionInitialAss essment

A. HowmanyofthePHA'sdevelopmentaresubjecttotheRequiredInitialAssessment?

The GHA has one development, which is subject to the Required Voluntary Conversion Initial Assessment.

TX281 -0125Units

B. Howmanyofthe PHA's developments are not subject to the Required Initial Assessment based on exemptions being they are elderly or disabled and not otherwise exempted occupancy units?

ThedevelopmentoftheGHAisnotexemptedfromtheRequiredVoluntar yConversionInitial Assessment.However,over50percentofthe housingunitsinthedevelopmentareoccupiedbyelderlyand/or disabledfamilies.Thegeneraloccupiedunitsareappropriatelyassigned.

C. InitialAssessm ent:

Test#1:

Would conversion of any of the dwelling units at the PHA adversely affect the availability of affordable housing in the community?

There is a short age of affordable rental housing units in the Granger, Texas area, which is evident by the lengthy waiting list. Converting subject units would adversely affect the housing market in this community.

NoneofthePHA'sunitsareconsideredappropriateforconversionbasedupon thePHA'sRequiredInitialAssessm ent.

ArthurLopez *Arthur Lopez* **ExecutiveDirector -GrangerHousingAuthority** 5/22/2002

Attachment6.(BoardResolutionCertification)

ResolutionNumber____

TheGrangerHousingAuthority

Resolution

WHEREAS, the Granger Housing Authority, (hereinafter called the Authority) through the Board of Commissioners has received and reviewed the Fiscal Year 2001 PHAP lanfor adoption:

WHEREAS, the Authority of, through its Board of Commissioners, believe it is in the best interest of the Housing Authority tha titadopts the Fiscal Year 2001 ``PHAPlan'', as attached here to, and incorporated here in as referenced as the Granger Housing Authority FY 2001 PHAPlan''. The second second

 $THEREFORE, BEITRESOLVED, that the Granger Housing Authority, through its Board of Commissioners, he {\it e} by adopts the above Resolutions on the terms and conditions asset for thhere in.$

TheforegoingResolutionshavingbeensubmittedtoavotewasadopted_____,2002.

SignatureBoardCh

airperson

Date

Attachment7.(Drug -FreeCertification)

Certificationfor aDrug -FreeWorkplace

U.S.DepartmentofHousing andUrbanDevelopment

ApplicantName GRANGERHOUSINGAUTHORITY	
Program/ActivityReceivingFederalGrantFunding CAPITALFUNDPROGRAM(TX59P281501 -01)	
ActingonbehalfoftheabovenamedApplicantasitsAuthorizedC theDepartmentofHousingandUrbanDevelopment(HUD)r	Official,Imakethefollowingcertificationsandagreementsto egardingthesiteslistedbelow:
IcertifythattheabovenamedApplicantwillorwillcontinueto	(1)Abidebythetermsofthestatement;and
provideadrug -freeworkplaceby:	(2)Notifytheemployerinwritingofhisorherconvictionfora violationofacriminaldrugstatuteoccu rringintheworkplacenolater
a. Publishing ast a tement notifying employees that the unlawful	thanfivecalendardaysaftersuchconviction;

аF manufacture, distribution, dispensing, possession, orus eofa controlled substance is prohibited in the Applicant's work place andspecifying the actions that will be taken against employees forviolationofsuchprohibition.

b.Establishinganon -goingdrug -freeawarenessprogramtoinform employees ----

(1)Thedangersofdrugabuseintheworkplace;

(2)TheApplicant'spolicyofmaintainingadrug -freeworkplace; (3) Anyavailabledrugcounseling, rehabilitation, and employee assistanceprograms; and

(4) The penalties that may be imposed upon employees for drug abuseviolationsoccurringintheworkplace.

c.Makingitarequirementthateachemployeetobeengagedinthe performanceofthegrantbegivenacopyofthestatementrequiredby paragrapha.;

d.Notifyingtheemployeeinthestatementrequired byparagrapha. that, as a condition of employment under the grant, the employee will

e. Notifying the agency in writing, with intencal endard a ys afterreceivingnoticeundersubparagraphd.(2)fromanemployeeor otherwisereceivingactualnoticeofsuchconv iction.Employersof convicted employees must providenotice, including position title, to everygrantofficerorotherdesigneeonwhosegrantactivitythe convictedemployeewasworking,unlesstheFederalagencyhas designatedacentralpointforther eceiptofsuchnotices.Noticeshall includetheidentificationnumber(s)ofeachaffectedgrant;

f. Takingoneofthefollowingactions, within 30 calendardays of receivingnoticeundersubparagraphd.(2), with respect to any employeewhoissoconvict ed--

(1)Takingappropriatepersonnelactionagainst such an employee, uptoandincludingtermination, consistent with the requirements of the Rehabilitation Act of 1973, asamended;or

(2) Requiring such employeet oparticipates at is facto rilyinadrug abuse assistance or rehabilitation program approved for such purposesbyaFederal,State,orlocalhealth,lawenforcement,orother appropriateagency;

g.Makingagoodfaithefforttocontinuetomaintainadrugfree workplacethroughim plementationofparagraphsa.thruf.

