# $U.S. Department of Housing and Urban Development\\ Office of Public and Indian Housing$

SmallPHAPlanUpdate
AnnualPlanforFiscalYear:200 2
Five-YearPlan:2002 -2006

HousingAuthorityoftheCityofSylvania

NOTE: THISPHA PLANSTEMPLATE (HUD50075) ISTOBECOMPLETEDIN ACCORDANCE WITHINSTRUCTIONS LOCATEDINAPPLICABLE PIHNOTICES

# PHAPlan AgencyIdentification

PHAName: HousingAuthorityoftheCityofSylvania
PHANumber: GA152
PHAFiscalYearBeginning: (07/2002)
PHAPlanContactInformation: Name:BrentMeeks Phone:(706)554 -2233 TDD: Email(ifavailable):
PublicAccesstoInformation Informationregardinganyactivitiesoutlinedinthisplancanbeobtainedbycontacting: (selectallthatapply)
DisplayLocationsForPHAPlansandSupportingDocuments
ThePHAPlans(includingattachments)areavailableforpublicin spectionat:(selectallthat apply)  MainadministrativeofficeofthePHA  PHAdevelopmentmanagementoffices  Mainadministrativeofficeofthelocal,countyorStategovernment  Publicl ibrary  PHAwebsite  Other(listbelow)
PHAPlanSupportingDocumentsareavailableforinspectionat:(selectallthatapply)  MainbusinessofficeofthePHA  PHAdevelopmentmanagementof fices  Other(listbelow)
PHAProgramsAdministered:
□ PublicHousingandSection8 □ Section8Only □ PublicHousingOnly

# AnnualPHAPlan FiscalYear200 2

[24CFRPart903.7]

# i.Table ofContents

 $Provide a table of contents for the Plan \\ , including attachments, and a list of supporting documents available for public inspection. For Attachments, indicate which attachments are provided by selecting all that apply. Provide the attachment's name (A,B,etc.) in the space to the left of the name of the attachment. If the attachment is provided as a {\bf SEPARATE} file submission from the PHAP lans file, provide the file name in parentheses in the space to the right of the title. \\$ 

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	ExplanationofPHAResponse(mustbeattachedifnotincludedinPHA	
_	Plantext)	
Ш	Other(Listbelow,providingeachattachmentname)	

<u>ii.ExecutiveSummary</u> [24CFRPart903.7 9(r)]
AtPHAoption, provide a briefover view of the information in the Annual Plan
This document represents the Sylvania Housing Authority's FY 2002 Agency Plan Annual Update. The Annual Update includes an overview of all the Authority's current operations.
$The Authority has provided updated information on the progress toward achieving the Five Year Plan's \\ Mission and Goals, planned Capital Fund Program expenditures for FFY 2002 -2006 and a performance report on the FFY 2001 Capital Fund Program expendi tures. In addition to the above, the Authority has also complete dazon version to tenant -based assistance analysis as required by HUD. A complete listing of the information provided in the Agency Plan Annual Update is provided on the previous page in the Table of Contents.$
1.SummaryofPolicyorProgramChangesfortheUpcomingYear
Inthissection, briefly describe changes in policies or programs discussed in last year's PHAP lanthatare not covered in other sections of this Update.
$The Housing\ Authority of the City of Sylvania has reviewed the Goals and Objectives stated in the initial Five-Year Planandhaved ecided to make some revisions. The revisions are discussed in Attachment D.$
$The Housing Authority is also requesting a revision to the included in Attachment ga 152b01. \\$ eFY 2001 Capital Fund Plan. This revision is included in Attachment ga 152b01.
2.CapitalImprovementNeeds [24CFRPart903.79(g)]
Exemptions:Section8onlyPHAsarenotrequiredtocompletethiscomponent.
A. Yes No:IsthePHAeligibletoparticipateintheCFPinthefiscalyearcoveredbythis PHAPlan?
B.WhatistheamountofthePHA'sestimatedoractual(ifknown)CapitalFundProgramgrant fortheupcomingyear? \$150,857
C. Yes No DoesthePHAplantoparticipateintheCapitalFundPrograminthe upcomingyear?Ifyes,completetherestofComponent7.Ifno,skiptonextcomponent.
D.CapitalFundProgramGrantSubmissions

## (1)CapitalFundProgram5 -YearActionPlan

The Capital Fund Program 5 - Year Action Planis provided as Attachment gal 152a01.

#### (2)CapitalFundProgramAnnualStatement

TheCapitalFundProgramAnnualStatementisprovidedasAttachment ga152a01.

# 3.D emolitionandDisposition

[24CFRPart903.79(h)]

P	App.	lıcal	<b>01</b> l	1ty::	Sec	tion	8on	lyl	PH.	1 P	15	saren	ot	requ	uıre	dto	oco	omp	le	tet	h1	ssec	tıoı	ı.

