

# PHA Plans

5 Year Plan for Fiscal Years 2000 - 2004 (REVISED)

Annual Plan for Fiscal Year 2002 (REVISED \*)

\*Only the FY 2002 Capital Fund Program Tables have been revised to reflect actual allocation.

Version 3 Submission Includes Other Changes Per 6/13/02 Letter From Birmingham HUD Office.

**NOTE: THIS PHA PLAN TEMPLATE ( HUD50075) IS TO BE COMPLETED IN  
ACCORDANCE WITH INSTRUCTIONS LOCATED IN APPLICABLE PIH NOTICES**

## PHA Plan Agency Identification

**PHAName:** SylacaugaHousingAuthority

**PHANumber:** AL057

**PHAFiscalYearBeginning:(mm/yyyy)** July1,2002

### 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**  
**PHAF ISCAL YEARS 2000 –2004( REVISED)**  
[24CFRPart903.5]

**A.Mission**

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

- The mission of the PHA is the same as that of the Department of Housing and Urban Development: To promote adequate and affordable housing, economic opportunity and a suitable living environment free from discrimination.
- The PHA's mission is: The Mission Statement of the Sylacauga Housing Authority is contained on page 1 of the Admissions and Occupancy Policy (adopted April 11, 2001), as follows:

“Our goal is to provide drug free, decent, safe, and sanitary housing for eligible families and to provide opportunities and promote self-sufficiency and economic independence for residents.”

**B.Goals**

The goals and objectives listed below are derived from HUD's strategic Goals and Objectives and those emphasized in recent legislation. PHA 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 EN COURAGED TO IDENTIFY QUANTIFIABLE MEASURES OF SUCCESS IN REACHING THEIR OBJECTIVES OVER THE COURSE OF THE 5 YEARS.** (Quantifiable measures would include target sets such as: numbers of families served or PHA scores achieved.) PHA should identify these measures in the space 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:
  - Reduce public housing vacancies:
  - Leverage private or other public funds to create additional housing opportunities:
  - Acquire or build units or developments
  - Other (list below)
- PHA Goal: Improve the quality of assisted housing

Objectives:

- Improve public housing management: ( PHAS score)
- Improve voucher management: (SEMAP score)
- Increase customer satisfaction:
- Concentrate on effortsto improve specific management functions:  
(list; e.g., public housing finance; voucher unit inspections)
- Renovate or modernize public housing units:
- Demolish or dispose of obsolete public housing:
- Provide replacement public housing:
- Provide replacement vouchers:
- Other: (list below)

PHA Goal: Increase assisted housing choices

Objectives:

- Provide voucher mobility counseling:
- Conduct outreach effortsto potential voucher landlords
- Increase voucher payment standards
- Implement voucher homeownership program:
- Implement public housing or other homeownership programs:
- Implement public housing site -based waiting lists:
- Convert public housing to vouchers:
- Other: (list below)

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

PHA Goal: Provide an improved living environment

Objectives:

- Implement measures to deconcentrate poverty by bringing higher income public housing households into lower income developments:
- Implement measures to promote income mixing in public housing by assuring access for lower income families into higher income developments:
- Implement public housing security improvements:
- Designate developments or buildings for particular resident groups (elderly, persons with disabilities)
- Other: (list below)

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

PHA Goal: Promote self -sufficiency and asset development of assisted households

Objectives:

- Increase the number and percentage of employed persons in assisted families:
- Provide or attract supportive services to improve assistancerecipients' employability:
- Provide or attract supportive services to increase independence for the elderly or families with disabilities.
- Other:(listbelow)

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

- PHA Goal: Ensure equal opportunity and affirmatively further fair housing

Objectives:

- Undertake affirmative measures to ensure access to assisted housing regardless of race, color, religion, national origin, sex, familial status, and disability:
- Undertake affirmative measures to provide a suitable living environment for families living in assisted housing, regardless of race, color, religion, national origin, sex, familial status, and disability:
- Undertake affirmative measures to ensure accessible housing to persons with all varieties of disabilities regardless of unit size required:
- Other:(listbelow)

**Other PHA Goals and Objectives:(listbelow)**

**AnnualPHAPlan  
PHAFiscalYear2002**  
[24CFRPart903.7]

**i. AnnualPlanType:**

SelectwhichtypeofAnnualPlanthePHAwillsubmit.

**StandardPlan**

**StreamlinedPlan:**

- HighPerformingPHA**
- SmallAgency(<2 50PublicHousingUnits)**
- AdministeringSection8Only**

**TroubledAgencyPlan**

**ii. ExecutiveSummaryoftheAnnualPHAPlan**

[24CFRPart903.79(r)]

ProvideabriefoverviewoftheinformationintheAnnualPlan,includinghighlightsofmajorinitiativesanddiscretionarypoliciessthePHAhasincludedintheAnnualPlan.

**Duringthepastyear,theSHAhasworkedtoimplementitsAnnualPlanandto determinethesuccessofitsimplementation.Overthepastyear(since development oftheFY2001Plan),theSHAhasadopted1)anewCollectionPolicy[VER10/01], 2)GarbageLitterPolicy(VER01/01),3)Security&FirePreventionPolicy[VER 10/01],4)PestControlPolicy[VER10/01],5)SmokeDetectorPolicy[VER10/01], andhavediscontinuedenforcementofitsCommunityServicePolicyasof1/1/02. TheResidentAdvisoryBoardhasbeeninvolvedwiththedevelopmentandupdate ofthecurrentannualplanfor2002.Inaddition,theHAhascloselymonitored changestotheAgency Planrequirementsensurethatthecurrentreporting formatisfollowedandallrequiredpoliciesareinplace.**

**iii. AnnualPlanTableofContents**

[24CFRPart903.79(r)]

ProvideatableofcontentsfortheAnnualPlan ,includingattachments,andalistofsupportingdocuments availableforpublicinspection .

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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 filename in parentheses in the space to the right of the title.

**Required Attachments:**

- Admissions Policy for Deconcentration – See Section 18D “Other Information Required by HUD” and Attachment F
- FY 2002 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)

**Optional Attachments:**

- PHA Management Organizational Chart
- FY 2001 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) See Attachment M
- Other (List below, providing each attachment name) **See below**  
Resident Advisory Board and Comments at Attachment M.

**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.

<b>List of Supporting Documents Available for Review</b>		
<b>Applicable &amp; On Display</b>	<b>Supporting Document</b>	<b>Applicable Plan Component</b>
Attachment L	PHA Plan Certifications of Compliance with the PHA Plans and Related Regulations	5 Year and Annual Plans
Attachment L	State/Local Government Certification of Consistency with the Consolidated Plan	5 Year and Annual Plans

<b>List of Supporting Documents Available for Review</b>		
<b>Applicable &amp; On Display</b>	<b>Supporting Document</b>	<b>Applicable Plan Component</b>
See Attachment G	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 jurisdiction to implement any of the jurisdictions' initiatives to affirmatively further fair housing that require the PHA's involvement.	5 Year and Annual Plans
Attachment I	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
Attachment O	Most recent board -approved operating budget for the public housing program	Annual Plan: Financial Resources;
Attachment F	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
Sect 8 New Attachment Q	Section 8 Administrative Plan	Annual Plan: Eligibility, Selection, and Admissions Policies
Attachment C	Public Housing Deconcentration and Income Mixing Documentation: 1. PHA board certification 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 2. Documentation of the required deconcentration and income mixing analysis	Annual Plan: Eligibility, Selection, and Admissions Policies
Attachment F	Public housing rent determination policies, including the methodology for setting public housing flat rents <input checked="" type="checkbox"/> check here if included in the public housing A&O Policy	Annual Plan: Rent Determination
Under Development	Schedule of flat rents offered at each public housing development <input type="checkbox"/> check here if included in the public housing A&O Policy	Annual Plan: Rent Determination
Sect 8 New Attachment Q	Section 8 rent determination (payment standard) policies <input type="checkbox"/> check here if included in Section 8 Administrative Plan	Annual Plan: Rent Determination
	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
Attachment F&R	Public housing grievance procedures <input checked="" type="checkbox"/> check here if included in the public housing A&O Policy	Annual Plan: Grievance Procedures
	Section 8 informal review and hearing procedures <input type="checkbox"/> check here if included in Section 8 Administrative Plan	Annual Plan: Grievance Procedures
Attachment A	The HUD -approved Capital Fund/Comprehensive Grant Program Annual Statement (HUD 52837) for active grant year	Annual Plan: Capital Needs



<b>List of Supporting Documents Available for Review</b>		
<b>Applicable &amp; On Display</b>	<b>Supporting Document</b>	<b>Applicable Plan Component</b>
	Most recent CIAP Budget/Progress Report (HUD 52825) for any active CIAP grant	Annual Plan: Capital Needs
Attachment B	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 HOPEVI application, if more recent, approved or submitted HOPEVI 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 <input type="checkbox"/> check here if included in the Section 8 Administrative Plan	Annual Plan: Homeownership
Attachment K	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
Attachment J	The most recent Public Housing Drug Elimination Program (PHDEP) semi-annual performance report for any open grant and most recently submitted PHDEP application (PHDEP Plan)	Annual Plan: Safety and Crime Prevention
Attachment P	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)

## **1. Statement of Housing Needs**

[24CFR Part 903.79(a)]

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

Based upon the information contained in the Consolidated Plan/s applicable to the jurisdiction, and/or other data available to the PHA, provide a statement of the housing needs in the jurisdiction by completing the following table. In the "Overall" Needs column, provide the estimated number of renter families that have housing needs. For the remaining characteristics, rate the impact of that 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.

<b>Housing Needs of Families in the Jurisdiction by Family Type</b>							
Family Type	Overall	Afford- ability	Supply	Quality	Access- ibility	Size	Loca- tion
Income <= 30% of AMI	1,309	5	2	2	3	3	3
Income > 30% but <= 50% of AMI	685	5	2	2	3	3	3
Income > 50% but < 80% of AMI	410	5	2	2	3	3	3
Elderly	563	4	3	3	4	2	3
Families with Disabilities	No Info						
Black	1,246	5	2	2	3	3	3
Hispanic	8	5	2	2	3	3	3
Race/Ethnicity							
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: 2000
- U.S. Census data: the Comprehensive Housing Affordability Strategy ("CHAS") dataset
- American Housing Survey data  
Indicate year:
- Other housing market study  
Indicate year:
- Other sources: City of Sylacauga Community Analysis of Impediments/Problems to Fair Housing Choice

▪ **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.** PHA 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)			
<input type="checkbox"/> Section 8 tenant -based assistance			
<input checked="" type="checkbox"/> Public Housing			
<input type="checkbox"/> Combined Section 8 and Public Housing			
<input type="checkbox"/> Public Housing Site -Based or sub -jurisdictional waiting list (optional)			
If used, identify which development/subjurisdiction:			
	# of families	% of total families	Annual Turnover
Waiting list total	70		122
Extremely low income <= 30% AMI	66	94.3	
Very low income (>30% but <=50% AMI)	3	4.3	
Low income (>50% but <80% AMI)	1	1.4	
Families with children	44	62.9	
Elderly families	9	12.9	
Families with Disabilities	15	21.4	
White	30	42.9	
Black	40	57.1	
Race/ethnicity			
Race/ethnicity			
Characteristics by Bedroom Size (Public Housing Only)			
1BR	27	38.6	
2BR	36	51.4	
3BR	7	10	
4BR	0	0	
5BR	0	0	
5+BR	0	0	
Is the waiting list closed (select one)? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
If yes:			
How long has it been closed (# of months)?			
Does the PHA expect to reopen the list in the PHA Plan year? <input type="checkbox"/> No <input type="checkbox"/> Yes			
Does the PHA permit specific categories of families on the waiting list, even if generally closed? <input type="checkbox"/> No <input type="checkbox"/> Yes			

## C.StrategyforAddressingNeeds

ProvideabriefdescriptionofthePHA'sstrategyforaddressingthehousingneedsoffamiliesinthe jurisdictionandonthewaiting list **INTHEUPCOMINGYEAR** ,andtheAgency'sreasonsforchoosing thisstrategy.

### (1)Strategies

#### **Need:Shortageofaffordablehousingforalleligiblepopulations**

#### **Strategy1.MaximizethenumberofaffordableunitsavailabletothePHAwithin itscurrentresourcesby:**

Selectallthatapply

- Employeffectivemaintenanceandmanagementpoliciestominimizethenumber ofpublichousingunitsoff -line
- Reduceturnovertimeforvacatedpublichousingunits
- Reducetimetorenovatepublichousingunits
- Seekreplacementofpublichousingunitslosttotheinventorythroughmixed financedevelopment
- Seekreplacementofpublichousingunitslosttotheinventorythroughsection8 replacementhousingresources
- Maintainorincreasesection8lease -upratesbyestablishingpaymentstandards thatwillenablefamieliestorentthroughoutthejurisdiction
- Undertakemeasurestoensureaccesstoaf fordablehousingamongfamilies assistedbythePHA,regardlessounitsizerequired
- Maintainorincreasesection8lease -upratesbymarketingtheprogramtoowners, particularlythoseoutsideofareasofminorityandpovertyconcentration
- Maintainorincreasesection8lease -upratesbyeffectivelyscreeningSection8 applicantstoincreaseowneracceptanceofprogram
- ParticipateintheConsolidatedPlandevelopmentprocesstoensurecoordination withbroadercommunitystrategies
- Other(listbelow)

#### **Strategy2:Increasethenumberofaffordablehousingunitsby:**

Selectallthatapply

- Applyforadditionalsection8unitsshouldtheybecomeavailable
- Leverageaffordablehousingresourcesinthecommunitythroughthecreation ofmixed -financehousing
- PursuehousingresourcesotherthanpublichousingorSection8tenant -based assistance.
- Other:(listbelow)

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

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

Select all that apply

- Exceed HUD federal targeting requirements for families at or below 30% of AMI in public housing
- Exceed HUD federal targeting requirements for families at or below 30% of AMI in tenant-based section 8 assistance
- Employ admissions preferences aimed at families with economic hardships
- Adopt rent policies to support and encourage work
- Other: (list below)

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

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

Select all that apply

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

**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 voucher 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 voucher targeted to families with disabilities, should they become available
- Affirmatively market to local non-profit agencies that assist families with disabilities
- Other: (list below)

**Need: Specific Family Types: Races or ethnicities with disproportionate housing needs**

**Strategy 1: Increase awareness of PHA resources among families of races and ethnicities with disproportionate needs:**

Select if applicable

- Affirmatively market to races/ethnicities shown to have disproportionate housing needs
- Other: (list below)

**Strategy 2: Conduct activities to affirmatively further fair housing**

Select all that apply

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

**Other Housing Needs & Strategies: (list needs and strategies below)**

**(2) Reasons for Selecting Strategies**

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

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

**2. Statement of Financial Resources**

[24CFR Part 903.79(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 support services, Section 8 tenant-based assistance, Section 8 support services or other.

<b>Financial Resources: Planned Sources and Uses</b>		
<b>Sources</b>	<b>Planned \$</b>	<b>Planned Uses</b>
<b>1. Federal Grants (FY 2002 grants)</b>		
a) Public Housing Operating Fund	821,457	
b) Public Housing Capital Fund	943,644	
c) HOPEVI Revitalization		
d) HOPEVI Demolition		
e) Annual Contributions for Section 8 Tenant -Based Assistance		
f) Public Housing Drug Elimination Program (including any Technical Assistance funds)	0	
g) Resident Opportunity and Self - Sufficiency Grants		
h) Community Development Block Grant		
i) HOME		
Other Federal Grants (list below)		
<b>2. Prior Year Federal Grants (unobligated funds only) (list below)</b>		
<b>3. Public Housing Dwelling Rental Income</b>	978,420	Maintenance & Operations
<b>4. Other income (list below)</b>		
Excess Utilities	40,000	Utility Costs
Interest On Investments/Other	16,210	Maintenance & Operations
<b>4. Non -federal sources (list below)</b>		
<b>Total resources</b>	<b>2,799,731</b>	

### **3.PHAPoliciesGoverningEligibility,Selection,andAdmissions**

[24CFRPart903.79(c)]

#### **A.PublicHousing**

Exemptions:PHAsthatdonotadministerpublichousingarenotrequiredto completesubcomponent3A.

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

a. WhendoesthePHAverifyeligibilityforadmissiontopublichousing?(selectallthat apply)

- Whenfamiliesarewithinacertainnumberofbeingofferedaunit:(statenumber)
- Whenfamiliesarewithinacertaintimeofbeingofferedaunit:(statetime)
- Other:

##### **AssoonasallinformationisprovidedtoSHAManagement**

b. Whichnon -income(screening)factorsdoesthePHAusetoestablisheligibilityfor admissiontopublichousing(selectallthat apply)?

- CriminalorDrug -relatedactivity
- Rentalhistory
- Housekeeping
- Other(describe)

c.  Yes  No:DoesthePHArequestcriminalrecordsfromlocallawenforcement agenciesforscreeningpurposes?

d.  Yes  No:DoesthePHArequestcriminalrecordsfromStatelawenforcement agenciesforscreeningpurposes?

e.  Yes  No:Does thePHAaccessFBIcriminalrecordsfromtheFBIfor screeningpurposes?(eitherdirectlyorthroughanNCIC - authorizedsource)

**CurrentlyintheprocessofestablishingasystemtoprovideNCICchecksthrough theSylacaugaPoliceDepartment.**

##### **(2)WaitingListOrganization**

a. WhichmethodsdoesthePHAplantousetoorganizeit'spublichousingwaitinglist (selectallthatapply)

- Community-widelist
- Sub-jurisdictionallists
- Site-basedwaitinglists
- Other(describe)

b. Wheremayinterestedpersonsapplyforadmissiontopublichousing?

