

Small PHA Plan Update Annual Plan for Fiscal Year: 2002

The Housing Authority of the City of Bremen, Georgia GA254v01

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

## PHA Plan Agency Identification

PHA Name: Bremen Housing Authority
PHA Number: GA254
PHA Fiscal Year Beginning: 01/2002
PHA Plan Contact Information: Name: Heidi Smith Phone: 770-537-4020 TDD: 770-537-4020 Email (if available): gis@mindspring.com
Public Access to Information Information regarding any activities outlined in this plan can be obtained by contacting: (select all that apply)
<b>Display Locations For PHA Plans and Supporting Documents</b>
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 Main administrative office of the local, county or 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)
PHA Programs Administered:
□ Public Housing and Section 8 □ Section 8 Only □ Public Housing Only

## Annual PHA Plan Fiscal Year 2002

[24 CFR Part 903.7]

#### i. Table of Contents

Provide a table of contents for the Plan, including attachments, and a list of supporting documents available for public inspection. For 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. If the attachment is provided as a **SEPARATE** file submission from the PHA Plans file, provide the file name in parentheses in the space to the right of the title.

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#### ii. Executive Summary

[24 CFR Part 903.7 9 (r)]

At PHA option, provide a brief overview of the information in the Annual Plan

#### **Not Applicable**

#### 1. Summary of Policy or Program Changes for the Upcoming Year

In this section, briefly describe changes in policies or programs discussed in last year's PHA Plan that are not covered in other sections of this Update.

The Housing Authority will continue to revise existing procedures & programs pursuant to HUD Final Rules. The Authority does not intend to otherwise revise any current policy or program. The Housing Authority will enforce it's policy to provide for deconcentration of poverty and encourage income mixing by bringing in higher income families into lower income developments and lower income families into higher income developments. The PHA has had no new policy changes in 2001.

#### 2. Capital Improvement Needs

20 000000000000000000000000000000000000
[24 CFR Part 903.7 9 (g)]
Exemptions: Section 8 only PHAs are not required to complete this component.
A. Yes No: Is the PHA eligible to participate in the CFP in the fiscal year covered by this PHA Plan?
B. What is the amount of the PHA's estimated or actual (if known) Capital Fund Program grant for the upcoming year? \$164,207.00
C. Yes No Does the PHA plan to participate in the Capital Fund Program in the upcoming year? If yes, complete the rest of Component 7. If no, skip to next component.

#### D. Capital Fund Program Grant Submissions

#### (1) Capital Fund Program 5-Year Action Plan

The Capital Fund Program 5-Year Action Plan is provided as Attachment C

#### (2) Capital Fund Program Annual Statement

The Capital Fund Program Annual Statement is provided as Attachment **B** 

## **Demolition and Disposition** [24 CFR Part 903.7 9 (h)] Applicability: Section 8 only PHAs are not required to complete this section. 1. $\square$ Yes $\boxtimes$ 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 next component; if "yes", complete one activity description for each development.) 2. Activity Description **Demolition/Disposition Activity Description** (Not including Activities Associated with HOPE VI or Conversion Activities) 1a. Development name: 1b. Development (project) number: 2. Activity type: Demolition Disposition 3. Application status (select one) Approved [ Submitted, pending approval Planned application 4. Date application approved, submitted, or planned for submission: (dd/mm/yy) 5. Number of units affected: 6. Coverage of action (select one) Part of the development Total development 7. Relocation resources (select all that apply) Section 8 for units Public housing for units Preference for admission to other public housing or section 8 units (describe below) Other housing for 8. Timeline for activity:

a. Actual or projected start date of activity:

c. Projected end date of activity:

b. Actual or projected start date of relocation activities:

<b>4. Voucher Hom</b> [24 CFR Part 903.7 9 (k)]	eownership Program
A. 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 next component; if "yes", describe each program using the table below (copy and complete questions for each program identified.)
The PHA has demons  Establishin that at leas Requiring insured or underwriti Demonstra	PHA to Administer a Section 8 Homeownership Program strated its capacity to administer the program by (select all that apply): In a minimum homeowner downpayment requirement of at least 3 percent and requiring set 1 percent of the downpayment comes from the family's resources that financing for purchase of a home under its section 8 homeownership will be provided, a guaranteed by the state or Federal government; comply with secondary mortgage market ing requirements; or comply with generally accepted private sector underwriting standards atting that it has or will acquire other relevant experience (list PHA experience, or any other on to be involved and its experience, below):
[24 CFR Part 903.7 (m)]	me Prevention: PHDEP Plan
	ly PHAs may skip to the next component PHAs eligible for PHDEP funds must provide a PHDEP Plan ments prior to receipt of PHDEP funds.
A. Yes No: 1	Is the PHA eligible to participate in the PHDEP in the fiscal year covered by this PHA
B. What is the amount \$25,000.00	nt of the PHA's estimated or actual (if known) PHDEP grant for the upcoming year?
C. X Yes No	Does the PHA plan to participate in the PHDEP in the upcoming year? If yes, answer ip to next component.
D. Xes No:	The PHDEP Plan is attached at Attachment <b>D</b> .