1. Yes No: DoesthePHAplantoconductanydemolitionordispositionactivities (pursuanttosection18of theU.S.HousingActof1937(42U.S.C.

1437p))intheplanFiscalYear?(If"No",skiptonextcomponent;if "yes",completeoneactivitydescriptionforeachdevelopment.)

## 2.ActivityDescription

Demolition/DispositionActivityDescription						
(Notinc ludingActivitiesAssociatedwithHOPEVIorConversionActivities)						
1a.Developmentname:						
1b.Development(project)number:						
2.Activitytype:Demolition						
Disposition						
3.Applicationstatus(selectone)						
Approved						
Submitted, pending approval						
Plannedapplication						
4. Dateapplicationapproved, submitted, or planned for submission:						
5.Numberofunitsaffected:						
6.Coverageofaction(selectone)						
Partofthedevelopment						
Totaldevelopment						
7.Relocationresources(selectallthatapply)						
Section8for units						
Publichousingfor units						
Preferenc eforadmissiontootherpublichousingorsection8						
Otherhousingfor units(describebelow)						
8. Timeline for activity:						
a. Actualorprojectedstartdateofactivity:						
b. Actualorproj ectedstartdateofrelocationactivities:						
c.Projectedenddateofactivity:						

4.VoucherHomeo	wnershipProgram
[24CFRPart903.79(k)]	
A. Yes No:	Does the PHA planto administer a Section 8 Homeownership program pursuant to Section 8 (y) of the U.S.H.A. of 1937, a simple mented by 24 CFR part 982? (If "No", skiptonext component; if "yes", describe each programusing the table below (copy and complete questions for each programidentified.)
B.CapacityofthePHA	AtoAdministeraSection8HomeownershipProgram
	ateditscapacitytoadministertheprogramby(selectallthatapply):
	gaminimumhomeownerdo wnpaymentrequirementofatleast3percent
andrequiri	ngthatatleast1percentofthedownpaymentcomesfromthefamily's
resources	
	natfinancingforpurchaseofahomeunderitssection8homeownership rided,insur edorguaranteedbythestateorFederalgovernment;comply
-	darymortgagemarketunderwritingrequirements;orcomplywithgenerally
	ivatesectorunderwritingstandards
☐ Demonstra	ntingthatithasorwillacquireotherr elevantexperience(listPHA
experience	e,oranyotherorganizationtobeinvolvedanditsexperience,below):
	ePrevention:PHDEPPlan
[24CFRPart903.7(m)] ExemptionsSection8Onlyl	PHAsmayskiptothenextcomponentPHAseligib leforPHDEPfundsmustprovidea
	riedrequirementspriortoreceiptofPHDEPfunds.
. 🗆	
A. ☐Yes ☒No:Ist thisPHAPlan?	hePHAeligibletoparticipateinthePHDEPinthefiscalyearcoveredby
tmsPHAPian?	
B.Wha tistheamounto	ofthePHA'sestimatedoractual(ifknown)PHDEPgrantforthe
upcomingyear?\$	· · · · · · · · · · · · · · · · · · ·
	DoesthePHAplantoparticipateinthePHDEPintheupcomingyear?If
yes,answerques tionL	O.Ifno,skiptonextcomponent.
D. Yes No:TI	nePHDEPPlanisattachedatAttachment
2	101 112 21 1 ministrumenteum Rutenment

# 6.OtherInformation [24CFRPart903.79(r)]

A. Resident	AdvisoryBoard(RAB)RecommendationsandPHAResponse
1.	No:DidthePHAreceiveanycommentsonthePHAPlanfromtheResident AdvisoryBoard/s?
2.Ifyes,thecon	nmentsareAttachedatAttachment(Filename)
3.Inwhatmanr	rerdidthePHAaddress thosecomments?(selectallthatapply)  ThePHAchangedportionsofthePHAPlaninresponsetocomments  Alistofthesechangesisincluded YesNo:belowor YesNo:attheendoftheRABCommentsinAttachment  Consideredcomments,butdeterminedthatnochangestothePHAPlanwere necessary.AnexplanationofthePHA'sconsiderationisincludedattheattheend oftheRABCommentsinAttachm ent
	Other:(listbelow)
	of Consistency with the Consolidated Plan
Foreachapplicab	leConsolidatedPlan,makethefollowingstatement(copyquestionsasmanytimesasnecessary).
1.Consolidate	dPlanjurisdiction: (StateofGeorgia)
	stakenthefollowingstepstoensureconsistencyofthisPHAPlanwiththe edPlanforthejurisdiction:(selectallthatapply)
	ThePHAhasbaseditsstatementofneedsoffamiliesinthejur isdictiononthe needsexpressedintheConsolidatedPlan/s. ThePHAhasparticipatedinanyconsultationprocessorganizedandofferedby theConsolidatedPlanagencyinthedevelopmentoftheConsolidatedPlan. ThePHAh asconsultedwiththeConsolidatedPlanagencyduringthe developmentofthisPHAPlan. ActivitiestobeundertakenbythePHAinthecomingyearareconsistentwith specificinitiativescontainedintheConsolidatedPlan.(listsuchinitativesbelow) Other:(listbelow)

