

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: Bonham Housing Authority

PHA Number: TX038

PHA Fiscal Year Beginning: April 1, 2001

This represents a joint plan transmission on behalf of the Consortium of the Texoma Housing Partners. The Bonham Housing Authority is the lead agency. The following is a list of all housing authorities with the number of units and funding sources currently participating in the consortium. All units are public housing.

| | |
|----------------------------|--|
| Bells TX089- | 19 units - operating subsidy and capital funding |
| Bonham TX038- | 104 units- operating subsidy, capital funding and drug elimination funding |
| Celeste TX126- | 24 units- operating subsidy and capital funding |
| Ector TX088- | 10 units- operating subsidy and capital funding |
| Farmersville TX221- | 49 units- operating subsidy and capital funding |
| Gunter TX139- | 12 units- operating subsidy and capital funding |
| Honey Grove TX093- | 70 units- operating subsidy and capital funding |
| Howe TX108- | 22 units- operating subsidy and capital funding |
| Ladonia TX092- | 20 units- operating subsidy and capital funding and drug elimination funding |
| Pottsboro TX091- | 11 units- operating subsidy and capital funding |
| Savoy TX097- | 25 units- operating subsidy and capital funding |
| Tom Bean TX115- | 19 units- operating subsidy and capital funding |
| Trenton TX127- | 19 units- operating subsidy and capital funding |
| Van Alstyne TX132- | 20 units- operating subsidy and capital funding |
| Whitewright TX107- | 32 units- operating subsidy and capital funding |
| Windom TX220- | 6 units- operating subsidy and capital funding |

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)

Xxx The mission of the PHA is the same as that of the Department of Housing and Urban Development: To promote adequate and affordable housing, economic opportunity and a suitable living environment free from discrimination.

_____ The PHA's mission is: (state mission here)

B. Goals

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 THE 5 YEARS.** (QUANTIFIABLE measures would include targets such as: numbers of families served or PHAS scores achieved.) PHAs should identify these measures in the spaces to the right of or below the stated objectives.

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

_____ PHA Goal: Expand the supply of assisted housing

Objectives:

_____ Apply for additional rental vouchers:

xxx Reduce public housing vacancies: Reduce by 5%

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

xxx Acquire or build units or developments

_____ Other (list below)

PHA Goal: Improve the quality of assisted housing

Objectives:

xxx Improve public housing management: (PHAS score) Improve occupancy

_____ Improve voucher management: (SEMAP score)

Xxx Increase customer satisfaction: continue to provide staff training.

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

- Xxx Renovate or modernize public housing units:
- xxx Demolish or dispose of obsolete public housing: demolish units in Van Alstyne
- _____ 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 home ownership program:
 - _____ Implement public housing or other home ownership 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:
 - Xxx 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 households
- Objectives:

- xxx Increase the number and percentage of employed persons in assisted families:
- xxx Provide or attract supportive services to improve assistance recipients' employability:
- xxx Provide or attract supportive services to increase independence for the elderly or families with disabilities. Continue to work with Foster Grandparent Program.
- _____ 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:
 - Xxx Undertake affirmative measures to ensure access to assisted housing regardless of race, color, religion national origin, sex, familial status, and disability:
 - xxx 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:
 - xxx 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.

xxx **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.

This is the first consolidated plan submitted on behalf of the consortium named the Texoma Housing Partners. There are sixteen small PHA's participating with a total of 460 units located in sixteen cities in four counties. The consortia's fiscal year begins April 1, 2001. The Five-Year Plan is for fiscal years 2000 through 2004 and the Annual Plan is for fiscal year 2001.

The mission and goal of the consortia, Texoma Housing Partners is not only to provide safe, secure housing but to provide guidance and direction through various educational programs, job training and readiness and social programs in an effort to enable residents to become self sufficient. With the inception of the consortia, a whole range of new possibilities are presented. The combined reporting and finances will provide tremendous cost and time savings allowing for additional programs and improvements. One exciting possibility is the development of three duplexes in Bonham. These units will be constructed with special insulated materials which will provide maximum energy efficiency. The rents will be set in accordance with moderate income levels thus providing a broader range of income on the property. Funds devoted to this project are the loan awarded by the

Texas Department of Housing and Community Affairs (TDHCA) and either capital monies or an additional low interest loan. We plan to continue with improvements to the properties based on current needs assessment. The major work item will be the installation of central air conditioning. We project that all units will be completed within the five year range. The combined resources including operating subsidy, rental income, interest income and the loan from TDHCA is \$2,157,151.00. The reserve level is at \$712,908.00.

The Drug Elimination funding will continue to provide for job training programs such as the Certified Nurses Aid training, Food Service training and Landscaping training. In addition, the G.E.D. training is now provided on-site to all residents. There will also be the continuance of foot patrol by off duty police officers at the Ladonia property.

Annual Plan Table of Contents

[24 CFR Part 903.7 9 (r)]

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

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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.

Required Attachments:

- xxx Admissions Policy for Deconcentration
- xxx FY 2000 Capital Fund Program Annual Statement
- _____ Most recent board-approved operating budget (Required Attachment for PHAs that are troubled or at risk of being designated troubled ONLY)
- xxx Five Year Plan Progress Statement
- xxx Membership of the Resident Advisory board
- xxx Criteria for Substantial Deviation and Significant Amendments
- xxx Deconcentration and Income Mixing

Optional Attachments:

- _____ PHA Management Organizational Chart
- _____ FY 2000 Capital Fund Program 5 Year Action Plan
- _____ Public Housing Drug Elimination Program (PHDEP) Plan
- _____ 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.

List of Supporting Documents Available for Review

| Applicable & On Display | Supporting Document | Applicable Plan Component |
|-------------------------|---|--|
| xxx | PHA Plan Certifications of Compliance with the PHA Plans and Related Regulations | 5 Year and Annual Plans |
| XXX | State/Local Government Certification of Consistency with the Consolidated Plan | 5 Year and Annual Plans |
| XXX | Fair Housing Documentation: Records reflecting that the PHA has examined its programs or proposed programs, identified any impediments to fair housing choice in those programs, addressed or is addressing those impediments in a reasonable fashion in view of the resources available, and worked or is working with local jurisdictions to implement any of the jurisdictions' initiatives to affirmatively further fair housing that require the PHA's involvement. | 5 Year and Annual Plans |
| xxx | 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 |
| xxx | Most recent board-approved operating budget for the public housing program | Annual Plan: Financial Resources; |
| XXX | 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 |
| | Section 8 Administrative Plan | Annual Plan: Eligibility, Selection, and Admissions Policies |
| XXX | 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 |
| | Public housing rent determination policies, including the methodology for setting public housing flat rents check here if included in the public housing xxx A & O Policy | Annual Plan: Rent Determination |
| | Schedule of flat rents offered at each public housing development XXX check here if included in the public housing A & O Policy | Annual Plan: Rent Determination |

| Applicable & On Display | Supporting Document | Applicable Plan Component |
|------------------------------------|---|---|
| | Section 8 rent determination (payment standard) policies check here if included in Section 8 Administrative Plan | Annual Plan: Rent Determination |
| xxx | 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 |
| | Public housing grievance procedures check here if included in the public housing xxx A & O Policy | Annual Plan: Grievance Procedures |
| | Section 8 informal review and hearing procedures check here if included in Section 8 Administrative Plan | Annual Plan: Grievance Procedures |
| | The HUD-approved Capital Fund/Comprehensive Grant Program Annual Statement (HUD 52837) for the active grant year | Annual Plan: Capital Needs |
| | Most recent CIAP Budget/Progress Report (HUD 52825) for any active CIAP grant | Annual Plan: Capital Needs |
| | Most recent, approved 5 Year Action Plan for the Capital Fund/Comprehensive Grant Program, if not included as an attachment (provided at PHA option) | Annual Plan: Capital Needs |
| | Approved HOPE VI applications or, if more recent, approved or submitted HOPE VI Revitalization Plans or any other approved proposal for development of public housing | Annual Plan: Capital Needs |
| | Approved or submitted applications for demolition and/or disposition of public housing | Annual Plan: Demolition and Disposition |
| | Approved or submitted applications for designation of public housing (Designated Housing Plans) | Annual Plan: Designation of Public Housing |
| | Approved or submitted assessments of reasonable revitalization of public housing and approved or submitted conversion plans prepared pursuant to section 202 of the 1996 HUD Appropriations Act | Annual Plan: Conversion of Public Housing |
| | Approved or submitted public housing homeownership programs/plans | Annual Plan: Homeownership |
| | Policies governing any Section 8 Homeownership program check here if included in the Section 8 Administrative Plan | Annual Plan: Homeownership |
| xxx | 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 |

| Applicable & On Display | Supporting Document | Applicable Plan Component |
|--|--|--|
| xxx | 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 |
| xxx | 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 |
| | Other supporting documents (optional) (list individually; use as many lines as necessary) | (specify as needed) |
| xxx | The Texoma Housing Partners Consortium Agreement is available and on display at the Administrative office. | Five Year and Annual Plan |