- PHAmainadministrativeoffice
- PHAdevelopmentssitemanagementoffice
- Other(listbelow)



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

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

2.  Yes  No: Are any or all of the PHA's site-based waiting lists new for the upcoming year (that is, they are not part of a previously HUD-approved site-based waiting list plan)? If yes, how many lists?

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

4. Where can interested persons obtain more information about and sign up to be on the site-based waiting lists (select all that apply)?

- PHA main administrative office
- All PHA development management offices
- Management offices at developments with site-based waiting lists
- At the development to which they would like to apply
- Other (list below)

**(3) Assignment**

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

- One
- Two
- Three or More

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

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

**(4) Admissions Preferences**

a. Income targeting:

Yes  No: Does the PHA plan to exceed the federal targeting requirements by targeting more than 40% of all new admission to public housing to families at or below 30% of median area income?

b. Transfer policies:

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

- Emergencies
- Overhoused
- Underhoused
- Medical justification

- Administrativereasons determined by the PHA (e.g., to permit modernization work)
- Resident choice: (state circumstances below)
- Other: (list below)

c. Preferences

1.  Yes  No: Has the PHA established preferences for admission to public housing (other than date and time of application)? (If "no" is selected, skip to subsection (5) **Occupancy** )
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 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 points system), place the same number next to each. That means you can use "1" more than once, "2" more than once, etc.

Date and Time

Former Federal preferences:

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

Other preferences (select all that apply)

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

4. Relationship of preferences to income targeting requirements:

- The PHA applies preferences within income tiers
- Not applicable: the pool of applicant families ensure that the PHA will meet income targeting requirements

**(5) Occupancy**

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

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

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

- At an annual reexamination and lease renewal
- Anytime family composition changes
- At family request for revision
- Other

**Anytime family income changes except for a cost of living adjustment.**

**(6) Deconcentration and Income Mixing – Template Questions Have Been Changed.  
See Attachment C of bound copy for new questions and responses.**

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

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

c. If the answer to b was yes, what changes were adopted? (select all that apply)

- Adoption of site based waiting lists  
If selected, list targeted developments below:
- Employing waiting list "skipping" to achieve deconcentration of poverty or income mixing goals at targeted developments  
If selected, list targeted developments below:
- Employing new admission preferences at targeted developments  
If selected, list targeted developments below:
- Other (list policies and development targeted below)

d.  Yes  No: Did the PHA adopt any changes to **other** policies based on the results of the required analysis of the need for deconcentration of poverty and income mixing?

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

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

- 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).**

**N/A –Section 8 New Construction Only**

**(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. Incometargeting

Yes  No: DoesthePHAplantoexceedthefederaltargetingrequirementsby targetingmorethan75%ofallnewadmissionstothesection8 programtofamiliesatorbelow30%ofmedianareaincome?

b. Preferences

1.  Yes  No: HasthePHAestablishedpreferencesforadmissionto section8 tenant-basedassistance?(otherthandateandtimeofapplication) (ifno,skiptosubcomponent **(5)Specialpurpose section8 assistance programs** )

2. WhichofthefollowingadmissionpreferencesdoesthePHAplantoemployinthe comingyear?(selectallthatapplyfromeitherformerFederalpreferencesorother preferences)

FormerFederalpreferences

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

Otherpreferences(selectallthatapply)

- Workingfamiliesandthoseunabletoworkbecauseofageordisability
- Veteransandveterans’ families
- Residentsholiveand/orworkinyourjurisdiction
- Thoseenrolledcurrentlyineducational, training, orupward mobilityprograms
- Householdsthatcontribute tomeetingincomegoals(broadrangeofincomes)
- Householdsthatcontribute tomeetingincomerequirements(targeting)
- Thosepreviouslyenrolledineducational, training, orupwardmobilityprograms
- Victimsofreprisalsorhatecrimes
- Otherpreference(s)(listbelow)

3. IfthePHAwillemployadmissionspreferences, pleaseprioritizebyplacinga“1” inthespacethat representsyourfirstpriority, a“2”intheboxrepresentingyour secondpriority, andsoon. Ifyougiveequalweighttooneormoreofthese choices(eitherthroughanabsolutehierarchyorthroughapoints system), placethe samenumbertoeach. Thatmeansyoucanuse“1”morethanonce, “2” more thanonce, etc.

DateandTime

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 the 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 preference to income targeting requirements: (select one)

- The PHA applies preference 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 admission 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)

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

- Through published notices
- Other (list below)

## 4.PHA Rent Determination Policies

[24CFR Part 903.79(d)]

### **A. Public Housing**

Exemptions: PHA 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---

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

b. Minimum Rent

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

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

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

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

**The SHA shall immediately grant an exemption from application of the minimum monthly rent to any family making a proper request in writing who is unable to pay because of financial hardship, which shall include:**

- The family has lost eligibility for, or is awaiting an eligibility determination from a federal, state, or local assistance program, including a family that includes a member who is an alien lawfully admitted for permanent residence under the Immigration and Nationalization Act who would be entitled to public benefits but for Title IV of the Personal Responsibility and Work Opportunity Reconciliation Act of 1996.**



- **The family would be evicted as a result of the implementation of the minimum rent (this exemption is only applicable for the initial implementation of a minimum rent or increase to the existing minimum rent).**
- **The income of the family has decreased because of changed circumstance, including loss of employment.**
- **A death in the family has occurred which affects the family circumstances.**
- **Other circumstances which may be decided by the LHA on a case -by case basis.**

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

1.  Yes  No: Does the PHA plan to charge rents at a fixed amount or percentage less than 30% of adjusted income?

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

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

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

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

- For household heads
- For other family members
- For transportation expenses
- For the non-reimbursed medical expenses of non-disabled or non-elderly families
- Other (describe below)

e. Ceiling rents

1. Do you have ceiling rents? (rents set at a level lower than 30% of adjusted income) (select one)

- Yes for all developments
- Yes but only for some developments
- No

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

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

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

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

f. Rent re-determinations:

1. Between income re-examinations, 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
- Anytime the family experiences an income increase
- Anytime a family experiences an income increase above a threshold amount or percentage: (if selected, specify threshold) \_\_\_\_\_
- Other (list below)

**Families will be re-examined during the 12-month Annual Re-exam cycle where there has been a substantial change in family circumstance: (1) Loss of income; (2) Increase of 10% or more in total family income; (3) Change in head of household or family composition; (4) To correct errors in previous re-exams; (5) Families will be re-examined where there is a showing of probable cause indicating the Annual re-exam may have been fraudulent, or a change of circumstances has occurred and has not been reported; (6) families will be re-examined based upon Annual re-exams schedule for the project where they reside regardless of the date of their previous re-exam or interim re-exam; (7) Special/Interim Re-Exam may be conducted on a monthly basis where: (a) the tenant reports no income; (b) the tenant's income is so unstable that an annual projection of anticipated income cannot be made at the time of the Annual re-exam. The Tenant will be notified of the Special/Interim Re-Exam date. Tenants failing to comply with the scheduled re-exam appointments or provide required information will be determined ineligible for continued occupancy in public housing and be required to vacate. A permanent rent will be entered at the earliest possible date.**

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

## **(2) Flat Rents**

1. In setting the market -based flat rents, what sources of information did the PHA use to establish comparability? (select all that apply.)

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

**A market study to determine flat rents for all developments of the SHA is currently underway. Anticipated completion date is October, 2002.**

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

Exemptions: PHA 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).**

## **Section 8 New Construction Only**

### **(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 repayment 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**

[24CFR Part 903.79(e)]

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

**A. PHA Management Structure**

Describe the PHA's management structure and organization.

(select one)

- An organization chart showing the PHA's management structure and organization is attached. **See Attachment E.**
- 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	622	122
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)

- 1) Pet Rules
- 2) Collection Policy
- 3) Housekeeping Policy
- 4) Lawn Care/Grass Cutting Policy
- 5) Garbage/Litter Policy
- 6) Security & Fire Prevention Policy
- 7) Pest Control Policy
- 8) Notice of Intent to Vacate Policy
- 9) Parking Violation Policy
- 10) Repayment Agreement Policy
- 11) Smoke Detector Policy
- 12) Solicitation Policy
- 13) Tenant Purchased Utilities Policy
- 14) Alteration to Premises Policy
- 15) Minimum Rent Change
- 16) Community Service Policy

(2) Section 8 Management: (list below)

**6. PHA Grievance Procedures**

[24CFR Part 903.79(f)]

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

**Current grievance procedure is located at Attachment R and has been included as an electronic attachment.**

▪ **Public Housing**

1.  Yes  No: Has the PHA established any written grievance procedures in addition to federal requirements found at 24CFR Part 966, Subpart B, for residents of public housing?

If yes, list addition to federal requirements below:

2. Which PHA offices should residents or applicants to public housing contact to initiate the PHA grievance process? (select all that apply)

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

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

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 24CFR 982?

If yes, list addition to federal requirements below:

2. Which PHA offices 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**

[24CFR Part 903.79(g)]

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

**A. Capital Fund Activities**

Exemptions from sub -component 7A: PHA 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) Attachment A

-or-

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

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

Capital Fund Grant Number AL09P05750102 FFY of Grant Approval: (2002) \_\_\_\_\_

Original Annual Statement – Also see electronic file at end of template at Attachment A.

Line No.	Summary by Development Account	Total Estimated Cost
1	Total Non -CGP Funds	
2	1406 Operations	
3	1408 Management Improvements	
4	1410 Administration	
5	1411 Audit	
6	1415 Liquidated Damages	
7	1430 Fees and Costs	
8	1440 Site Acquisition	
9	1450 Site Improvement	
10	1460 Dwelling Structures	
11	1465.1 Dwelling Equipment -Nonexpendable	
12	1470 Nondwelling Structures	
13	1475 Nondwelling Equipment	
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	<b>Amount of Annual Grant (Sum of lines 2 -19)</b>	
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	

**AnnualStatement  
CapitalFundProgram(CFP)PartII:SupportingTable**

Development Number/Name HA-WideActivities	GeneralDescriptionofMajorWork Categories	Development Account Number	Total Estimated Cost

**AnnualStatement  
CapitalFundProgram(CFP)PartIII:ImplementationSchedule**

Development Number/Name HA-WideActivities	AllFundsObligated (QuarterEndingDate)	AllFundsExpended (QuarterEndingDate)



**(2)Optional5 -YearActionPlan**

Agenciesareencouragedtoincludea5 -YearActionPla ncoveringcapitalworkitems.Thisstatementcan becompletedbyusingthe5YearActionPlantableprovidedinthetablelibraryattheendofthePHAPlan template **OR**bycompletingandattachingaproperlyupdatedHUD -52834.

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

**Nolongeroptional.SeeAttachmentB.**

b.If yestoquestiona,selectone:

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

-or-

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

**HOPEVI and Public Housing Development and Replacement Activities (Non-Capital Fund)**

**Not Applicable**

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

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

1. Development name:

2. Development (project) number:

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

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

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

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

Yes  No: Will the PHA be conducting any other public housing development or replacement activities not discussed in the Capital Fund Program Annual Statement? If yes, list developments or activities below:

## **8. Demolition and Disposition**

[24CFR Part 903.79(h)]

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

### **Not Applicable**

1.  Yes  No: Does the PHA plan to conduct any demolition or disposition activities (pursuant to section 18 of the U.S. Housing Act of 1937 (42 U.S.C. 1437p)) in the plan Fiscal Year? (If "No", skip to component 9; if "yes", complete one activity description for each development.)

#### 2. Activity Description

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

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

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

[24CFR Part 903.7 9(i)]

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

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

2. Activity Description

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

<b>Designation of Public Housing Activity Description</b>	
1a. Development name: Sylcauga Housing Authority	
1b. Development (project) number: 57 -2; 57 -3; 57 -8; & 57 -9 (entire development) 57-4; 57 -5; 57 -6 (partial)	
2. Designation type:	
Occupancy by only the elderly	<input checked="" type="checkbox"/>
Occupancy by families with disabilities	<input type="checkbox"/>
Occupancy by only elderly families and families with disabilities	<input type="checkbox"/>
3. Application status (select one)	
Approved; included in the PHA's Designation Plan	<input checked="" type="checkbox"/>
Submitted, pending approval	<input type="checkbox"/>
Planned application	<input type="checkbox"/>
4. Date this designation approved, submitted, or planned for submission: <u>(In Place)</u>	
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?	
6. Number of units affected: 352	
7. Coverage of action (select one) <b>See above list.</b>	
<input type="checkbox"/> Part of the development	
<input type="checkbox"/> Total development	

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

[24CFR Part 903.79(j)]

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

### **A. Assessment of Reasonable Revitalization Pursuant to section 202 of the HUD FY1996 HUD Appropriation s Act**

1.  Yes  No: Have any of the PHA's developments or portions of developments been identified by HUD or the PHA as covered under section 202 of the HUD FY 1996 HUD Appropriations Act? (If "No", skip to component 11; if "yes", complete one activity description for each identified development, unless eligible to complete a streamlined submission. PHAs completing streamlined submissions may skip to component 11.)

#### 2. Activity Description

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

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

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

[24CFR Part 903.79(k)]

**A. Public Housing**

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

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

2. Activity Description

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

<b>Public Housing Homeownership Activity Description (Complete one for each development affected)</b>
1a. Development name: 1b. Development (project) number:
2. Federal Program authority: <input type="checkbox"/> HOPEI <input type="checkbox"/> 5(h) <input type="checkbox"/> Turnkey III <input type="checkbox"/> Section 32 of the USHA of 1937 (effective 10/1/99)
3. Application status: (select one) <input type="checkbox"/> Approved; included in the PHA’s Homeownership Plan/Program <input type="checkbox"/> Submitted, pending approval <input type="checkbox"/> 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) <input type="checkbox"/> Part of the development <input type="checkbox"/> Total development

## B. Section 8 Tenant Based Assistance

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

### 2. Program Description:

#### a. Size of Program

- Yes  No: Will the PHA limit the number of families participating in the section 8 homeownership option?

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

- 25 or fewer participants  
 26- 50 participants  
 51 to 100 participants  
 more than 100 participants

#### b. PHA established eligibility criteria

- Yes  No: Will the PHA's program have eligibility criteria for participation in its Section 8 Homeownership Option program in addition to HUD criteria? If yes, list criteria below:

## 12. PHA Community Service and Self -sufficiency Programs

[24 CFR Part 903.79(1)]

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.

## See Attachment T for adopted Community Service Policy and revision of the same.

### A. PHA Coordination with the Welfare (TANF) Agency

#### 1. Cooperative agreements:

- Yes  No: Has the PHA 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)? **Attachment K**

See

If yes, what was the date that agreement was assigned? 08/01/97

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

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

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

**(1) General**

a. Self-Sufficiency Policies

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

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

**Advocate use of S.A.F.E. Programs. SHA also is considering establishing a community network in support of R.O.S.S. program objectives.**

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)

**(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	<b>Not determined.</b>	
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 plan to take to achieve at least the minimum program size?  
If no, list steps the PHA will take below:

**C. Welfare Benefit Reductions**

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

Housing Act of 1937 (relating to the treatment of income changes resulting from welfare program requirements) by: (select all that apply)

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



### **13.PHASafetyandCrimePreventionMeasures**

[24CFRPart903.79(m)]

ExemptionsfromComponent13:HighperformingandsmallPHAsnotparticipatinginPHDEPand  
Section8OnlyPHAsmayoptoutofComponent15.HighPerformingandsmallPHAs that are participating in  
PHDEP and are submitting a PHDEP Plan with this PHA Plan may opt out of Component D.

### **SeethemostrecentPHDEPPlanandSemi-AnnualReportsat AttachmentJ.**

#### **A.Needformeasurestoensurethesafetyofpublichousingresidents**

1.Describetheneedformeasurestoensurethesafetyofpublichousingresidents(select  
allthatapply)

- Highincidenceofviolentand/or drug -relatedcrimeinsomeorall ofthePHA's  
developments
- Highincidenceofviolentand/or drug -relatedcrimeintheareassurroundingor  
adjacenttothePHA'sdevelopments
- Residentsfearfulfortheirsafetyand/orthesafetyoftheirchildren
- Observedlower -levelcrime,vandalismand/orgraffiti
- Peopleonwaitinglistunwillingtomoveintooneormoredevelopmentsdueto  
perceivedand/oractuallevelsofviolentand/or drug -relatedcrime
- Other(describebelow)

2.WhatinformationordatadidthePHAusedtodeterminetheneedforPHAactionsto  
improvesafetyofresidents(selectallthatapply).

- Safetyandsecuritysurveyofresidents
- Analysisofcrimestatisticsovertimeforcrimescommitted“inandaround”  
publichousingauthority
- Analysisofcosttrendsovertimeforrepairofvandalismandremovalofgraffiti
- Residentreports
- PHAemployeereports
- Policereports
- Demonstrable,quantifiablesuccesswithpreviousorongoinganticrime/antidrug  
programs
- Other(describebelow)

3.Whichdevelopmentsaremostaffected?(listbelow)

**TheCub&BoyScoutProgramsareofferedatDrewCourtPolice  
Substation;however,allpublichousingyouth(withintheguidelinesof  
theprogram)areeligibletoparticipate.TheIn-SchoolTutorial  
ProgramfocusesattentionuponallacademicallychallengedSHA youth**

**in junior and senior high school. Accordingly all public housing students (in the appropriate grades) are eligible to participate if they need help. Likewise, computer instruction is available to all who want to participate regardless of the development in which they live. The Youth Sports Program is contracted with the City of Sylacauga Recreation Department and is available to all SHA youth who want to participate. Once PHDEP funds are exhausted, activities will be included only as funds allow. The following priorities are established: 1) maintain police presence, 2) scouting, 3) youth sports, and 4) tutorial computer.**

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

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

- Contracting with outside and/or resident organizations for the provision of crime and/or drug -prevention activities
- Crime Prevention Through Environmental Design
- Activities targeted to at -risk youth, adults, or seniors
- Volunteer Resident Patrol/Block Watchers Program
- Other (describe below)

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

**The Police Substation is located at Drew Court; however, routine patrols and police presence (above the baseline) are provided at each of the SHA public housing communities.**

**C. Coordination between PHA and the police**

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

- Police involvement in development, implementation, and/or ongoing evaluation of drug -elimination plan
- Police provide crime data to housing authority staff for analysis and action
- Police have established a physical presence on housing authority property (e.g., community policing office, officer in residence)
- Police regularly testify in and otherwise support eviction cases
- Police regularly meet with the PHA management and residents
- Agreement between PHA and local law enforcement agency for provision of above-baseline law enforcement services
- Other activities (list below)

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

**The Police Substation is located at Drew Court; however, all SHA developments benefit from the contractual arrangement with the Sylacauga PD.**

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

PHA eligible for FY2000 PHDEP funds must provide a PHDEP Plan meeting specified requirements prior to receipt of PHDEP funds.