2.SitesforWorkPerformance. The Applicant shall list (on separate pages) the site (s) for the performance of work done in connection with the set of the set otheHUDfundingoftheprogram/activityshownabove:PlaceofPerformancesh allincludethestreetaddress, city, county, State, and zipcode. IdentifyeachsheetwiththeApplicantnameandaddressandtheprogram/activityreceivinggrantfunding.)

Checkhere ifthereareworkplacesonfilethatarenotide ntifiedontheattachedsheets

Ihere by certify that all the information stated here in, as well as any information provided in the accompaniment here with, is true and accurate.				
Warning: HUDwillprosecutefalseclaimsandstatements.Convictionmayresul tincriminaland/orcivilpenalties.				
(18U.S.C.1001,1010,1012;31U.S.C.3729,3802)				
NameofAuthorizedOfficial	Title			
JohnStefek	ChairmanBoardofCommissioners			
Signature	Date			
X John Stefek	01/14/2002			

Attachment8.(ConsolidatedP lanCertification)

U.S.DepartmentofHousingandUrbanDevelopment OfficeofPublicandIndianHousing

CertificationbyStateorLocalOfficialofPHAPlansConsistencywith theConsolidatedPlan

I, the	certify
(EnterOfficial'sName)	(EnterOfficial'sTitle)
thattheFiveYearandAnnualPHAPlanofthe	is (EnterHAName)
consistent with the Consolidated Plan of	
pursuantto24CFRPart91.	

Signed/DatedbyAppropriateStateorLocalOfficial

CertificationbyStateandLocalOfficialofPHAPlansConsistencywiththeConsolidatedPlantoAccompanytheHUD50075 OMBApprovalNo.2577 -0226 Expires03/31/2002 (7/99) Page1of1

CertificationofPayments toInfluenceFederal Transactions

U.S.DepartmentofHousing andUrbanDevelopment OfficeofPublicandIndianHousing

ApplicantName
GRANGERHOUSINGAUTHORITY
Program/ActivityReceivingFederalGrantFunding CAPITALFUNDPROGRAM(TX59P281501 -01)

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

(1)NoFederalappropriatedfundshavebeenpaidorwill bepaid,byoronbehalfoftheundersigned,toany personforinfluencingorattemp tingtoinfluencean officeroremployeeofanagency,aMemberof Congress,anofficeroremployeeofCongress,oran employeeofaMemberofCongressinconnectionwith theawardingofanyFederalcontract,themakingofany Federalgrant,themakingof anyFederalloan,the enteringintoofanycooperativeagreement,andthe extension,continuation,renewal,amendment,or modificationofanyFederalcontract,grant,loan,or cooperativeagreement.

(2)IfanyfundsotherthanFederalappropriatedfunds havebeenpaidorwillbepaidtoanypersonfor influencingorattemptingtoinfluenceanofficeror employeeofanagency,aMemberofCongress,an officeroremployeeofCongress,oranemployeeofa MemberofCongressinconnectionwiththis Federalcon tract,grant,loan,orcooperativeagreement, theundersignedshallcompleteandsubmitStandard Form-LLL,DisclosureFormtoReportLobbying,in accordancewithitsinstructions. (3)Theundersignedshallrequirethatthelanguageof thiscertificationbincludedintheawarddocumentsfor allsubawardsatalltiers(includingsubcontracts, subgrants,andcontractsundergrants,loans,and cooperativeagreements)andthatallsubrecipientsshall certifyanddiscloseaccordingly.

Thiscertificationisa materialrepresentationoffact uponwhichreliancewasplacedwhenthistransaction wasmadeorenteredinto.Submissionofthis certificationisaprerequisiteformakingorenteringinto thistransactionimposedbySection1352,Title31,U.S. Code.Any personwhofailstofiletherequired certificationshallbesubjecttoacivilpenaltyofnotless than\$10,000andnotmorethan\$100,000foreachsuch failure.