1. Statement of Housing Needs

[24 CFR Part 903.7 9 (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 factor on the housing needs for each family type, from 1 to 5, with 1 being "no impact" and 5 being "severe impact." Use N/A to indicate that no information is available upon which the PHA can make this assessment.

| Housing Needs of Families in the Jurisdiction by Family Type | | | | | | | |
|---|---------------------|----------------------------|---------------|----------------|----------------------------|--------------------|------------------|
| Family Type | Over all | Afford- ability | Supply | Quality | Access- ibility | 2. Size | Loca-tion |
| Income <= 30% of AMI | 4686 | 5 | 4 | 4 | 2 | 4 | 4 |
| Income >30% but <=50% of AMI | 4245 | 4 | 4 | 4 | 2 | 4 | 4 |
| Income >50% but <80% of AMI | 4007 | 3 | 4 | 4 | 2 | 4 | 4 |
| Elderly | 2567 | 5 | 5 | 4 | 5 | 4 | 4 |
| Families with Disabilities | 525 | 5 | 5 | 4 | 5 | 4 | 4 |
| Race: White | 10735 | 5 | 4 | 4 | 2 | 4 | 4 |
| Race: Black | 1556 | 5 | 4 | 4 | 2 | 4 | 4 |
| Race: Hispanic | 647 | 5 | 5 | 4 | 4 | 3 | 4 |
| Race/Ethnicity | | | | | | | |

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: _____

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

_____ American Housing Survey data

Indicate year: ____
 ____ Other housing market study
 Indicate year: ____
 xxx Other sources: (list and indicate year of information)

1990 Census Summary File Tape
 1995 Community Needs Assessment conducted by TCOG.

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 | | | |
|--|---------------|---------------------|-----------------|
| Waiting list type: (select one) | | | |
| ____ Section 8 tenant-based assistance | | | |
| <u>xxx</u> Public Housing | | | |
| ____ Combined Section 8 and Public Housing | | | |
| ____ 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 | 132 | | 28% |
| Extremely low income <=30% AMI | 101 | 77% | |
| Very low income (>30% but <=50% AMI) | 19 | 15% | |
| Low income (>50% but <80% AMI) | 12 | 9% | |

| | | | |
|--|-----|-----|--|
| Families with children | 61 | 47% | |
| Elderly families | 65 | 50% | |
| Families with Disabilities | 6 | 5% | |
| Race:White | 111 | 84% | |
| Race:Black | 18 | 14% | |
| Race:Hispanic | 2 | 2% | |
| Race/ethnicity | | | |
| | | | |
| Characteristics by Bedroom Size (Public Housing Only) | | | |
| 1BR | 56 | 43% | |
| 2 BR | 40 | 31% | |
| 3 BR | 33 | 25% | |
| 4 BR | 3 | 3% | |
| 5 BR | | | |
| 5+ BR | | | |
| Is the waiting list closed (select one)? No xxx Yes If yes: B. How long has it been closed (# of months)? Does the PHA expect to reopen the list in the PHA Plan year? No Yes Does the PHA permit specific categories of families onto the waiting list, even if generally closed? No Yes | | | |

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) Strategies

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

Xxx Employ effective maintenance and management policies to minimize the number of

- public housing units off-line
- xxx Reduce turnover time for vacated public housing units
- xxx 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
- xxx 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.
- xxx Other: (list below) Develop three energy efficient duplexes containing 6 total units using funds from the TDHCA Home funds.

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

- xxx 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
- xxx Adopt rent policies to support and encourage work
- _____ Other: (list below)

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

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

Select all that apply

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

B. Need: Specific Family Types: The Elderly

Strategy 1: Target available assistance to the elderly:

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)

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
- xxx 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

- Xxx 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:

- xxx ☐ 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
- xxx ☐ 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
- xxx ☐ 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 other funds, indicate the use for those funds as one of the following categories: public housing operations, public housing capital improvements, public housing safety/security, public housing supportive services, Section 8 tenant-based assistance, Section 8 supportive services or other.

| Financial Resources: Planned Sources and Uses | | |
|---|-------------------|---------------------|
| Sources | Planned \$ | Planned Uses |
| 1. Federal Grants (FY 2001 grants) | | |
| a) Public Housing Operating Fund | \$424,938.00 | |
| b) Public Housing Capital Fund | \$823,745.00 | |
| c) HOPE VI Revitalization | | |
| d) HOPE VI Demolition | | |
| e) Annual Contributions for Section 8 Tenant-Based Assistance | | |
| f) Public Housing Drug Elimination Program (including any Technical Assistance funds) | \$35,000.00 | |
| g) Resident Opportunity and Self- Sufficiency Grants | | |
| h) Community Development Block Grant | | |
| i) HOME | | |
| Other Federal Grants (list below) | | |
| | | |
| 2. Prior Year Federal Grants (unobligated funds only) (list below) | | |
| | | |
| | | |
| | | |
| 3. Public Housing Dwelling Rental Income | \$663,283.00 | |
| | | |
| | | |
| 4. Other income (list below) | | |
| Interest | \$18,543.00 | |
| TDHCA- loan | \$361,925.00 | |
| 4. Non-federal sources (list below) | | |
| | | |
| | | |
| | | |
| Total resources | \$2,327,434.00 | |
| | | |

| Sources | Planned \$ | Planned Uses |
|---------|------------|--------------|
| | | |

3. PHA Policies Governing Eligibility, Selection, and Admissions

[24 CFR Part 903.7 9 (c)]

A. Public Housing

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

(1) Eligibility

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

_____ 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: (state time)

xxx Other: (describe) immediately after completion of application

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

Xxx Criminal or Drug-related activity

xxx Rental history

xxx Housekeeping

_____ Other (describe)

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

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

e. _____ Yes xxx 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)

xxx Community-wide list

_____ Sub-jurisdictional lists

- ____ Site-based waiting lists
____ Other (describe)

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

- Xxx 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)

- xxx One
____ Two
____ Three or More

b. xxx 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 xxx 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)

xxx Emergencies

xxx Overhoused

xxx Underhoused

xxx Medical justification

xxx Administrative reasons determined by the PHA (e.g., to permit modernization work)

____ Resident choice: (state circumstances below)

____ Other: (list below)

a. Preferences

1. xxx 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.

1 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)

- 2 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
- xxx 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)

- xxx The PHA-resident lease
- xxx 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
- xxx Any time family composition changes
- _____ At family request for revision
- _____ Other (list)

(6) Deconcentration and Income Mixing

a. _____ Yes xxx No: Does the PHA have any general occupancy (family) public housing developments covered by the deconcentration rule? If no, this section is complete. If yes, continue to the next questions.

b. _____ Yes xxx 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:

_____ Employing new admission preferences at targeted developments

If selected, list targeted developments below:

_____ Other (list policies and developments targeted below)

d. _____ Yes xxx 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

_____ Other (list below)

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)

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

_____ List (any applicable) developments below:

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)
- _____ Other (list below)
- 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)

(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:

(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)

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

_____ Through published notices

_____ Other (list below)

4. PHA Rent Determination Policies

[24 CFR Part 903.7 9 (d)]

A. Public Housing

Exemptions: PHAs that do not administer public housing are not required to complete sub-component 4A.