- Yes  No: Is the PHA eligible to participate in the PHDEP in the fiscal year covered by this PHA Plan?
- Yes  No: Has the PHA included the PHDEP Plan for FY2001 in this PHA Plan?
- Yes  No: This PHDEP Plan is an Attachment. (Attachment Filename: See Attachment J)

**14. RESERVED FOR PET POLICY**

[24CFR Part 903.79(n)]

**See adopted pet policy at Attachment D.**

**15. Civil Rights Certifications**

[24CFR Part 903.79(o)]

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

**Required certifications are provided at Attachment L. Originals sent to DHUD Birmingham Alabama Office under separate cover.**

**16. Fiscal Audit**

[24CFR Part 903.79(p)]

- 1.  Yes  No: Is the PHA required to have an audit conducted under section 5(h)(2) of the U.S. Housing Act of 1937 (42 U.S.C. 1437c(h))? (If no, skip to component 17.)
- 2.  Yes  No: Was the most recent fiscal audit submitted to HUD?
- 3.  Yes  No: Were there any findings as the result of that audit?
- 4.  Yes  No: If there were any findings, do any remain unresolved? If yes, how many unresolved findings remain? \_\_\_\_
- 5.  Yes  No: Have responses to any unresolved findings been submitted to HUD? If not, when are they due (state below)?

## **17.PHA Asset Management**

[24CFRPart903.79(q)]

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

1.  Yes  No: Is the PHA engaging in any activities that will contribute to the long-term asset management of its public housing stock, including how the Agency will plan for long-term operating, capital investment, rehabilitation, modernization, disposition, and other needs that have **not** been addressed elsewhere in this PHA Plan?
  
2. What types of asset management activities will the PHA undertake? (select all that apply)
  - Not applicable
  - Private management
  - Development-based accounting
  - Comprehensive stock assessment
  - Other: (list below)

### **Long Term Asset Management – Energy Management at Sylavon Towers Project AL09P057008**

Utilizing the provisions of Performance Contracting, plans are to replace the existing HVAC system at the above development. This five-story structure, consisting of 97 dwelling units, will be upgraded to the latest technology regarding air quality by the most efficient means. The new system will be the geothermal system whereby tremendous savings can be obtained due to its design. While the performance contract will not guarantee a savings sufficient to cover the entire cost of the new system, it will provide, over the ten-year contract period, approximately one-half of said cost.

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

## **18. Other Information**

[24CFRPart903.79(r)]

### **A. Resident Advisory Board Recommendations**

1.  Yes  No: Did the PHA receive any comments on the PHA Plan from the Resident Advisory Board/s?
  
2. If yes, the comments are: (if comments were received, the PHA **MUST** select one)
  - Attached as Attachment (Filename) Attachment M
  - 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)

**See Resident Participation Certification at Attachment M signed by Chairperson Edna Maxwell. For a listing of all Resident Advisory Board Members, also see Attachment M (added as electronic file per Birmingham HUD letter dated 6/13/02).**

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

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

**Ms. Edna Maxwell was appointed by the Mayor and City Council of the City of Sylacauga to serve on the Board of Directors (see Attachment V).**

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)

**SHA residents that have demonstrated an interest and leadership potential by their involvement in other public housing activities.**

c. Eligible voters: (select all that apply)

- All adult recipients of PHA assistance (public housing and section 8 tenant assistance) -based
- Representatives of all PHA resident and assisted family organizations
- Other (list) **City Council and Mayor of the City of Sylacauga**

### 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: ( **State of Alabama** )

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

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

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

**The State of Alabama Consolidated Plans specifically mention the use, abuse and sale of drugs in PHA's. Such practice is listed as a barrier to affordable housing. Implementation of PHDEP activities are listed as a "high priority" to eliminate this barrier and to raise the quality of life for lower income Alabama citizens.**

### D. Other Information Required by HUD

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

**The following information is an excerpt from the Sylacauga Housing Authority Admissions and Continued Occupancy Policy (adopted April 11, 2001) page 45.**

## **SECTIONXXVI. DECONCENTRATIONRULE**

1. ObjectiveTheobjectiveoftheDeconcentrationRuleforpublichousingunitsisto ensure that families are housed in a manner that will prevent a concentration of poverty families and/or a concentration of higher income families in any one development. The specific objective of the housing authority is to house no less than 40 percent of its public housing inventory with families that have income at or below 30% of the area median income by public housing development. Also the housing authority will take actions to insure that no individual development has a concentration of higher income families in one or more of the developments. To insure that the housing authority does not concentrate families with higher income levels, it is the goal of the housing authority not to house more than 60% of its units in any one development with families whose income exceeds 30% of the area median income. The housing authority will track the status of family income, by development, on a monthly basis by utilizing income reports generated by the housing authority's computer system.
  
2. ActionsTo accomplish the deconcentration goals, the housing authority will take the following actions:
  - A. At the beginning of each housing authority fiscal year, the housing authority will establish a goal for housing 40% of its new admissions with families whose incomes are at or below the area median income. The annual goal will be calculated by taking 40% of the total number of move ins from the previous housing authority fiscal year.
  
  - B. To accomplish the goals of:
    - (1) Housing not less than 40% of its public housing inventory on an annual basis with families that have incomes at or below 30% of area median income, and
    - (2) Not housing families with incomes that exceed 30% of the area median income in developments that have 60% or more of the total household living in the development with incomes that exceed 30% of the area median income, the housing authority's Tenant Selection and Assignment Plan, which is a part of this policy, provides for skipping families on the waiting list to accomplish these goals.

### **Component 10(B) Voluntary Conversion Initial Assessments**

- a. How many of the PHA's developments are subject to the Required Initial Assessments?  
All
  
- b. How many of the PHA's developments are not subject to the Required Initial Assessments based on exemptions (e.g., elderly and/or disabled developments not general occupancy projects)?  
N/A

- c. How many Assessments were conducted for the PHA's covered developments?  
9, see Attachment U.
- d. Identify PHA developments that may be appropriate for conversion based on the Required Initial Assessments: N/A

Development Name	Number of Units

- e. If the PHA has not completed the Required Initial Assessments, describe the status of these assessments:  
N/A



## Attachments

CapitalFundTablesforFY2002andOn -GoingGrants .....	AttachmentA
CapitalFundProgramFiveYearActionPlan .....	AttachmentB
DeconcentrationandIncomeMixingQuestionsand BackupInformation .....	AttachmentC
PetPolicy .....	AttachmentD
OrganizationalChart .....	AttachmentE
ACOPAdopted4/11/01 .....	AttachmentF
CityofSylacaugaAnalysisofImpediments/Problems toFairHousingChoice .....	AttachmentG
CHASDataPer1990Census .....	AttachmentH
StateofAlabamaConsolidatedPlanFY2000 .....	AttachmentI
MostRecentPHDEPPlanandSemi -AnnualReports .....	AttachmentJ
LocalAgreementBetweenSylacaugaHousingAuthority andTalladegaCountyDHR .....	AttachmentK
RequiredCertifications .....	AttachmentL
▪ CertificationforaDrugFreeWorkplace	
▪ CertificationofPaymentstoInfluenceFederalTransactions	
▪ DisclosureofLobbyingActivities	
▪ PHACertificationofCompliancewiththePHAPlans andRelatedRegulationsBoard	
▪ ResolutiontoAccompanythePHAPlan	
▪ CertificationbyStateofPHAPlan'sConsistencywith StateConsolidatedPlan	
PHAResidentParticipationCertificationApprovingAnnualand FiveYearAgencyPlans&ListofResidentAdvisory BoardMembers .....	AttachmentM
BoardResolutionAdoptingFiveYearandAnnualAgencyPlans .....	AttachmentN
MostRecentBoardApprovedOperatingBudget .....	AttachmentO

MostCurrentFiscalAuditReport ..... AttachmentP  
Section8"NewConstruction"ManagementPlan ..... AttachmentQ  
SylacaugaHousingAuthorityGrievanceProcedure ..... AttachmentR  
EvidenceofPublicHearingNotificationProcess ..... AttachmentS  
ChangeinCommunityServicePolicyInformation ..... AttachmentT  
VoluntaryConversionAnalysisRequiredInitialAssessment ..... AttachmentU

# ATTACHMENT A

<b>Annual Statement/Performance and Evaluation Report</b> <b>Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)</b> <b>Part 1: Summary</b>						
<b>PHAName:</b> Sylacauga Housing Authority		<b>Grant Type and Number</b> Capital Fund Program: AL09P057501-02 Capital Fund Program Replacement Housing Factor Grant No:			<b>Federal FY of Grant:</b> FY2002	
<input checked="" type="checkbox"/> <b>Original Annual Statement</b> <input type="checkbox"/> <b>Performance and Evaluation Report for Period Ending:</b>		<input type="checkbox"/> <b>Reserve for Disasters/Emergencies</b> <input type="checkbox"/> <b>Final Performance and Evaluation Report</b>		<input type="checkbox"/> <b>Revised Annual Statement (revision no: )</b>		
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost		
		Original	Revised	Obligated	Expended	
1	Total Non -CFP Funds					
2	1406 Operations	90,891				
3	1408 Management Improvements Soft Costs	36,150				
4	1410 Administration	51,760				
5	1411 Audit					
6	1415 Liquidated Damages					
7	1430 Fees and Costs	54,600				
8	1440 Site Acquisition					
9	1450 Site Improvement	105,942				
10	1460 Dwelling Structures	481,570				
11	1465.1 Dwelling Equipment — Nonexpendable	27,500				
12	1470 Nondwelling Structures	7,500				
13	1475 Nondwelling Equipment	44,000				
14	1485 Demolition					
15	1490 Replacement Reserve					
16	1492 Moving to Work Demonstration					
17	1495.1 Relocation Costs	9,000				
18	1498 Mod Used for Development					
19	1502 Contingency					
20	Amount of Annual Grant: (sum of lines 2 -19)					
21	Amount of line 20 Related to LBP Activities	908,913				
22	Amount of line 20 Related to Section 504 Compliance					
23	Amount of line 20 Related to Security					

# ATTACHMENT A

<b>Annual Statement/Performance and Evaluation Report</b> <b>Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)</b> <b>Part 1: Summary</b>			
<b>PHAName:</b> Sylacauga Housing Authority	<b>Grant Type and Number</b> Capital Fund Program: AL09P057501-02 Capital Fund Program Replacement Housing Factor Grant No:	<b>Federal FY of Grant:</b> FY2002	
<input checked="" type="checkbox"/> <b>Original Annual Statement</b>		<input type="checkbox"/> <b>Reserve for Disasters/Emergencies</b>	
<input type="checkbox"/> <b>Performance and Evaluation Report for Period Ending:</b>		<input type="checkbox"/> <b>Final Performance and Evaluation Report</b>	
<input type="checkbox"/> <b>Revised Annual Statement (revision no: )</b>			
<b>Line No.</b>	<b>Summary by Development Account</b>	<b>Total Estimated Cost</b>	<b>Total Actual Cost</b>
24	Amount of line 20 Related to Energy Conservation Measures	214,200	

# ATTACHMENT A

<b>Annual Statement/Performance and Evaluation Report</b> <b>Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)</b> <b>Part II: Supporting Pages</b>								
PHAName: Sylacauga Housing Authority		Grant Type and Number Capital Fund Program#: AL09P057501-02 Capital Fund Program Replacement Housing Factor#:			Federal FY of Grant: FY2002			
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work
				Original	Revised	Funds Obligated	Funds Expended	
57-2	Backflow Preventers/Water Pressure Valves	1450.0	32	3,200				
Sylavon Court	Site Improvements (Sew./Water/Gas/Elec./Drain, etc.)	1450.0	6	6,000				
	Prep & Paint Interiors	1460.0	8	8,000				
	Counter Top Replacement	1460.0	6	3,000				
	HVAC	1460.0	2	3,000				
57-3	Backflow Preventers/Water Pressure Valves	1450.0	150	15,000				
Sylavon Court	Site Improvements (Sew./Water/Gas/Elec./Drain, etc.)	1450.0	18	18,000				
	Prep & Paint Interiors	1460.0	30	30,000				
	Counter Top Replacement	1460.0	10	5,000				
	Commode/Water Heater Replacements	1460.0	20	6,000				
	HVAC Replacement	1460.0	10	10,000				
	Foundation Repairs	1460.0	5	5,000				
	Maintenance Equipment	1475.0		20,000				
	Gas Detection Equipment	1475.0	3	4,000				
	Office Equipment	1475.0		20,000				
57-4	Site Improvements (Sew./Water/Gas/Elec./Drain, etc.)	1450.0	15	15,000				
Drew Court	Prep & Paint Interiors	1460.0	20	20,000				
	Counter Top Replacement	1460.0	12	6,000				
	Foundation Repairs	1460.0	5	5,000				

# ATTACHMENT A

<b>Annual Statement/Performance and Evaluation Report</b> <b>Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)</b> <b>Part II: Supporting Pages</b>								
<b>PHAName:</b> Sylacauga Housing Authority		<b>Grant Type and Number</b> Capital Fund Program#: AL09P057501-02 Capital Fund Program Replacement Housing Factor#:			<b>Federal FY of Grant:</b> FY2002			
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work
				Original	Revised	Funds Obligated	Funds Expended	
	Commode/Water Heater Replacements	1460.0	30	9,000				
	Dwelling Equipment (Refrigerators)	1465.1	10	5,000				
57-5	Site Improvements (Sew./Water/Gas/Elec./Drain, etc.)	1450.0	6	6,000				
Drew Court	Prep & Paint Interiors	1460.0	9	9,000				
	Counter Top Replacement	1460.0	4	2,000				
	Commode/Water Heater Replacements	1460.0	8	2,400				
	Dwelling Equipment (Refrigerators)	1465.1	3	1,500				
57-6	Site Improvements (Sew./Water/Gas/Elec./Drain, etc.)	1450.0	15	15,000				
Drew Court	Prep & Paint Interiors	1460.0	23	23,000				
	Counter Top Replacement	1460.0	12	6,000				
	Commode/Water Heater Replacements	1460.0	30	9,000				
	Dwelling Equipment	1465.1	12	6,000				
57-8	Site Improvements (Sew./Water/Gas/Elec./Drain, etc.)	1450.0	5	5,000				
Sylavon Towers	HVAC Improvements/Replacement	1460.0	1	91,000				
	Prep & Paint Interiors	1460.0	32	32,000				
	Dwelling Equipment	1465.1	2	1,000				
	Security Equipment	1465.1	5	5,000				

# ATTACHMENT A

<b>Annual Statement/Performance and Evaluation Report</b> <b>Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)</b> <b>Part II: Supporting Pages</b>								
PHA Name: Sylacauga Housing Authority		<b>Grant Type and Number</b> Capital Fund Program#: AL09P057501-02 Capital Fund Program Replacement Housing Factor#:				<b>Federal FY of Grant:</b> FY2002		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work
				Original	Revised	Funds Obligated	Funds Expended	
57-9	Site Improvements	1460.1	3	3,000				
Sylavon Court	Prep & Paint Interiors	1460.0	7	7,000				
57-10	Site Improvements (Sew./Water/Gas/Elec./Drain, etc.)	1450.0	18	19,742				
Drew Court	Prep & Paint Interiors	1460.0	60	60,000				
	Counter Top Replacement	1460.0	30	15,000				
	Vinyl Flooring Replacement	1460.0	10	10,000				
	Reglaze Tubs & Sinks	1460.0	21	5,170				
	HVAC Improvements	1460.0	60	100,000				
	Dwelling Equipment/Refrigerators	1465.1	18	9,000				
	A/C Modifications – Day Care/Office	1470.0	1	7,500				
	Relocation Costs	1495.1	60	9,000				
PHA Wide	Operations	1406.0		90,891				
	Management Improvements	1408.0		36,150				
	Administration & Supervision	1410.0		51,760				
	Fees & Costs	1430.0		54,600				
Total				908,913				

# ATTACHMENT A

**Annual Statement/Performance and Evaluation Report  
 Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)  
 Part III: Implementation Schedule**

PHA Name: Sylacauga Housing Authority	Grant Type and Number: Capital Fund Program#: AL09P057501-02 Capital Fund Program Replacement Housing Factor#:	Federal FY of Grant: FY2002
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Development Number Name/HA-Wide Activities	All Fund Obligated (Quarter Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates
	Original	Revised	Actual	Original	Revised	Actual	
57-2	06/30/2004			06/30/2004			
57-3	06/30/2004			06/30/2004			
57-4	06/30/2004			06/30/2004			
57-5	06/30/2004			06/30/2004			
57-6	06/30/2004			06/30/2004			
57-8	06/30/2004			06/30/2004			
57-9	06/30/2004			06/30/2004			
57-10	06/30/2004			06/30/2004			
PHA Wide	06/30/2004			06/30/2004			