Iherebycertifythatalltheinformationstatedherein,aswellasanyinformationprovi dedintheaccompanimentherewith,istrue andaccurate:

Warning: HUDwillprosecutefalseclaimsandstatements.Convictionmayresultincriminaland/orcivilpenalties. (18U.S.C.1001,1010,1012;31U.S.C.3729,3802)

NameofAuthorizedOfficial	Title
JohnStefek	ChairmanBoardofCommissioners
Signature	Date(mm/dd/yyyy)
John Stefek	01/14/2002
formHUD50071 (3/98)	

Previouseditionisobsolete

ref.Handboooks7417.1,7475.13,7485.1,&7485.3

Attachment10.(PHACompliancew/Plans&Regulat ionsCertification)

U.S.DepartmentofHousingandUrbanDevelopment OfficeofPublicandIndianHousing

PHACertificationsofCompliancewith thePHAPlans andRelatedRegulations BoardResolutiontoAccompanythePHAPlan

ActingonbehalfoftheBoardofCommissionersofthePublicHousingAgency(PHA)listedbelow,asitsChairman orotherauthorizedPHAofficialifthereisnoBoardofComm issioners,Iapprovethesubmissionofthe <u>5-YearPlan</u> andAnnualPlan_forPHAfiscalyearbeginning_____,hereinafterreferredtoasthePlanofwhichthisdocument isapartandmakethefollowingcertificationsandagreementswiththeDepartmentof HousingDevelopment(HUD) inconnectionwiththesubmissionofthePlanandimplementationthereof:

1. The Planis consistent with the applicable comprehensive housing affordability strategy (or any planet) of the planet of th incorporatingsuchstrategy)fortheju risdictioninwhichthePHAislocated. 2. The Plancontains a certification by the appropriate State or local official sthat the Planis consistentwith the applicable Consolidated Plan, which includes a certification that requires the prepara tionofan AnalysisofImpedimentstoFairHousingChoice,forthePHA'sjurisdictionandadescriptionofthe manner in which the PHAP lanis consistent with the applicable Consolidated Plan.oryBoardorBoards,themembershipofwhichrepresents 3. The PHA has established a Resident Advis the residents assisted by the PHA, consulted with this Board or Boards indeveloping the Plan, and the resident state of the resideconsidered there commendations of the Board or Boards (24 CFR 903.13). The PHA has in cludedinthe Plan submission acopy of the recommendations made by the Resident Advisory Board or Boards and a submission acopy of the recommendation of the recommenddescriptionofthemannerinwhichthePlanaddressestheserecommendations. 4. The PHA made the proposed Plan and all infor mationrelevanttothepublichearingavailableforpublic inspectionatleast45daysbeforethehearing,publishedanoticethatahearingwouldbeheldand conductedahearingtodiscussthePlanandinvitedpubliccomment. 5.ThePH A will carry out the Plan in conformity with Title VI of the Civil Rights Act of 1964, the Fair and the VI of the Civil Rights Act of 1964, the VI of the VI of the Civil Rights Act of 1964, the VI of the VI of the Civil Rights Act of 1964, the VI of the VI of the Civil Rights Act of 1964, the VI of the VI of the Civil Rights Act of 1964, the VI of the VI of the Civil Rights Act of 1964, the VI of the VI of the Civil Rights Act of 1964, the VI of 1964, theHousing Act, section 504 of the Rehabilitation Act of 1973, and title II of the American swith Disabilities and the advantage of the American state of tActof1990. 6.ThePHAwillaff irmativelyfurtherfairhousingbyexaminingtheirprogramsorproposedprograms, identifyanyimpedimentstofairhousingchoicewithinthoseprograms, address those impediments in a reasonable fashion inview of the resources available andworkwithlocaljurisdictionstoimplementany of the jurisdiction's initiatives to affirmatively further fairhousing that require the PHA's involvement and maintain records reflecting these analyses and actions. 7.ForPHAPlanthati ncludesapolicyforsitebasedwaitinglists: • ThePHAregularlysubmitsrequireddatatoHUD'sMTCSinanaccurate,completeandtimely manner(asspecifiedinPIHNotice99 -2): • Thesystemofsite -basedwaitinglistsprovide sforfulldisclosuretoeachapplicantintheselection of the development in which to reside, including basic information about available sites; and an estimate of the period of time the applicant would likely have to wait to be admittedtounitsof differentsizes and types at each site; Adoptionofsite -basedwaitinglistwouldnotviolateanycourtorderorsettlementagreementorbe inconsistentwithapendingcomplaintbroughtbyHUD;

• ThePHAshalltakereasonablemeasurestoassurethatsuchwaitinglist is consistent with affirmatively furthering fairhousing;

 $\bullet \ The PHA provides for review of its site \\ -based waiting list policy to determine if it is consistent with \\$

civilrightslawsandcertifications,asspecifiedin24CFRpar t903.7(c)(1).