(1) 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---

Xxx 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
xxx \$26-\$50

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

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

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

1. _____ Yes xxx 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:

d. Which of the discretionary (optional) deductions and/or exclusions policies does the PHA plan to employ (select all that apply)

xxx For the earned income of a previously unemployed household member
_____ For increases in earned income
_____ Fixed amount (other than general rent-setting policy)
If yes, state amount/s and circumstances below:

_____ Fixed percentage (other than general rent-setting policy)
If yes, state percentage/s and circumstances below:

- _____ For household heads
_____ For other family members
xxx For transportation expenses
_____ For the non-reimbursed medical expenses of non-disabled or non-elderly families
xxx Other (describe below) 10% reduction to annual income for employed families.

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
xxx 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)
_____ 95th 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
xxx 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)

g. _____ Yes xxx 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.)

- Xxx The section 8 rent reasonableness study of comparable housing
_____ Survey of rents listed in local newspaper
xxx Survey of similar unassisted units in the neighborhood
_____ Other (list/describe below)

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 program, certificates).**

(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)

(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 903.7 9 (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

Describe the PHA's management structure and organization.

(select one)

- _____ An organization chart showing the PHA's management structure and organization is attached.
- _____ 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 of the upcoming fiscal year, and expected turnover in each. (Use "NA" to indicate that the PHA does not operate any of the programs listed below.)

| Program Name | Units or Families Served at Year Beginning | Expected Turnover |
|--|---|--------------------------|
| Public Housing | | |
| Section 8 Vouchers | | |
| Section 8 Certificates | | |
| Section 8 Mod Rehab | | |
| Special Purpose Section 8 Certificates/Vouchers (list individually) | | |

| | | |
|---|--|--|
| Public Housing Drug Elimination Program (PHDEP) | | |
| | | |
| | | |
| Other Federal Programs(list individually) | | |
| | | |
| | | |

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)

(2) Section 8 Management: (list below)

6. PHA Grievance Procedures

[24 CFR Part 903.7 9 (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 xxx 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)
- xxx 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)

7. Capital Improvement Needs

[24 CFR Part 903.7 9 (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.

(1) 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.

Select one:

____ The Capital Fund Program Annual Statement is provided as an attachment to the PHA Plan at Attachment (state name)

-or-

Xxx 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.

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

b. If yes to question a, select one:

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

-or-

xxx 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)

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. **Note- The following table represents the planned work for all housing authorities participating in the consortium. The development number is that of the lead agency- Bonham. The number of vacancies is across the sixteen cities.** (Vacancies to be defined as those units that are available for occupancy, not to include those under capital improvement)

Optional 5-Year Action Plan Tables

| Development Number (or indicate PHA wide) in Development | Development Name Number Vacant Units | % Vacancies |
|---|---|--------------------|
| TX038 | Texoma Housing Partners | 50 11% |

| Description of Needed Physical Improvements or Management Improvements | Estimated Cost |
|---|-----------------------|
| Planned Start Date (HA Fiscal Year) | |

| Description of Needed Physical Improvements or Management Improvements | Estimated Cost | Planned Start Date (HA Fiscal Year) |
|--|----------------|--|
|--|----------------|--|

| | | |
|---|-------------|---------|
| Operation costs- 1406 | \$164,746.0 | 4/01/02 |
| Architect fees, inspector fees- 1430 | 0 | 4/01/02 |
| Installation of Central A/C- continuance 1460 | \$56,763.00 | 4/01/02 |
| | \$602,236.0 | |
| Operation costs- 1406 | 0 | 4/01/03 |
| Architect Fees, inspector fees- 1430 | | 4/01/03 |
| Installation of Central A/C- continuance | \$164,746.0 | 4/01/03 |
| Purchase replacement appliances- 1465 | 0 | 4/01/03 |
| | \$56,763.00 | |
| Operation costs- 1406 | \$502,236.0 | 4/01/04 |
| Architect fees, inspector fees- 1430 | 0 | 4/01/04 |
| Remodel interior of units including but not limited to: tile replacement, mini blinds, ceiling fans, bathroom and kitchen fixtures, kitchen cabinets and counter tops, windows, screens, interior, exterior doors, lighting fixtures, carpet for Elderly sites.- 1460 | \$100,000.0 | |
| | 0 | 4/01/04 |
| | \$164,746.0 | |
| | 0 | |
| | \$56,763.00 | 4/01/05 |
| Operation costs- 1406 | | 4/01/05 |
| Architect fees, inspector fees- 1430 | \$602,236.0 | |
| Exterior repairs including but not limited to: roof replacements, foundation repairs, sidewalk replacements, landscaping.- 1450 | 0 | 4/01/05 |
| Purchase replacement trucks- 1475 | | |
| | \$164,746.0 | |
| | 0 | |
| | \$56,763.00 | |
| | \$502,236.0 | |
| | 0 | |
| | \$100,000.0 | |
| | 0 | |
| Total estimated cost over next 5 years | \$4,118,725 | |
| | . | |

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 xxx 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 xxx 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 xxx 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:

Xxx 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: Proposed development of (3) duplexes consisting of (6) units.

8. Demolition and Disposition

[24 CFR Part 903.7 9 (h)]

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

1. ____ Yes x xx 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 xxx No: Has the PHA provided the activities description information in the optional Public Housing Asset Management Table? (If “yes”, skip to component 9. If “No”, complete the Activity Description table below.)

| Demolition/Disposition Activity Description | |
|--|--|
| 1a. Development name: Bonham Housing Authority Duplex Development | |
| 1b. Development (project) number: 530637 (TDHCA) | |
| 2. Activity type: <input type="checkbox"/> Demolition <input checked="" type="checkbox"/> Disposition | |
| 3. Application status (select one) <input type="checkbox"/> Approved <input type="checkbox"/> Submitted, pending approval <input checked="" type="checkbox"/> Planned application | |
| 4. Date application approved, submitted, or planned for submission: <u>04/01/01</u> | |
| 5. Number of units affected: 6 Coverage of action (select one) <input checked="" type="checkbox"/> Part of the development <input type="checkbox"/> Total development | |
| 7. Timeline for activity: a. Actual or projected start date of activity: 8/01/01 b. Projected end date of activity: 2/01/02 | |

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

[24 CFR Part 903.7 9 (i)]

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

1. Yes xxx 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.

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

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 xxx 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.

| Conversion of Public Housing Activity Description | |
|--|--|
| 1a. Development name: | |
| 1b. Development (project) number: | |
| 2. What is the status of the required assessment? | |
| ____ | Assessment underway |
| ____ | Assessment results submitted to HUD |
| ____ | Assessment results approved by HUD (if marked, proceed to next question) |
| ____ | Other (explain below) |
| 3. ____ Yes ____ No: Is a Conversion Plan required? (If yes, go to block 4; if no, go to block 5.) | |
| 4. Status of Conversion Plan (select the statement that best describes the current status) | |
| ____ | Conversion Plan in development |
| ____ | Conversion Plan submitted to HUD on: (DD/MM/YYYY) |
| ____ | Conversion Plan approved by HUD on: (DD/MM/YYYY) |
| ____ | Activities pursuant to HUD-approved Conversion Plan underway |

5. Description of how requirements of Section 202 are being satisfied by means other than conversion (select one)

- ____ Units addressed in a pending or approved demolition application (date submitted or approved:
- ____ Units addressed in a pending or approved HOPE VI demolition application (date submitted or approved:)
- ____ Units addressed in a pending or approved HOPE VI Revitalization Plan (date submitted or approved:)
- ____ Requirements no longer applicable: vacancy rates are less than 10 percent
- ____ Requirements no longer applicable: site now has less than 300 units
- ____ Other: (describe below)

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

2. Activity Description

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

| Public Housing Homeownership Activity Description (Complete one for each development affected) | |
|---|--|
| 1a. Development name: | |
| 1b. Development (project) number: | |
| 2. Federal Program authority: | |
| ____ | HOPE I |
| ____ | 5(h) |
| ____ | Turnkey III |
| ____ | Section 32 of the USHA of 1937 (effective 10/1/99) |
| 3. Application status: (select one) | |
| ____ | Approved; included in the PHA’s Homeownership Plan/Program |
| ____ | Submitted, pending approval |
| ____ | Planned application |
| 4. Date Homeownership Plan/Program approved, submitted, or planned for submission: | |
| (DD/MM/YYYY) | |
| 5. Number of units affected: | |
| 6. Coverage of action: (select one) | |
| ____ | Part of the development |
| ____ | Total development |

B. Section 8 Tenant Based Assistance

1. ____ Yes xxx 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 903.7 9 (l)]

Exemptions from Component 12: High performing and small PHAs are not required to complete this component. Section 8-Only PHAs are not required to complete sub-component C.