# ATTACHMENT A

<b>Annual Statement/Performance and Evaluation Report</b> <b>Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)</b> <b>Part 1: Summary</b>						
<b>PHAName:</b> Sylacauga Housing Authority		<b>Grant Type and Number</b> Capital Fund Program: AL09P057501-01 Capital Fund Program Replacement Housing Factor Grant No:			<b>Federal FY of Grant:</b> FY2001	
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Performance and Evaluation Report for Period Ending:		<input type="checkbox"/> Reserve for Disasters/Emergencies <input checked="" type="checkbox"/> Revised Annual Statement (revision no: 1) <input type="checkbox"/> Final Performance and Evaluation Report				
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost		
		Original	Revised	Obligated	Expended	
1	Total Non -CFP Funds					
2	1406 Operations	92,499.00	92,499.00			
3	1408 Management Improvements Soft Costs	53,650.00	36,150.00			
4	1410 Administration	46,345.00	46,345.00			
5	1411 Audit					
6	1415 Liquidated Damages					
7	1430 Fees and Costs	52,970.00	52,970.00			
8	1440 Site Acquisition					
9	1450 Site Improvement	123,200.00	123,200.00			
10	1460 Dwelling Structures	432,480.00	533,480.00			
11	1465.1 Dwelling Equipment — Nonexpendable	27,500.00	27,500.00			
12	1470 Non dwelling Structures	52,500.00	7,500.00			
13	1475 Non dwelling Equipment	62,500.00	24,000.00			
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)	943,644.00	943,644.00			
21	Amount of line 20 Related to LBP Activities					
22	Amount of line 20 Related to Section 504 Compliance					

# ATTACHMENT A

<b>Annual Statement/Performance and Evaluation Report</b>					
<b>Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)</b>					
<b>Part 1: Summary</b>					
<b>PHAName:</b> Sylacauga Housing Authority		<b>Grant Type and Number</b> Capital Fund Program: AL09P057501-01 Capital Fund Program Replacement Housing Factor Grant No:			<b>Federal FY of Grant:</b>  FY2001
<input type="checkbox"/> Original Annual Statement		<input type="checkbox"/> Reserve for Disasters/Emergencies		<input checked="" type="checkbox"/> Revised Annual Statement (revision no: 1)	
<input type="checkbox"/> Performance and Evaluation Report for Period Ending:		<input type="checkbox"/> Final Performance and Evaluation Report			
<b>Line No.</b>	<b>Summary by Development Account</b>	<b>Total Estimated Cost</b>		<b>Total Actual Cost</b>	
23	Amount of line 20 Related to Security				
24	Amount of line 20 Related to Energy Conservation Measures	86,500.00	277,300.00		

# ATTACHMENT A

<b>Annual Statement/Performance and Evaluation Report</b> <b>Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)</b> <b>Part II: Supporting Pages</b>								
PHAName: Sylacauga Housing Authority		<b>Grant Type and Number</b> Capital Fund Program#: AL09P057501-01 Capital Fund Program Replacement Housing Factor#:			<b>Federal FY of Grant:</b> FY2001			
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work
				Original	Revised	Funds Obligated	Funds Expended	
57-2	Backflow Preventers/Water Pressure Valves	1450.0	32	3,200	3,200			
	Site Improvements (Sew./Water/Gas/Elec./Drain, etc.)	1450.0	8	8,000	8,000			
	Prep & Paint Interiors	1460.0	8	8,000	8,000			
	Counter Top Replacement	1460.0	4	2,000	2,000			
	Security Door Screens	1460.0	32	12,800	0			
	HVAC	1460.0	2	3,000	3,000			
57-3	Backflow Preventers/Water Pressure Valves	1450.0	150	15,000	15,000			
	Site Improvements	1450.0	20	20,000	20,000			
	Prep & Paint Interiors	1460.0	30	30,000	30,000			
	Counter Top Replacement	1460.0	10	5,000	5,000			
	Commode/Water Heater Replacements	1460.0	20	6,000	6,000			
	HVAC Replacement	1460.0	10	10,000	10,000			
	Foundation Repairs	1460.0	5	5,000	5,000			
	Renovation of Space – Old Office Bldg.	1470.0	1	35,000	0			
	A/C Modifications – Old Office Bldg.	1470.0	1	10,000	0			
	Maintenance Equipment	1475.0		45,000	10,000			
	Gas Detection Equipment	1475.0	3	4,000	4,000			
	Office Equipment	1475.0		13,500	10,000			

# ATTACHMENT A

<b>Annual Statement/Performance and Evaluation Report</b> <b>Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)</b> <b>Part II: Supporting Pages</b>								
PHAName: Sylacauga Housing Authority		Grant Type and Number Capital Fund Program#: AL09P057501-01 Capital Fund Program Replacement Housing Factor#:				Federal FY of Grant: FY2001		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work
				Original	Revised	Funds Obligated	Funds Expended	
57-4	Site Improvements (Sew./Water/Gas/Elec./Drain, etc.)	1450.0	20	20,000	20,000			
	Prep & Paint Interiors	1460.0	20	20,000	20,000			
	Counter Top Replacement	1460.0	12	6,000	6,000			
	Foundation Repairs	1460.0	5	5,000	5,000			
	Commode/Water Heater Replacements	1460.0	30	9,000	9,000			
	Dwelling Equipment (Refrigerators)	1465.1	10	5,000	5,000			
57-5	Site Improvements (Sew./Water/Gas/Elec./Drain, etc.)	1450.0	6	6,000	6,000			
	Prep & Paint Interiors	1460.0	9	9,000	9,000			
	Counter Top Replacement	1460.0	4	2,000	2,000			
	Commode/Water Heater Replacements	1460.0	8	2,400	2,400			
	Dwelling Equipment (Refrigerators)	1465.1	3	1,500	1,500			
57-6	Site Improvements (Sew./Water/Gas/Elec./Drain, etc.)	1450.0	20	20,000	20,000			
	Prep & Paint Interiors	1460.0	23	23,000	23,000			
	Counter Top Replacement	1460.0	12	6,000	6,000			
	Commode/Water Heater Replacements	1460.0	30	9,000	9,000			
	Dwelling Equipment	1465.1	12	6,000	6,000			
57-8	Site Improvements (Sew./Water/Gas/Elec./Drain, etc.)	1450.0	6	6,000	6,000			

# ATTACHMENT A

<b>Annual Statement/Performance and Evaluation Report</b> <b>Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)</b> <b>Part II: Supporting Pages</b>								
PHA Name: Sylacauga Housing Authority		Grant Type and Number Capital Fund Program#: AL09P057501-01 Capital Fund Program Replacement Housing Factor#:				Federal FY of Grant: FY2001		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work
				Original	Revised	Funds Obligated	Funds Expended	
	HVAC Improvements/Replacement	1460.0	1	66,000	256,800			
	Prep & Paint Interiors	1460.0	32	32,000	32,000			
	Interior Renovations – Replace Carpeting	1460.0	1	42,000	0			
	Dwelling Equipment	1465.1	2	1,000	1,000			
	Security Equipment	1465.1	5	5,000	5,000			
57-9	Prep & Paint Interiors	1460.0	7	7,000	7,000			
57-10	Site Improvements (Sew./Water/Gas/Elec./Drain, etc.)	1450.0	25	25,000	25,000			
	Prep & Paint Interiors	1460.0	52	52,000	52,000			
	Counter Top Replacement	1460.0	20	10,000	10,000			
	Vinyl Flooring Replacement	1460.0	10	20,000	10,000			
	Reglaze Tubs & Sinks	1460.0	22	5,280	5,280			
	Drywall Replacement	1460.0	25	25,000	0			
	Dwelling Equipment/Refrigerators	1465.1	18	9,000	9,000			
	A/C Modifications – Day Care/Office	1470.0	1	7,500	7,500			
PHAWide	Operations	1406.0		92,499	92,499			
	Management Improvements	1408.0						
	Marketing	1408.0	1	12,000	8150			

# ATTACHMENT A

<b>Annual Statement/Performance and Evaluation Report</b> <b>Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)</b> <b>Part II: Supporting Pages</b>								
PHA Name: Sylacauga Housing Authority		Grant Type and Number Capital Fund Program#: AL09P057501-01 Capital Fund Program Replacement Housing Factor#:			Federal FY of Grant: FY2001			
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work
				Original	Revised	Funds Obligated	Funds Expended	
	Natural Gas Pipeline Operator Qualifications	1408.0	1	25,000	17,000			
	Annual Plan/Grant Preparation	1408.0	1	7,000	7,000			
	Staff Education	1408.0	1	9,650	4,000			
	Administration & Supervision	1410.0						
	Salaries	1410.0	1	46,345	46,345			
	Fees & Costs	1430.0						
	Architect	1430.0		15,000	15,000			
	Inspection Costs	1430.0		27,970	27,970			
	Consultants Fees	1430.0		10,000	10,000			
Total				943,644	943,644			

**ATTACHMENT A**

**Annual Statement/Performance and Evaluation Report  
 Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)  
 Part III: Implementation Schedule**

PHAName: Sylacauga Housing Authority		Grant Type and Number Capital Fund Program#: AL09P057501-01 Capital Fund Program Replacement Housing Factor#:				Federal FY of Grant: FY2001	
Development Number Name/HA-Wide Activities	All Fund Obligated (Quarter Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates
	Original	Revised	Actual	Original	Revised	Actual	
57-2	06/30/2003			06/30/2003			
57-3	06/30/2003			06/30/2003			
57-4	06/30/2003			06/30/2003			
57-5	06/30/2003			06/30/2003			
57-6	06/30/2003			06/30/2003			
57-8	06/30/2003			06/30/2003			
57-9	06/30/2003			06/30/2003			
57-10	06/30/2003			06/30/2003			
PHAWide	06/30/2003			06/30/2003			

# ATTACHMENT A

<b>Annual Statement/Performance and Evaluation Report</b> <b>Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)</b> <b>Part 1: Summary</b>						
<b>PHAName:</b> Sylacauga Housing Authority		<b>Grant Type and Number</b> Capital Fund Program: AL09P057501-00 Capital Fund Program Replacement Housing Factor Grant No:			<b>Federal FY of Grant:</b> FY2000	
<input type="checkbox"/> Original Annual Statement		<input type="checkbox"/> Reserve for Disasters/Emergencies		<input checked="" type="checkbox"/> Revised Annual Statement (revision no: 1)		
<input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 12/31/01		<input type="checkbox"/> Final Performance and Evaluation Report				
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost		
		Original	Revised	Obligated	Expended	
1	Total Non -CFP Funds					
2	1406 Operations		92,499.00	92,499.00	92,499.00	
3	1408 Management Improvements Soft Costs	35,000.00	36,390.31	36,390.31	36,390.31	
4	1410 Administration	45,900.00	65,106.35	65,106.35	65,106.35	
5	1411 Audit					
6	1415 Liquidated Damages					
7	1430 Fees and Costs	52,470.00	61,414.92	61,414.92	61,414.92	
8	1440 Site Acquisition					
9	1450 Site Improvement	247,874.00	121,656.28	121,656.28	121,656.28	
10	1460 Dwelling Structures	398,100.00	429,118.41	365,055.61	365,055.61	
11	1465.1 Dwelling Equipment —Nonexpendable	40,000.00	6,130.02	6,130.02	6,130.02	
12	1470 Non Dwelling Structures		16,647.02	16,647.02	16,647.02	
13	1475 Non Dwelling Equipment	105,650.00	96,031.69	96,031.69	96,031.69	
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)	924,994.00	924,994.00	860,931.20	860,931.20	
21	Amount of line 20 Related to LBP Activities					
22	Amount of line 20 Related to Section 504 Compliance					



# ATTACHMENT A

<b>Annual Statement/Performance and Evaluation Report</b>				
<b>Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)</b>				
<b>Part 1: Summary</b>				
<b>PHAName:</b> Sylacauga Housing Authority	<b>Grant Type and Number</b> Capital Fund Program: AL09P057501-00 Capital Fund Program Replacement Housing Factor Grant No:		<b>Federal FY of Grant:</b>  FY2000	
<input type="checkbox"/> Original Annual Statement		<input type="checkbox"/> Reserve for Disasters/Emergencies		<input checked="" type="checkbox"/> Revised Annual Statement (revision no: 1)
<input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 12/31/01		<input type="checkbox"/> Final Performance and Evaluation Report		
<b>Line No.</b>	<b>Summary by Development Account</b>	<b>Total Estimated Cost</b>		<b>Total Actual Cost</b>
23	Amount of line 20 Related to Security			
24	Amount of line 20 Related to Energy Conservation Measures	86,500.00	116,215.82	116,215.82

# ATTACHMENT A

<b>Annual Statement/Performance and Evaluation Report</b> <b>Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)</b> <b>Part II: Supporting Pages</b>								
PHAName: Sylacauga Ho using Authority		Grant Type and Number Capital Fund Program#: AL09P057501-00 Capital Fund Program Replacement Housing Factor#:				Federal FY of Grant: FY2000		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work
				Original	Revised	Funds Obligated	Funds Expended	
501-00	Operations	1406.0		-	92,499.00	92,499.00	92,499.00	
	Management Improvements	1408.0		35,000.00	36,390.31	36,390.31	36,390.31	
	Administration & Supervision	1410.0		45,900.00	65,106.35	65,106.35	65,106.35	
	Fees and Costs	1430.0		52,470.00	61,414.92	61,414.92	61,414.92	
501-00-2	Backflow Preventers/Water Pressure Valves	1450.0		1,707.00	-	-	-	
	Site Improvements (Sew./Water/Gas/Elec./Drain, etc.)	1450.0		2,744.00	142.50	217.50	217.50	
	Prep & Paint Interiors	1460.0		13,722.00	10,168.58	10,168.58	10,168.58	
	Weatherstripping	1460.0		10,080.00	10,754.97	10,754.97	10,754.97	
	HVAC Repairs/Improvements	1460.0		-	2,067.13	454.77	454.77	
	Dwelling Equipment	1465.0		1,098.00	1,271.52	1,271.52	1,271.52	
501-00-3	Backflow Preventers/Water Pressure Valves	1450.0		8,909.00	49,244.63	49,244.63	49,244.63	
	Site Improvements (Sew./Water/Gas/Elec./Drain, etc.)	1450.0		14,322.00	33,498.64	39,536.74	39,536.74	
	Tree Removal/Replacement	1450.0		50,000.00	-	50.00	50.00	
	Phase One/Maintenance Facility Extension	1450.0		69,874.00	-	-	-	
	Prep & Paint Interiors	1460.0		71,612.00	31,558.80	31,558.80	31,558.80	
	Weatherstripping	1460.0		52,605.00	31,575.44	31,575.44	31,575.44	
	Commode/Water Heater Replacements	1460.0		-	3,363.07	3,059.65	3,059.65	
	Handrail Repairs	1460.0		-	3,180.99	3,180.99	3,180.99	
	Electrical Modifications	1460.0		-	10,383.55	10,383.55	10,383.55	

# ATTACHMENT A

<b>Annual Statement/Performance and Evaluation Report</b> <b>Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)</b> <b>Part II: Supporting Pages</b>								
PHAName: Sylacauga Ho using Authority		Grant Type and Number Capital Fund Program#: AL09P057501-00 Capital Fund Program Replacement Housing Factor#:				Federal FY of Grant: FY2000		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work
				Original	Revised	Funds Obligated	Funds Expended	
	HVAC Repairs/Improvements	1460.0		-	9,464.40	6,229.71	6,229.71	
	Lock Cores	1465.0		5,729.00	3,179.13	3,179.13	3,179.13	
	Portable Heaters	1465.0		-	799.70	799.70	799.70	
	Panic Locks –Community Room	1470.0		-	2,529.90	2,529.90	2,529.90	
	Modify Ductwork	1470.0		-	3,000.00	3,000.00	3,000.00	
	Storage Racks –Shop	1470.0		-	3,619.12	3,619.12	3,619.12	
	Maintenance Equipment	1475.0		38,095.00	37,407.59	37,407.59	37,407.59	
	Gas Detection Equipment	1475.0		4,000.00	3,393.38	3,393.38	3,393.38	
	Non-Dwelling Equipment	1475.0		50,000.00	30,263.75	30,263.75	30,263.75	
	Sewer Equipment	1475.0		25,000.00	24,966.97	24,966.97	24,966.97	
501-00-4	Backflow Preventers/Water Pressure Valves	1450.0		4,588.00	-	-	-	
	Site Improvements (Sew./Water/Gas/Elec./Drain, etc.)	1450.0		7,376.00	725.00	1,771.58	1,771.58	
	Tree Replacement/Removal	1450.0		-	-	350.00	350.00	
	Prep & Paint Interiors	1460.0		36,878.00	33,791.29	33,791.29	33,791.29	
	HVAC Repairs/Improvements	1460.0		-	-	-	-	
	Weatherstripping	1460.0		-	5,076.23	5,076.23	5,076.23	
	Commode/Water Heater Replacements	1460.0		-	2,754.73	1,904.69	1,904.69	
	Interior Renovations	1460.0		-	3,504.19	3,354.59	3,354.59	
	Dwelling Equipment	1465.1		2,950.00	-	-	-	
501-00-5	Backflow Preventers/Water Pressure Valves	1450.0		854.00	-	-	-	