3. PHARequestsforsupportfromtheConsolidatedPlanAgency									
Yes No:DoesthePHArequestfinancialorothersupportfromtheStateorlocal									
governmentagencyinorde rtomeettheneedsofitspublichousingresidentsor									
inventory? If yes, please list the 5 most important requests below:									

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

The State of Georgia Consolidated Plansupports the Sylvania Housing Authority's Agency Plan with the following Strategic Plan Priority:

ToincreasethenumberofGeorgia'slowandmoderateincomehouseholdswhohave obtainedaffordable,rentalhousing freeofovercrowdedandstructurallysubstandardconditions.

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

#### 1. AmendmentandDeviationDefinitions

24CFRPart903.7(r)

PHAsarerequiredtodefineandadopttheirownstandardsofsubstantia ldeviationfromthe5 -yearPlanand SignificantAmendmenttotheAnnualPlan.Thedefinitionofsignificantamendmentisimportantbecauseitdefines whenthePHAwillsubjectachangetothepoliciesoractivitiesdescribedintheAnnualPlantofullpu blichearing andHUDreviewbeforeimplementation.

#### A.SubstantialDeviationfromthe5 -yearPlan:

A "Substantial Deviation" from the 5 -Year Plan is an overall change in the direction of the Authority pertaining to the Authority's Goals and Objectives. This includes changing the Authority's Goals and Objectives.

#### B. SignificantAmendmentorModificationtotheAnnualPlan:

A "Significant Amendment or Modification" to the Annual Plan is a change in a policy or policiespertaining to the operation of the Authority. This includes the following:

- **Changestorentoradmissionspoliciesororganizationofthewaitinglist.**
- Additions of non-emergency work items over \$100,000 (items not included in the current Annual Statement or 5 Year Action Plan) or change in use of replacement reserve funds under the Capital Fund.
- Anychangewithregardtodemolitionordisposition, designation, homeownership programsor conversion activities.

### **AttachmentA**

## Supporting Documents Available for Review

PHAsaretoindicatewhic hdocumentsareavailableforpublicreviewbyplacingamarkinthe "Applicable&OnDisplay" columnintheappropriaterows. Alllisted documents must be on display if applicable to the programactivities conducted by the PHA.

	ListofSupportingDoc umentsAvailableforReview	<b>ew</b>
Applicable & OnDisplay	SupportingDocument	RelatedPlan Component
X	PHAPlanCertificationsofCompliancewiththePHAPlansand RelatedRegulations	5YearandAnnual Plans
	State/LocalGovernmentCertificationofConsistenc ywiththe ConsolidatedPlan(notrequiredforthisupdate)	5YearandAnnual Plans
X	FairHousingDocumentationSupportingFairHousing Certifications: RecordsreflectingthatthePHAhasexaminedits programsorproposedprograms,identifiedanyimpe dimentstofair housingchoiceinthoseprograms,addressedorisaddressing thoseimpedimentsinareasonablefashioninviewoftheresources available,andworkedorisworkingwithlocaljurisdictionsto implementanyofthejurisdictions'initiatives toaffirmatively furtherfairhousingthatrequirethePHA'sinvolvement.	5YearandAnnual Plans
X	HousingNeedsStatementoftheConsolidatedPlanforthe jurisdiction/sinwhichthePHAislocatedandanyadditional backupdatatosupportstatement ofhousingneedsinthe jurisdiction	AnnualPlan: HousingNeeds
X	Mostrecentboard -approvedoperatingbudgetforthepublic housingprogram	AnnualPlan: FinancialResources
X	PublicHousingAdmissionsand(Continued)OccupancyPolicy (A&O/ACOP),which includestheTenantSelectionand AssignmentPlan[TSAP]	AnnualPlan: Eligibility,Selection, andAdmissions Policies
	AnypolicygoverningoccupancyofPoliceOfficersinPublic Housing Checkhereifincludedinthepublichousing A&OPolicy	AnnualPlan: Eligibility,Selection, andAdmissions Policies
	Section8AdministrativePlan	AnnualPlan: Eligibility,Selection, andAdmissions Policies
X	Publichousingrentdeterminationpolicies,includingthemethod forsettingpublicho usingflatrents  Checkhereifincludedinthepublichousing  A&OPolicy	AnnualPlan:Rent Determination
X	Scheduleofflatrentsofferedateachpublichousingdevelopment  checkhereifincludedinthepublichous ing A&OPolicy	AnnualPlan:Rent Determination