8. The PHA will comply with the prohibitions against discrimination on the basis of a gepursuant to the Age Discrimination Act of 1975.

9. ThePHAwillcomplywiththeArchitecturalBarriersActof1968and24CFRPart41,Polic ProceduresfortheEnforcementofStandardsandRequirementsforAccessibilitybythePhysically Handicapped.

10. The PHA will comply with the requirements of section 3 of the Housing and Urban Development Act of 1968, Employm ent Opportunities for Low -or Very -Low Income Persons, and with its implementing regulation at 24 CFR Part 135.

11. The PHA has submitted with the Plana certification with regard to a drug freework place required by 24 CFRP art 24, Subpart F.

12. ThePHAhassubmitted with the Planacertification with regard to compliance with restrictions on lobbying required by 24 CFRP art 87, together with disclosure forms if required by this Part, and with restrictions on payments to influence Federal Transactions, in accordance with the Byrd Amendment and implementing regulations at 49 CFR Part 24.

13.ForPHAPlanthatincludesaPHDEPPlanasspecifiedin24CFR761.21:ThePHDEPPlanisconsistent withandconformstoth e"PlanRequirements" and "GranteePerformanceRequirements" asspecifiedin 24CFR761.21 and 761.23 respectively and the PHA will maintain and have available for review/inspection(atalltimes), records or documentation of the following:

• BaselinelawenforcementservicesforpublichousingdevelopmentsassistedunderthePHDEP plan;

• Consortiumagreement/sbetweenthePHAsparticipatingintheconsortiumandacopyofthe paymentagreementbetweent heconsortiumandHUD(applicableonlytoPHAsparticipatingina consortiumasspecifiedunder24CFR761.15);

• Partnershipagreements(indicatingspecificleveragedsupport)withagencies/organizations providingfunding,se rvicesorotherin -kindresourcesforPHDEP -fundedactivities;

- Coordinationwithotherlawenforcementefforts;
- Writtenagreement(s)withlocallawenforcementagencies(receivinganyPHDEPfunds);and
- $\bullet All crimestatistics and other relevant data (including PartIand specified PartII crimes) that establish need for the public housing sites assisted under the PHDEPPIan.$

14. The PHA will comply with a cquisition and relocation requirements of the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970 and implementing regulations at 49 CFR Part 24 as applicable.

15. ThePHA will take appropriate affirmative action to a ward contract stominority and women's business enter prises under 24 CFR 5.105(a).

16. The PHA will provide HUD or the responsible entity any documentation that the Department needs to carry out its review under the National Environmental Policy Act and other related authorities in accordance with 24 CFR Part 58.

17.WithrespecttopublichousingthePHAwillcomplywithDavis-BaconorHUDdeterminedwageraterequirementsundersection12oftheUnitedStatesHousingActof1937andtheContractWorkHoursandSafetyStandardsAct.

18. The PHA will keep records in accordance with 24 CFR 85.20 and facilitate an effective audit to determine compliance with program requirements.

19. ThePHAwillcomplywiththeLead -BasedPaintPoisoningPreventionActand24CFRPart35.

20. The PHA will comply with the policies, guidelines, and requirements of OMBC ircular No. A Principles for State, Local and Indian Tribal Governments) and 24 CFR Part 85 (Administrative

RequirementsforGrantsandCooperativeAgre ementstoState,LocalandFederallyRecognizedIndian TribalGovernments.).

21. The PHA will under take only activities and programs covered by the Planina manner consistent with its Planand will utilize covered grant funds only for activ it is shat are approvable under the regulations

iesand

and included inits Plan.

22. AllattachmentstothePlanhavebeenandwillcontinuetobeavailableatalltimesandalllocationsthat thePHAPlanisavailableforpublicinspection.Allre quiredsupportingdocumentshavebeenmade availableforpublicinspectionalongwiththePlanandattachmentsattheprimarybusinessofficeofthe PHAandatallothertimesandlocationsidentifiedbythePHAinitsPHAPlanandwillconti nuetobe madeavailableatleastattheprimarybusinessofficeofthePHA.