## **<u>6. Other Information</u>** [24 CFR Part 903.7 9 (r)]

A. Re	esident A	Advisory Board (RAB) Recommendations and PHA Response
1.	Yes 🖂	No: Did the PHA receive any comments on the PHA Plan from the Resident Advisory Board/s?
2. If y	es, the c	comments are Attached at Attachment .
3. In v	what ma	nner did the PHA address those comments? (select all that apply)  The PHA changed portions of the PHA Plan in response to comments  A list of these changes is included  Yes No: below or  Yes No: at the end of the RAB Comments in Attachment  Considered comments, but determined that no changes to the PHA Plan were necessary. An explanation of the PHA's consideration is included at the end of the RAB Comments in Attachment  Attachment
		Other: (list below)
		of Consistency with the Consolidated Plan
For eac	h applicat	ble Consolidated Plan, make the following statement (copy questions as many times as necessary).
1. Co	nsolidate	ed Plan jurisdiction: State of Georgia/Department of Community Affairs
		as taken the following steps to ensure consistency of this PHA Plan with the Consolidated Plan diction: (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 specific initiatives contained in the Consolidated Plan. (list such initiatives below)  Other: (list below)
		lests for support from the Consolidated Plan Agency lo: Does the PHA request financial or other support from the State or local government agency in order to meet the needs of its public housing residents or inventory? If yes, please list the 5 most important requests below:

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

The Consolidated Plan supports the PHA Plan of the Bremen Housing Authority because the PHA Plan meets the priority outlined in the State of Georgia's Consolidated Plan to increase the number of Georgia's low and moderate income households who have obtained affordable, rental housing free of overcrowded and structurally substandard conditions. There is a need for affordable housing for extremely low, very low, low and moderate-income families in Bowdon. The waiting list for the Bremen Housing Authority indicates a housing need for all types of families.

#### C. Criteria for Substantial Deviation and Significant Amendments

#### 1. Amendment and Deviation Definitions

24 CFR Part 903.7(r)

PHAs are required to define and adopt their own standards of substantial deviation from the 5-year Plan and Significant Amendment to the Annual Plan. The definition of significant amendment is important because it defines when the PHA will subject a change to the policies or activities described in the Annual Plan to full public hearing and HUD review before implementation.

#### A. Substantial Deviation from the 5-year Plan:

Substantial deviations are defined as discretionary in the plans or policies of the housing authority that fundamentally change the mission, goals, objectives, or plans of the agency and which require formal approval of the Board of Commissioners or as may be required by HUD.

#### **B.** Significant Amendment or Modification to the Annual Plan:

Significant amendments or modifications are defined as discretionary in the plans or policies of the housing authority that fundamentally change the mission, goals, objectives, or plans of the agency and which require formal approval of the Board of Commissioners or as may be required by HUD.

## Attachment A

## **Supporting Documents Available for Review**

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

	List of Supporting Documents Available for Review						
Applicable & On Display	•						
<b>√</b>	PHA Plan Certifications of Compliance with the PHA Plans and Related Regulations	5 Year and Annual Plans					
✓	State/Local Government Certification of Consistency with the Consolidated Plan (not required for this update) For 2000	5 Year and Annual Plans					
✓	Fair Housing Documentation Supporting Fair Housing Certifications: Records reflecting thathe PHA has examined its programs or proposed programs, identified any impediments to fair housing choice in those programs, addressed or is addressing those impediments in a reasonable fashion in view of the resources available, and worked or is working with local jurisdictions to implement any of the jurisdictions' initiatives to affirmatively further fair housing that require the PHA's involvement.	5 Year and Annual Plans					
<b>√</b>	Housing Needs Statement of the Consolidated Plan for the jurisdiction/s in which the PHA is located and any additional backup data to support statement of housing needs in the jurisdiction	Annual Plan: Housing Needs					
✓	Most recent board-approved operating budget for the public housing program	Annual Plan: Financial Resources					
✓	Public Housing Admissions and (Continued) Occupancy Policy (A&O/ACOP), which includes the Tenant Selection and Assignment Plan [TSAP]	Annual Plan: Eligibility, Selection, and Admissions Policies					
	Any policy governing occupancy of Police Officers in Public Housing  check here if included in the public housing  A&O Policy	Annual Plan: Eligibility, Selection, and Admissions Policies					
	Section 8 Administrative Plan	Annual Plan: Eligibility, Selection, and Admissions Policies					
<b>√</b>	Public housing rent determination policies, including the method for setting public housing flat rents  check here if included in the public housing  A & O Policy	Annual Plan: Rent Determination					
✓	Schedule of flat rents offered at each public housing development  check here if included in the public housing  A & O Policy	Annual Plan: Rent Determination					