ListofSupportingDoc umentsAvailableforReview							
Applicable	SupportingDocument	RelatedPlan					
& OnDisplay		Component					
Oliolispiay	Section8rentdetermination(paymentstandard)policies	AnnualPlan:Rent					
	checkhereifincludedinSection8Administrative	Determination					
	Plan						
	Publichousingmanagementandmainte nancepolicydocuments,	AnnualPlan:					
X	includingpoliciesforthepreventionoreradicationofpest	Operationsand					
	infestation(includingcockroachinfestation)	Maintenance					
	ResultsoflatestbindingPublicHousingAssessmentSystem	AnnualPlan:					
X	(PHAS)Assessment	Managementand					
		Operations					
	Follow-upPlantoResultsofthePHASResidentSatisfaction	AnnualPlan:					
	Survey(ifnecessary)	Operationsand					
X		Maintenanceand					
		CommunityService&					
		Self-Sufficiency					
	ResultsoflatestSection8ManagementAssessmentSys tem	AnnualPlan:					
	(SEMAP)	Managementand					
	(SEMI)	Operations					
	AnyrequiredpoliciesgoverninganySection8specialhousing	AnnualPlan:					
	types	Operationsand					
		Maintenance					
	checkhereifincludedinSection8Administrative	Mannenance					
	Plan	, 1D1 C ;					
	Publichousinggr ievanceprocedures	AnnualPlan:Grievance					
X	checkhereifincludedinthepublichousing	Procedures					
	A&OPolicy						
	Section8informalreviewandhearingprocedures	AnnualPlan:					
	checkhereifincludedinSection8Administrative	GrievanceProcedures					
	Plan						
	TheHUD -approvedCapitalFund/ComprehensiveGrantProgram	AnnualPlan:Capital					
X	AnnualStatement(HUD52837)foranyactivegrantyear	Needs					
	MostrecentCIAPBudget/ProgressReport(HUD52825)forany	AnnualPlan:Capital					
	activeCIAPgran ts	Needs					
	ApprovedHOPEVIapplicationsor,ifmorerecent,approvedor	AnnualPlan:Capital					
	submittedHOPEVIRevitalizationPlans,oranyotherapproved	Needs					
	proposalfordevelopmentofpublichousing	recus					
	Self-evaluation, Needs As sessment and Transition Plan required	Annual Dlan Canital					
		AnnualPlan:Capital					
	byregulationsimplementing §504oftheRehabilitationActand	Needs					
	theAmericanswithDisabilitiesAct.See,PIH99 -52(HA).	151					
	Approvedorsubmittedapplicat ionsfordemolitionand/or	AnnualPlan:					
	dispositionofpublichousing	Demolitionand					
		Disposition					
	Approvedorsubmittedapplicationsfordesignationofpublic	AnnualPlan:					
	housing(DesignatedHousingPlans)	DesignationofPublic					
		Housing					

	ListofSupportingDoc umentsAvailableforRevi	•
Applicable &	SupportingDocument	RelatedPlan Component
OnDisplay		
	Approvedorsu bmittedassessmentsofreasonablerevitalizationof	AnnualPlan:
	publichousing and approved or submitted conversion plans	ConversionofPublic
	preparedpursuanttosection202ofthe1996HUDAppropriations	Housing
	Act, Section 22 of the USH ousing Act of 1937, or Section 33 of	
	theUSHousingAct of1937 Approvedorsubmittedpublichousinghomeownership	AnnualPlan:
	programs/plans	Homeownership
	PoliciesgoverninganySection8Homeownershipprogram	AnnualPlan:
	(sectionoftheSection8AdministrativeP lan)	Homeownership
	CooperationagreementbetweenthePHAandtheTANFagency	AnnualPlan:
X	andbetweenthePHAandlocalemploymentandtrainingservice	CommunityService&
4.	agencies	Self-Sufficiency
	FSSActionPlan/sforpublichousing and/orSection8	AnnualPlan:
		CommunityService&
		Self-Sufficiency
	Section3documentationrequiredby24CFRPart135,SubpartE	AnnualPlan:
		CommunityService&
		Self-Sufficiency
	Mostrecentself -sufficiency(ED/SS,TOPorROSSorother	AnnualPlan:
	residents ervicesgrant)grantprogramreports	CommunityService&
		Self-Sufficiency
	ThemostrecentPublicHousingDrugEliminationProgram	AnnualPlan:Safety
	(PHEDEP)semi -annualperformancereport	andCrimePrevention
	PHDEP-relateddocumentat ion:	AnnualPlan:Safety
	Baselinelawenforcementservicesforpublichousing	andCrimePrevention
	developmentsassistedunderthePHDEPplan;	
	Consortiumagreement/sbetweenthePHAsparticipating	
	intheconsortiumandacopyofthepaymentagreement	
	betweentheconsortium and HUD (applicable onlyto	
	PHAsparticipatinginaconsortiumasspecifiedunder24 CFR761.15);	
	Partnershipagreements(indicatingspecificleveraged	
	support)withagencies/organizationsprovidingfunding,	
	servicesorotherin -kindresourcesforPHDEP -funded	
	activities;	
	· Coordinationwithotherlawenforcementefforts;	
	· Writtenagreement(s)withlocallawenforcementagencies	
	(receivinganyPHDEPfunds);and	
	· Allcrimestatisticsandotherrelevantdata(includingPart	
	IandspecifiedPartIIcrimes)thatestablishnee dforthe	
	publichousingsitesassistedunderthePHDEPPlan.	
	PolicyonOwnershipofPetsinPublicHousingFamily	PetPolicy
X	Developments(asrequiredbyregulationat24CFRPart960,	
11	SubpartG)	
	checkhe reifincludedinthepublichousingA&OPolicy	