A. PHA Coordination with the Welfare (TANF) Agency

1. Cooperative agreements:

xxx 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? 03/26/99

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

- xxx Client referrals
- xxx Information sharing regarding mutual clients (for rent determinations and otherwise)
- Xxx Coordinate the provision of specific social and self-sufficiency services and programs to eligible families
- xxx 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.)

| Services and Programs | | | | |
|--|-------------------|--|--|--|
| Program Name & Description (including location, if appropriate) | Estimated Size | Allocation Method (waiting list/random selection/specific criteria/other) | Access (development office / PHA main office / other provider name) | Eligibility (public housing or section 8 participants or both) |
| Certified Nurses Aid Training | 10 per class | waiting list | Veterans Administration | PHA residents and veterans |
| Food Service Training | 10 per class | waiting list | Veterans Administration | PHA residents and veterans |

| | | | | |
|-------------|-------------|--------------|-------------------|-------------------|
| GED classes | 6 per class | waiting list | PHA training site | PHA and community |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |

(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

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

_____ agencies
_____ Other: (list below)

| |
|--|
| D. Reserved for Community Service Requirement pursuant to section 12(c) of the U.S. Housing Act of 1937 |
|--|

13. PHA Safety and Crime Prevention Measures

[24 CFR Part 903.7 9 (m)]

Exemptions from Component 13: High performing and small PHAs not participating in PHDEP and Section 8 Only PHAs may skip to component 15. High Performing and small PHAs that are participating in PHDEP and are submitting a PHDEP Plan with this PHA Plan may skip to sub-component D.

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

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

- _____ High incidence of violent and/or drug-related crime in some or all of the PHA's developments
- _____ High incidence of violent and/or drug-related crime in the areas surrounding or adjacent to the PHA's developments
- xxx Residents fearful for their safety and/or the safety of their children
- xxx Observed lower-level crime, vandalism and/or graffiti
- xxx 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).

- xxx Safety and security survey of residents
- xxx 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
- xxx Resident reports
- xxx PHA employee reports
- xxx Police reports
- xxx Demonstrable, quantifiable success with previous or ongoing anticrime/anti drug programs
- _____ Other (describe below)

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

Bonham Housing Authority

Ladonia Housing Authority

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

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

xxx Volunteer Resident Patrol/Block Watchers Program

_____ Other (describe below)

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

Bonham Housing Authority

Ladonia Housing Authority

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)

xxx Police involvement in development, implementation, and/or ongoing evaluation of drug-elimination plan

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

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

Xxx Police regularly testify in and otherwise support eviction cases

xxx Police regularly meet with the PHA management and residents

xxx 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)

Bonham Housing Authority

Ladonia Housng

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.

Xxx Yes ____ No: Is the PHA eligible to participate in the PHDEP in the fiscal year covered by this PHA Plan?

Xxx Yes ____ No: Has the PHA included the PHDEP Plan for FY 2001 in this PHA Plan?

Xxx Yes ____ No: This PHDEP Plan is an Attachment. (Attachment Filename: ____)

Bonham PHDEP

Ladonia PHDEP

14. RESERVED FOR PET POLICY

24 CFR Part 903.7 9 (n)]

PET OWNERSHIP RULES

1. Common household pet means a domesticated cat, dog, bird, and fish in aquariums. These definitions do not include any wild animal, bird or fish.
2. Each household shall have only one pet (with the exception of fish).
3. The pet owner shall have only a small cat or dog. The animal's weight shall not exceed 25 pounds. The animal's height shall not exceed 12 inches. Such limitations do not apply to a seeing eye or helping hand dog used to assist a handicapped or disabled resident.
4. Each non-elderly family shall pay \$200.00 for a pet, which is the total of a \$100.00 non-refundable fee and a \$100.00 refundable deposit. An elderly family will pay a refundable pet deposit of \$50. There is no deposit required for fish, birds, gerbils or guinea pigs. The pet deposit is not part of the rent payable by the pet owner, and is in addition to any other financial obligation generally imposed on residents of the development where the pet owner lives.
5. Pet owners shall license their pets yearly with the City. The pet owner must show the PHA proof of annual rabies and distemper booster inoculations.
6. If possible, the pet owner shall have his or her cat or dog spayed or

neutered and shall pay the cost thereof. A veterinarian shall verify that the spaying or neutering has been accomplished.

7. The pet owner shall house the pet inside the pet owner's dwelling unit. The pet owner shall keep a cat or a dog on a leash and shall control the animal when it is taken out of the dwelling unit for any purpose. The owner of a bird shall confine the bird to a cage at all times. No pet owner shall allow his or her pet to be unleashed or loose outside the pet owner's dwelling unit.
8. No resident shall keep, raise, train, breed, or maintain any pet of any kind at any location, either inside or outside the dwelling unit, for any commercial purpose.
9. No pet owner shall keep a vicious or intimidating pet on the premises. If the pet owner declines, delays or refuses to remove the pet from the premises, the PHA shall do so, in order to safeguard the health and welfare of other residents.
10. No pet owner shall permit his or her pet to disturb, interfere, or diminish the peaceful enjoyment of the pet owner's neighbors or other residents. The terms "disturb, interfere, or diminish" shall include but are not limited to barking, howling, biting, scratching, chirping, and other activities of a disturbing nature. If the pet owner declines, delays, or refuses to remove the pet from the premises, the PHA will do so.
11. The owner of a cat shall feed the animal at least once per day; provide a litter box inside the dwelling unit; clean the litter box at least every two days and take the animal to a veterinarian at least once per year. The pet owner shall not permit refuse from the litter box to accumulate or to become unsanitary or unsightly, and shall dispose of such droppings by placing them in a sack in a designated container outside the building where the pet owner lives.
12. The owner of a dog shall feed the animal at least once a day; take the animal for a walk at least twice a day; remove the animal's droppings at least every two days and take the animal to a veterinarian at least once per year. The pet owner shall not permit droppings from the animal to accumulate or to become unsanitary or unsightly, and shall dispose of such droppings by placing them in a sack in a designated container outside the building where the pet owner lives.

13. No pet owner shall keep a pet in violation of state, local or humane laws or ordinances. Any failure of these pet ownership rules to contain other applicable state or local laws or ordinances does not relieve the pet owner of the responsibility for complying with such requirements.
14. The pet owner shall take the precautions and measures necessary to eliminate pet odors within and around the dwelling unit, and shall maintain the dwelling unit in a sanitary condition at all times, as determined by the PHA.
15. No pet owner shall alter the dwelling unit or the surrounding premises to create a space, hole, container or enclosure for any pet.
16. PHA staff shall enter a dwelling unit where a pet has been left unattended for 24 hours, remove the pet and transfer it to the proper local authorities, subject to any provisions of state or local law or ordinances in this regard. The PHA shall accept no responsibility for the pet under such circumstances.
17. All residents, including the elderly, handicapped, and disabled, are prohibited from feeding, housing, or caring for stray animals or birds. Such action shall constitute a pet without permission of the PHA.
18. Each pet owner shall identify an alternate custodian for his or her pet. If the pet owner is ill or absent from the dwelling unit and unable to care for his or her pet, the alternate custodian shall assume responsibility for the care and keeping of the pet, including, if necessary, the removal of the pet from PHA premises.
19. Should any pet housed in the PHA's facilities give birth to a litter, the resident shall remove all pets from the premises except one.
20. If a resident, including a pet owner, breaches any of the rules set forth above, the PHA may revoke the pet permit and evict the resident or pet owner.

I have read and understand the above pet ownership rules and agree to abide by them.

Resident Signature

PHA Staff Signature

Susan\C\MyFiles\PetRules

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. xxx 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. xxx Yes ____ No: Was the most recent fiscal audit submitted to HUD?
3. ____ Yes xxx 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 xxx No: Is the PHA engaging in any activities that will contribute to the long-term asset management of its public housing stock, including how the Agency will plan for long-term operating, capital investment, rehabilitation, modernization, disposition, and other needs that have **not** been addressed elsewhere in this PHA Plan?

