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

PHA Plans

5 Year Plan for Fiscal Years 2002 - 2006 Annual Plan for Fiscal Year 2002

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: _Aurora Housing Authority_____

PHA Number: IL06-PO90____

PHA Fiscal Year Beginning: (mm/yyyy) 04/2002

Public Access to Information

Information regarding any activities outlined in this plan can be obtained by contacting: (select all that apply)

- _X__ 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)

- _X__ 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)

- _X__ Main business office of the PHA
- _____ PHA development management offices
- ____ Other (list below)

OMB Approval No:HUB7500226 Expires: 03/31/2002

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5-YEAR PLAN PHA FISCAL YEARS 2000 - 2004 [24 CFR Part 903.5]

A. Mission

State the PHA's mission for serving the needs of low-income, very low income, and extremely low-income families in the PHA's jurisdictipe of the shelf as the shelf of the Department of Housing and Urban Development: To promote adequate and affordable housing, economic opportunity and a suitable living environment free from discrimination.

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

Aurora Housing Authority Mission Statement

It is the mission of the Aurora Housing Authority to promote the original philosophy of public housing as a temporary helping hand by providing housing assistance to those in need with understanding, respect and professionalism without discrimination.

The primary focus of our mission is to provide and maintain quality, affordable housing within a safe, stable environment while promoting available educational, employment, economic development and self sufficiency programs and initiatives for the residents we serve to enhance their lives and increase opportunities for upward mobility and independent lifestyles.

B. Goals

The goals and objectives listed below are derived from HUD's strategic Goals and Objectives and those HUD Strategic Goals: The ase the availability of the coals and objectives afford able or identify other goals and/or objectives. Whether selecting the HUD-suggested objectives or their own, PHAS ARE STRONGLY ENCOURAGED TO IDENTIFY QUANTIFIABLE MEASURES OF SUCCESS IN REACHING THEIR OBJECTIVES OVER THE COURSE OF THE 5 YEARS. You anti PHA Graal to Stop an obtain of the supply of chassisted thousing milies served or PHAS scores

Objectives:

- _____ Apply for additional rental vouchers:
- __X_ 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:

_X__ Improve public housing management: (PHAS score)

- _X__ Improve voucher management: (SEMAP score)
- _X__ Increase customer satisfaction:
- Concentrate on efforts to improve specific management functions: (list; e.g., public housing finance; voucher unit inspections)
- _X__ Renovate or modernize public housing units:
- Demolish or dispose of obsolete public housing:
- Provide replacement public housing:
- Provide replacement vouchers:
- Other: (list below)
- _X__ PHA Goal: Increase assisted housing choices **Objectives:**
 - _X__ Provide voucher mobility counseling:
 - X Conduct outreach efforts to 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 _X__ **Objectives:**
 - Implement measures to deconcentrate poverty by bringing higher income _____ public housing households into lower income developments:
 - _X__ Implement measures to promote income mixing in public housing by assuring access for lower income families into higher income developments:
 - _X__ 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

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

- _____ Increase the number and percentage of employed persons in assisted families:
- _X__ Provide or attract supportive services to improve assistance recipients' employability:
- _X__ Provide or attract supportive services to increase independence for the elderly or families with disabilities.
- ____ Other: (list below)

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

- _X__ PHA Goal: Ensure equal opportunity and affirmatively further fair housing Objectives:
 - _X__ Undertake affirmative measures to ensure access to assisted housing regardless of race, color, religion national origin, sex, familial status, and disability:
 - _X__ 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: (list below)

Other PHA Goals and Objectives: (list below)

Annual PHA Plan PHA Fiscal Year 2002

[24 CFR Part 903.7]

Annual Plan Type:

Select which type of Annual Plan the PHA will submit.

_X__ Standard Plan

Streamlined Plan:

- ____ High Performing PHA
- ____ Small Agency (<250 Public Housing Units)
- ____ Administering Section 8 Only

____ Troubled Agency Plan

Executive Summary of the Annual PHA Plan

[24 CFR Part 903.7 9 (r)]

Provide a brief overview of the information in the Annual Plan, including highlights of major initiatives and discretionary policies the PHA has included in the Annual Plan.

Annual Plan Table of Contents

[24 CFR Part 903.7 9 (r)] Provide a table of contents for the Annual Plan, including attachments, and a list of supporting documents available for public inspection.

Table of Contents

Annual Plan

Executive Summary

- i. Table of Contents
 - Housing Needs
 - 1. Financial Resources
 - 2. Policies on Eligibility, Selection and Admissions
 - 3. Rent Determination Policies
 - 4. Operations and Management Policies
 - 5. Grievance Procedures
 - 6. Capital Improvement Needs
 - 7. Demolition and Disposition
 - 8. Designation of Housing
 - 9. Conversions of Public Housing
 - 10. Homeownership
 - 11. Community Service Programs
 - 12. Crime and Safety
 - 13. Pets (Inactive for January 1 PHAs)
 - 14. Civil Rights Certifications (included with PHA Plan Certifications)

Page #

- 15. Audit
- 16. Asset Management
- 17. Other Information

Attachments

Indicate which attachments are provided by selecting all that apply. Provide the attachment's name (A, B, Receipting the Appacet of the left of the name of the attachment. Note: If the attachment is provided as a SEPARATE file submission from the PHA Plans file, provide the file name in parentheses in the space to the right of the plans for Deconcentration

- <u>A the right of the fills</u> I only to Decentration of the right of the fills. X_____ 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
- _X_ FY 2000 Capital Fund Program 5 Year Action Plan
- ____ Public Housing Drug Elimination Program (PHDEP) Plan
- X____ Comments of Resident Advisory Board or Boards (must be attached if not included in PHA Plan text)
- ___X__ Other (List below, providing each attachment name)
- 1. Progress in meeting the Five Year Plan and Mission Goals
- 2. AHA Board of Commissioner member information.
- 3. AHA Resident Advisory Board information
- 4. AHA definition of substantial deviation and significant amendment or modification.
- 5. Plan comments and recommendations.
- 6. Admin policy for deconcentration.