List of Supporting Documents Available for Review					
Applicable & On Display	Supporting Document	Related Plan Component			
	Section 8 rent determination (payment standard) policies  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			
✓	Results of latest binding Public Housing Assessment System (PHAS) Assessment	Annual Plan: Management and Operations			
<b>√</b>	Follow-up Plan to Results of the PHAS Resident Satisfaction Survey (if necessary)	Annual Plan: Operations and Maintenance and Community Service & Self-Sufficiency			
	Results of latest Section 8 Management Assessment System (SEMAP)	Annual Plan: Management and Operations			
	Any required policies governing any Section 8 special housing types  check here if included in Section 8 Administrative Plan	Annual Plan: Operations and Maintenance			
<b>✓</b>	Public housing grievance procedures  check here if included in the public housing  A & O Policy	Annual Plan: Grievance Procedures			
	Section 8 informal review and hearing procedures  check here if included in Section 8 Administrative Plan	Annual Plan: Grievance Procedures			
✓	The HUD-approved Capital Fund/Comprehensive Grant Program Annual Statement (HUD 52837) for any active grant year	Annual Plan: Capital Needs			
✓	Most recent CIAP Budget/Progress Report (HUD 52825) for any active CIAP grants	Annual Plan: Capital Needs			
	Approved HOPE VI applications or, if more recent, approved or submitted HOPE VI Revitalization Plans, or any other approved proposal for development of public housing	Annual Plan: Capital Needs			
	Self-evaluation, Needs Assessment and Transition Plan required by regulations implementing §504 of the Rehabilitation Act and the Americans with Disabilities Act. See, PIH 99-52 (HA).				
	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			

	List of Supporting Documents Available for Review					
Applicable & On Display	Supporting Document	Related Plan Component				
	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, Section 22 of the US Housing Act of 1937, or Section 33 of the US Housing Act of 1937	Annual Plan: Conversion of Public Housing				
	Approved or submitted public housing homeownership programs/plans	Annual Plan: Homeownership				
	Policies governing any Section 8 Homeownership program (sectionof the Section 8 Administrative Plan)	Annual Plan: Homeownership				
	Cooperation agreement between the PHA and the TANF agency and between the PHA and local employment and training service agencies	Annual Plan: Community Service & Self-Sufficiency				
	FSS Action Plan/s for public housing and/or Section 8	Annual Plan: Community Service & Self-Sufficiency				
	Section 3 documentation required by 24 CFR Part 135, Subpart E	Annual Plan: Community Service & Self-Sufficiency				
	Most recent self-sufficiency (ED/SS, TOP or ROSS or other resident services grant) grant program reports	Annual Plan: Community Service & Self-Sufficiency				
✓	The most recent Public Housing Drug Elimination Program (PHEDEP) semi-annual performance report	Annual Plan: Safety and Crime Prevention				
<b>√</b>	PHDEP-related documentation:  Baseline law enforcement services for public housing developments assisted under the PHDEP plan;  Consortium agreement/s between the PHAs participating in the consortium and a copy of the payment agreement between the consortium and HUD (applicable only to PHAs participating in a consortium as specified under 24 CFR 761.15);  Partnership agreements (indicating specific leveraged support) with agencies/organizations providing funding, services or other in-kind resources for PHDEP-funded activities;  Coordination with other law enforcement efforts;  Written agreement(s) with local law enforcement agencies (receiving any PHDEP funds); and  All crime statistics and other relevant data (including Part I and specified Part II crimes) that establish need for the public housing sites assisted under the PHDEP Plan.	Annual Plan: Safety and Crime Prevention				
✓	Policy on Ownership of Pets in Public Housing Family Developments (as required by regulation at 24 CFR Part 960, Subpart G)  check here if included in the public housing A & O Policy	Pet Policy				

	List of Supporting Documents Available for Review						
Applicable & On Display	& Component						
√ V	The results of 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						
	Troubled PHAs: MOA/Recovery Plan						
<b>✓</b>	Other supporting documents (optional) (list individually; use as many lines as necessary) Voluntary Conversion Initial Assessments	(specify as needed)  Attachment J					

#### **Attachment B**

## **CAPITAL FUND PROGRAM TABLES START HERE**

Ann	ual Statement/Performance and Evalu	ation Report			
Capi	ital Fund Program and Capital Fund F	Program Replacemen	nt Housing Factor (	CFP/CFPRHF) Pai	t I: Summary
PHA N	ame: The Housing Authority of the City of Bremen, GA	Grant Type and Number	-		Federal FY of Grant:
		Capital Fund Program Grant N			2002
		Replacement Housing Factor (			
	ginal Annual Statement Reserve for Disasters/ Eme formance and Evaluation Report for Period Ending:		Statement (revision no: ) nd Evaluation Report		
Line	Summary by Development Account	Total Estin		Total A	ctual Cost
No.	1				
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations	\$94,607.00			
3	1408 Management Improvements				
4	1410 Administration				
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	\$700.00			
8	1440 Site Acquisition				
9	1450 Site Improvement	\$25,000.00			
10	1460 Dwelling Structures	\$12,400.00			
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Nondwelling Structures				
13	1475 Nondwelling Equipment	\$31,500.00			
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1499 Development Activities				
19	1501 Collaterization or Debt Service				
20	1502 Contingency				
21	Amount of Annual Grant: (sum of lines 2 – 20)	\$164,207.00			
22	Amount of line 21 Related to LBP Activities				