ListofSupportingDoc umentsAvailableforReview											
Applicable & OnDisplay	SupportingDocument	RelatedPlan Component									
X	TheresultsofthemostrecentfiscalyearauditofthePHA conductedundersection5(h)(2)oftheU.S.HousingActof1937 (42U.S.C.1437c(h)),theresultsofthatauditandthePHA's responsetoanyfindings	AnnualPlan:Annual Audit									
	TroubledPHAs:MOA/RecoveryPlan	TroubledPHAs									
	Othersupportingdocuments(optional) (listindividually;useasmanylinesasnecessary)	(specifyasneeded)									
X	InitialConversionAssessment	AttachmentG									

# **Attachment B**

# Resident Member on the PHAG overning Board

1. [	∑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.	Nameo	fresiden tm	ember(s)onthegoverningboard:Ms.JessieReed
В.	Howwa	Elect	entboardmemberselected:(selectone)? red pinted
C.	Thetern	nofappointn	nentis(includethedatetermexpires):Termexpires11/26/2002
2.		istedbythePI	ningboarddoesnothaveatleastonememberwhoisdirectly HA,whynot? thePHAislocatedinaStatethatrequiresthemembersofa governingboardtobesalariedandserveonafulltimebasis thePHAhaslessthan300publichousingunits,hasprovided reasonablenoticetotheresidentadvisoryboardoftheopportunity toserveonthegoverningboard,andhasnotbeennotifiedbyany residentoftheirinteresttoparticipateinthe Board. Other(explain):
В.	Dateof	fnexttermex	pirationofagoverningboardmember:
C.		ndtitleofapp forthenextpo	ointingofficial(s)forgoverningboard(indicateappointing osition):

## **Attachment C**

# Member ship of the Resident Advisory Board or Boards

ListmembersoftheResidentAdvisoryBoardorBoards:(Ifthelistwouldbe unreasonablylong,listorganizationsrepresentedorotherwiseprovideadescription sufficienttoidentifyhowmembersa rechosen.)

Ms. AnnieBrigham

Ms.TiffanyPatterson

Ms.ChazelBedford

Mr.JohnColes

Ms.JessieReed

#### **Attachment D**

#### BriefStatementofProgressinMeeting5 -YearPlanMissionandGoals

The Sylvania Housing Authority has completed a review of 5 -Year Mission and Goals. This attachment is a progress report on how the Authority is faring in accomplishing the goals. In an effort to develop meaning fulgoals and objectives, the Authority has determined that some goals should be dropped because they are not realistic. Other goals have been modified to meet the needs of the Authority. The following represents the progress report and update.

#### Goal#1

Trainingisprovided to employees in all areas of the Authority on an asneeded basis.

 $The Authority\ is in the process of identifying community resources and sources of funding for programs to improve customers ervice and physical improvements.$ 

The Executive Director has implemented an operational system to ensure that all tasks are completed in an efficient manner.

The Executive Director is in the process of developing a preventive maintenance program to improve the physical appearance of maintenance equipment and vehicles. The date for this objective has been moved back to January 2003.

#### Goal#2

The first and four thought it is sunder this goal have been eliminated due to the fact that they are not effective goals for the Authority.

The Executive Director is in the process of assessing the adequacy of the current computer system. If the assessme ntdetermines that the system needs to be upgraded, then appropriate sources of funds will be examined.

The Executive Director and staffare identifying organizational needs. This will be completed by October of 2002.