Supporting Documents Available for Review

Indicate which documents are available for public review by placing a mark in the "Applicable & On

Displ	Display" column in the appropriate rows. All listed documents must be on display if applicable to the program activities conducted by the program activities conducted by the program activities conducted by the program activities of the program activiti				
Applicable & On Display	Supporting Document	Applicable Plan Component			
X	PHA Plan Certifications of Compliance with the PHA Plans and Related Regulations	5 Year and Annual Plans			
X	State/Local Government Certification of Consistency with the Consolidated Plan	5 Year and Annual Plans			
X	Fair Housing Documentation: Records reflecting that the PHA has examined its programs or proposed programs, identified any impediments to fair housing choice in those programs, addressed or is addressing those impediments in a reasonable fashion in view of the resources available, and worked or is working with local jurisdictions to implement any of the jurisdictions' initiatives to affirmatively further fair housing that require the PHA's involvement.	5 Year and Annual Plans			

Applicable & On Display	Supporting Document	Applicable Plan Component
X	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
Х	Most recent board-approved operating budget for the public housing program	Annual Plan: Financial Resources;
X	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
Х	Section 8 Administrative Plan	Annual Plan: Eligibility, Selection, and Admissions Policies
X	Public Housing Deconcentration and Income Mixing Documentation: PHA board certifications of compliance with deconcentration requirements (section 16(a) of the US Housing Act of 1937, as implemented in the 2/18/99 Quality Housing and Work Responsibility Act Initial Guidance; Notice and any further HUD guidance) and 18. Documentation of the required deconcentration and income mixing analysis	Annual Plan: Eligibility, Selection, and Admissions Policies
X	Public housing rent determination policies, including the methodology for setting public housing flat rents check here if included in the public housing A & O Policy	Annual Plan: Rent Determination
Х	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
X	Section 8 rent determination (payment standard) policies check here if included in Section 8 Administrative Plan	Annual Plan: Rent Determination
Х	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
Х	Public housing grievance procedures check here if included in the public housing A & O Policy	Annual Plan: Grievance Procedures
X	Section 8 informal review and hearing procedures check here if included in Section 8 Administrative Plan	Annual Plan: Grievance Procedures
X	The HUD-approved Capital Fund/Comprehensive Grant Program Annual Statement (HUD 52837) for the active grant year	Annual Plan: Capital Needs

any active CIAP grant Annual Plan: Capital Fund/Comprehensive Grant Program, if not included as an attachment (provided at PHA option) Annual Plan: Capital X 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 Approved HOPE VI applications or, if more recent, approved or submitted applications for dewolopment of public housing Annual Plan: Demoli and Disposition Approved or submitted applications for designation of public housing (Designated Housing Plans) Annual Plan: Designa 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: Conver Public Housing Approved or submitted public housing homeownership programs/plans Annual Plan: Homeownership Homeownership Annual Plan: Homeownership X Any cooperative agreement between the PHA and the TANF agency Annual Plan: Commu Service & Self-Suffici X Annual Plan: Commu Service & Self-Suffici X X Most recent self-sufficiency (ED/SS, TOP or ROSS or other resident services grant) grant program reports Annual Plan: Commu Service & Self-Suffici X X The most recent ly submitted PHDEP application (PHEDEP) semi-annual performance report for any open grant and most recently submitted PHDEP application (PHEDEP) semi-annual performance report for any	Applicable & On Display	Supporting Document	Applicable Plan Component
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		Troubled PHAs: MOA/Recovery Plan	Troubled PHAs
(inst individuality; use as many lines as necessary)		Other supporting documents (optional) (list individually; use as many lines as necessary)	(specify as needed)

<u>1.</u> Statement of Housing Needs [24 CFR Part 903.7 9 (a)]

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

Based upon the i	nformation of	contained in	the Consolic	lated Plan/s a	applicable to	the jurisdict	ion, and/or
other data availa completing the for renter families th	ble to the PF Housing ollowing tab	A, provide a Needs of le. In the O sing needs	Families Families verall Need Family Ta	of the housin in the Jur is column, p in column, p	g needs in the solution of the	ne jurisdiction stimated num te the impact	n by iber of of that
Familfactor pen the hou "severe impact."	sing meeds f	or & foh l fami	ly syme y fron	1 Quon Stywith	1 Avering "no	inapact" and	51bearigon
Income <= 30% of AMI	4,499	2,416	N/A	1,894	N/A	189	N/A
Income >30% but <=50% of AMI	2.392	978	N/A	N/A	N/A	189	N/A
Income >50% but <80% of AMI	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Elderly	2,027	1,180	N/A	846	N/A	1	N/A
Families with Disabilities	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Race/Ethnicity	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Race/Ethnicity							
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.)