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HUD 50075 OMB Approval No: 2577-0226 Expires: 03/31/2002

Ann	ual Statement/Performance and Evalua	tion Report			
Capi	tal Fund Program and Capital Fund P	rogram Replacemo	ent Housing Factor (	CFP/CFPRHF) Pa	rt I: Summary
PHA N	ame: The Housing Authority of the City of Bremen, GA	<b>Grant Type and Number</b>			Federal FY of Grant:
		Capital Fund Program Grant	: No: <b>GA06P25450102</b>		2002
		Replacement Housing Facto			
⊠Ori	ginal Annual Statement Reserve for Disasters/ Emer	gencies 🗌 Revised Annua	l Statement (revision no:		
Per	formance and Evaluation Report for Period Ending:	Final Performance	and Evaluation Report		
Line	Summary by Development Account	Total Est	imated Cost	Total A	ctual Cost
No.					
		Original	Revised	Obligated	Expended
23	Amount of line 21 Related to Section 504 compliance				
24	Amount of line 21 Related to Security – Soft Costs				
25	Amount of Line 21 Related to Security – Hard Costs				
26	Amount of line 21 Related to Energy Conservation Measures				

# Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part II: Supporting Pages

PHA Name: The Housing Authority of the City of Bremen, GA		Grant Type and Number Capital Fund Program Grant No: GA06P25450102 Replacement Housing Factor Grant No:			Federal FY of Grant: 2002			
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Quantity Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
	<u>OPERATIONS</u>							
PHA Wide	Operations	1406	80 Units	\$94,607.00				
	SUBTOTAL			\$94,607.00				
	FEES & COSTS							
GA254-1	b. Consulting fees for Agency Plan	1430.2	80 Units	\$700.00				
	Preparation							
	SUBTOTAL			\$700.00				
	SITE IMPROVEMENTS							
GA254-1	Add 10 additional parking spaces @	1450	10 Units	\$25,000.00				
	Norman Circle (\$2,500 ea.)							
	SUBTOTAL			\$25,000.00				
	DWELLING STRUCTURES							
GA254-1	a. Install range hoods @ efficiency units	1460	20 Units	\$10,000.00				
	and 1 br. apartments @ Elder Drive							
	20 units @ \$500 ea.							
	Subtotal			\$10,000.00				

## Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)

Part II: Supporting Pages

PHA Name:		Grant Type and N	lumber		Federal FY of Grant: 2002			
The Housing Authority of the City of Bremen, GA				A06P25450102				
		Replacement House	sing Factor Grant					
Development Number	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estin	nated Cost	Total Actual Cost		Status of Work
Name/HA-Wide Activities								
				Original	Revised	Funds Obligated	Funds Expended	
GA254-1	b. Install security screen doors @ (12)	1460	12 Units	\$2,400.00				
	2 br. Units @ Elder Drive.							
	12 x \$200 ea.							
	Subtotal			\$2,400.00				
	SUBTOTAL			\$12,400.00				
	NON-DWELLING EQUIPMENT							
GA254-1	Computer Hardware	1475	LS	\$20,000.00				
	Lawnmower	1475	LS	\$10,000.00				
	Generator	1475	LS	\$1,000.00				
	Edger	1475	LS	\$500.00				
	SUBTOTAL			\$31,500.00				
	GRAND TOTAL			\$164,207.00				

#### **Annual Statement/Performance and Evaluation Report** Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part III: Implementation Schedule PHA Name: The Housing Authority of the **Grant Type and Number** Federal FY of Grant: 2002 City of Bremen, GA Capital Fund Program No: GA06P25450102 Replacement Housing Factor No: All Fund Obligated All Funds Expended Reasons for Revised Target Dates Development Number (Quarter Ending Date) (Quarter Ending Date) Name/HA-Wide Activities Original Original Revised Actual Revised Actual 12/31/03 12/31/04 PHA Wide GA207-1 12/31/03 12/31/04

GA254-1=80 Apts.