# ATTACHMENT A

<b>Annual Statement/Performance and Evaluation Report</b> <b>Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)</b> <b>Part II: Supporting Pages</b>								
PHA Name: Sylacauga Housing Authority		Grant Type and Number Capital Fund Program #: AL09P057501-00 Capital Fund Program Replacement Housing Factor #:			Federal FY of Grant: FY2000			
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work
				Original	Revised	Funds Obligated	Funds Expended	
	Site Improvements (Sew./Water/Gas/Elec./Drain, etc.)	1450.0		1,372.00	-	-	-	
	Prep & Paint Interiors	1460.0		6,861.00	4,893.09	4,893.09	4,893.09	
	Interior Renovations/Countertops	1460.0		-	2,837.54	1,837.54	1,837.54	
	Weatherstripping	1460.0		-	466.00	466.00	466.00	
	Dwelling Equipment	1465.1		549.00	-	-	-	
501-00-6	Backflow Preventers/Water Pressure Valves	1460.0		4,428.00	-	-	-	
	Site Improvements (Sew./Water/Gas/Elec./Drain, etc.)	1450.0		7,118.00	5,355.92	530.92	530.92	
	Prep & Paint Interiors	1460.0		35,592.00	22,778.04	22,778.04	22,778.04	
	Counter Top Replacement	1460.0		-	2,932.65	1,806.09	1,806.09	
	Commode/Water Heater Replacements	1460.0		-	-	335.38	335.38	
	Weatherstripping	1460.0		-	5,076.23	5,076.23	5,076.23	
	Dwelling Equipment	1465.1		2,847.00	-	-	-	
501-00-8	Backflow Preventers/Water Pressure Valves	1450.0		5,174.00	1,053.94	1,053.94	1,053.94	
	Site Improvements (Sew./Water/Gas/Elec./Drain, etc.)	1450.0		8,319.00	3,007.21	3,007.21	3,007.21	
	HVAC Improvements/Replacement	1460.0		75,000.00	60,000.00	-	-	
	Prep & Paint Interiors	1460.0		41,596.00	25,306.38	25,306.38	25,306.38	
	Interior Renovations	1460.0		31,250.00	38,463.17	35,966.57	35,966.57	
	Communications/Surveillance Equipment	1460.0		12,500.00	3,491.00	3,491.00	3,491.00	
	Dwelling Equipment	1465.1		3,328.00	-	-	-	

# ATTACHMENT A

<b>Annual Statement/Performance and Evaluation Report</b> <b>Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)</b> <b>Part II: Supporting Pages</b>								
PHAName: Sylacauga Ho using Authority		Grant Type and Number Capital Fund Program#: AL09P057501-00 Capital Fund Program Replacement Housing Factor#:				Federal FY of Grant: FY2000		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work
				Original	Revised	Funds Obligated	Funds Expended	
501-00-9	Tree Replacement/Removal	1450.0		-	-	300.00	300.00	
	Prep & Paint Interiors	1460.0		-	3,100.29	3,100.29	3,100.29	
501-00-10	Backflow Preventers/Water Pressure Valves	1450.0		5,441.00	-	-	-	
	Site Improvements (Sew./Water/Gas/Elec./Drain, etc.)	1450.0		8,748.00	18,500.62	3,658.34	3,658.34	
	Handrails Replaced – Site Improvements/Ballfield	1450.0		-	-	20,092.42	20,092.42	
	Site Improvements/Fencing	1450.0		-	1,843.00	1,843.00	1,843.00	
	Prep & Paint Interiors	1460.0		43,739.00	58,960.15	58,960.15	58,960.15	
	Handrails Replaced	1460.0		-	2,894.50	2,894.50	2,894.50	
	Interior Renovations	1460.0		-	29,797.46	27,741.71	27,741.71	
	Weatherstripping	1460.0		-	9,865.14	9,865.14	9,865.14	
	Reglaze Tubs & Sinks	1460.0		-	7,255.00	7,255.00	7,255.00	
	Water Heater/Commode	1460.0		-	1,643.22	1,789.24	1,789.24	
	Dwelling Equipment	1465.1		3,499.00	879.67	879.67	879.67	
	A/C Modifications – Day Care/Office	1470.0		22,120.00	7,498.00	7,498.00	7,498.00	
Total				924,994.00	924,994.00	860,931.20	860,931.20	

## ATTACHMENT A

<b>Annual Statement/Performance and Evaluation Report</b> <b>Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)</b> <b>Part III: Implementation Schedule</b>							
PHA Name: Sylacauga Housing Authority		Grant Type and Number: Capital Fund Program#: AL09P057501-00 Capital Fund Program Replacement Housing Factor#:				Federal FY of Grant: FY2000	
Development Number Name/HA-Wide Activities	All Fund Obligated (Quarter Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates
	Original	Revised	Actual	Original	Revised	Actual	
PHAWide	12/30/2000			06/30/2001			
57-2	12/30/2000			06/30/2001			
57-3	12/30/2000			06/30/2001			
57-4	12/30/2000			06/30/2001			
57-5	12/30/2000			06/30/2001			
57-6	12/30/2000			06/30/2001			
57-8	12/30/2000			06/30/2001			
57-9	12/30/2000			06/30/2001			
57-10	12/30/2000			06/30/2001			

# ATTACHMENT B

**Capital Fund Program Five - Year Action Plan**  
**Part I: Summary**

PHAName		<input type="checkbox"/> <b>Original 5 - Year Plan</b> <input type="checkbox"/> <b>Revision No:</b>			
<i>Development Number/Name/HA-Wide</i>	Year 1	Work Statement for Year 2 FFY Grant: 2002 PHAFY:	Work Statement for Year 3 FFY Grant: 2003 PHAFY:	Work Statement for Year 4 FFY Grant: 2004 PHAFY:	Work Statement for Year 5 FFY Grant: 2005 PHAFY:
	Annual Statement	471,400	147,500		
<b>57-10</b>					
57-2		280,000	190,400		
57-3		186,900	3,250		
<b>57-4</b>		129,000	4,150		
57-5		-0-	12,592		
57-6		61,171	4,150		
57-8		15,000	24,250		
PHAWide		410,000	410,000	410,000	410,000
All			750,000	1,140,000	1,140,000
CFPFunds Listed for 5 - year planning		1,553,471	1,546,292	1,550,000.00	1,550,000.00
Replacement Housing Factor Funds					

## ATTACHMENT B

CapitalFundProgramFive -YearActionPlan  
**Part II: Supporting Pages — Work Activities**

Activities for Year1	Activities for Year:2 FFY Grant:2002 PHAFY:			Activities for Year:3 FFY Grant:2003 PHAFY:		
	Development Name/Number	Major Work Categories	Estimated Cost	Development Name/Number	Major Work Categories	Estimated Cost
See	57-10	Site Improvements	15,600	57-10	Site Improvements	21,200
Annual	57-10	Modernization	455,800	57-10	Equipment -AC	126,300
Statement	57-2	Site Improvements	107,200	57-2	Site Improvements	8,000
	57-2	Modernization	172,800	57-2	Modernization	182,400
	57-3	Equipment	166,900	57-3	Equipment	3,250
	57-3	Recycle Program	10,000	57-4	Modernization	4,150
	57-3	Modernization	10,000	57-5	Modernization	12,592
	57-4	Modernization	129,000	57-6	Modernization	4,150
	57-6	Modernization	61,171	57-8	Site Improvements	19,400
	57-8	Modernization	15,000	57-8	Modernization	4,850
	PHA Wide	Administration	100,000	PHA Wide Dwelling Structures	Not Determined	750,000
	PHA Wide	Management Improvements	200,000	PHA Wide	Administration	100,000
	PHA Wide	Fees & Costs	60,000	PHA Wide	Management Improvements	200,000
	PHA Wide	Non-Dwelling Equipment	50,000	PHA Wide	Fees & Costs	60,000
				PHA Wide	Non-Dwelling Equipment	50,000
Total CFPE Estimated Cost			\$1,553,471			\$1,546,292



# ATTACHMENT B

Capital Fund Program Five -Year Action Plan  
**Part II: Supporting Pages — Work Activities**

Activities for Year: 4 FFY Grant: 2004 PHAFY:			Activities for Year: 5 FFY Grant: 2005 PHAFY:		
Development Name/Number	Major Work Categories	Estimated Cost	Development Name/Number	Major Work Categories	Estimated Cost
All	Site Improvements	175,000	All	Site Improvements	175,000
All	Modernization	750,000	All	Modernization	750,000
57-10&57 -5	Equipment -AC	65,000	57-4&57 -6	Equipment -AC	65,000
All	Nondwelling Structures/Equipment	150,000	All	Nondwelling Structures/Equipment	150,000
PHAWide	Administration	100,000	PHAWide	Administration	100,000
PHAWide	Management Improvements	200,000	PHAWide	Management Improvements	200,000
PHAWide	Fees & Costs	60,000	PHAWide	Fees & Costs	60,000
PHAWide	Non-Dwelling Equipment	50,000	PHAWide	Non-Dwelling Equipment	50,000
Total CFPEstimated Cost		\$1,550,000.00			\$1,550,000.00

# ATTACHMENT C

**Component 3, (6) Deconcentration and Income Mixing**

- a.  Yes  No: DoesthePHAhaveanygeneraloccupancy(family)publichousing developmentscoveredbythedeconcentrationrule?Ifno,this sectioniscomplete.If yes,continuetotheneftquestion.
- b.  Yes  No: Doanyofthesecovereddevelopmentshaveaverageincomes aboveorbelow85%to115%oftheaverageincomesofallsuch developments?Ifno,thissectioniscomplete.

Ifyes,listthesedevelopmentsasfollows:

<b>DeconcentrationPolicyforCoveredDevelopments</b>			
<b>DevelopmentName :</b>	<b>Number ofUnits</b>	<b>Explanation(ifany)[seestep4at §903.2(c)(1)(iv)]</b>	<b>Deconcentrationpolicy(if noexplanation)[seestep5 at §903.2(c) (1)(v)]</b>
57-10	100	SeeBelow	N/A
57-2	31	SeeBelow	N/A
57-3	161	SeeBelow	N/A
57-4	84	SeeBelow	N/A
57-5	16	SeeBelow	N/A
57-8	66	SeeBelow	N/A
57-9	21	SeeBelow	N/A

TheaverageincomefortheSHAasawholeis\$7,244.16.Accordingly,therangefor 85%to115%shouldequateto\$6,157.56to\$8,330.78.Asp HUD'sproposedrulefor Amendmentsto"EstablishedIncomeRange"Definitiondated8/15/2001andNoticePIH 2001-26(HA)issued8/2/2001,HUDFieldOfficeswillaccept,asareasonable explanation,caseswheretheaverageincomeforPHAdevelopmentsisabovethe establishedincomerangeof85%to115%,butisandwillremainbelow30%ofthe averagemedianincome.ForSylacauga,thisfigureis\$11,790.00,whichmeansthatall developmentsarewithinanacceptablerange.Seeattachedinformation.

# ATTACHMENT D

Sylacauga Housing Authority (HA)  
Dwelling Lease Addendum

## Pet Policy

This addendum is being executed in accordance of Section XVI of the Dwelling Lease to govern Pet Ownership in Public Housing. As applicable, Section 526 of the Quality Housing and Work Responsibility Act of 1998 (Public Law 105 - 276, 112 Stat. 2451, 2568 (the Public Housing Reform Act of 1998)) added new section 31 (captioned "Pet Ownership in Public Housing") to the United States Housing Act of 1937. Section 31 establishes pet ownership requirements for tenants of public housing other than federally assisted rental housing for the elderly or persons with disabilities. Section 227 of the Housing - Rural Recovery Act of 1983 (12 U.S.C. 1701r -1) (the 1983 Act) covers pet ownership requirements for the elderly or persons with disabilities. This rule does not alter or affect these regulations in any way, nor would the regulation in Section 227 of the 1983 Act apply in any way to Section 31 of the 1937 Act. Section 31 of the 1937 Act is being implemented by adding a new subpart G to 24 CFR Part 960. The following policies must be complied with for pet ownership in the HA:

### Section I.

1. Pet ownership: A tenant may own one or more common household pets or have one or more common household pets present in the dwelling unit of such tenant, subject to the following conditions:
  - A. Each Head of Household may own up to two pets. If one of the pets is a dog or cat, (or other four legged animal), the second pet must be contained in a cage or an aquarium for fish. Each bird or other animals, other than fish, shall be counted as one pet.
  - B. If the pet is a dog or cat, it must be neutered/spayed at six (6) months, and cats must be declawed at three (3) months. The evidence can be provided by a statement/bill from veterinarian and/or staff of the humane society. The evidence must be provided prior to the executive of this agreement and/or within 10 days of the pet becoming of age to be neutered/spayed or declawed. Tenant must provide water proof and leak proof litter boxes for cat waste, which must be kept inside the dwelling unit. Cardboard boxes are not acceptable and will not be approved. The Tenant shall not permit refuse from litter boxes to accumulate nor to become unsightly or unsanitary. Also, the weight of a cat cannot exceed 10 pounds (fully grown) and 20 pounds (fully grown) if the pet is a dog. All other four legged animals are limited to 10 pounds (fully grown).
  - C. If the pet is a bird, it shall be housed in a bird cage and cannot be let out of the cage at any time.

- D. If the pet is a fish, the aquarium must be thirty gallons or less, and the container must be placed in a safe location in the unit. The Tenant is limited to one container for the fish; however, there is no limit on the number of fish that can be maintained in the container as long as the container is maintained in a safe and non-hazardous manner.
- E. If the pet is a cat or dog, it must have received rabies and distemper inoculations or boosters, as applicable. Evidence of inoculations can be provided by a statement/bill from a veterinarian or staff of the humane society and must be provided to the executive of this agreement.
- F. All pets must be housed within the unit and no facilities can be constructed outside of the unit for any pet. No animal shall be permitted to be loose and if the pet is taken outside it must be taken outside on a leash and kept off other Tenant's lawns. Also, all pets must wear collars with identification (owner's name) at all times. Pets without a collar will be picked up immediately and transported to the Humane Society.
- G. All authorized pet(s) must be under the control of an adult. **An unleashed pet, or one tied to a fixed object, is not under the control of an adult.** Pets which are unleashed, or leashed and unattended, on HA property will be impounded and taken to the local Humane Society. It shall be the responsibility of the Tenant to reclaim the pet and at the expense of the Tenant. Also, if a member of the HA staff has to take a pet to the Humane Society the Tenant will be charged \$50 to cover the expense of taking the pet(s) to the Humane Society.
- H. Pet(s) may not be left unattended for more than twenty-four consecutive hours. If it is reported to HA staff that a pet(s) has been left unattended for more than a twenty-four (24) consecutive hour period, HA staff may enter the unit and remove the pet and transfer the pet to the humane society. Any expense to remove and reclaim the pet from any facility will be the responsibility of the Tenant. In the case of an emergency, the HA will work with the resident to allow more than 24 hours for the resident to make accommodations for the pet.
- I. *Pet(s), as applicable, must be weighed by a veterinarian or staff of the humane society. A statement containing the weight of the pet must be provided to the HA prior to the execution of this agreement.*

*Note:*

**Any pet that is not fully grown must be weighed every six months. Weighing must be done by a veterinarian or humane society staff. Also, any pet that exceeds the weight limit at any time during occupancy will not be an eligible pet and must be removed from HA property.**

- 2. **Responsible Pet Ownership:** Each pet must be maintained responsibly and in accordance with this pet ownership lease addendum and in accordance with all applicable ordinances, state and local public health, animal control, and animal anti-cruelty laws and regulations governing pet ownership. Any waste generated by a pet must be properly and promptly disposed of to avoid any unpleasant and unsanitary odor from being in the unit.

3. Prohibited Animals: Animals that are considered vicious and/or intimidating will not be allowed. Some examples of animals that have a reputation of a vicious nature are: reptiles, rottweiler, doberman pinscher, pit bull dog, and/or any animal that displays vicious behavior. This determination will be made by a HA representative prior to the execution of this lease addendum.
4. Pet(s) shall not disturb, interfere or diminish the peaceful enjoyment of other tenants. The terms, "disturb, interfere or diminish" shall include but not be limited to barking, howling, chirping, biting, scratching and other like activities. This includes any pets whom make noise continuously and/or incessantly for a period of 10 minutes or intermittently for 1/2 hour or more to the disturbance of any person at any time of the day or night. The Housing Manager will terminate this authorization, if a pet disturbs other tenants under this section of the lease addendum. The Tenant will be given one week to make other arrangements for the care of the pet or the dwelling lease will be terminated.
5. If the animal should become destructive, create an nuisance, represent a threat to the safety and security of other persons, or create a problem in the area of cleanliness and sanitation, the Housing Manager will notify the tenant, in writing, that the animal must be removed from the Public Housing Development, within 10 days of the date of the notice from the HA. If the pet may be a danger or threat to the safety and security of other persons the 10 days notice will be changed to upon receipt of the notice from the HA. The Tenant may request a hearing, which will be handled according to the HA's established grievance procedure. The pet may remain with the tenant during the hearing process unless the HA has determined that the pet may be a danger or threat to the safety and security of other persons. If this determination is made by the HA, the pet must be immediately removed from the unit upon receipt of the notice from the HA.
6. The Tenant is solely responsible for cleaning up the waste of the pet within the dwelling and on the grounds of the public housing development. If the pet is taken outside it must be on a leash at all times. If there is any visible waste by the pet it must be disposed of in a plastic bag, securely tied and placed in the garbage. If the HA staff is required to clean any waste left by a pet, the Tenant will be charged \$50 for the removal of the waste.
7. The Tenant shall have pets restrained so that maintenance can be performed in the apartment. The Tenant shall, whenever an inspection or maintenance is scheduled, either be at home or shall have all animals caged. If a maintenance person enters an apartment where an animal is not restrained, maintenance shall not be performed, and the Tenant shall be charged a fee of \$50.00. If this same situation again occurs, the pet shall be removed from the premises. Pets that are not caged or properly restrained will be impounded and taken to the local Humane Society. It shall be the responsibility of the Tenant to reclaim the pet and at the expense of the Tenant. Also, if a member of the HA staff has to take a pet to the Humane Society the Tenant will be charged an additional \$50 to cover the expense of taking the pet(s) to the Humane Society. The housing authority shall not be responsible if any animal escapes from the residence due to maintenance, inspections or other activities of the landlord.