_X___ Consolidated Plan of the Jurisdiction/s

Indicate year: _2000-2002___

- 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: (list and indicate year of information)

A. Housing Needs of Families on the Public Housing and Section 8 Tenant- Based Assistance Waiting Lists

State the housing needs of the families on the PHA's waiting list/s. Complete one table for each type of PHA-wide waiting list administered by the PHA. PHAs may provide separate tables for site-based or sub-jurisdictional public housing waiting lists at their option

]	Housing Needs of Fai	nilies on the Waiting L	list
X Public Housin Combined Sec Public Housing	t-based assistance g tion 8 and Public Hous	risdictional waiting list (optional)
	# of families	% of total families	Annual Turnover
Waiting list total	385		Varies
Extremely low income <=30% AMI	359	93.2%	
Very low income (>30% but <=50% AMI)	25	6.5%	
Low income (>50% but <80% AMI)	1	.3%	
Families with children	338	87.8%	
Elderly families	1	.3%	
Families with Disabilities	31	8.1%	
Race/ethnicity B*	282	73.2%	
Race/ethnicity W*	101	26.2%	
Race/ethnicity H*	54	14%	
Race/ethnicity O*	2	.6%	
B: Black			
W: White			
H: Hispanic			
O: Other			

Characteristics by			
Bedroom Size			
(Public Housing			
Only)			
1BR	39	10.1%	Varies
2 BR	196	50.9%	Varies
3 BR	135	35.1%	Varies
4 BR	10	2.6%	Varies
5 BR	4	1%	Varies
5+ BR	1	.3%	Varies
Is the waiting list clo	sed (select one)? <u>No</u>	Yes	
If yes:			
B. How lo	ng has it been closed (#	# of months)?	
Does the PHA	expect to reopen the lis	st in the PHA Plan year	? No Yes
Does the PHA permit specific categories of families onto the waiting list, even if			
generally clo	osed? No Yes		-

H	Iousing Needs of Fam	ilies on the Waiting L	ist	
Waiting list type: (select one) XSection 8 tenant-based assistance Public Housing Combined Section 8 and Public Housing Public Housing Site-Based or sub-jurisdictional waiting list (optional) If used, identify which development/subjurisdiction:				
	# of families	% of total families	Annual Turnover	
Waiting list total	1053		Varies	
Extremely low income <=30% AMI	945	89.7%		
Very low income (>30% but <=50% AMI)	101	9.6%		
Low income (>50% but <80% AMI)	7	.7%		
Families with children	829	78.7%		

Elderly families	8	.8%	
Families with	206	19.6%	
Disabilities	200	17.070	
Race/ethnicity B*	745	70.8%	
Race/ethnicity W*	301	28.6%	
Race/ethnicity H*	143	13.6%	
Race/ethnicity O*	7	.6%	
B: Black			
W: White			
H: Hispanic			
O: Other			
Characteristics by			
Bedroom Size			
(Public Housing			
Only)			
1BR			
2 BR			
3 BR			
4 BR			
5 BR			
5+ BR			
Is the waiting list clo	osed (select one)? N	o Yes	
If yes:			
B. How le	ong has it been closed	l (# of months)?	
Does the PHA	expect to reopen the	list in the PHA Plan y	year? No Yes
Does the PHA permit specific categories of families onto the waiting list, even if			
generally cl	losed? No Yes		

C. Strategy for Addressing Needs

Provide a brief description of the PHA's strategy for addressing the housing needs of families in (1)e strategies and on the waiting list IN THE UPCOMING YEAR, and the Agency's reasons for Choosing this strategy of affordable housing for all eligible populations

Strategy 1. Maximize the number of affordable units available to the PHA within its current resources by:

Select all that apply

_X__ Employ effective maintenance and management policies to minimize the number of public housing units off-line

- _X__ Reduce turnover time for vacated public housing units
- _X__ Reduce time to renovate public housing units
- _____ Seek replacement of public housing units lost to the inventory through mixed finance development
- ____ Seek replacement of public housing units lost to the inventory through section 8 replacement housing resources
- _____ Maintain or increase section 8 lease-up rates by establishing payment standards that will enable families to rent throughout the jurisdiction
- _____ Undertake measures to ensure access to affordable housing among families assisted by the PHA, regardless of unit size required
- _____ Maintain or increase section 8 lease-up rates by marketing the program to owners, particularly those outside of areas of minority and poverty concentration
- _____ Maintain or increase section 8 lease-up rates by effectively screening Section 8 applicants to increase owner acceptance of program
- _X__ Participate in the Consolidated Plan development process to ensure coordination with broader community strategies
- ____ Other (list below)

Strategy 2: Increase the number of affordable housing units by:

Select all that apply

- _____ Apply for additional section 8 units should they become available
- Leverage affordable housing resources in the community through the creation of mixed finance housing
- ____ Pursue housing resources other than public housing or Section 8 tenant-based assistance.
- ____ Other: (list below)

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
- _X__ 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

- _X__ Employ admissions preferences aimed at families who are working
- _X__ Adopt rent policies to support and encourage work

____ Other: (list below)

B. Need: Specific Family Types: The Elderly

Strategy 1: Target available assistance to the elderly:

Select all	that apply

- Seek designation of public housing for the elderly
- _____ Apply for special-purpose vouchers targeted to the elderly, should they become available

Other: (list below)

Need: Specific Family Types: Families with Disabilities

Strategy 1: Target available assistance to Families with Disabilities:

Select all that apply

- Seek designation of public housing for families with disabilities
- Carry out the modifications needed in public housing based on the section 504 Needs Assessment for Public Housing
- _____ Apply for special-purpose vouchers targeted to families with disabilities, should they become available
- _X___ Affirmatively market to local non-profit agencies that assist families with disabilities
- _X___ Other: (list below)

Provide reasonable accommodations to persons with disabilities as requested (i.e., audio/visual assistance devices, ramps, grab bars. etc.).