#### Goal#3

 $All \ objectives \ under \quad Goal \ \#3 \ are \ currently \ being \ addressed. \ The \ completion \ dates \ have \ been \ moved back because the process is taking longer than expected.$ 

#### Goal#4

The Authority is using funds through the Capital Funds Program to enhance the Housing stock. Aschedule of the Capital Fund Program for 2002 to 2006 are located in this document. Refer to the Table of Contents for exact location.

#### Goal#5

Goal #5 has been eliminated because all objectives are already in place.

#### **Attachment E**

## $Resident Assessment and Satis \ \ faction Survey Follow \ \ -Up Plan$

#### Overview

The Housing Authority of the City of Sylvania received the following scores on the Resident AssessmentSurvey.

Section:	<u>Score</u>
MaintenanceandRepairs	81%
Communication	72%
Safety	70%
Services	97%
NeighborhoodAppearance	77%

As a result of this survey, the Housing Authority is required to develop a Follow addresseach sections core that fell below 75%.

-Up Plan to

#### **SAFETY**

Goal: Toaddresstheconcernofresidentspertainingtosa fetyandsecurityoutlinedin

the Resident Service and Satisfaction Survey; develop programs that focus on

improvingsecurity.

**Action:** The Authority will meet with the Resident Advisory Board to discuss what

actionscanbetakentomakethedevelopmentss aferforallfamilies.

#### **COMMUNICATION**

**Goal:** Toimprovecommunication betweenAuthoritymanagementandresidents.

**Action:** The Authority will continue to hold resident advisory board meetings. The

Resident Advisory Board will be asked to help convey inf ormation about Authority-related issuestoother residents. Also, the Authority will evaluate the use of an ewsletter to distribute information about the Authority to residents.

# **AttachmentF**

# **DeconcentrationAnalysis**

Components,(b)Dec	oncentration and income which in a contract of the contract of
a. ∐Yes ⊠No:	DoesthePHAhaveanygeneraloccupancy(family)publichousing developmentscoveredbythedeconcentrationrule?Ifno,thissectionis complete.Ifyes,continuetothenextquestion .
b. Yes No:	Doanyofthesecovereddevelopmentshaveaverageincomesaboveor below85% to 115% of the averageincomes of all such developments? If no, this section is complete.
Ifyes,listthesedevelo	opmentsas follows:
	DeconcentrationPolicyforCoveredDevelopments

	DeconcentrationPolicyforCoveredDevelopments								
DevelopmentName :	Number ofUnits	Explanation(ifany)[seestep4at §903.2(c)(1)((iv)]	Deconcentrationpolicy(if noexplanation)[seestep5 at \$903.2(c)(1)(v)]						

## **AttachmentG**

# Initial Conversion Assessment Analysis

A.		manyofthePHA'sdevelopments sments?	saresubjecttotheRequiredInitia	1
	Two			
B.	Asses	ManyofthePHA'sdevelopments ssmentsbasedonexemptions(e.graloccupancyprojects?	· · · · · · · · · · · · · · · · · · ·	
	Zero			
C.	How	manyAssessmentswereconduc	tedforthePHA'scovereddevelo	pments?
	Onea	ssessmentperdevelopment.		
D.		ifyPHAdevelopmentsthatmaybiredInitialAssessments:	peappropriateforconversionbas	sedonth 6
				1
		None DevelopmentName	NumberofUnits	
				1 -
				-
				_
E.	Ifthel	PHAhasnotcompletedtheRequi	redInitialAssessments,describ	ethe

statusoftheseassessments:

Authority'soffice.

Housing

Ann	ualStatement/PerformanceandEvaluat	ionReport			
Cap	ital Fund Program and Capital Fund Fund Program and Capital Fund Fund Fund Fund Fund Fund Fund Fund	ramReplacementHo	ousingFactor(CFP/C	CFPRHF)PartI:Su	ımmarv
PHAN	ame: HousingAuthorityoftheCityofSylvania	GrantTypeandNumber CapitalFundProgramGra ntNo ReplacementHousingFactorGra	FederalFYofGrant: 2002		
	ginalAnnualStatement ReserveforDisasters/Emerg formanceandEvaluationReportforPeriodEnding:	gencies RevisedAnnualSt		)	
Line	SummarybyDevelopmentAccount	TotalEstim		Total	ActualCost
No.					
		Original	Revised	Obligated	Expended
1	Totalnon -CFPFunds				
2	1406Operations				
3	1408ManagementImprovements				
4	1410Administration				
5	1411Audit				
6	1415LiquidatedDamages				
7	1430FeesandCosts				
8	1440SiteAcquisition				
9	1450SiteImprovement				
10	1460DwellingStructures	\$150,857.00			
11	1465.1DwellingEquipment —Nonexpendable				
12	1470NondwellingStructures				
13	1475NondwellingEquipment				
14	1485Demolition				
15	1490ReplacementReserve				
16	1492 MovingtoWorkDemonstration				
17	1495.1RelocationCosts				
18	1499DevelopmentActivities				
19	1501CollaterizationorDebtService				
20	1502Contingency				
21	AmountofAnnualGrant:(sumoflines2 –20)	\$150,857.00			
22	Amountofline 21RelatedtoLBPActivities				
23	Amountofline21RelatedtoSection504compliance				
24	Amountofline21RelatedtoSecurity –SoftCosts				
25	AmountofLine21RelatedtoSecurity - HardCosts				
26	Amountofline21RelatedtoEnergyConse rvationMeasures				