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

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

3. _____ 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 xxx 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:
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 xxx 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 xxx 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: (provide name here)

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)

Xxx 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)

_____ Other: (list below)

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

D. Other Information Required by HUD

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

Attachments

Use this section to provide any additional attachments referenced in the Plans.

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 \$ 25,000.00

B. Eligibility type (Indicate with an "x") N1_____ N2xxx R_____

C. FFY in which funding is requested 04/01/01

D. Executive Summary of Annual PHDEP Plan

In the space below, provide a brief overview of the PHDEP Plan, including highlights of major initiatives or activities undertaken. It may include a description of the expected outcomes. The summary must not be more than five (5) sentences long. Through the funding of the PHDEP grant, it is the goal of the Bonham Housing Authority to provide a comprehensive array of programs designed to provide positive alternatives to drug and criminal behavior. The programs are provided through partnerships with local agencies and the Social Service programs provided through the Housing Authority. It is our intent to monitor the progress of each program, follow each participant and provide continual aftercare to increase the measure of success.

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.

| PHDEP Target Areas (Name of development(s) or site) | Total # of Units within the PHDEP Target Area(s) |
|---|--|
| Bonham Housing Authority | 104 units 208 population |

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 xxxx 18 Months _____ 24
Months _____ 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 balance and anticipated completion date. For grant extensions received, place "GE" in column or "W" for waivers.

| Fiscal Year of Funding Submission | PHDEP Funding Received Grant Extensions or Waivers | Grant # Anticipated Completion Date | Fund Balance as of Date of this |
|-----------------------------------|--|-------------------------------------|---------------------------------|
| FY 1995 | | | |
| FY 1996 | | | |
| FY 1997 | | | |
| FY 1998 | | | |
| FY 1999 | \$25,000.00 | | |
| FY 2000 | \$25,000.00 | Fund balance- \$20,163.15 | Completion date- 10/14/01 |

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.

B. PHDEP Budget Summary

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

FY _____ PHDEP Budget Summary

| Budget Line Item | Total Funding |
|---|---------------|
| 9110 - Reimbursement of Law Enforcement | |
| 9120 - Security Personnel | |
| 9130 - Employment of Investigators | |
| 9140 - Voluntary Tenant Patrol | |
| 9150 - Physical Improvements | |
| 9160 - Drug Prevention | \$25,000.00 |
| 9170 - Drug Intervention | |
| 9180 - Drug Treatment | |
| 9190 - Other Program Costs | |

TOTAL PHDEP FUNDING

\$25,000.00

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 must be concise—not to exceed two sentences in any column. Tables for line items in which the PHA has no planned goals or activities may be deleted.

9110 - Reimbursement of Law Enforcement

Total PHDEP Funding: \$

Goal(s)

Objectives

| Proposed Activities | # of Persons Served | Target Population | Start Date | Expected |
|---------------------|---------------------|--------------------------------|------------------------|----------|
| Complete Date | PHDEP Funding | Other Funding (Amount/ Source) | Performance Indicators | |
| 1. | | | | |
| 2. | | | | |
| 3. | | | | |

9120 - Security Personnel

Total PHDEP Funding: \$

Goal(s)

Objectives

| Proposed Activities | # of Persons Served | Target Population | Start Date | Expected |
|---------------------|---------------------|--------------------------------|------------------------|----------|
| Complete Date | PHDEP Funding | Other Funding (Amount /Source) | Performance Indicators | |
| 1. | | | | |
| 2. | | | | |
| 3. | | | | |

9130 - Employment of Investigators

Total PHDEP Funding: \$

Goal(s)

Objectives

| Proposed Activities | # of Persons Served | Target Population | Start Date | Expected |
|---------------------|---------------------|--------------------------------|------------------------|----------|
| Complete Date | PHDEP Funding | Other Funding (Amount /Source) | Performance Indicators | |
| 1. | | | | |
| 2. | | | | |
| 3. | | | | |

9140 - Voluntary Tenant Patrol

Total PHDEP Funding: \$

Goal(s)

Objectives

| Proposed Activities | # of Persons Served | Target Population | Start Date | Expected |
|---------------------|---------------------|--------------------------------|------------------------|----------|
| Complete Date | PHEDEP Funding | Other Funding (Amount /Source) | Performance Indicators | |
| 1. | | | | |
| 2. | | | | |
| 3. | | | | |

9150 - Physical Improvements Total PHDEP Funding: \$

Goal(s)

Objectives

| Proposed Activities | # of Persons Served | Target Population | Start Date | Expected |
|---------------------|---------------------|--------------------------------|------------------------|----------|
| Complete Date | PHEDEP Funding | Other Funding (Amount /Source) | Performance Indicators | |
| 1. | | | | |
| 2. | | | | |
| 3. | | | | |

9160 - Drug Prevention Total PHDEP Funding: \$

Goal(s)

Objectives

| Proposed Activities | # of Persons Served | Target Population | Start Date | Expected |
|---------------------------|-------------------------------------|--------------------------------|------------------------|----------|
| Complete Date | PHEDEP Funding | Other Funding (Amount /Source) | Performance Indicators | |
| 1. Training Programs | #people served- 40 | 104 | 10/15/01 | 10/15/02 |
| 2. \$25,000.00 | other sources- \$36,700.00 in kind. | | | |
| 3. | | | | |

9170 - Drug Intervention Total PHDEP Funding: \$

Goal(s)

Objectives

| Proposed Activities | # of Persons Served | Target Population | Start Date | Expected |
|---------------------|---------------------|--------------------------------|------------------------|----------|
| Complete Date | PHEDEP Funding | Other Funding (Amount /Source) | Performance Indicators | |
| 1. | | | | |
| 2. | | | | |
| 3. | | | | |

9180 - Drug Treatment Total PHDEP Funding: \$

Goal(s)

Objectives

| Proposed Activities | # of Persons Served | Target Population | Start Date | Expected |
|---------------------|---------------------|--------------------------------|------------------------|----------|
| Complete Date | PHEDEP Funding | Other Funding (Amount /Source) | Performance Indicators | |
| 1. | | | | |
| 2. | | | | |

3.

9190 - Other Program Costs

Total PHDEP Funds: \$

Goal(s)

Objectives

| Proposed Activities | # of Persons Served | Target Population | Start Date | Expected |
|---------------------|---------------------|--------------------------------|------------------------|----------|
| Complete Date | PHDEP Funding | Other Funding (Amount /Source) | Performance Indicators | |

- 1.
- 2.
- 3.

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) |
|--------------------|--|--|---|---|
|--------------------|--|--|---|---|

e.g Budget Line Item # 9120 Activities 1, 3 Activity 2

| | | | | |
|--------------|------|-------------|------|-------------|
| 9110 | | | | |
| 9120 | | | | |
| 9130 | | | | |
| 9140 | | | | |
| 9150 | | | | |
| 9160 | 100% | \$25,000.00 | 100% | \$25,000.00 |
| 9170 | | | | |
| 9180 | | | | |
| 9190 | | | | |
| TOTAL | \$ | \$ | | |

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."

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 \$10,000.00

B. Eligibility type (Indicate with an "x") N1_____ N2 xxx R_____

C. FFY in which funding is requested 2001

D. Executive Summary of Annual PHDEP Plan

In the space below, provide a brief overview of the PHDEP Plan, including highlights of major initiatives or activities undertaken. It may include a description of the expected outcomes. The summary must not be more than five (5) sentences long. In an effort to maintain and secure a safe environment, the Ladonia Housing Authority plans to continue the use of off duty police officers for the purpose of providing foot patrol to the property.

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.

| PHDEP Target Areas (Name of development(s) or site) | Total # of Units within the PHDEP Target Area(s) |
|---|--|
| Ladonia Housing Authority | 20 Units 75 people |

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 xxx** **18 Months**_____ **24 Months**_____

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 balance and anticipated completion date. For grant extensions received, place "GE" in column or "W" for waivers.

| Fiscal Year of Funding Submission | PHDEP Funding Received Grant Extensions or Waivers | Grant # Anticipated Completion Date | Fund Balance as of Date of this |
|--|---|--|--|
| FY 1995 | | | |
| FY 1996 | | | |
| FY 1997 | | | |
| FY 1998 | | | |
| FY 1999 | \$10,000 | Fund Bal. \$5,305.00 | Completion 10/14/01 |
| FY 2000 | \$10,000 | Fund Bal. \$9,700.00 | Completion 10/14/01 |

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. The Ladonia Housing Authority consists of 20 units. There has been a history of drug related criminal activity and gang related activity. The PHDEP grant provides for off duty police officers to perform foot patrol. The police officers work a sporadic schedule to prevent individuals from knowing exactly when they are on duty. The officers submit daily reports outlining activity on their shift. An assessment of criminal activity is conducted every six months.