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

- _X__ Counsel section 8 tenants as to location of units outside of areas of poverty or minority concentration and assist them to locate those units
- X____ 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) <u>Reasons for Selecting Strategies</u>

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

- _X__ Funding constraints
- _X__ 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
- _X__ Influence of the housing market on PHA programs
- ____ Community priorities regarding housing assistance
- _X__ Results of consultation with local or state government
- _X__ Results of consultation with residents and the Resident Advisory Board
- _____ Results of consultation with advocacy groups
- ____ Other: (list below)

Statement of Financial Resources

[24 CFR Part 903.7 9 (b)]

[24 CIRT 1 art (000.7) (0)]		
List the financial resources that are an	*	* *
public housing and tenant-based Section	n 8 assistance programs administe	red by the PHA during the Plan
year. Note: the table assumes that Fe funds are expended on eligible purpos	deral public housing or tenant ba	ased Section 8 assistance grant
Sources des, indicate the use for those funds	as one of the familie categori	es: pub Planneer Oses tions,
1. Federal Grants (FY 2000	ablic housing safety/security, pub.	ic housing supportive services,
grants)		
a) Public Housing Operating Fund	1,460,000	
b) Public Housing Capital Fund	1,397,936	
c) HOPE VI Revitalization	0	
d) HOPE VI Demolition	0	
e) Annual Contributions for Section	4,690,000	
8 Tenant-Based Assistance		
f) Public Housing Drug Elimination	150,600	
Program (including any		
Technical Assistance funds)		
g) Resident Opportunity and Self-	0	
Sufficiency Grants		

Sources	Planned \$	Planned Uses
h) Community Development Block Grant	0	
i) HOME	0	
Other Federal Grants (list below)	0	
2. Prior Year Federal Grants (unobligated funds only) (list below)	345,307	
3. Public Housing Dwelling Rental Income	930,000	
4. Other income (list helow)		
4. Other income (list below)		
4. Non-federal sources (list below)		
Total resources	8,828,536	

<u>3.</u> <u>PHA</u> <u>Policies</u> <u>Governing</u> <u>Eligibility</u>, <u>Selection</u>, <u>and</u> <u>Admissions</u> [24 CFR Part 903.7 9 (c)]

A. Public Housing

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

(1) Eligibility

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

_X__ When families are within a certain number of being offered a unit: (state number)

- _____ When families are within a certain time of being offered a unit: (state time)
- ____ Other: (describe)
- b. Which non-income (screening) factors does the PHA use to establish eligibility for admission to public housing (select all that apply)?
- _X__ Criminal or Drug-related activity
- _X__ Rental history
- ____ Housekeeping
- ____ Other (describe)
- c. _X_Yes ____ No: Does the PHA request criminal records from local law enforcement agencies for screening purposes?
- d. _X__Yes ____No: Does the PHA request criminal records from State law enforcement agencies for screening purposes?
- e. _X_Yes ____ No: Does the PHA access FBI criminal records from the FBI for screening purposes? (either directly or through an NCICauthorized source) We attempt to obtain records from NCIC when we cannot obtain records from local or State police.

(2)Waiting List Organization

a. Which methods does the PHA plan to use to organize its public housing waiting list (select all that apply)

- _X_ Community-wide list
- _____ Sub-jurisdictional lists
- _____ Site-based waiting lists
- ____ Other (describe)
- b. Where may interested persons apply for admission to public housing?
- _X__ PHA main administrative office
- _____ PHA development site management office
- ____ Other (list below)
- c. If the PHA plans to operate one or more site-based waiting lists in the coming year, answer each of the following questions; if not, skip to subsection (3) Assignment
 - 1. How many site-based waiting lists will the PHA operate in the coming year?
 - 2.____Yes _____No: Are any or all of the PHA's site-based waiting lists new for the upcoming year (that is, they are not part of a previously-HUD-approved site based waiting list plan)? If yes, how many lists?

- 3. ____Yes ____ No: May families be on more than one list simultaneously If yes, how many lists?
- 4. Where can interested persons obtain more information about and sign up to be on the site-based waiting lists (select all that apply)?
 - _____ PHA main administrative office
 - _____ All PHA development management offices
 - _____ Management offices at developments with site-based waiting lists
 - _____ At the development to which they would like to apply
 - ____ Other (list below)

(3) Assignment

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

____ One

_X__ Two

____ Three or More

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

b. Transfer policies:

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

- _X_ Emergencies
- ____ Overhoused

____ Underhoused

- _X__ Medical justification
- _X_ Administrative reasons determined by the PHA (e.g., to permit modernization work)
- _____ Resident choice: (state circumstances below)
- ____ Other: (list below)

a. Preferences

- 1. _X__ Yes ____ No: Has the PHA established preferences for admission to public housing (other than date and time of application)? (If "no" is selected, skip to subsection (5) Occupancy)
- 1. Which of the following admission preferences does the PHA plan to employ in the coming year? (select all that apply from either former Federal preferences or other preferences)

Former Federal preferences:

- _____ Involuntary Displacement (Disaster, Government Action, Action of Housing
- ____ Owner, Inaccessibility, Property Disposition)
- _____ Victims of domestic violence
- _____ Substandard housing
- ____ Homelessness
- _X__ 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
- _X__ Residents who live and/or work in the jurisdiction
- _____ Those enrolled currently in educational, training, or upward mobility programs
- _____ Households that contribute to meeting income goals (broad range of incomes)
- _____ Households that contribute to meeting income requirements (targeting)
- _____ Those previously enrolled in educational, training, or upward mobility programs
- _____ Victims of reprisals or hate crimes
- ____ Other preference(s) (list below)

3. If the PHA will employ admissions preferences, please prioritize by placing a "1" in the space that represents your first priority, a "2" in the box representing your second priority, and so on. If you give equal weight to one or more of these choices (either through an absolute hierarchy or through a point system), place the same number next to each. That means you can use "1" more than once, "2" more than once, etc.