**1. Pets may not be bred or used for any commercial purposes.**

**Section II. SCHEDULE OF ANNUAL FEES AND INITIAL DEPOSIT**

**FEE AND DEPOSIT SCHEDULE**

(An Annual Fee and Deposit is required for each pet)

Type of Pet	Fee	Deposit
Dog	\$150	\$250
Cat	\$100	\$150
Fish Aquarium	\$0	\$0
Fish Bowl (Requires no power and no larger than two gallons)	\$0	\$0
Caged Pets	\$75	\$100

Note: The above schedule is applicable for each pet; therefore, if a tenant has more than one pet, they must pay the applicable pet fee and deposit for each pet.

The entire annual fee and deposit (subject to the exception listed below) must be paid prior to the execution of the lease addendum. No pet shall be allowed in the unit prior to the completion of the terms of this pet policy.

The annual fee shall be paid at the time of re-examination each year and all proof of inoculations and other requirements shall be made available to the HA at such time. The Annual Fee is not reimbursable. If the deposit is more than \$100.00, the head of household may elect to pay \$100.00 at the time of the signing of this addendum and make \$50.00 per month payments until the total deposit is paid. The deposit made shall be utilized to offset damages caused by the pet and/or tenant. Any balance, if any, from the deposit will be refunded to the tenant. THERE SHALL BE NO REFUND OF THE ANNUAL FEE.

It shall be a serious violation of the lease for any tenant to have a pet without proper approval and without having complied with the terms of this policy. Such violations shall be considered to be a violation of paragraph IV (P) of the lease and the HA will issue a termination notice. The tenant will be entitled to a grievance hearing in accordance with the HA's grievance procedure.

## **RESIDENT ACKNOWLEDGMENT**

After reading and/or having read to me this lease addendum I, \_\_\_\_\_  
agree to the following: (Print Name)

I agree to abide by the requirements outlined in this lease addendum for pet ownership and to keep the pet(s) in accordance with this lease addendum.

I agree and understand that I am liable for any damage or injury whatsoever caused by pet(s) and shall pay the landlord or applicable party for any damages or injury caused by the pet(s). I also realize that I should obtain liability insurance for pet ownership and that paying for the insurance is my responsibility.

I agree to accept full responsibility and will not hold liable (indemnify) the landlord for any claims by or injuries to third parties or their property caused by my pet(s).

I agree to pay a non-refundable fee of \$\_\_\_\_\_ to cover some of the additional operating cost incurred by the HA. I also understand that this fee is due and payable prior to the execution of this lease addendum.

I agree to pay a refundable pet deposit of \$\_\_\_\_\_ to the HA. If the pet deposit exceeds \$100.00, the deposit may be paid with an initial payment of \$100.00, and the additional amount due in increments of \$50 per month for \_\_\_\_\_ consecutive months. The \$50.00 is due and payable with my rent and other charges. If I fail to make \_\_\_\_\_ the total payment due, which shall include the pet deposit payment, rent and other charges, my lease will be terminated in accordance with the provisions of the dwelling lease and collection policy. The Annual Fee and Initial Deposit must be paid prior to the execution of this lease addendum. The pet deposit may

be used by the Landlord at the termination of the lease toward payment of any rent or toward payment of any other costs made necessary because of Tenant's occupancy of the premises. Otherwise, the pet deposit, or any balance remaining after final inspection, will be returned to the Tenant after the premises are vacated and all keys have been returned.

I agree and understand that violating this lease addendum will result in the removal of the pet(s) from the property of the HA and that I may not be allowed to own any type of pet in the future while being an occupant of the HA.

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Head of Household Signature

Date

---

Housing Authority Representative Signature

Date

**ATTACHMENTD**  
**PETRULESANDREGULATIONS**  
DwellingLeaseAddendum

SYLACAUGAHOUSINGAUTHORITY  
oftheCityofSylacauga,Alabama

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**RulesGoverningPetOwnershipinHousingforElderlyorHandicappedTenants:**

**I.INTRODUCTIONANDPURPOSE:**

(A) **INTRODUCTION:** The Sylacauga Housing Authority of the City of Sylacauga, Alabama (hereinafterreferredtoas"Landlord"),recognizingtherightsoftenantsinfederallyassistedrentalProjects fortheElderlyorHandicapped,ownedandmanagedbytheLandlord,toownorkeepcommonhousehold pets living in the dwelling unit of the Tenant, deems it desirable to prescribe reasonable rules and regulationstogovernthekeepingofsaidpets.

(B) **PURPOSE:** ConsistentwiththeinterestoftheLandlordtoinsuretheattainingofthegoalof providingdecent,safeandsanitaryhousingfortheelderlyorthehandicapped,andmaintenanceofadecent, safeandsanitarylivingenvironmentforexistingandprospective tenants,andinprotectingandpreserving the physical condition of the Project and the financial interest of the Landlord therein, the Landlord has chosen to prescribe reasonable rules and regulations to govern the keeping of common household pets authorized in Housing for the Elderly or Handicapped in any Project of the Landlord, including any buildingwithina mixed-useproject,thatwasdesignatedforoccupancybytheelderlyorhandicappedatits inception,or,althoughnotsodesignated,forwhichtheLandlordgivespreferenceintenantselection.

**II.DEFINITIONS:**

(A) "Common household pet" means a domesticated animal, such as a dog, cat, bird or fish, that is traditionallykeptinthehouseforpleasure,ratherthanforcommercialpurposes.This termdoesnotinclude animalswhichareusedtoassistthehandicapped.

(B) "Elderly or handicapped tenant" means anelderlyorhandicappedpersonorfamilyasdefinedin part24CFR912.2ofsection227oftheHousingandUrban-RenewalRecoveryActof1983(12U.S.C. 170ln-1).

(C) "Project for the Elderly or Handicapped" means any project assisted under the United States HousingActof1937.



III. EXCLUSION OF CERTAIN PETS FROM SYLAVON TOWERS PROJECT:

(A) **Exclusion of dogs and cats:** No tenant shall be permitted to keep a dog or cat in the Sylavon Towers Project owned by the Landlord. The Sylavon Towers Project consists of a multi-unit high-rise housing facility with interior hallways and corridors. The presence of dogs and/or cats in such hallways and corridors would, in the opinion of the Landlord, create an unsafe condition for the presence of those elderly or handicapped tenants who normally and commonly use the hallways and corridors in said Project; and the use of such hallways and corridors for the ingress, egress or exercise of such pets would detract from the living environment for existing and prospective tenants. Tenants shall be permitted to own or keep a common household pet other than a dog or cat, in accordance with all rules and regulations hereinafter set forth.

(B) In the event an elderly or handicapped tenant occupying a unit in the Sylavon Towers Project desires to own or keep a dog or cat, in accordance with applicable regulations, such tenant shall, upon application therefor, be allowed to transfer to some other unit designated for the elderly or handicapped. This transfer shall not be considered a convenience and no transfer fee will be charged to the tenant.

IV. APPLICATION AND REGISTRATION:

(A) **APPLICATION:** Any tenant authorized by the lease agreement to own or keep a common household pet, living in the dwelling unit of the Tenant, must make application therefor **PRIOR** to entry of any pet on the premises of the Landlord. The application must be in writing on a form prepared for said purpose by the Landlord and made available at the request of the Tenant; and the information required therein shall include, but not be limited to, the following:

1. Name of Tenant as set forth in the lease agreement.
2. Project name.
3. Dwelling unit number.
4. Date of current dwelling lease.
5. Description of pet:
  - (a) Type
  - (b) Breed
  - (c) Color
  - (d) Weight
  - (e) Height
  - (f) Approximate age
  - (g) Estimated approximate weight and height at maturity
  - (h) Source of ownership
  - (i) Description of any known physical abnormalities

6. If you own a home owner's or renter's insurance policy, the name of the insurance company or insurance agent.

7. Name, address and telephone number of two or more parties responsible for pet in absence of tenant.

(B) **REGISTRATION:** Within ten (10) days following submission of complete written application, as herein above required, Landlord shall notify tenant of (i) approval of the application conditional on compliance with the following registration requirements, or (ii) denial of approval and the reason or reasons therefor.

In the event of approval, the pet owner must register the pet **BEFORE** it is brought to the Project premises and must update the registration at least annually. Landlord may coordinate annual update with annual re-examination of tenant income. In addition, Tenant must:

1. **Inoculations:** Submit certificates signed by a licensed veterinarian or a state or local authority empowered to inoculate animals, evidencing that the pet has received all inoculations required by applicable state and local laws.

2. **Sterilization:** In the case of dogs and cats, and any other warm-blooded mammal which would fit within the definition of "common household pet", evidence must be submitted that the pet has been spayed or neutered, as applicable.

3. **Deposit:** Pay a pet deposit in the sum of Three Hundred and No/100 (\$300.00) Dollars, in addition to any other financial obligation of the Tenant; the Landlord may use the pet deposit to pay reasonable expenses directly attributable to the presence of the pet in the Project, including, but not limited to, the cost of repairs and replacement to, and fumigation of, the Tenant's dwelling unit. Landlord has taken into consideration anticipated costs of general cleaning expenses, fumigation costs, cleaning, defleaing, deticking and deodorizing carpets, doors, appliances, landscaping or other improvements on owner's property; painting expenses, carpet replacement, drapery replacement, carpentry expenses and boarding costs.

Tenant understands, however, that the payment of the pet deposit is not a limit on the Tenant's liability for property damages, cleaning, deodorization, defleaing, deticking, replacement and personal injuries for which the Tenant is or may be held liable. Payment for damages, repairs, cleaning, replacement, etc., is due immediately upon demand by the Landlord.

4. **Alternate Responsible Party:** Tenant must provide names, addresses and telephone numbers of two or more responsible parties whose duty is to care for the pet if the pet owner is absent, incapacitated, dies or is otherwise unable to care for the pet. Tenant must provide written proof that the designated responsible parties are authorized and willing to represent Tenant to insure compliance with these rules and regulations.

5. **Additional Grounds for Denial of Approval:** Landlord may deny approval of tenant application in the event Landlord has reasonably determined that, based upon the Tenant's past habits and practices, the Tenant will be unable to keep the pet in compliance with the pet rules and regulations and other lease obligations. Temperament of the pet for which application is made by the Tenant may be considered as a factor in determining the prospective pet owner's ability to comply with the pet rules and regulations and other lease obligations. The project owner, however, may not refuse to approve the application of the Tenant based upon a determination that the Tenant is financially unable to care for the pet or that the pet is inappropriate, based upon the therapeutic value to the pet owner or the interests of the property or existing tenants.

#### V. GENERAL RULES AND REGULATIONS:

(A) **SIZE AND WEIGHT RESTRICTIONS:**

1. No dog or cat may exceed the weight of twenty (20) pounds. The weight of any other pet shall not exceed two and one-half (2 - 1/2) pounds.

2. No pet cage or enclosure shall exceed in dimension two feet in width, two feet in depth or two feet in height.

3. No fish aquarium shall exceed thirty (30) gallons in capacity. (Pet Deposits shall not be charged for fish aquariums meeting this size restriction. No larger aquariums will be approved. Limited to one aquarium per apartment).

(B) **DENSITY OF TENANTS AND PETS:** Each tenant shall be permitted only one pet per dwelling unit, except, however, fish. Tenant shall be permitted only one aquarium.

(C) **STANDARDS OF PET CARE:**

1. Pet owners are required to have dogs or cats spayed or neutered, as applicable. The birth of offspring shall be considered conclusive proof of violation of this requirement.

2. Pet owners are required to have cats declawed.

3. Tenants shall regularly and periodically treat pets for fleas, insects, parasites, lice, ticks, fungus, mange and any and all similar infestations or afflictions.

4. No tenant shall own or keep any pet which exhibits or has exhibited any vicious, violent or mean propensities. In the event any pet should attack, bite, scratch or otherwise viciously or violently injure or damage any person on the premises of the Landlord, it shall be considered conclusive proof of violation of this requirement.

5. **Prohibited Animals** : Animals or breeds of animals that are considered by the HA to be vicious and/or intimidating will not be allowed. Some examples that have a reputation of a vicious nature are reptiles, rottweiler, doberman pinscher, pit bulldog, and/or any animal that displays vicious behavior. This determination will be made by a HA representative prior to the execution of this lease addendum.

6. Tenant must comply with annual licensing and inoculation requirements established by applicable state and local laws. Tenant must maintain a complete written record of compliance with licensing and inoculation requirements.

7. In the event any authorized pet shall give birth to offspring, the number of which added to the authorized pet exceed the limit authorized by these rules, the Tenant shall immediately remove from the premises all of said unauthorized pets.

8. Tenant is prohibited from altering the dwelling unit, patio, porch or yard area to create an enclosure for any pet.

9. All dogs and cats must be appropriately and effectively restrained on a leash and under the control of a responsible individual at all times while outside the tenant unit.

10. All pets are prohibited from all common areas of the Project of Landlord, said areas intended to include, but not be limited to, lobbies, laundry rooms, social rooms, dining rooms, kitchens, restrooms, offices, daycare centers and maintenance shops; pets are prohibited from hallways and corridors outside the individual dwelling units, except for the limited purpose of ingress and egress to said individual dwelling units.

11. Birds must be confined to a cage at all times.

12. **Prohibited Activity** : Pet shall not disturb, interfere or diminish the peaceful enjoyment of other tenants. The terms, "disturb, interfere or diminish" shall include but not be limited to barking, howling, chirping, biting, scratching and other like activities. This includes any pet who makes noise continuously and/or incessantly for a period of 10 minutes or intermittently for one -half hour or more and therefore disturbs any person at any time of the day or night. The Housing Manager will terminate this authorization if a pet disturbs other tenants under this section of the lease addendum. The Tenant will be given one week to make other arrangements for the care of the pet or the dwelling lease will be terminated.

**(D) SANITATION AND SAFETY STANDARDS FOR DISPOSAL OF PET WASTE:**

1. **Dogs:** Tenant must regularly remove pet from the tenant unit to permit pet to exercise and deposit waste; Tenant must collect, remove and deposit all removable pet waste (fecal material) in suitable, sanitary waste receptacles.

2. **Cats:** (a) Tenant must require pets to deposit waste in an appropriate litter box.

(b) Litter in litter box must be completely changed and replaced at least twice each week. Soiled litter must be disposed of in a closed, plastic container and deposited in an outside garbage receptacle.

(c) Tenant must separate pet waste from litter at least once each day and dispose of waste in a suitable, sanitary, sealed, plastic container or sack and deposit in an outside garbage receptacle.

3. **Other:** Litter, disposable bedding and similar material in containers, cages or enclosures for all other animals shall be completely changed and replaced at least twice each week, and shall be disposed of in a suitable, sanitary, sealed, plastic container or sack and deposited in an outside garbage receptacle.

4. Tenant must take adequate precautions and measures as may be necessary to eliminate pet odor within and around tenant unit and shall maintain the unit in a sanitary condition at all times. Emanation of pet odor outside the confines of the dwelling unit, in hallways adjoining the dwelling unit or in adjoining dwelling units or areas, shall be conclusive proof of violation of this requirement.

5. The tenant is solely responsible for cleaning up the waste of the pet within the dwelling unit and on the premises of the public housing development. If the pet is taken outside, it must be on a leash at all times. If there is any visible waste by the pet it must be disposed of in a plastic bag, securely tied and placed in the garbage receptacle for their unit. If the HA staff is required to clean any waste left by a pet, the Tenant will be charged \$50 for the removal of the waste.

6. The Tenant shall have pets restrained so that maintenance can be performed in the apartment. The Tenant shall, whenever an inspection or maintenance is scheduled, either be at home or shall have all animals caged. If a maintenance person enters an apartment where an animal is not caged, maintenance shall not be performed, and the Tenant shall be charged a fee of \$50. If this same situation again occurs, the pet shall be removed from the premises. Pets that are not caged may be impounded by animal control officers or by HA staff and taken to the local Humane Society. It shall be the responsibility of the Tenant to reclaim the pet at the expense of the Tenant. Also, if a member of the HA staff takes a pet to the Humane Society, the Tenant will be charged an additional \$50 to cover the expense of taking the pet to the Humane Society. The housing authority shall not be responsible if any animal escapes from the residence due to maintenance, inspections or other activities of the landlord.

7. Tenant shall not leave any pet unattended for a period of time exceeding twenty-four (24) hours.

8. In the event any pet is left unattended for a period of time exceeding twenty-four (24) hours, or becomes vicious, displays symptoms of severe illness or demonstrates other behavior that constitutes or appears to constitute an immediate threat to the health or safety of the tenants of the Project as a whole, Landlord is permitted entry to the tenant unit, if necessary, to remove the pet and place it in a facility that will provide care and shelter for a period not to exceed thirty (30) days.

**(E) PETS TEMPORARILY ON THE PREMISES:** Tenant is prohibited from owning or keeping any pet temporarily in the tenant unit or on the Project premises. Tenant is prohibited from feeding, housing or harboring stray animals. The feeding of a stray animal shall constitute temporary keeping of an animal and conclusive proof of violation of these rules and regulations.

**VI. INSPECTIONS:** In addition to other inspections permitted under the Tenant Lease or other provisions of these rules and regulations, Landlord may, after notice to Tenant, and during reasonable hours, enter and inspect the tenant unit in the event Landlord has reason to believe that the conduct or condition of a pet constitutes a violation of these rules and regulations, or is a nuisance or a threat to the health and safety of the occupant of the Project or other persons in the community.

**VII. EMERGENCIES:**

**(A) REMOVAL OF DANGEROUS PETS:** Landlord or his agent may enter the tenant unit, if necessary, remove a pet that is or has become vicious, displays symptoms of illness or demonstrates other behavior which may constitute an immediate threat to the health or safety of any person in the Project.

**(B) REMOVAL FOR PROTECTION OF PET AND UNIT:** Landlord or his agent may enter the tenant unit, if necessary, remove a pet if the health or safety of a pet or the condition of the tenant unit is

threatened by the death, incapacity or absence of Tenant, or by other factors that render the Tenant unable to care for the pet or unit.