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 | \$10,000.00 |
| 9120 - Security Personnel | |
| 9130 - Employment of Investigators | |
| 9140 - Voluntary Tenant Patrol | |
| 9150 - Physical Improvements | |
| 9160 - Drug Prevention | |

9170 - Drug Intervention
9180 - Drug Treatment
9190 - Other Program Costs

TOTAL PHDEP FUNDING

\$10,000.00

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 must be concise—not to exceed two sentences in any column. Tables for line items in which the PHA has no planned goals or activities may be deleted.

9110 - Reimbursement of Law Enforcement

Total PHDEP Funding: \$

Goal(s)

Objectives

| Proposed Activities | # of Persons Served | Target Population | Start Date | Expected |
|---------------------|---------------------|--------------------------------|------------------------|----------|
| Complete Date | PHDEP Funding | Other Funding (Amount/ Source) | Performance Indicators | |

1. To decrease criminal activity, to secure and maintain a safe environment.

2. A total of 75 people served.

3. The Housing Authority residents are the target population.

Start date- 10/14/01

Completion date- 10/14/02

9120 - Security Personnel

Total PHDEP Funding: \$

Goal(s)

Objectives

| Proposed Activities | # of Persons Served | Target Population | Start Date | Expected |
|---------------------|---------------------|--------------------------------|------------------------|----------|
| Complete Date | PHDEP Funding | Other Funding (Amount /Source) | Performance Indicators | |

1.

2.

3.

9130 - Employment of Investigators

Total PHDEP Funding: \$

Goal(s)

Objectives

| Proposed Activities | # of Persons Served | Target Population | Start Date | Expected |
|---------------------|---------------------|--------------------------------|------------------------|----------|
| Complete Date | PHDEP Funding | Other Funding (Amount /Source) | Performance Indicators | |

1.

2.

3.

9140 - Voluntary Tenant Patrol **Total PHDEP Funding: \$**

Goal(s)

Objectives

| Proposed Activities | # of Persons Served | Target Population | Start Date | Expected |
|---------------------|---------------------|--------------------------------|------------------------|----------|
| Complete Date | PHDEP Funding | Other Funding (Amount /Source) | Performance Indicators | |

- 1.
- 2.
- 3.

9150 - Physical Improvements **Total PHDEP Funding: \$**

Goal(s)

Objectives

| Proposed Activities | # of Persons Served | Target Population | Start Date | Expected |
|---------------------|---------------------|--------------------------------|------------------------|----------|
| Complete Date | PHDEP Funding | Other Funding (Amount /Source) | Performance Indicators | |

- 1.
- 2.
- 3.

9160 - Drug Prevention **Total PHDEP Funding: \$**

Goal(s)

Objectives

| Proposed Activities | # of Persons Served | Target Population | Start Date | Expected |
|---------------------|---------------------|--------------------------------|------------------------|----------|
| Complete Date | PHDEP Funding | Other Funding (Amount /Source) | Performance Indicators | |

- 1.
- 2.
- 3.

9170 - Drug Intervention **Total PHDEP Funding: \$**

Goal(s)

Objectives

| Proposed Activities | # of Persons Served | Target Population | Start Date | Expected |
|---------------------|---------------------|--------------------------------|------------------------|----------|
| Complete Date | PHDEP Funding | Other Funding (Amount /Source) | Performance Indicators | |

- 1.
- 2.
- 3.

9180 - Drug Treatment **Total PHDEP Funding: \$**

Goal(s)

Objectives

| Proposed Activities | # of Persons Served | Target Population | Start Date | Expected |
|---------------------|---------------------|--------------------------------|------------------------|----------|
| Complete Date | PHEDEP Funding | Other Funding (Amount /Source) | Performance Indicators | |

- 1.
- 2.
- 3.

9190 - Other Program Costs**Total PHDEP Funds: \$**

Goal(s)

Objectives

| Proposed Activities | # of Persons Served | Target Population | Start Date | Expected |
|---------------------|---------------------|--------------------------------|------------------------|----------|
| Complete Date | PHEDEP Funding | Other Funding (Amount /Source) | Performance Indicators | |

- 1.
- 2.
- 3.

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) |
|--------------------|--|--|---|---|
|--------------------|--|--|---|---|

e.g Budget Line Item # 9120 Activities 1, 3 Activity 2

| | | | | |
|------|------|-------------|------|-------------|
| 9110 | 100% | \$10,000.00 | 100% | \$10,000.00 |
| 9120 | | | | |
| 9130 | | | | |
| 9140 | | | | |
| 9150 | | | | |
| 9160 | | | | |
| 9170 | | | | |
| 9180 | | | | |
| 9190 | | | | |

| | | | | |
|--------------|--|-------------|--|-------------|
| TOTAL | | \$10,000.00 | | \$10,000.00 |
|--------------|--|-------------|--|-------------|

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."

TEXOMA HOUSING PARTNERS CONSORTIUM AGREEMENT

WHEREAS, the 100% Low Rent Public Housing Authorities of the Cities of: Bells, Bonham, Celeste, Ector, Gunter, Farmersville, Howe, Honey Grove, Ladonia, Pottsboro, Savoy, Tom Bean, Trenton, Van Alstyne, Whitewright, and Windom, Texas, hereby agree to join together to form, operate, and maintain a voluntary consortium to be known as TEXOMA HOUSING PARTNERS (THP) for the purpose of administering public housing funds and to provide for the public housing needs of the citizens of their respective cities; and

WHEREAS, the operation and maintenance of THP involves certain responsibilities and privileges; and,

WHEREAS, it is the intent of this Consortium Agreement to provide the basic framework for this cooperative endeavor;

WHEREAS, it is our mutual goal to combine our total resources to provide public housing needs beyond our individual capabilities and in accordance with 24 CFR 943, the Bonham Housing Authority is designated as the lead agency; now therefore

The sixteen (16) public housing authorities who are signatories to this Consortium Agreement agree as follows:

ARTICLE I

The sixteen (16) public housing authorities whose approval is attached hereto agree to operate

and maintain THP offices at the Bonham Public Housing Authority Administrative Offices located at 810 West 16th Street, Bonham, Texas, and such other locations as the Governing Board of THP may from time to time designate. THP shall be governed by a policy-making board consisting of seventeen (17) voting members who shall serve terms of three (3) years, with the exception that initial members shall have staggered terms to provide continuity of THP's program. Each of the existing sixteen (16) public housing authority boards shall designate one (1) member to the initial THP Governing Board. Upon convening for the first time, these sixteen (16) members shall draw lots to determine five (5) members to serve an initial one (1) year term; five (5) members to serve an initial two (2) year term; and six (6) members to serve an initial three (3) year term. Members may be appointed to the THP Governing Board for successive terms. After appointment for an initial term by the sixteen public housing authorities, subsequent appointments or reappointments will be made by the mayor of each city represented in accordance with Chapter 392, Subchapter 3, Section 392.031 of the Local Government Code. One public housing resident of one of the member public housing authorities will be appointed for a three (3) year term. This resident will be appointed in accordance with a selection process to be established by the THP Governing Board. In the event that new members are added under the terms of Article IV hereof, such new members will have a member appointed to the Governing Board by the mayor of the city represented.

This Governing Board shall have policy-making authority for THP and shall be known as the Board of Directors. THP shall operate on a fiscal year that shall begin on April 1 of each calendar year and end on March 31 of the following year. Bonham Housing Authority, acting as the lead agency, is designated to receive HUD program payments on behalf of participating PHAs, to administer HUD requirements for administration of the funds, and to apply the funds in accordance with the consortium agreement and HUD regulations and requirements. All participating PHAs are subject to the joint PHA Plan submitted by the lead agency.

If a member of the Board of Directors resigns, dies, or is absent from three (3) consecutive meetings, the appointing authority may designate a new member to complete the unexpired term of the departing member upon written notice by the President of the Board of Directors.