## **Attachment C**

Capital Fund P	rogram F	ive-Year Action Plan			
Part I: Sumr					
PHA Name: Housing A				Original 5-Year Plan	
the City of Bowdon, GA				Revision No:	
Development	Year 1	Work Statement for Year 2	Work Statement for Year 3	Work Statement for Year 4	Work Statement for Year 5
Number/Name/HA-		FFY Grant: 2003	FFY Grant: 2004	FFY Grant: 2005	FFY Grant: 2006
Wide		PHA FY: 2003	PHA FY: 2004	PHA FY: 2005	PHA FY: 2006
HA Wide		\$164,207.00	\$164,207.00	\$164,207.00	\$164,207.00
	Annual				
	Statement				
CFP Funds Listed for		\$164,207.00	\$164,207.00	\$164,207.00	\$164,207.00
5-year planning		,	,	,	,
Replacement Housing					
Factor Funds					

Canit	al Fund Program Five	-Vear Action Plan					
	apporting Pages—						
Activities for Year 1	ipporting rages—	Activities for Year: 2 FFY Grant: 2003 PHA FY: 2003	Activities for Year: 3 FFY Grant: 2004 PHA FY: 2004				
	Development Name/Number	Major Work Categories	<b>Estimated Cost</b>	Development Name/Number	Major Work Categories	<b>Estimated Cost</b>	
See	PHA Wide	Operations	\$164,207.00	PHA Wide	Operations	\$164,207.00	
Annual			·			·	
Statement							
	T / 1 CED E /	1.0	\$164,207.00			\$164,207.00	
	Total CFP Estima	ited Cost	\$104,207.00			\$164,207.00	

	Activities for Year: <u>4</u> FFY Grant: 2005 PHA FY: 2005	vities	Activities for Year: <u>5</u> FFY Grant: 2006 PHA FY: 2006				
Development Name/Number	Major Work Categories	<b>Estimated Cost</b>	Development Name/Number	Major Work Categories	<b>Estimated Cost</b>		
PHA Wide	Operations	\$164,207.00	PHA Wide	Operations	\$164,207.00		
	<u> </u>						
	<u> </u>						
Total CF	P Estimated Cost	\$164,207.00			\$164,207.00		

#### **Attachment D**

### **Public Housing Drug Elimination Program Plan**

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

#### **Annual PHDEP Plan Table of Contents:**

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

#### **Section 1: General Information/History**

- A. Amount of PHDEP Grant \$25,000.00
- B. Eligibility type (Indicate with an "x") N1\_\_\_\_\_ N2\_\_\_ R\_X\_
- C. FFY in which funding is requested 2002
- D. Executive Summary of Annual PHDEP Plan

In the space below, provide a brief overview of the PHDEP Plan, including highlights of major initiatives or activities undertaken. It may include a description of the expected outcomes. The summary must not be more than five (5) sentences long

The Housing Authority plans to continue active law enforcement of policies and procedures of management to eliminate drug and drug related crime. The Authority will continue to contract with the City of Bremen for a full time police officer to provide foot patrol at all three sites of the Authority. The police sub-station will be at Norman Circle.

#### E. Target Areas

Complete the following table by indicating each PHDEP Target Area (development or site where activities will be conducted), the total number of units in each PHDEP Target Area, and the total number of individuals expected to participate in PHDEP sponsored activities in each Target Area.

PHDEP Target Areas (Name of development(s) or site)	Total # of Units within the PHDEP Target Area(s)	Total Population to be Served within the PHDEP Target Area(s)
ELDER DRIVE	32	39
RICHIE CIRCLE	16	49
NORMAN CIRCLE	32	79

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F. Duration of Progra
-----------------------

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

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

#### **G. PHDEP Program History**

Indicate each FY that funding has been received under the PHDEP Program (place an "x" by each applicable Year) and provide amount of funding received. If previously funded programs <u>have not</u> been closed out at the time of this submission, indicate the fund balance and anticipated completion date. For grant extensions received, place "GE" in column or "W" for waivers.

Fiscal Year of Funding	PHDEP Funding Received	Grant #	Fund Balance as of Date of this Submission	Grant Extensions or Waivers	Anticipated Completion Date
FY1996	\$63,620.00	GA06DEP2450196	0	NONE	
FY1997	\$50,000.00	GA06DEP2450197	0	NONE	
FY1998	\$50,000.00	GA06DEP2450198	0	NONE	
FY1999	\$25,000.00	GA06DEP2450199	0	NONE	
FY2000	\$25,000.00	GA06DEP2450100	\$13,750.00	NONE	3/31/2002
FY2001	\$25,000.00	GA06DEP2450101	\$25,000.00	NONE	3/31/2003

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

#### A. PHDEP Plan Summary

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

The goal and objective of the 2002 PHDEP program is to reduce and/or eliminate violent and drug related crime in and around the Bremen Housing Authority property and to maintain a safe public housing development in all three site areas. The Housing Authority will continue to contract with the City of Bremen for another year with its Police Department to provide Officer Stevens for 40 hours a week to work all the areas of the development to furnish additional security and protection services.