__1_ Date and Time

Former Federal preferences:

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

_1__ 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
- _1___ Residents who live and/or work in the jurisdiction
- _____ Those enrolled currently in educational, training, or upward mobility programs
- _____ Households that contribute to meeting income goals (broad range of incomes)
- _____ Households that contribute to meeting income requirements (targeting)
- ____ Those previously enrolled in educational, training, or upward mobility programs
- _____ Victims of reprisals or hate crimes
- ____ Other preference(s) (list below)
- 4. Relationship of preferences to income targeting requirements:
- The PHA applies preferences within income tiers Not applicable: the pool of applicant families ensures that the PHA will meet

income targeting requirements

(5) Occupancy

- a. What reference materials can applicants and residents use to obtain information about the rules of occupancy of public housing (select all that apply)
- _X__ The PHA-resident lease
- _X__ The PHA's Admissions and (Continued) Occupancy policy
- _X___ PHA briefing seminars or written materials ORIENTATION BEFORE MOVE IN
- ____ 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
- _X__ Any time family composition changes
- _____ At family request for revision
- ____ Other (list)

(6) Deconcentration and Income Mixing

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

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

- _____ Adoption of site-based waiting lists
- _____ If selected, list targeted developments below:
- Employing waiting list "skipping" to achieve deconcentration of poverty or income mixing goals at targeted developments
 If selected, list targeted developments below:
- ____ Employing new admission preferences at targeted developments If selected, list targeted developments below:
- _____ Other (list policies and developments targeted below)
- d. ____Yes ____ 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 DEfiglibility assistance program (vouchers, and until completely merged into the voucher program, certificates).
7	-assistance program (vouchers, and until completely merged into the voucher program, certificates).

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

- _X__ 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
- _____ More general screening than criminal and drug-related activity (list factors below)
- ____ Other (list below)
- b. _X__ Yes ____ No: Does the PHA request criminal records from local law enforcement agencies for screening purposes?
- c. _X_Yes ____ No: Does the PHA request criminal records from State law enforcement agencies for screening purposes?
- d. _X__Yes ____ No: Does the PHA access FBI criminal records from the FBI for screening purposes? (either directly or through an NCICauthorized source) We attempt to obtain records from NCIC when we cannot obtain records from local or State police.
- e. Indicate what kinds of information you share with prospective landlords? (select all that apply)
- _X__ 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)
- _X__ 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)
- _X__ PHA main administrative office
- ____ Other (list below)

(3) Search Time

a. _X_Yes ____ No: Does the PHA give extensions on standard 60-day period to search for a unit?

If yes, state circumstances below:

At the discretion of the AHA on a case by case basis based on the circumstances.

(4) Admissions Preferences

a. Income targeting

____Yes ____No: Does the PHA plan to exceed the federal targeting requirements by targeting more than 75% of all new admissions to the section 8 program to families at or below 30% of median area income?

b. Preferences

1. _X_Yes ____ No: Has the PHA established preferences for admission to section 8 tenant-based assistance? (other than date and time of application) (if no, skip to subcomponent (5) Special purpose section 8 assistance programs)

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

Former Federal preferences

- ____ Involuntary Displacement (Disaster, Government Action, Action of Housing Owner, Inaccessibility, Property Disposition)
- ____ Victims of domestic violence
- ____ Substandard housing
- ____ Homelessness
- _X__ High rent burden (rent is > 50 percent of income)

Other preferences (select all that apply)

- _____ Working families and those unable to work because of age or disability
- _____ Veterans and veterans' families
- _1__ Residents who live and/or work in your jurisdiction
- _____ Those enrolled currently in educational, training, or upward mobility programs
- Households that contribute to meeting income goals (broad range of incomes)

- _____ Households that contribute to meeting income requirements (targeting)
- _____ Those previously enrolled in educational, training, or upward mobility programs
- _____ Victims of reprisals or hate crimes
- ____ Other preference(s) (list below)

3. If the PHA will employ admissions preferences, please prioritize by placing a "1" in the space that represents your first priority, a "2" in the box representing your second priority, and so on. If you give equal weight to one or more of these choices (either through an absolute hierarchy or through a point system), place the same number next to each. That means you can use "1" more than once, "2" more

- than once, etc.
- _1__ Date and Time

Former Federal preferences

- Involuntary Displacement (Disaster, Government Action, Action of Housing
- Owner, Inaccessibility, Property Disposition)
- _____ Victims of domestic violence
- _____ Substandard housing
- Homelessness
- _1_ 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
- _X_ Residents who live and/or work in your jurisdiction
- _____ Those enrolled currently in educational, training, or upward mobility programs
- Households that contribute to meeting income goals (broad range of incomes)
- Households that contribute to meeting income requirements (targeting)
- ____ Those previously enrolled in educational, training, or upward mobility programs
- _____ Victims of reprisals or hate crimes
- ____ Other preference(s) (list below)
- 4. Among applicants on the waiting list with equal preference status, how are applicants selected? (select one)
- _X__ 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)
- _X__ This preference has previously been reviewed and approved by HUD

____ The PHA requests approval for this preference through this PHA Plan

- 6. Relationship of preferences to income targeting requirements: (select one) _____ The PHA applies preferences within income tiers
- X_____ Not applicable: the pool of applicant families ensures that the PHA will meet income targeting requirements

(5) Special Purpose Section 8 Assistance Programs

- a. In which documents or other reference materials are the policies governing eligibility, selection, and admissions to any special-purpose section 8 program administered by the PHA contained? (select all that apply)
- ____ The Section 8 Administrative Plan
- Briefing sessions and written materials
- ____ Other (list below)
- a. How does the PHA announce the availability of any special-purpose section 8 programs to the public?
- _____ Through published notices
- ____ Other (list below)

4. PHA Rent Determination Policies

[24 CFR Part 903.7 9 (d)]

A. Public Housing

Exemptions: PHAs that do not administer public housing are not required to complete sub-component (1)A 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 USE of discretionary policies: (select one)

_X__ 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 __X_ \$1-\$25 _____ \$26-\$50
- 2. _X_Yes ____ No: Has the PHA adopted any discretionary minimum rent hardship exemption policies?

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

MINIMUM RENT

The AHA has set the minimum rent at \$25.00. However if the family requests a hardship exemption, the AHA will immediately suspend the minimum rent for the family until the AHA can determine whether the hardship exists and whether the hardship is of a temporary or long-term nature.