ARTICLE II

The Board of Directors of THP, by majority vote, shall be responsible for the approval of the expenditure of all funds made available to THP from all sources including, but not limited to, U.S. Department of Housing and Urban Development (HUD) subsidy, rent roll income, interest income, and the sale of fixed assets or surplus equipment. Such expenditure of funds will be made from the depository selected under Article IV, and may be expended upon check or

warrant signed by the Secretary/Treasurer, countersigned by the President, or in the absence or inability of the President to act, the Vice-President. The Board of Directors of THP shall enter into a management contract with Texoma Council of Governments (TCOG) to provide administrative services, property maintenance, and fiscal operations for THP. The scope, nature and compensation for such services shall be mutually agreed upon by the Board of Directors and TCOG.

ARTICLE III

TCOG's Public Housing Director shall prepare and submit to the Board of Directors a standard operating procedural manual. The Public Housing Director shall prepare an annual budget and recommendations to be presented to the Board of Directors for their consideration and approval in accordance with the schedule established by HUD. The approval of the budget by the Board of Directors shall be contingent upon the availability of sufficient funds in the form of HUD subsidy, projected rental income, and operating reserves.

ARTICLE IV

The activities of THP shall be financed by a fund which shall be set up in a depository to be selected by the Board of Directors. Each public housing authority shall, upon execution of this agreement, and selection of the depository by THP, execute such forms and documents so as to 1) authorize HUD to make payment of all subsidy amounts directly to the selected depository, and 2) authorize transfer of existing operating reserve amounts to the selected depository.

The Board of Directors may consider requests from other public housing authorities to be admitted to and become cooperative partners of THP on an equal basis with the participating partners to this agreement. New members shall agree to comply with the provisions of Article IV, paragraph 1, upon acceptance by the Board of Directors.

ARTICLE V

In the event that any of the original sixteen (16) parties to this agreement or any parties subsequently admitted under Article IV desires to disassociate themselves from THP, it shall be necessary for that particular public housing authority to give written notice to the Board of Directors. Such notice of intention to disassociate from THP will be effective at the end of THP's fiscal year during which notice is given provided that at least ninety (90) days remain in the fiscal year. In the event that less than ninety (90) days remain in THP's current fiscal year,

such notice of intention to disassociate from THP will be effective at the end of the succeeding fiscal year. In the event of that one or more public housing authorities give proper notice to the remaining members of their intention to disassociate from THP, the other parties may continue to operate THP. In the event that all of the cooperative public housing authorities jointly agree to dissolve the THP, the assets of THP will be disposed of in a manner designated by the Board of Directors and the net proceeds, after the satisfaction of all indebtedness, will be divided among the cooperative public housing authorities in a manner designated by them. Any party may challenge the manner for disposing of assets provided by a majority of the Board of Directors by submitting to the non-challenging parties three (3) names of individuals acceptable as an arbitrator to the challenging party. The non-challenging parties may select one (1) of the named individuals to arbitrate the manner of disposition. If none of the individuals are acceptable to the non-challenging parties, they shall submit the names of three (3) individuals acceptable as an arbitrator from which the challenging party may select. The alternating submission of names of individuals shall be continued until one (1) mutually acceptable person is selected. The selected arbitrator shall establish the procedures for arbitration of the issue. The decision of the arbitrator will be finding on all parties.

ARTICLE VI

The appointed members serving on the Board of Directors shall meet no less often than annually at a time and place to be determined. The President shall also be authorized to call special meetings in accordance with applicable state laws. A simple majority of fifty-one percent (51%) of the total number of voting members shall constitute a quorum for the transaction of business.

Special meetings called by the President shall be announced in accordance with the Texas Open Meetings Act. The posted notice shall specify the time, place, and subject of the called meeting and business transacted at such called meetings shall be confined to the subjects as stated in such notice.

When a quorum is present at any meeting, the vote of the majority of the voting members shall decide any question brought before the meetings, except that a two-thirds (2/3) affirmative vote of the total number of representatives shall be required to amend the Consortium Agreement.

The President of the Board of Directors shall preside at all meetings. In the absence of the President, the Vice-President shall preside at these meetings. In the absence of both the President and the Vice-President, the Secretary/Treasurer shall preside at these meetings. In the event that any of the aforementioned officers of THP are unable to attend any meeting, the members present at the meeting shall, in a manner deemed acceptable to them, designate a presiding officer from among them, provided that a quorum is present to conduct business.

ARTICLE VII

The officers and duties of THP are as follows:

21. The duties of the President of the Board of Directors shall be:
 1. Preside at meetings of the Board of Directors
 2. Sign official documents
 3. Call special meetings as required and in accordance with provisions of the Open Meetings Act
 4. Recommend committee appointments to include but not be limited to, audit committee, budget committee, nominating committee
 5. The President shall not vote on matters before the Board of Directors except to cast the tie breaking vote in the event of a tie vote
22. The duties of the Vice-President of the Board of Directors shall be to assume the duties of the President in the event the President is absent or otherwise unable to fulfill his or her responsibility.
23. The duties of the Secretary/Treasurer shall be:
 1. Preside at meetings of the Board of Directors in the absence of both the President and Vice-President
 2. Sign official documents

ARTICLE VIII

THP shall have an annual audit made of its financial accounts and transactions during the preceding fiscal year. Such audit shall be made in conformance with applicable laws and regulations.

ARTICLE IX

This Consortium Agreement shall become initially effective upon the date of ratification by the minute order, resolution or other appropriate signification of assent by the parties hereto as shown by a certified copy of said minute order, resolution, or other appropriate signification of assent under the hand of the Chairman of the public housing authority of the initial sixteen (16) cooperative members; or a similar certified copy in the case of any public housing authority becoming a member of THP after the execution of this Consortium Agreement by the parties originally signatories hereto, or any parties subsequently admitted with the participating public housing authorities to this Agreement

This Consortium Agreement may be amended by affirmative letter vote of two-thirds (2/3) of

the total number of members of the Board of Directors, provided that the proposed amendment was discussed and authorized for consideration at a regular or special called meeting of the Board of Directors.

This agreement is effective as of April 1, 2000, or the date of signature below, whichever is later.

PUBLIC HOUSING AUTHORITY OF THE CITY OF BELLS, TEXAS

_____ Date:_____

Subscribed and sworn to before me on this _____ day of _____, 2000.

Notary Public - Signature

PUBLIC HOUSING AUTHORITY OF THE CITY OF BONHAM, TEXAS

_____ Date:_____

Subscribed and sworn to before me on this _____ day of _____, 2000.

Notary Public - Signature

PUBLIC HOUSING AUTHORITY OF THE CITY OF CELESTE, TEXAS

_____ Date:_____

Subscribed and sworn to before me on this _____ day of _____, 2000.

Notary Public - Signature

PUBLIC HOUSING AUTHORITY OF THE CITY OF ECTOR, TEXAS

_____ Date:_____

Subscribed and sworn to before me on this _____ day of _____, 2000.

Notary Public - Signature

PUBLIC HOUSING AUTHORITY OF THE CITY OF FARMERSVILLE, TEXAS

_____ Date:_____

Subscribed and sworn to before me on this _____ day of _____, 2000.

Notary Public - Signature

PUBLIC HOUSING AUTHORITY OF THE CITY OF GUNTER, TEXAS

_____ Date:_____

Subscribed and sworn to before me on this _____ day of _____, 2000.

Notary Public - Signature

PUBLIC HOUSING AUTHORITY OF THE CITY OF HONEY GROVE, TEXAS

_____ Date:_____

Subscribed and sworn to before me on this _____ day of _____, 2000.

Notary Public - Signature

PUBLIC HOUSING AUTHORITY OF THE CITY OF HOWE, TEXAS

_____ Date: _____

Subscribed and sworn to before me on this _____ day of _____, 2000.

Notary Public - Signature

PUBLIC HOUSING AUTHORITY OF THE CITY OF LADONIA, TEXAS

_____ Date: _____

Subscribed and sworn to before me on this _____ day of _____, 2000.

Notary Public - Signature

PUBLIC HOUSING AUTHORITY OF THE CITY OF POTTSBORO, TEXAS

_____ Date: _____

Subscribed and sworn to before me on this _____ day of _____, 2000.