#### **B. PHDEP Budget Summary**

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

FY2002 PHDEP Budget Summary							
Budget Line Item	Total Funding						
9110 – Reimbursement of Law Enforcement	\$25,000.00						
9120 - Security Personnel							
9130 - Employment of Investigators							
9140 - Voluntary Tenant Patrol							
9150 - Physical Improvements							
9160 - Drug Prevention							
9170 - Drug Intervention							
9180 - Drug Treatment							
9190 - Other Program Costs							
TOTAL PHDEP FUNDING	\$25,000.00						

#### C. PHDEP Plan Goals and Activities

In the tables below, provide information on the PHDEP strategy summarized above by budget line item. Each goal and objective should be numbered sequentially for each budget line item (where applicable). Use as many rows as necessary to list proposed activities (additional rows may be inserted in the tables). PHAs are not required to provide information in shaded boxes. Information provided must be concise—not to exceed two sentences in any column. Tables for line items in which the PHA has no planned goals or activities may be deleted.

9110 - Reimbursement of Law Enforcement					Total PHDEP Funding: \$25,000		
Goal(s)							
Objectives							
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	Other Funding (Amount/ Source)	Performance Indicators
1.Contract w/ police dept. for 40 hours of extra police presence per week.			4/1/03	3/31/04	\$25,000	\$16,600 (CFP)	Decrease in the # of calls that involve domestic violence & drug related activity.
2.							
3.							

9120 - Security Personnel					Total PHI	EP Fundin	g:
Goal(s)							
Objectives							
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	Other Funding (Amount /Source)	Performance Indicators
1.							
2.							
3.							

9130 - Employment of Investigators				Total PHI	EP Fundin	g:	
Goal(s)							
Objectives							
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	Other Funding (Amount /Source)	Performance Indicators
1.							
2.							
3.							

9140 - Voluntary Tenant Patrol						Total PHDEP Funding:		
Goal(s)								
Objectives								
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	Other Funding (Amount /Source)	Performance Indicators	
1.								
2.								
3.								

9150 - Physical Improvements						Total PHDEP Funding: \$		
Goal(s)								
Objectives								
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	Other Funding (Amount /Source)	Performance Indicators	
1.								
2.								
3.								

9160 - Drug Prevention						EP Fundin	g:
Goal(s)							
Objectives							
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	Other Funding (Amount /Source)	Performance Indicators

9170 - Drug Intervention						Total PHDEP Funding:		
Goal(s)								
Objectives								
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	Other Funding (Amount /Source)	Performance Indicators	
1.								
2.								
3.								

9180 - Drug Treatment					Total PHDEP Funding:		
Goal(s)							
Objectives							
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	Other Funding (Amount /Source)	Performance Indicators
1.							
2.							
3.							

9190 - Other Program Costs	<b>Total PHDEP Funds:</b>

Goal(s)							
Objectives							
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	Other Funding	Performance Indicators
1.							
3.							

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

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

Budget Line Item #	25% Expenditure of Total Grant Funds By Activity #	Total PHDEP Funding Expended	50% Obligation of Total Grant Funds by Activity #	Total PHDEP Funding Obligated
	Activities 1, 3		Activity 2	-
9110	Activity 1	\$25,000	Activity 1	\$25,000
9120				
9130				
9140				
9150				
9160				
9170				
9180				
9190				
TOTAL	Activity 1	\$25,000	Activity 1	\$25,000

#### **Section 4: Certifications**

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

## **Board** 1. X Yes No: Does the PHA governing board include at least one member who is directly assisted by the PHA this year? (if no, skip to #2) A. Name of resident member(s) on the governing board: **Bonnie Wingard** B. How was the resident board member selected: (select one)? Elected Appointed C. The term of appointment is (include the date term expires: One Year-Expires 2/2/02 2. A. If the PHA governing board does not have at least one member who is directly assisted by the PHA, why not? the PHA is located in a State that requires the members of a governing board to be salaried and serve on a full time basis the PHA has less than 300 public housing units, has provided reasonable notice to the resident advisory board of the opportunity to serve on the governing board, and has not been notified by any resident of their interest to participate in the Board. Other (explain): B. Date of next term expiration of a governing board member: **February 2002** C. Name and title of appointing official(s) for governing board (indicate appointing official for the next position): Jimmy Carden - Mayor

Required Attachment E: Resident Member on the PHA Governing

## Required Attachment F: Membership of the Resident Advisory Board or Boards

List members of the Resident Advisory Board or Boards: (If the list would be unreasonably long, list organizations represented or otherwise provide a description sufficient to identify how members are chosen.)