- A. A hardship exists in the following circumstances:
 - 1. When the family has lost eligibility for or is waiting for an eligibility determination for a Federal, State, or local assistance program;
 - 2. When the family would be evicted as a result of the imposition of the minimum rent requirement;
 - 3. When the income of the family has decreased because of changed circumstances, including loss of employment;
 - 4. When the family has an increase in expenses because of changed circumstances, for medical costs, child care, transportation, education, or similar items;
 - 5. When a death has occurred in the family.
- B. There is no minimum rent hardship exception if the hardship is determined temporary. The AHA may rquest reasonable documentation of hardship circumstances. If the AHA determines there is no qualifying hardship, the minimum rent will be reinstated, including requiring back payment of minimum

rent for the time of suspension.

- C. Temporary hardship. If the AHA reasonably determines that there is a qualifying hardship but that it is of a temporary nature, the minimum rent will be not be imposed for a period of 90 days from the date of the family's request. At the end of the 90-day period, the minimum rent will be imposed retroactively to the time of suspension. The AHA will offer a reasonable repayment agreement, however, the family cannot be evicted for non-payment of rent due to the minimum rent hardship.
- D. Long-term hardship. If the AHA determines there is a long-term hardship, the family will be exempt from the minimum rent requirement until the hardship no longer exists. This is done retroactively to the date of the family's request for an exception.
- E. The new minimum rent policies are retroactive to the effective date of the Quality Housing and Work Responsibility Act of October 21, 1998. If a tenant in occupancy has qualified for one of the mandatory hardship execptions since October 21, 1998 and was charged a minimum rent, the AHA will make arrangement to reimburse the tenant the overpayment in an equitable manner.
- F. Appeals. The family may use the grievance procedure to appeal the AHA's determination regarding the hardship. No escrow deposit will be required in order to access the grievance procedure.
- a. Rents set at less than 30% than adjusted income
- 1. ____Yes _X__ 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
- _X_ No
- 2. For which kinds of developments are ceiling rents in place? (select all that apply)
- _____ For all developments
- _____ For all general occupancy developments (not elderly or disabled or elderly only)
- _____ For specified general occupancy developments
- _____ For certain parts of developments; e.g., the high-rise portion
- _____ For certain size units; e.g., larger bedroom sizes
- ____ Other (list below)
- 3. Select the space or spaces that best describe how you arrive at ceiling rents (select all that apply)
- _____ Market comparability study
- _____ Fair market rents (FMR)
- _____ 95th percentile rents
- _____ 75 percent of operating costs
- _____ 100 percent of operating costs for general occupancy (family) developments
- ____ Operating costs plus debt service
- _____ The "rental value" of the unit
- ____ Other (list below)
- f. Rent re-determinations:
- 1. Between income reexaminations, how often must tenants report changes in income or family composition to the PHA such that the changes result in an adjustment to rent? (select all that apply)

____ Never

- _____ At family option
- _____ Any time the family experiences an income increase
- _X__ Any time a family experiences an income increase above a threshold amount or percentage: (if selected, specify threshold)_\$100.00 per month income change_____ Other (list below)
- ____ Other (list below)
- g. <u>Yes</u> 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
- X_{-} Other (list/describe below) 40th percentile of FMR's for existing comparable housing in the area as established by HUD.

FLAT RENT

The AHA has set a flat rent for each public housing unit. This flat rent amount is based on the Fair Market Rent Schedule established by HUD for the Chicago Metropolitan area which includes Kane County. The amount of the flat rent will be reevaluated annually and adjustments applied. Affected families will be given a 30-day notice of any rent change. Adjustments are applied on the anniversary date for each affected family.

The AHA will post the flat rents at each of the developments and at the central office.

Bedroom Sized Unit	Monthly Flat Rent Amount
Studio (0 bedroom)	\$ 593.00
One Bedroom	\$ 711.00
Two Bedroom	\$ 848.00
Three Bedroom	\$1,060.00

4 Bedroom	\$1,186.00
5 Bedroom	\$1,363.00
6 Bedroom	\$1,540.00

B. Section 8 Tenant-Based Assistance

Exemptions: PHAs that do not administer Section 8 tenant-based assistance are not required to complete sub-component 4B. Unless otherwise specified, all questions in this section apply only to the tenantbased section 8 assistance program (vouchers, and until completely merged into the voucher (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 below100% of FMR
- _X__ 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)
- _X__ 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 standardReflects market or submarket
- ____ Other (list below)
- c. If the payment standard is higher than FMR, why has the PHA chosen this level? (select all that apply)
- _____ FMRs are not adequate to ensure success among assisted families in the PHA's segment of the FMR area
- _____ Reflects market or submarket
- ____ To increase housing options for families
- ____ Other (list below)
- d. How often are payment standards reevaluated for adequacy? (select one)
- _X 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
_X	\$1-\$25
	\$26-\$50

b. _X_Yes ____ No: Has the PHA adopted any discretionary minimum rent hardship exemption policies? (if yes, list below)

MINIMUM RENT

The AHA has set the minimum rent at \$25.00. However if the family requests a hardship exemption, the AHA will immediately suspend the minimum rent for the family until the AHA can determine whether the hardship exists and whether the hardship is of a temporary or long-term nature.

- A. A hardship exists in the following circumstances:
 - 1. When the family has lost eligibility for or is waiting for an eligibility determination for a Federal, State, or local assistance program;
 - 2. When the family would be evicted as a result of the imposition of the minimum rent requirement;
 - 3. When the income of the family has decreased because of changed circumstances, including loss of employment;
 - 4. When the family has an increase in expenses because of changed circumstances, for medical costs, child care, transportation, education, or similar items;
 - 5. When a death has occurred in the family.
- B. There is no minimum rent hardship exception if the hardship is determined temporary. The AHA may rquest reasonable documentation of hardship circumstances. If the AHA determines there is no qualifying hardship, the

minimum rent will be reinstated, including requiring back payment of minimum rent for the time of suspension.