Notary Public - Signature

PUBLIC HOUSING AUTHORITY OF THE CITY OF SAVOY, TEXAS

_____ Date:_____

Subscribed and sworn to before me on this _____ day of _____, 2000.

Notary Public - Signature

PUBLIC HOUSING AUTHORITY OF THE CITY OF TOM BEAN, TEXAS

_____ Date:_____

Subscribed and sworn to before me on this _____ day of _____, 2000.

Notary Public - Signature

PUBLIC HOUSING AUTHORITY OF THE CITY OF TRENTON, TEXAS

_____ Date:_____

Subscribed and sworn to before me on this _____ day of _____, 2000.

Notary Public - Signature

PUBLIC HOUSING AUTHORITY OF THE CITY OF VAN ALSTYNE, TEXAS

_____ Date:_____

Subscribed and sworn to before me on this _____ day of _____, 2000.

Notary Public - Signature

PUBLIC HOUSING AUTHORITY OF THE CITY OF WHITEWRIGHT, TEXAS

_____ Date: _____

Subscribed and sworn to before me on this _____ day of _____, 2000.

Notary Public - Signature

PUBLIC HOUSING AUTHORITY OF THE CITY OF WINDOM, TEXAS

_____ Date: _____

Subscribed and sworn to before me on this _____ day of _____, 2000.

Notary Public - Signature

FIVE YEAR PLAN PROGRESS STATEMENT

This narrative represents an overview of the progress made during FYE 2000.

Great strides have been made during the past year. The greatest being the initiation of the Texoma Housing Partners Consortium. There are sixteen PHAs participating in the consortium ranging in size from 6 to 104 units for a total of 460. The combined management has generated significant benefits

including greater operational flexibility, management control and fiscal accountability. The programs provided through the Drug Elimination Grants continue to be successful. Training programs such as the Certified Nurses Aide Training have enabled residents to become gainfully employed. The security at the Ladonia Housing Authority property has continued to provide residents with a safe environment. Planned improvements were initiated during 2000 such as the installation of central air-conditioning, central heating, tile replacement, roofing and foundation repairs.

MEMBERSHIP OF THE RESIDENT ADVISORY BOARD

The following represents the membership of the Resident Advisory Board:

Harold Brown
Terry Philips
Evelyn Miller
Jennifer Wilson
Bernice Orozco
Edna Chesser
Emily Hensen
Tammy Mueller

6C- Criteria for Substantial Deviation and Significant Amendments

- A. Substantial Deviation from the 5-year Plan:
- C Any change to Mission Statement such as:
- C 50% deletion from or addition to the goals and objectives as a whole.

- C 50% or more decrease in the quantifiable measurement of any individual goal or objective
- B. Significant Deviation or Modification to the Annual Plan;
 - C 50% variance in the funds projected in the Capital Fund Program Annual Statement
 - C Any increase or decrease over 50% in the funds projected in the Financial Resource Statement and /or the Capital Fund Program Annual Statement
 - C Any change in a policy or procedure that requires a regulatory 30-day posting.
 - C Any submission to HUD that requires a separate notification to residents, such as HOPE VI, Public Housing Conversion, Demolition/Disposition, Designated Housing or Homeownership programs.
 - C Any change inconsistent with the local, approved Consolidated Plan.

6B4

The consolidated Plan supports the PHA Plan with the following actions and commitments:

- A. Promote adequate affordable housing
- B. Promote economic opportunity
- C. Promote a suitable living environment without discrimination

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 Cost |
|----------|---|----------------------|
| 1 | Total Non-CGP Funds | |
| 2 | 1406 Operations | \$164,746.00 |
| 3 | 1408 Management Improvements | |
| 4 | 1410 Administration | |
| 5 | 1411 Audit | |
| 6 | 1415 Liquidated Damages | |
| 7 | 1430 Fees and Costs | \$56,763.00 |
| 8 | 1440 Site Acquisition | |
| 9 | 1450 Site Improvement | \$21,496.00 |
| 10 | 1460 Dwelling Structures | \$465,740.00 |
| 11 | 1465.1 Dwelling Equipment-Nonexpendable | \$45,000.00 |
| 12 | 1470 Nondwelling Structures | |
| 13 | 1475 Nondwelling Equipment | \$70,000.00 |
| 14 | 1485 Demolition | |
| 15 | 1490 Replacement Reserve | |
| 16 | 1492 Moving to Work Demonstration | |
| 17 | 1495.1 Relocation Costs | |
| 18 | 1498 Mod Used for Development | |
| 19 | 1502 Contingency | |
| 20 | Amount of Annual Grant (Sum of lines 2-19) | \$823,745.00 |
| 21 | Amount of line 20 Related to LBP Activities | |
| 22 | Amount of line 20 Related to Section 504 Compliance | |
| 23 | Amount of line 20 Related to Security | |
| 24 | Amount of line 20 Related to Energy Conservation Measures | |

Annual Statement

Capital Fund Program (CFP) Part II: Supporting Table

| Development Number/Name | General Description of Major Work Categories | Development Account | Total Estimated |
|-------------------------|--|---------------------|-----------------|
|-------------------------|--|---------------------|-----------------|

| | | | |
|----------|--|------|--------------|
| TX038-HA | Operations | 1406 | \$164,746.00 |
| | Purchase of (1) van and (2) trucks | 1475 | \$70,000.00 |
| | Purchase 48 stoves | 1465 | \$45,000.00 |
| | Purchase 48 refrigerators | | |
| | Purchase 48 hot water heaters | | |
| | Architect Fee and Inspector Fee | 1430 | \$56,763.00 |
| | Exterior paint, foundation repairs | 1450 | \$21,496.00 |
| | Installation of Central air conditioning | 1460 | \$465,740.00 |

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

| Development Number/Name | All Funds Obligated (Quarter Ending Date) | All Funds Expended (Quarter Ending Date) |
|----------------------------|--|---|
| TX038-HA | 9/30/03 | 9/30/04 |

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. **Note- The following table represents the planned work for all housing authorities participating in the consortium. The development number is that of the lead agency- Bonham. The number of vacancies is across the sixteen cities.** (Vacancies to be defined as those units that are available for occupancy, not to include those under capital improvement)

| Optional 5-Year Action Plan Tables | | | |
|------------------------------------|---|---------------------|----------------------------|
| Development Number | Development Name (or indicate PHA wide) | Number Vacant Units | % Vacancies in Development |
| TX038 | Texoma Housing Partners | 50 | 11% |

| Description of Needed Physical Improvements or Management Improvements | Estimated Cost | Planned Start Date (HA Fiscal Year) |
|--|-------------------|--|
|--|-------------------|--|

HUD 50075

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

| | | |
|---|--------------------------------------|---------|
| Installation of Central A/C- continuance | \$164,746.00 | 4/01/02 |
| Operation costs- 1406 | Operation costs- 1406 | 4/01/02 |
| Architect Fees, inspector fees- 1430 | Architect Fees, inspector fees- 1430 | 4/01/03 |
| Installation of Central A/C- continuance | Architect Fees, inspector fees- 1430 | 4/01/03 |
| Operation costs- 1406 | \$56,763.00 | 4/01/03 |
| Architect fees, inspector fees- 1430 | \$602,236.00 | 4/01/04 |
| Remodel interior of units including but not limited to: tile replacement, mini blinds, ceiling fans, bathroom and kitchen fixtures, kitchen cabinets and counter tops, windows, screens, interior, exterior doors, lighting fixtures, carpet for Elderly sites.- 1460 | \$164,746.00 | 4/01/04 |
| | \$56,763.00 | 4/01/04 |
| | \$602,236.00 | |
| Operation costs- 1406 | \$164,746.00 | |
| Architect fees, inspector fees- 1430 | \$56,763.00 | 4/01/05 |
| Exterior repairs including but not limited to: roof replacements, foundation repairs, sidewalk replacements, landscaping.- 1450 | \$602,236.00 | 4/01/05 |
| | | 4/01/05 |
| | \$164,746.00 | |
| | \$56,763.00 | |
| | \$602,236.00 | |
| Total estimated cost over next 5 years | \$4,118,725. | |

HUD 50075

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

Optional Public Housing Asset Management Table

See Technical Guidance for instructions on the use of this table, including information to be provided.

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