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

PartII:SupportingPages

PHAName: Housi	ngAuthorityoftheCityofSylvania	GrantTypean dN CapitalFundProg ReplacementHous	Number ramGrantNo: GA( ingFactorGrantNo:	FederalFYofGrant: 2002				
Development Number Name/HA-Wide Activities	GeneralDescriptionofMajorWork Categories	Dev.AcctNo.	Quantity	TotalEstin	TotalEstimatedCost		TotalActualCost	
				Original	Revised	Funds Obligated	Funds Expended	
	DwellingStructures							
GA152-3	Bathroomandkitchenmodernizationand replacementoffloortile(Phase2)	1460	6	\$150,857.00				
	G 45 4 1			φ150 05 <b>5</b> 00				
	GrantTotal			\$150,857.00				

AnnualStatement/PerformanceandEvaluationReport
CapitalFundProgramandCapitalFundProgramReplacementHousingFactor(CFP/CFPRHF)
PartIII:ImplementationSchedule

<b>PHAName:</b> HousingAuthorityoftheCityof Sylvania			GrantTypeandNumber CapitalFundProgramNo: GA06P50102 ReplacementHousingFac torNo:				FederalFYofGrant: 2002
DevelopmentNumber Name/HA-Wide Activities		andObligated erEndingDat				ReasonsforRevisedTargetDates	
	Original	Revised	Actual	Original	Revised	Actual	
GA152-3	12/31/03			6/30/05			

CapitalFundProgramFive -YearActionPlan

PartI:Summary

PHAName: Housing Authority of				<b>⊠</b> Original5 -YearPlan	
theCityofSylvania				☐RevisionNo:	
Development	Year1	WorkStatementforYear2	WorkStatementforYear3	WorkStatementforYear4	WorkStatementforYear5
Number/Name/HA-		FFYGrant: 2003	FFYGrant: 2004	FFYGrant: 2005	FFYGrant: 2006
Wide		PHAFY: 2004	PHAFY: 2005	PHAFY: 2006	PHAFY: 2007
	Annual Statement				
GA152-1		\$0	\$0	\$0	\$150,857
GA152-3		\$150,857	\$150,857	\$150,857	\$0
CFPFundsListedfor 5-yearplanning		\$150,857	\$150,857	\$150,857	\$150,857
ReplacementHousing FactorFunds					

# ${\bf Capital Fund Program\ \ Five\ - Year Action Plan}$ PartII:SupportingPages —WorkActivities

Activitiesfor		ActivitiesforYear: 2			Activities for Year: 3	
Year1		FFYGrant: 2003			FFYGrant: 2004	
		PHAFY: 2004			PHAFY: 2005	
	Development	MajorWork Categories	EstimatedCost	Development	MajorWorkCategories	EstimatedCost
	Name/Number			Name/Number	, and the second	
See						
Annual		<u>DwellingStructures</u>			<u>DwellingStructures</u>	
Statement	GA152-3	BathroomandKitchenModernization andReplacementoffloortile(Phase3)	\$150,857	GA152-3	BathroomandKitchenModernization andReplacementoffloortile(Phase 4)	\$150,857
_						
		TotalCFPEstimatedCo st	\$150,857			\$150,857

# CapitalFundProgramFive -YearActionPlan PartII:SupportingPages —WorkActivities

	ActivitiesforYear: 4 FFYGrant: 2005			ActivitiesforYear: 5 FFYGrant: 2006	
	PHAFY: 2006			PHAFY: 2007	
Development Name/Number	MajorWorkCategories	EstimatedCost	Development Name/Number	MajorWorkCategories	Estimated Cost
	DwellingStructures			SiteImprovements	
GA152-3	BathroomandKitchenModernizationand Replacementoffloortile(Phase 5)	\$150,857	GA152-1	Replacesewerline	\$30,000
				<u>DwellingStructures</u>	
			GA152-1	Replacementofheatersandhotwater heaters	\$120,857
	TotalCFPEstimatedCost	\$150,857			\$150,857