- C. Temporary hardship. If the AHA reasonably determines that there is a qualifying hardship but that it is of a temporary nature, the minimum rent will be not be imposed for a period of 90 days from the date of the family's request. At the end of the 90-day period, the minimum rent will be imposed retroactively to the time of suspension. The AHA will offer a reasonable repayment agreement, however, the family cannot be evicted for non-payment of rent due to the minimum rent hardship.
- D. Long-term hardship. If the AHA determines there is a long-term hardship, the family will be exempt from the minimum rent requirement until the hardship no longer exists. This is done retroactively to the date of the family's request for an exception.
- E. The new minimum rent policies are retroactive to the effective date of the Quality Housing and Work Responsibility Act of October 21, 1998. If a tenant in occupancy has qualified for one of the mandatory hardship execptions since October 21, 1998 and was charged a minimum rent, the AHA will make arrangement to reimburse the tenant the overpayment in an equitable manner.
- F. Appeals. The family may use the grievance procedure to appeal the AHA's determination regarding the hardship. No escrow deposit will be required in order to access the grievance procedure.

5. Operations and Management

[24 CFR Part 903.7 9 (e)]

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

A. PHA Management Structure

(setsortborte) PHA's management structure and organization.

- _____ An organization chart showing the PHA's management structure and organization is attached.
- _X__ A brief description of the management structure and organization of the PHA follows:

The Aurora Housing Authority operates under the direction of an Executive Director who is hired by a seven member Board of Commissioners. The Board is appointed to five year terms by the Mayor of Aurora. The AHA currently has thirty eight full time employees. Management staff consists of an Executive Director, Deputy Executive Director, Director of Housing Management and Special Operations and a Director of Business Operations.

B. HUD Programs Under PHA Management

List Federal programs administered by the PHA, number of families served at the beginning of				
Program Name	Utity or minimized year, and Sindicate that the PHA does n Served at Year	dExpected urnover in each. ot operate any of the programs 1	(Use "NA" to isted below.)	
	Beginning			
Public Housing	502	Varies		
Section 8 Vouchers	385	Varies		
Section 8 Certificates	261	Varies		
Section 8 Mod Rehab	14	Varies		
Special Purpose Section 8 Certificates/Vouchers (list individually)				
Public Housing Drug Elimination Program (PHDEP)	461	Varies	-	
			-	
Other Federal Programs(list individually)				
Capital Fund	656	Varies		

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 Maintenance and Management: (list below) 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.

- -Admissions and Continued Occuapcy Policy
- Public Housing Lease
- Routine and Preventative Maintenance Policy
- Pest Control Policy (includes cockroach extermination)
- (2) Section 8 Management: (list below)
- Section 8 Administrative Plan
- HAP Contract

6. PHA Grievance Procedures

[24 CFR Part 903.7 9 (f)]
Exemptions from component 6: High performing PHAs are not required to complete component 6. Section 8-Only PHAs are exempt from sub-component 6A.

A. Public Housing

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

If yes, list additions to federal requirements below:

- 2. Which PHA office should residents or applicants to public housing contact to initiate the PHA grievance process? (select all that apply)
- X PHA main administrative office
- _X__ PHA development management offices
- Other (list below)

B. Section 8 Tenant-Based Assistance

1. ____Yes _X__ 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 tenantbased assistance program in addition to federal requirements found at 24 CFR 982?

If yes, list additions to federal requirements below:

- 2. Which PHA office should applicants or assisted families contact to initiate the informal review and informal hearing processes? (select all that apply)
- _X__ PHA main administrative office
- Other (list below)

7. Capital Improvement Needs

[24 CFR Part 903.7 9 (g)]

Exemptions from Component 7: Section 8 only PHAs are not required to complete this component and A. Capital Fund Activities

Exemptions from sub-component 7A: PHAs that will not participate in the Capital Fund Program (1) Capital Fund Program Annual Statement

Using parts I, II, and III of the Annual Statement for the Capital Fund Program (CFP), identify capital Sagizities 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.

- _X__ The Capital Fund Program Annual Statement is provided as an attachment to the PHA Plan at Attachment (state name) il090a02
- -or-
- ____ The Capital Fund Program Annual Statement is provided below: (if selected, copy the CFP Annual Statement from the Table Library and insert here)

(2) Optional <u>5-Year Action Plan</u>

Agencies are encouraged to include a 5-Year Action Plan covering capital work items. This statement can a be completed by using the 5 Keather per Alan toblen rayided in the table literary at the rend pither PHA the Plan template OR by completing and attaching a properly updated HUD-52834. Capital Fund? (if no, skip to sub-component 7B)

b. If yes to question a, select one:

- _X___ The Capital Fund Program 5-Year Action Plan is provided as an attachment to the PHA Plan at Attachment (state name il090b02
- -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 here)

B. HOPE VI and Public Housing Development and Replacement Activities (Non-Capital Fund)

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

Program Annual Statement. 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-finance development
	activities for public housing in the Plan year?
	If yes, list developments or activities below:

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

8. Demolition and Disposition

 [24 CFR Part 903.7 9 (h)]

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

 1. ____Yes _X___ 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.)

Demolition/Disposition Activity Description		
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:		
Coverage of action (select one)		
Part of the development		
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

[24 CFR Part 903.7 9 (i)]

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

 1.
 Yes X
 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 or only families and families, or by elderly families or by elderly families and families or only elderly families or only families with disabilities, or by elderly families or only families and families 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.