PHANamePHANumber

Signed/DatedbyPHABoardChairorotherauthorize dPHAofficial

Attachment11.(DisclosureofLobbyActivitiesCertification)

DISCLOSUREOFLOBBYINGACTIVITIES Complete this form to disclose lobbying activities pursuant to (Seereverseforpublicburdendisclosure.)

ApprovedbyOMB0348 -0046 31U.S.C.1352

1.TypeofFederalAction: a.contract b.grant c.cooperative agreement d.loan e.loanguarantee f.loaninsurance (Checkapplicablebox)	2.StatusofFederalAction:		3.ReportType: 	
4.NameandAddressofReportin	awardee ifknown :	5.lfReportingEntityinNo.4isaSubawardee, Enter NameandAddressofPrime: CongressionalDistrict, ifknown:		
6.FederalDepartment/Agency: DEPARTMENTOFHOUSING&URBAN	DEVELOPMENT	7.FederalProgramName/Description: TX59P281501-01 CFDANumber, ifapplicable :		
8.FederalAc tionNumber, ifkn	own :	9.AwardAmount, ifknown : \$		
10.a.NameandAddressofLobby Registrant (<i>ifindividual,lastname,firstname,MI</i>):	/ing	b.IndividualsPerformingServices (including address ifdifferentfromNo.10a) (lastname,firstn_ame,MI):		
11. Informationrequestedthroughthisformisauthorized U.S.C.section 1352. Thisdisclosureoflobbyingactivities materialrepresentationoffactuponwhichreliancewaspla tierabo vewhenthistransactionwasmadeorentered disclosureisrequiredpursuantto31U.S.C. 1352. Thisinfo willbereportedtotheCongressemi -annuallya forpublicinspection.Anyperso nwhofailstofilett disclosureshallbesubjecttoacivilpenaltyofnotleesthat\$ andnotmorethan\$100,000foreachsuchfailure.	isa acedbythe adinto.This ormation andwillbeavailable nerequired	Signature:_ <i>John_Stelek</i> PrintName:_ JOHNSTEFEK Title:_ <u>CHAIRMANBOARDOFCOMMISSIONERS</u> TelephoneNo.: (<u>512)859 -2573</u> Date:_ <u>01/14/2002</u> _		
FederalUseOnly:		AuthorizedforLocalReproduction StandardFormLLL(Rev.7 -97)		

Attachment12.(SubstantialDeviation –SignificantAmendmentorMod ification)

GrangerHousingAuthority

500NorthCommerce 512-859-0207(FAX) Granger,Texas76530 512-859-2797 P.O.Box728 grangerha@thegateway.net

GrangerHousingAuthority TX281

SubstantialDeviation -SignificantAmendmentorModification

Thefollowingstatementispursuantto24CFR,Part903,PublicHousingAgencyPlans,FinalNotice,Section 903.7(r)(2);APHAmustidentifythebasiscriteriathePHAwillusefordetermining:(i)A substantialdeviationfrom its5 -YearPlan;and(ii)Asignificantamendmentormodificationtoits5 -YearPlanandAnnualPlan.Thecriteria for"asubstantialdeviationfromthe5 -YearPlan"and"asignificantamendmentormodificationtothe5YearPlan andAnnualPlan"includesbutisnotlimitedtothefollowing:

·AnychangetotheMissionStatement;

.50% deletion from or addition to the goals and objectives as a whole;

·50% ormore decrease in the quantifiable measurement of any individual goal or
 ·50% variance in the funds projected in the Capital Fund Program Annual Statement or 5
 ·Year

ActionPlan;

·Anyincreaseordecreaseover50% in the funds projected in the Financial Resource Statement and/or the Capital Fund Program Ann ual Statement;

·Anychangeinapolicyorprocedurethatrequiresaregulatory30 -dayposting;

 $\cdot Any submission to HUD that requires a separate notification to residents, such as Hope VI,\\$

PublicHousingConversion,Demolition/Disposition,DesignatedH ousingorHomeownership programs;

·Anychangeinconsistentwiththelocal,approvedConsolidatedPlan;and

·Anychangestorentoradmissionspoliciesororganizationofthewaitinglist;

If the amendmentor modification is a significant amendment or modification, as defined above, the PHA: (1) May not adopt the amendmentor modification until the PHA has duly called a meeting of its board of directors and the meeting, at which the amendmentor modification is adopted, is open to the public; and (2) May not implement the amendmentor modification, until notification of the amendmentor modification is provided to HUD and approved by HUD in accordance with HUD's plan review procedures, as provided in Section 903.23.

ArthurLopez *Arthur Lopez* **ExecutiveDirector -GrangerHousingAuthority** 5/22/2002