**(C) COST FOLLOWING REMOVAL BY LANDLORD:** In the event a pet is removed under this Section VII, Landlord may place the pet in a facility which will provide care and shelter until Tenant is able to assume responsibility for the pet, but not longer than thirty (30) days. The cost of the animal care facility shall be the responsibility of and be borne by Tenant.

**VIII. PRIORITY OF STATE OR LOCAL LAW:** In the event any state or local law or regulation governing the care and/or handling of pets shall conflict with these rules and regulations, the state or local law or regulations shall apply and take priority over these rules and regulations.

**IX. PUNISHMENT FOR VIOLATION:** Violation of any pet rule or regulations shall be grounds for:

1. Termination of the right of Tenant to own or keep a pet registered hereunder;
2. Removal of the pet;
3. Termination of tenancy of Tenant; or
4. Any combination of the above.

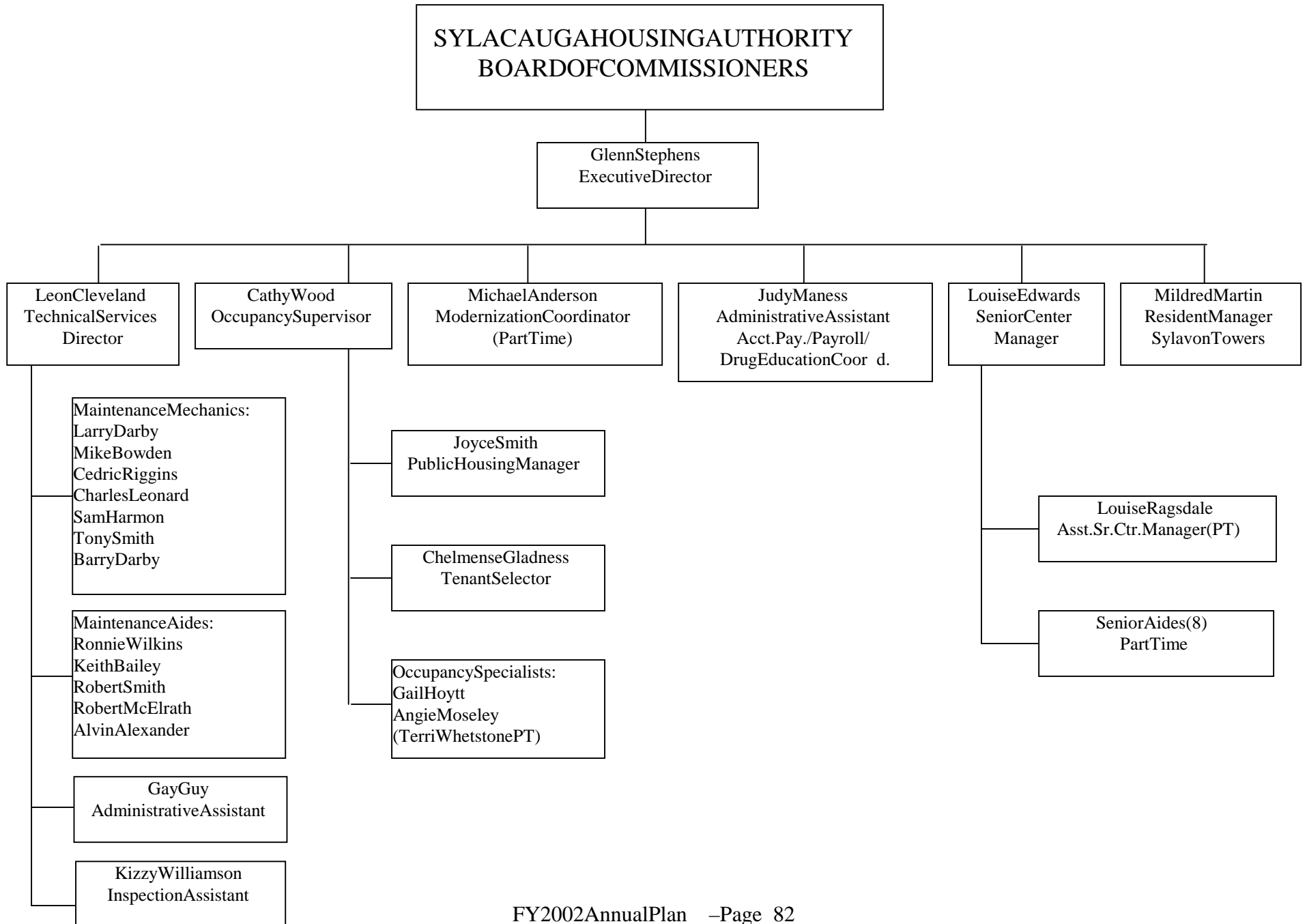
Termination of tenancy shall be handled in accordance with applicable Grievance and Hearing Procedures of Landlord.

**X. AMENDMENT:** Landlord may, from time to time, amend these rules and regulations upon written notification to each Elderly or Handicapped Tenant and, upon amendment, shall become a part thereof as if fully set forth herein.

**XI. EFFECTIVE DATE:** The effective date, as specified by the Department of Housing and Urban Development, is March 2, 1987 and revised April 2001.

(4/2001 Revision)

# ATTACHMENTE



# ATTACHMENTM

## RESIDENTADVISORYBOARD

1. EdnaMaxwell,Chairperson –SylavonCourt
2. TonySmith,BoardMember –DrewCourt
3. AnnNewman,BoardMember –DrewCourt
4. LarrayJames,BoardMember –VirginiaS.WestHomes
5. EdnaLanders,BoardMember –SylavonTowers



# **ATTACHMENT**

## **RESIDENT MEMBERSHIP BOARD**

Ms. Edna Maxwell is appointed by the Mayor and City Council of the City of Sylacauga to serve on the Board of Directors.

**PHA Resident Participation Certification**  
**Approving Annual and Five Year Agency Plans**  
 as Required by the QHWR A of 1998

**ATTACHMENT M**

PHAName <b>Sylacauga Housing Authority</b>	Template Plan Version <b>2002</b>	FFY of Plan Approval <b>2002</b>
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Acting on behalf of the Resident's Council and/or a duly recognized resident representative of the abovenamed Public Housing Agency (PHA), I make the following certifications and agreements to the U.S. Department of Housing and Urban Development (HUD) regarding the PHA's submission of (check one or more as applicable):

- 5-Year Plan Submitted on 4/17/2002  Amendments to 5-Year Plan Submitted on \_\_\_\_\_
- Annual Plan Submitted on 4/17/2002  Amendments to Annual Plan Submitted on \_\_\_\_\_

I certify on behalf of the Resident Council and/or Residents of the: (Name) Sylacauga Housing Authority that:

- |   |  |
|---|--|
| <p>1 The PHA develops, implements, monitors, and amends its 5-Year and Annual Agency Plans in consultation with residents of the developments covered by the Plan;</p> <p>2 The PHA has consulted with Resident Advisory Board (RMB) because of the RMB's required role in the development of the Five-Year and/or Annual Agency Plan;</p> <p>3 The PHA, in partnership with the residents, develops and implements a process for resident participation which ensures that residents are involved in a meaningful way in all phases of the Agency Plans;</p> <p>4 The PHA, in partnership with the residents of the developments covered by the Agency Plans, have established a Partnership Process to develop and implement the goals, needs, strategies and priorities identified in the Agency Plans;</p> <p>5 The Partnership Process has enabled residents to participate on a PHA-wide basis, in ongoing discussions of the Agency Plans and strategies for its implementation, and in all meetings necessary to ensure meaningful participation;</p> | <p>6 The PHA has informed the residents of their responsibility for learning about and participating in the Agency Planning process;</p> <p>7 Residents are encouraged to form networks with residents from other PHAs to exchange information and ideas;</p> <p>8 The PHA has made a reasonable effort to notify residents of the draft Agency Plans and has made copies of the draft Plans available to the local city government, and provided residents and local government with at least 30 days in which to comment on the draft Plans;</p> <p>9 Through the Partnership Process developed between the PHA and the residents, an approach has been formed for residents and the PHA to overcome some of the traditional barriers to working together cooperatively and collaboratively;</p> <p>10 The proposed activities, obligations and expenditures in the Agency Plans appear to be consistent with the State of Alabama Consolidated Plan; and</p> <p>11 The Resident Advisory Board Chairman of the named RAB hereby expresses satisfaction, support, and approval of the PHA's overall performance in the development of and resident involvement with the PHA's Five Year and Annual Agency Plans.</p> |
|---|--|

Attested by: Resident Advisory Board President

Edna Maxwell, Appointed Resident Representative

Resident Advisory Board Chairman

Original On File and Signed by Edna Maxwell

Address:

**Edna Maxwell**  
**202 Tyler Street**  
**Sylacauga, Alabama 35150**

Date April 11, 2002

# GRIEVANCE PROCEDURE SYLACAUGA HOUSING AUTHORITY

## I. RIGHT TO HEARING

Upon the filing of a written request as provided in these procedures, a Tenant shall be entitled to a hearing before a hearing officer.

## II. DEFINITIONS

For the purpose of this Grievance Procedure, the following definitions are applicable:

- (A) "Grievance" shall mean any dispute which a Tenant may have with respect to Landlord action or failure to act in accordance with the individual Tenant's lease or Landlord regulations which adversely affect the individual Tenant's rights, duties, welfare or status. Grievance does not include any dispute a Tenant may have with Landlord concerning a termination of tenancy or eviction that involves any activity that may threaten the health, safety, or right to peaceful enjoyment of the Landlord's public housing premises by other Tenants or employees of the Landlord, or any criminal activity or drug-related criminal activity on or off such premises.
- (B) "Complainant" shall mean any Tenant whose grievance is presented to the Landlord or at the project management office in accordance with Section III and Section IV.
- (C) "Elements of due process" shall mean an eviction action or a termination of tenancy in a State or local court in which the following procedural safeguards are required:
  - (1) Adequate notice to the Tenant of the grounds for terminating the tenancy and for eviction;
  - (2) Right of the Tenant to be represented by counsel;
  - (3) Opportunity for the Tenant to refute the evidence presented by the Landlord including the right to confront and cross-examine witnesses and to present any affirmative legal or equitable defense which the Tenant may have;
  - (4) A decision on the merits.
- (D) "Hearing officer" shall mean a person selected in accordance with Section IV of these procedures to hear grievances and render a decision with respect thereto.
- (E) *Tenant* shall mean the adult person (or persons) (other than a live-in aide):
  - (1) Who resides in the premises, and who executed the lease with the Landlord as lessee of the premises, or, if no such person now resides in the premises,
  - (2) Who resides in the premises, and who is the remaining head of household of the Tenant family residing in the premises.
- (F) *Resident organization* includes a resident management corporation.
- (G) **Promptly** (as used in Section III, and IV.(D)) shall mean within five business days from the date of mailing of the adverse action or grievable complaint.

## III. PROCEDURES PRIOR TO HEARING

*Informal settlement of grievance.* Any grievance shall be promptly and personally presented, either orally or in writing, to the Landlord office or to the office of the project in which the Tenant resides so that the grievance may be discussed informally and settled without a hearing. A summary of such discussions shall be prepared within a reasonable time and one copy shall be given to the Tenant and one retained in the Landlord's Tenant file. The summary shall specify the names of the participants, dates of meeting, the nature of the proposed disposition of the complaint and the specific reasons therefor, and shall specify the procedures by which a hearing under these procedures may be obtained if the Tenant is not satisfied. **The purpose of this informal settlement of grievance is to allow the Tenant and management to informally discuss an issue without the need for third parties, including witnesses or representatives, to be involved. At any time that a third party, including a witness or representative becomes or should become involved in the process, the informal settlement conference shall become a "hearing" and the procedures found in Section IV hereof shall apply. The housing authority shall notify the Tenant of the date and time that the hearing will take place.**

## IV. PROCEDURES TO OBTAIN A HEARING

- (A) *Request for hearing.* In the event that the Tenant is not satisfied with the informal settlement of grievance provided for in Section III, the Tenant shall submit a written request for a hearing to the Landlord or the project office within five (5) business days from date of mailing of the summary of discussion pursuant to Section III. The written request shall specify:
  - (1) The reasons for the grievance; and
  - (2) The action or relief sought.
- (B) *Selection of Hearing Officer.* A grievance hearing shall be conducted by an impartial person appointed by the Landlord other than a person who made or approved the Landlord action under review or a subordinate of such person.

The Landlord shall annually submit a list of prospective hearing officers. This list shall be provided to any existing resident organization for such organization's comments or recommendations. Any comments or recommendations by the resident organizations submitted in a reasonable time shall be considered by the Landlord.

From this list, a hearing officer shall be selected.
- (C) *Failure to request a hearing.* If the Tenant does not request a hearing in accordance with this Section, then the Landlord's disposition of the grievance under Section III shall become final: *Provided*, That failure to request a hearing shall not constitute a waiver by the Tenant of the right thereafter to contest the Landlord's action in disposing of the complaint in an appropriate judicial proceeding.
- (D) *Hearing prerequisite.* All grievances shall be promptly presented in person, either orally or in writing pursuant to the informal procedure prescribed in Section III as a condition precedent to a hearing under this section: *Provided*, That if the Tenant shall show good cause why there was failure to proceed in accordance with Section III to the hearing officer, the provisions of this Subsection may be waived by the hearing officer.
- (E) *Escrow deposit.* Before a hearing is scheduled in any grievance involving the amount of rent as defined in the lease which the Landlord claims is due, the Tenant shall pay to the Landlord an amount equal to the amount of the rent due and payable as of the first of the month preceding the month in which the act or failure to act took place. The Tenant shall thereafter deposit monthly the same amount of the monthly rent in an escrow account held by the Landlord until the complaint is resolved by decision of the hearing

considered as acceptance of money for rent during the period in which the grievance is pending. These requirements may be waived by the Landlord in extenuating circumstances. Unless so waived, the failure to make such payments shall result in a termination of the grievance procedure: *Provided*, That failure to make payment shall not constitute a waiver of any right the Tenant may have to contest the Landlord's disposition of his grievance in any appropriate judicial proceeding.

- (F) *Scheduling of hearings.* Upon the Tenant's compliance with this Section, or upon the housing authority notifying the tenant or his/her representative that a hearing will be held, a hearing shall be promptly scheduled by the hearing officer for a time and place reasonably convenient to both the Tenant and the Landlord. A written notification specifying the date, time, place and the procedures governing the hearing shall be delivered to the Tenant and the appropriate Landlord official.

## V. PROCEDURES GOVERNING THE HEARING

- (A) The Tenant shall be afforded a fair hearing, which shall include:
- (1) The opportunity to examine before the grievance hearing any Landlord documents, including records and regulations, that are directly relevant to the hearing. The Tenant shall be provided a copy of any such document at the Tenant's expense. If the Landlord does not make the document available for examination upon request by the Tenant, the Landlord may not rely on such document at the grievance hearing.
  - (2) The right to be represented by counsel or other person chosen as the Tenant's representative, and to have such person make statements on the Tenant's behalf;
  - (3) The right to a private hearing unless the Tenant requests a public hearing;
  - (4) The right to present evidence and arguments in support of the Tenant's complaint, to controvert evidence relied on by the Landlord or project management, and to confront and cross-examine all witnesses upon whose testimony or information the Landlord or project management relies; and
  - (5) A decision based solely and exclusively upon the facts presented at the hearing.
- (B) *Accommodation of persons with disabilities.*
- (1) The Landlord shall provide reasonable accommodation for persons with disabilities to participate in the hearing.  

Reasonable accommodation may include qualified sign language interpreters, readers, accessible locations, or attendants.
  - (2) If the Tenant is visually impaired, any notice to the Tenant which is required by these procedures must be in an accessible format.
- (C) At the hearing, the complainant must first make a showing of an entitlement to the relief sought and thereafter the HA must sustain the burden of justifying the HA action or failure to act against which the complaint is directed.

## VI. DECISION OF THE HEARING OFFICER

- (A) The hearing officer shall prepare a written decision, together with the reasons therefor, within a reasonable time (not to exceed 10 calendar days) after the hearing. A copy

of the decision shall be sent to the Tenant and the Landlord. The Landlord shall retain a copy of the decision in the Tenant's folder. A copy of such decision, with all names and identifying references deleted, shall also be maintained on file by the Landlord and made available for inspection by a prospective complainant, his representative, or the hearing officer.

(B) The decision of the hearing officer shall be binding on the Landlord which shall take all actions, or refrain from any actions, necessary to carry out the decision unless the Landlord's Board of Commissioners determines within a reasonable time, and promptly notifies the complainant of its determination, that:

(1) The grievance does not concern Landlord action or failure to act in accordance with or involving the Tenant's lease or Landlord regulations, which adversely affect the Tenant's rights, duties, welfare or status;

(2) The decision of the hearing officer is contrary to applicable Federal, State or local law, Landlord regulations or requirements of the Annual Contributions Contract between Landlord and the U.S. Department of Housing and Urban Development.

(C) A decision by the hearing officer or Board of Commissioners in favor of the Landlord or which denies the relief requested by the Tenant in whole or in part shall not constitute a waiver of, nor affect in any manner whatsoever, any rights the Tenant may have to a trial *de novo* or judicial review in any judicial proceedings, which may thereafter be brought in the matter.

I have received a copy of this grievance procedure and have had an opportunity to ask questions about the procedure.

---

Tenant \_\_\_\_\_ Date \_\_\_\_\_

---

Tenant \_\_\_\_\_ Date \_\_\_\_\_

Voluntary Conversion of Public Housing Development Analysis  
Required Initial Assessment

**HOUSING AUTHORITY:** Sylacauga Housing Authority

**Determination of requirement for initial assessment:**

This assessment must be completed once for each of the authority's developments, unless the development fall under one of the following categories:

1. The development has already been determined to be subject to mandatory conversion under 24 CFR part 971;
2. The development is the subject of an application for demolition or disposition that has not been disapproved by HUD;
3. The development has been awarded a HOPEVI revitalization grant; or
4. The development is designated for occupancy by the elderly and/or persons with disabilities (i.e., is not a general occupancy development).