The Resident Advisory Board Members are:

Bonnie Wingard Carol Long Janet Padgett Caron Connelly Darlene Garmon

## Attachment G: FY2001 P & E Report

## **CAPITAL FUND PROGRAM TABLES START HERE**

Ann	ual Statement/Performance and Evalu	ation Report						
Capi	ital Fund Program and Capital Fund P	rogram Replacemen	nt Housing Factor (	CFP/CFPRHF) Par	rt I: Summary			
PHA N	ame: The Housing Authority of the City of Bremen, GA	Grant Type and Number	Grant Type and Number					
		Capital Fund Program Grant N			2001			
		Replacement Housing Factor C						
∐Ori   ⊠Per	ginal Annual Statement Reserve for Disasters/ Eme formance and Evaluation Report for Period Ending: 0	rgencies ∐Revised Annual S 6/30/01 □ Final Performa	Statement (revision no: nce and Evaluation Repor	) <del>t</del>				
Line	Summary by Development Account	Total Estim	<b>_</b>		ctual Cost			
No.	The state of the s							
		Original	Revised	Obligated	Expended			
1	Total non-CFP Funds							
2	1406 Operations	\$164,207.00		\$164,207.00				
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	1499 Development Activities							
19	1501 Collaterization or Debt Service							
20	1502 Contingency							
21	Amount of Annual Grant: (sum of lines $2-20$ )	\$164,207.00		\$164,207.00				
22	Amount of line 21 Related to LBP Activities							

Small PHA Plan Update Page 29 **Table Library** 

Annual Statement/Performance and Evaluation Report									
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I: Summary									
PHA N	PHA Name: The Housing Authority of the City of Bremen, GA  Grant Type and Number  Capital Fund Program Grant No: GA06P25450101  Replacement Housing Factor Grant No:								
	Original Annual Statement ☐ Reserve for Disasters/ Emergencies ☐ Revised Annual Statement (revision no: ) ☐ Performance and Evaluation Report for Period Ending: 06/30/01 ☐ Final Performance and Evaluation Report								
Line	Summary by Development Account	Total Esti	mated Cost	Total Ac	ctual Cost				
No.		-			T				
		Original	Revised	Obligated	Expended				
23	Amount of line 21 Related to Section 504 compliance								
24	Amount of line 21 Related to Security – Soft Costs								
25	Amount of Line 21 Related to Security – Hard Costs								
26	Amount of line 21 Related to Energy Conservation Measures								

## **Annual Statement/Performance and Evaluation Report**

Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)

Part II: Supporting Pages

PHA Name: The Housing Auth	ority of the City of Bremen, GA	Grant Type and Number Capital Fund Program Grant No: GA06P25450101 Replacement Housing Factor Grant No:				Federal FY of Grant: 2001		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
	<u>OPERATIONS</u>							
PHA Wide	Operations	1406	80 Units	\$164,207.00		\$164,207.00		In Progress
	SUBTOTAL			\$164,207.00		\$164,207.00		
	GRAND TOTAL			\$164,207.00		\$164,207.00		

#### **Annual Statement/Performance and Evaluation Report** Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part III: Implementation Schedule PHA Name: The Housing Authority of the **Grant Type and Number** Federal FY of Grant: 2001 City of Bremen, GA Capital Fund Program No: GA06P25450101 Replacement Housing Factor No: All Fund Obligated All Funds Expended Reasons for Revised Target Dates Development Number (Quarter Ending Date) (Quarter Ending Date) Name/HA-Wide Activities Original Original Revised Actual Revised Actual 03/30/03 PHA Wide 09/30/04

GA254-1=80 Apts.

## Attachment H: FY2000 P & E Report

## **CAPITAL FUND PROGRAM TABLES START HERE**

Ann	ual Statement/Performance and Evalu	ation Report			
Capi	ital Fund Program and Capital Fund F	Program Replacemen	t Housing Factor (	CFP/CFPRHF) Par	rt I: Summary
PHA N	ame: The Housing Authority of the City of Bremen, GA	Grant Type and Number			Federal FY of Grant:
		Capital Fund Program Grant N			2000
		Replacement Housing Factor G			
	ginal Annual Statement Reserve for Disasters/ Eme formance and Evaluation Report for Period Ending: 0		Statement (revision no: nce and Evaluation Repor	) <del>1</del>	
Line	Summary by Development Account	Total Estim			ctual Cost
No.	, and a second s				
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations	\$136,142.00		\$136,142.00	\$0.00
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	\$24,800.00		\$0.00	\$0.00
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	1499 Development Activities				
19	1501 Collaterization or Debt Service				
20	1502 Contingency				
21	Amount of Annual Grant: (sum of lines 2 – 20)	\$160,942.00		\$136,142.00	\$0.00
22	Amount of line 21 Related to LBP Activities				

Small PHA Plan Update Page 33 **Table Library** 

Ann	Annual Statement/Performance and Evaluation Report						
Capi	Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I: Summary						
PHA N	ame: The Housing Authority of the City of Bremen, GA	Grant Type and Number Capital Fund Program Grant No: GA06P25450100 Replacement Housing Factor Grant No:			Federal FY of Grant: 2000		
Original Annual Statement Reserve for Disasters/ Emergencies Revised Annual Statement (revision no:							
☑Performance and Evaluation Report for Period Ending: 06/30/01 ☐Final Performance and Evaluation Report							
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost			
No.							
		Original	Revised	Obligated	Expended		
23	Amount of line 21 Related to Section 504 compliance						
24	Amount of line 21 Related to Security – Soft Costs						
25	Amount of Line 21 Related to Security – Hard Costs						
26	Amount of line 21 Related to Energy Conservation Measures						