Ann	ualStatement/PerformanceandEvaluat	ionReport					
Capi	ital Fund Program and Capital Fund Prog	ramReplacementHo	ousingFactor(CFP/C	CFPRHF)Part1:S	ummary		
PHAN	ame: HousingAuthorityoftheCityofSylvania  ginalAnnualStatement	GrantTypeandNumber CapitalFundProgram:GA 06 CapitalFundProgram ReplacementHousingFactorGrant	FederalFYofGrant: 2001				
	formanceandEvaluationReportforPeriodEnding:12/31		nceandEvaluationReport				
Line	SummarybyDevelopmentAccount	TotalEstin	lActualCost				
No.							
		Original	Revised	Obligated	Expended		
1	Totalnon -CFPFunds						
2	1406Operations						
3	1408ManagementImprovements						
4	1410Administration						
5	1411Audit						
6	1415liquidatedDamages						
7	1430FeesandCosts	\$0.00	\$20,600.00	\$20,600.00	\$20,600.00		
8	1440SiteAcquisition						
9	1450SiteImprovement						
10	1460DwellingStructures	\$135,857.00	\$115,257.00	\$115,257.00	\$19,113.00		
11	1465.1DwellingEquipment —Nonexpendable						
12	1470NondwellingStructures						
13	1475NondwellingEquipment						
14	1485Demolition	\$15,000.00	\$15,000.00	\$15,000.00	\$15,000.00		
15	1490ReplacementReserve						
16	1492MovingtoWorkDemonstration						
17	1495.1RelocationCosts						
18	1498ModUsedforDevelopment						
19	1502Contingency						
20	AmountofAnnualG rant:(sumoflines2 -19)	\$150,857.00	\$150,857.00	\$150,857.00	\$54,713.00		
21	Amountofline20RelatedtoLBPActivities						
22	Amountofline20RelatedtoSection504Compliance						
23	Amountofline20RelatedtoSecurity						
24	Amountofline20R elatedtoEnergyConservation Measures						

# AnnualStatement/PerformanceandEvaluationReport CapitalFundProgramandCapitalFundProgramReplacementHousingFactor(CFP/CFPRHF) PartII:SupportingPages

PHAName: Housin	ngAuthorityoftheCityof Sylvania	GrantTypeandNumber				FederalFYofGrant: 2001		
		CapitalFundProgram#:GA06P15250101						
		CapitalFundProgram ReplacementHousin						
Development Number	GeneralDescriptionofMajorWork Categories	Dev.Acc tNo.	Quantity	TotalEstimatedCost		TotalActualCost		Statusof Proposed
Name/HA-Wide Activities	Categories			Original	Revised	Funds Obligated	Funds Expended	Work
	DwellingStructures							
GA152 -1A & B	ReplaceSewerLines	1460	1	\$30,000.00	\$19,113.00	\$19,113.00	\$19,113.00	Complete
GA152 -3	Completeinstallationofsecurityscreens, bathroommodernization,replacementof tile,replacementofheaters,andhot waterheatersandkitchenmodernization.	1460	4	\$105,857.00	\$96,144.00	\$96,144.00	\$0.00	ContractLet
	Subtotal1460			\$135,857.00	\$115,257.00	\$115,257.00	\$19,113.00	
	<b>Demolition</b>							
GA152-2	Demolition	1485	2	\$15,000.00	\$15,000.00	\$15,000.00	\$15,000.00	Complete
	Subtotal1485			\$15,000.00	\$15,000.00	\$15,000.00	\$15,000.00	
	FeesandCost							
PHA-Wide	A&EFees	1430		\$0.00	\$20,600.00	\$20,600.00	\$20,566.00	Complete
	Subtotal1430			\$0.00	\$20,600.00	\$20,600.00	\$20,566.00	
Total				\$150,857.00	\$150,857.00	\$150,857.00	\$54,679.00	

# AnnualStatement/PerformanceandEvaluationReport CapitalFundProgramandCapitalFundProgramReplacementHousingFactor(CFP/CFPRHF) PartIII:ImplementationSchedule

PHAName : Housing Authority of the City			TypeandNumb	oer			FederalFYofGrant: 2001		
ofSylvania			CapitalFundProgram#: GA06P15250101						
				ReplacementHousin					
DevelopmentNumber AllFundC							ReasonsforRevisedTargetDates		
		artEndingDate	e)	(QuarterEnding Date)					
Activities									
	Original	Revised	Actual	Original	Revised	Actual			
GA 150 1	2/02		10/01/01	0.102		10/01/01			
GA152 -1	3/03		12/31/01	9/03		12/31/01			
GA152 -2	3/03			9/03					
GA152 -3	3/03		12/31/01	9/03		12/31/01			