Please complete this table for all developments of your PHA to determine if an initial assessment is required.

**\*If any question is answered yes, development is exempt for the voluntary conversion requirements.**

DEV. NUMBER	DEVELOPMENT NAME	*IS THE DEV. SUBJECT TO MANDATORY CONVERSION?	*ISA DEMOLITION APPLICATION PENDING	*IS THE DEV. DESIGNATED ELDERLY/ DISABLED?	*DEV. HAS HOPEVI APPROVED?	*IS DEV. EXEMPT?
AL09P057002	Sylavon Court	No	No	Yes	No	No
AL09P057003	Sylavon Court Extension	No	No	Yes	No	No
AL09P057004	Drew Court Extension	No	No	No	No	No
AL09P057005	Drew Court Extension	No	No	No	No	No
AL09P057006	Drew Court Extension	No	No	No	No	No
AL09P057008	Sylavon Towers	No	No	Yes	No	No
AL09P057009	Sylavon Court Extension	No	No	Yes	No	No
AL09P057010	Drew Court	No	No	No	No	No
AL09P057011	Virginia S. West Homes	No	No	No	No	No

**Complete an individual development analysis for each development not exempt.**

Voluntary Conversion of Public Housing Development Analysis  
Required Initial Assessment

**DEVELOPMENT NUMBER:** AL09P057002

As required by 24 CFR Part 972-Complete each section to determine if Conversion of Public Housing to Tenant-Based Assistance, may be appropriate:

**Necessary conditions for voluntary conversion:**

- *Will not be more expensive than continuing to operate the development (or portion of it) as public housing;*
- *Will principally benefit the residents of the public housing development to be converted and the community; and*
- *Will not adversely affect the availability of affordable housing in the community.*

1. Is the cost of conversion more expensive than continuing to operate the development as a public housing community? Use most recent financial (year-end) statements for public housing and Section 8.

- a. Public Housing Line 520, HUD 52599: (PUM) \$225.37
- b. Section 8 HUD 52681, Line 30 \$757,990 divided by line 11: \$2,989 = avg. unit cost \$253.59
- c. Is line 1b higher? Yes  No

If line c is yes, Section 8 is more expensive to operate and is not appropriate for conversion and you do not have to complete sections 2 or 3.

2. Would the conversion of this public housing development principally benefit the residents of this development and the community? Yes  No

- a. Would the conversion adversely affect the availability of affordable housing in the community? Yes  No

Comments:

- b. Would the conversion provide the development with better housing choices? Yes  No

Comments:

- c. Would the conversion help to de-concentrate low-income families in the community? Yes  No

Comments:

- d. Could other sources of housing be developed in connection with the conversion of this development to benefit residents? Yes  No

Comments:

If line 2 is no, this development is not appropriate for conversion and you do not go to Number 3.

3. Would the conversion of this public housing development affect the availability of affordable housing stock in the area? Yes  No

Comments:

If line 3 is no, this development is not appropriate for conversion.

**We have determined that conversion is:**

Appropriate because conversion of the development would meet the necessary conditions for voluntary conversion.

Inappropriate because conversion of the development would not meet the necessary conditions for voluntary conversion.

Signature of Executive Director

Date

Voluntary Conversion of Public Housing Development Analysis  
Required Initial Assessment

DEVELOPMENT NUMBER: AL09P057003

As required by 24 CFR Part 972 - Complete each section to determine if Conversion of Public Housing to Tenant-Based Assistance, may be appropriate:

**Necessary conditions for voluntary conversion:**

- *Will not be more expensive than continuing to operate the development (or portion of it) as public housing;* •
- *Will principally benefit the residents of the public housing development to be converted and the community; and* •
- *Will not adversely affect the availability of affordable housing in the community.*

1. Is the cost of conversion more expensive than continuing to operate the development as a public housing community? Use most recent financial (year-end) statements for public housing and Section 8.

a. Public Housing Line 520, HUD 52599: (PUM) \$225.37

b. Section 8 HUD 52681, Line 30 \$757,990 divided by line 11: \$2,989 = avg. unit cost \$253.59

(If you do not have Section 8, you may contact another Authority in your locality with the same FMRs and use its information or contact your Public Housing Revitalization Specialist.)

c. Is line 1b higher? Yes  No

If line c is yes, Section 8 is more expensive to operate and is not appropriate for conversion and you do not have to complete sections 2 or 3.

2. Would the conversion of this public housing development principally benefit the residents of this development and the community? Yes  No

a. Would the conversion adversely affect the availability of affordable housing in the community? Yes  No

Comments:

b. Would the conversion provide the development with better housing choices? Yes  No

Comments:

c. Would the conversion help to de-concentrate low-income families in the community? Yes  No

Comments:

d. Could other sources of housing be developed in connection with the conversion of this development to benefit residents? Yes  No

Comments:

If line 2 is no, this development is not appropriate for conversion and you do not go to Number 3.

3. Would the conversion of this public housing development affect the availability of affordable housing stock in the area? Yes  No

Comments:

If line 3 is no, this development is not appropriate for conversion.

We have determined that conversion is:

Appropriate because conversion of the development would meet the necessary conditions for voluntary conversion.

Inappropriate because conversion of the development would not meet the necessary conditions for voluntary conversion.

Signature of Executive Director

Date



Voluntary Conversion of Public Housing Development Analysis  
Required Initial Assessment

DEVELOPMENT NUMBER: AL09P057004

As required by 24 CFR Part 972-Complete each section to determine if Conversion of Public Housing to Tenant-Based Assistance, may be appropriate:

**Necessary conditions for voluntary conversion:**

- Will not be more expensive than continuing to operate the development (or portion of it) as public housing; •  
• Will principally benefit the residents of the public housing development to be converted and the community; and •  
• Will not adversely affect the availability of affordable housing in the community.

1. Is the cost of conversion more expensive than continuing to operate the development as a public housing community? Use most recent financial (year-end) statements for public housing and Section 8.

a. Public Housing Line 520, HUD 52599: (PUM) \$225.37

b. Section 8 HUD 52681, Line 30 \$757,990 divided by line 11: \$2,989 = avg. unit cost \$253.59

(If you do not have Section 8, you may contact another Authority in your locality with the same FMRs and use its information or contact your Public Housing Revitalization Specialist.)

c. Is line 1b higher? Yes  No

If line c is yes, Section 8 is more expensive to operate and is not appropriate for conversion and you do not have to complete sections 2 or 3.

2. Would the conversion of this public housing development principally benefit the residents of this development and the community? Yes No

a. Would the conversion adversely affect the availability of affordable housing in the community? Yes No

Comments:

b. Would the conversion provide the development with better housing choices? Yes No

Comments:

c. Would the conversion help to de-concentrate low-income families in the community? Yes No

Comments:

d. Could other sources of housing be developed in connection with the conversion of this development to benefit residents? Yes No

Comments:

If line 2 is no, this development is not appropriate for conversion and you do not go to Number 3.

3. Would the conversion of this public housing development affect the availability of affordable housing stock in the area? Yes No

Comments:

If line 3 is no, this development is not appropriate for conversion.

We have determined that conversion is:

Appropriate because conversion of the development would meet the necessary conditions for voluntary conversion.

Inappropriate because conversion of the development would not meet the necessary conditions for voluntary conversion.

Signature of Executive Director

Date

Voluntary Conversion of Public Housing Development Analysis  
Required Initial Assessment

**DEVELOPMENT NUMBER:** AL09P057005

As required by 24 CFR Part 972-Complete each section to determine if Conversion of Public Housing to Tenant-Based Assistance, may be appropriate:

**Necessary conditions for voluntary conversion:**

- *Will not be more expensive than continuing to operate the development (or portion of it) as public housing;*
- *Will principally benefit the residents of the public housing development to be converted and the community; and*
- *Will not adversely affect the availability of affordable housing in the community.*

1. Is the cost of conversion more expensive than continuing to operate the development as a public housing community? Use most recent financial (year-end) statements for public housing and Section 8.

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If line is yes, Section 8 is more expensive to operate and is not appropriate for conversion and you do not have to complete sections 2 or 3.

2. Would the conversion of this public housing development principally benefit the residents of this development and the community? Yes No

a. Would the conversion adversely affect the availability of affordable housing in the community? Yes No

Comments:

b. Would the conversion provide the development with better housing choices? Yes No

Comments:

c. Would the conversion help to de-concentrate low-income families in the community? Yes No

Comments:

d. Could other sources of housing be developed in connection with the conversion of this development to benefit residents? Yes No

Comments:

If line 2 is no, this development is not appropriate for conversion and you do not go to Number 3.

3. Would the conversion of this public housing development affect the availability of affordable housing stock in the area? Yes No

Comments:

If line 3 is no, this development is not appropriate for conversion.

**We have determined that conversion is:**

- Appropriate because conversion of the development would meet the necessary conditions for voluntary conversion.
- Inappropriate because conversion of the development would not meet the necessary conditions for voluntary conversion.

Signature of Executive Director

Date

Voluntary Conversion of Public Housing Development Analysis  
Required Initial Assessment

**DEVELOPMENT NUMBER:** AL09P057006

As required by 24 CFR Part 972-Complete each section to determine if Conversion of Public Housing to Tenant-Based Assistance, may be appropriate:

**Necessary conditions for voluntary conversion:**

• *Will not be more expensive than continuing to operate the development (or portion of it) as public housing;* •  
*Will principally benefit the residents of the public housing development to be converted and the community; and* •  
*Will not adversely affect the availability of affordable housing in the community.* •

1. Is the cost of conversion more expensive than continuing to operate the development as a public housing community? Use most recent financial (year-end) statements for public housing and Section 8.

a. Public Housing Line 520, HUD 52599: (PUM) \$225.37

b. Section 8 HUD 52681, Line 30 \$757,990 divided by line 11: \$2,989 = avg. unit cost \$253.59

(If you do not have Section 8, you may contact another Authority in your locality with the same FMRs and use its information or contact your Public Housing Revitalization Specialist.)

c. Is line 1b higher? Yes  No

If line is yes, Section 8 is more expensive to operate and is not appropriate for conversion and you do not have to complete sections 2 or 3.

2. Would the conversion of this public housing development principally benefit the residents of this development and the community? Yes No

a. Would the conversion adversely affect the availability of affordable housing in the community? Yes No

Comments:

\_\_\_\_\_

b. Would the conversion provide the development with better housing choices? Yes No

Comments:

\_\_\_\_\_

c. Would the conversion help to de-concentrate low-income families in the community? Yes No

Comments:

\_\_\_\_\_

d. Could other sources of housing be developed in connection with the conversion of this development to benefit residents? Yes No

Comments:

\_\_\_\_\_

If line 2 is no, this development is not appropriate for conversion and you do not go to Number 3.

3. Would the conversion of this public housing development affect the availability of affordable housing stock in the area? Yes No

Comments:

\_\_\_\_\_

If line 3 is no, this development is not appropriate for conversion.

**We have determined that conversion is:**

Appropriate because conversion of the development would meet the necessary conditions for voluntary conversion.

Inappropriate because conversion of the development would not meet the necessary conditions for voluntary conversion.

Signature of Executive Director

Date

Voluntary Conversion of Public Housing Development Analysis  
Required Initial Assessment

**DEVELOPMENT NUMBER:** AL09P057008

As required by 24 CFR Part 972-Complete each section to determine if Conversion of Public Housing to Tenant-Based Assistance, may be appropriate:

**Necessary conditions for voluntary conversion:**

• *Will not be more expensive than continuing to operate the development (or portion of it) as public housing;* •  
*Will principally benefit the residents of the public housing development to be converted and the community; and* •  
*Will not adversely affect the availability of affordable housing in the community.* •

1. Is the cost of conversion more expensive than continuing to operate the development as a public housing community? Use most recent financial (year-end) statements for public housing and Section 8.

a. Public Housing Line 520, HUD 52599: (PUM) \$225.37

b. Section 8 HUD 52681, Line 30 \$757,990 divided by line 11: \$2,989 = avg. unit cost \$253.59

(If you do not have Section 8, you may contact another Authority in your locality with the same FMRs and use its information or contact your Public Housing Revitalization Specialist.)

c. Is line 1b higher? Yes  No

If line is yes, Section 8 is more expensive to operate and is not appropriate for conversion and you do not have to complete sections 2 or 3.

2. Would the conversion of this public housing development principally benefit the residents of this development and the community? Yes No

a. Would the conversion adversely affect the availability of affordable housing in the community? Yes No

Comments:

\_\_\_\_\_

b. Would the conversion provide the development with better housing choices? Yes No

Comments:

\_\_\_\_\_

c. Would the conversion help to de-concentrate low-income families in the community? Yes No

Comments:

\_\_\_\_\_

d. Could other sources of housing be developed in connection with the conversion of this development to benefit residents? Yes No

Comments:

\_\_\_\_\_

If line 2 is no, this development is not appropriate for conversion and you do not go to Number 3.

3. Would the conversion of this public housing development affect the availability of affordable housing stock in the area? Yes No

Comments:

\_\_\_\_\_

If line 3 is no, this development is not appropriate for conversion.

**We have determined that conversion is:**

Appropriate because conversion of the development would meet the necessary conditions for voluntary conversion.

Inappropriate because conversion of the development would not meet the necessary conditions for voluntary conversion.

Signature of Executive Director

Date

SignatureofExecutiveDirector

Date

Voluntary Conversion of Public Housing Development Analysis  
Required Initial Assessment

**DEVELOPMENT NUMBER:** AL09P057010

As required by 24 CFR Part 972-Complete each section to determine if Conversion of Public Housing to Tenant-Based Assistance, may be appropriate:

**Necessary conditions for voluntary conversion:**

• *Will not be more expensive than continuing to operate the development (or portion of it) as public housing;* •  
*Will principally benefit the residents of the public housing development to be converted and the community; and* •  
*Will not adversely affect the availability of affordable housing in the community.* •

1. Is the cost of conversion more expensive than continuing to operate the development as a public housing community? Use most recent financial (year-end) statements for public housing and Section 8.

a. Public Housing Line 520, HUD 52599: (PUM) \$225.37

b. Section 8 HUD 52681, Line 30 \$757,990 divided by line 11: \$2,989 = avg. unit cost \$253.59

(If you do not have Section 8, you may contact another Authority in your locality with the same FMRs and use its information or contact your Public Housing Revitalization Specialist.)

c. Is line 1b higher? Yes  No

If line is yes, Section 8 is more expensive to operate and is not appropriate for conversion and you do not have to complete sections 2 or 3.

2. Would the conversion of this public housing development principally benefit the residents of this development and the community? Yes No

a. Would the conversion adversely affect the availability of affordable housing in the community? Yes No

Comments:

\_\_\_\_\_

b. Would the conversion provide the development with better housing choices? Yes No

Comments:

\_\_\_\_\_

c. Would the conversion help to de-concentrate low-income families in the community? Yes No

Comments:

\_\_\_\_\_

d. Could other sources of housing be developed in connection with the conversion of this development to benefit residents? Yes No

Comments:

\_\_\_\_\_

If line 2 is no, this development is not appropriate for conversion and you do not go to Number 3.

3. Would the conversion of this public housing development affect the availability of affordable housing stock in the area? Yes No

Comments:

\_\_\_\_\_

If line 3 is no, this development is not appropriate for conversion.

**We have determined that conversion is:**

Appropriate because conversion of the development would meet the necessary conditions for voluntary conversion.

Inappropriate because conversion of the development would not meet the necessary conditions for voluntary conversion.

Signature of Executive Director

Date

Voluntary Conversion of Public Housing Development Analysis  
Required Initial Assessment

**DEVELOPMENT NUMBER:** AL09P057011

As required by 24 CFR Part 972-Complete each section to determine if Conversion of Public Housing to Tenant-Based Assistance, may be appropriate:

**Necessary conditions for voluntary conversion:**

• *Will not be more expensive than continuing to operate the development (or portion of it) as public housing;* •  
*Will principally benefit the residents of the public housing development to be converted and the community; and* •  
*Will not adversely affect the availability of affordable housing in the community.* •

1. Is the cost of conversion more expensive than continuing to operate the development as a public housing community? Use most recent financial (year-end) statements for public housing and Section 8.

a. Public Housing Line 520, HUD 52599: (PUM) \$225.37

b. Section 8 HUD 52681, Line 30 \$757,990 divided by line 11: \$2,989 = avg. unit cost \$253.59

(If you do not have Section 8, you may contact another Authority in your locality with the same FMRs and use its information or contact your Public Housing Revitalization Specialist.)

c. Is line 1b higher? Yes  No

If line c is yes, Section 8 is more expensive to operate and is not appropriate for conversion and you do not have to complete sections 2 or 3.

2. Would the conversion of this public housing development principally benefit the residents of this development and the community? Yes No

a. Would the conversion adversely affect the availability of affordable housing in the community? Yes No

Comments:

\_\_\_\_\_

b. Would the conversion provide the development with better housing choices? Yes No

Comments:

\_\_\_\_\_

c. Would the conversion help to de-concentrate low-income families in the community? Yes No

Comments:

\_\_\_\_\_

d. Could other sources of housing be developed in connection with the conversion of this development to benefit residents? Yes No

Comments:

\_\_\_\_\_

If line 2 is no, this development is not appropriate for conversion and you do not go to Number 3.

3. Would the conversion of this public housing development affect the availability of affordable housing stock in the area? Yes No

Comments:

\_\_\_\_\_

If line 3 is no, this development is not appropriate for conversion.

**We have determined that conversion is:**

Appropriate because conversion of the development would meet the necessary conditions for voluntary conversion.

Inappropriate because conversion of the development would not meet the necessary conditions for voluntary conversion.

Signature of Executive Director

Date