## **Annual Statement/Performance and Evaluation Report**

Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)

**Part II: Supporting Pages** 

PHA Name:		Grant Type and Number			Federal FY of Grant: 2000			
The Housing Auth	nority of the City of Bremen, GA	Capital Fund Program Grant No: GA06P25450100			reaction of Grante 2000			
	<del>_</del>		ising Factor Grant	_				
Development	General Description of Major Work	Dev. Acct No.	Quantity	Total Estin	nated Cost	Total Actual Cost		Status of
Number	Categories						Work	
Name/HA-Wide								
Activities								
				Original	Revised	Funds	Funds	
	ODED ATIONS					Obligated	Expended	
	<u>OPERATIONS</u>	1106	7.10	<b>** ** ** ** ** ** ** **</b>		<b>***</b>		
PHA Wide	Operations	1406	L/S	\$136,142.00		\$136,142.00	\$0.00	In Progress
	SUBTOTAL			\$136,142.00		\$136,142.00	\$0.00	
	Site Improvements	1170	22.7.	4.5.000.00		40.00		
GA254-1	Landscaping	1450	32 Units	\$5,000.00		\$0.00	\$0.00	No Work
Elder	Subtotal			\$5,000.00		\$0.00	\$0.00	To Date
Circle								
						****		
GA254-1	Landscaping	1450	16 Units	\$4,800.00		\$0.00	\$0.00	No Work
Richie	Subtotal			\$4,800.00		\$0.00	\$0.00	To Date
Circle								
GA254-1	Landassains	1450	32 Units	\$5,000.00		\$0.00	\$0.00	No Work
Norman	Landscaping  Remove concrete surfaces and landscape	1450	L/S	\$10,000.00		\$0.00	\$0.00	To Date
Circle	<del>-</del>	1430	L/S					10 Date
Circie	Subtotal			\$15,000.00		\$0.00	\$0.00	
	Grand Total			\$160,942.00		\$136,142.00	\$0.00	
	57 MAR 1 0 MA			\$100,5 12100		\$10 0,1 1200 0	<b>\$000</b>	

#### **Annual Statement/Performance and Evaluation Report** Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part III: Implementation Schedule PHA Name: The Housing Authority of the **Grant Type and Number** Federal FY of Grant: 2000 City of Bremen, GA Capital Fund Program No: GA06P25450100 Replacement Housing Factor No: All Fund Obligated All Funds Expended Reasons for Revised Target Dates Development Number (Quarter Ending Date) (Quarter Ending Date) Name/HA-Wide Activities Original Original Revised Actual Revised Actual PHA Wide Mar-02 Sep-03 GA207-1 Elder Circle Mar-02 Sep-03

Sep-03

Sep-03

GA254-1=80 Apts.

Richie Circle

Norman Circle

Mar-02

Mar-02

#### **Attachment I: Progress on FY2001 Missions & Goals**

Most of the goals and objectives are in line with what was proposed in the first and second submission of the Agency Plan. The Authority has done an excellent job of maintaining a drug free environment and promoting self-sufficiency opportunities for its residents. The few items listed below are those items where the Authority has identified potential problems or issues related to reaching their goals over the five-year period.

The BHA has not established a youth mentoring program to provide tutoring, leadership skills and "Big Brother-Big Sister" activities; this is being done through the Bremen School District.

A volunteer mentoring program has not yet been added to expand present youth programs.

Community collaboration is a large focus for assisting youth in the community; activities are coordinated with the Haralson Coalition on children, youth and families.

#### **Attachment J: Voluntary Conversion**

#### **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)? **NONE**
- c. How many Assessments were conducted for the PHA's covered developments? **One for each project**
- d. Identify PHA developments that may be appropriate for conversion based on the Required Initial Assessments: **N/A**

<b>Development Name</b>	Number of Units

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

## **Attachment K: Deconcentration & Income Mixing**

## (6) Deconcentration and Income Mixing

a.  Yes No:	Does the PHA have any general occupancy (family) public housing developments covered by the deconcentration rule? If no, this section is complete. If yes, continue to the next question.
b. Yes No:	Do any of these covered developments have average incomes above or below 85% to 115% of the average incomes of all such developments? If no, this section is complete.

If yes, list these developments as follows:

<b>Deconcentration Policy for Covered Developments</b>					
Development Name:	Number of Units	Explanation (if any) [see step 4 at §903.2(c)(1)((iv)]	Deconcentration policy (if no explanation) [see step 5 at §903.2(c)(1)(v)]		