Designation of Public Housing Activity Description
<u>1a. Development name:</u>
<u>1b. Development (project) number:</u>
2. Designation type:
Occupancy by only the elderly
Occupancy by families with disabilities
Occupancy by only elderly families and families with disabilities
3. Application status (select one)
Approved; included in the PHA's Designation Plan
Submitted, pending approval
Planned application
4. Date this designation approved, submitted, or planned for submission: (DD/MM/YY)

5. If approved, will this designation constitute a (select one)
New Designation Plan
Revision of a previously-approved Designation Plan?
1. Number of units affected:
7. Coverage of action (select one)
Part of the development
Total development

<u>10.</u> Conversion of Public Housing to Tenant-Based Assistance</u> [24 CFR Part 903.7 9 (j)]

Exemptions from Component 10; Section 8 only PHAs are not required to complete this <u>Asectionsessments of Reasonable Revitalization Pursuant to section 202 of the HUD FY</u> 1996 HUD Appropriations Act

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

2. Activity Description

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

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

status)
<u>Conversion Plan in development</u>
<u>Conversion Plan submitted to HUD on: (DD/MM/YYYY)</u>
<u>Conversion Plan approved by HUD on: (DD/MM/YYYY)</u>
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)
<u>Units addressed in a pending or approved demolition application (date</u>
submitted or approved:
<u>Units addressed in a pending or approved HOPE VI demolition application</u>
(date submitted or approved:)
<u>Units addressed in a pending or approved HOPE VI Revitalization Plan (date</u>
submitted or approved:)
<u>Requirements no longer applicable: vacancy rates are less than 10 percent</u>
<u>Requirements no longer applicable:</u> site now has less than 300 units
Other: (describe below)

<u>B. Reserved for Conversions pursuant to Section 22 of the U.S. Housing Act</u> of 1937

<u>C. Reserved for Conversions pursuant to Section 33 of the U.S. Housing Act of 1937</u>

11. Homeownership Programs Administered by the PHA [24 CFR Part 903.7 9 (k)]

A. Public Housing

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

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

2. Activity Description

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

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

B. Section 8 Tenant Based Assistance

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

section 8 homeownership option?

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

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

b. PHA-established eligibility criteria

Yes _____No: Will the PHA's program have eligibility criteria for participation in its Section 8 Homeownership Option program in addition to HUD criteria?

If yes, list criteria below:

12. PHA Community Service and Self-sufficiency Programs

[24 CFR Part 903.7 9 (l)]

Exemptions from Component 12: High performing and small PHAs are not required to complete this <u>AcorpHMAnCoorthin at Rody withs the rWelfared (FANF)</u> <u>Agency</u> monent C.

<u>1. Cooperative agreements:</u>

X_Yes No: Has the PHA has entered into a cooperative agreement with the TANF Agency, to share information and/or target supportive services (as contemplated by section 12(d)(7) of the Housing Act of 1937)?

If yes, what was the date that agreement was signed? 06/12/01

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

- _X__ Client referrals
- _X__ Information sharing regarding mutual clients (for rent determinations and otherwise)
- _X__ 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)

- _X__ Public housing rent determination policies (Flat Rent Policy)
- _____ Public housing admissions policies
- _____ Section 8 admissions policies
- _____ Preference in admission to section 8 for certain public housing families
- _____ Preferences for families working or engaging in training or education programs for non-housing programs operated or coordinated by the PHA
- Preference/eligibility for public housing homeownership option participation
- _____ Preference/eligibility for section 8 homeownership option participation
- ____ Other policies (list below)
- b. Economic and Social self-sufficiency programs
- _X_Yes ____ No: Does the PHA coordinate, promote or provide any programs to enhance the economic and social self-sufficiency of residents? (If "yes", complete the following table; if "no" skip to sub-component 2, Family Self Sufficiency Programs. The position of the table may be altered to facilitate its use.)

Services and Programs				
Program Name & Description (including location, if appropriat)	Estimate Size	Allocation Method (waiting list/random selection/specif : criteria/other)	Access (development office / PHA main office / other provider name)	Eligibility (public housing ([•] section 8 participants or both)
Section 8 FSS Program	18	Waiting List/ Volunteers	AHA Main Office	Section 8

(2) Family Self Sufficiency program/s

Family Self Sufficiency (FSS) Participation				
Program	Required Number of Participant (start of FY 2000 Estimate)	Actual Number of Participants (As of: DD/MM/YY)		
Public Housing	0	N/A		
Section 8	34	18		

a. Participation Description

b. ____Yes _X___ No:If the PHA is not maintaining the minimum program size required by HUD, does the most recent FSS Action Plan address the steps the PHA plans to take to achieve at least the minimum program size?

If no, list steps the PHA will take below:

1. Recruit additional FSS participants from existing Section 8 Program.

2. Recruit additional FSS participants from new Section 8 participants.

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)
- _X__ Adopting appropriate changes to the PHA's public housing rent determination policies and train staff to carry out those policies
- _X Informing residents of new policy on admission and reexamination
- _X__ Actively notifying residents of new policy at times in addition to admission and reexamination.
- _X__ 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)

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

13. PHA Safety and Crime Prevention Measures

[24 CFR Part 903.7 9 (m)]

Exemptions from Component 13: High performing and small PHAs not participating in PHDEP and ASec Need Goly Ribbasures to tensure the Safetsh derforblic housing PHESiden ts participating in PHDEP and are submitting a PHDEP Plan with this PHA Plan may skip to sub-component D.

- 1. Describe the need for measures to ensure the safety of public housing residents (select all that apply)
- High incidence of violent and/or drug-related crime in some or all of the PHA's developments
- _____ High incidence of violent and/or drug-related crime in the areas surrounding or adjacent to the PHA's developments
- _____ Residents fearful for their safety and/or the safety of their children
- _X__ Observed lower-level crime, vandalism and/or graffiti
- People on waiting list unwilling to move into one or more developments due to perceived and/or actual levels of violent and/or drug-related crime
- _X__ Other (describe below)

Continued reduction of drug-related crime and other crime to improve the safety of residents and improve their quality of life.

- 2. What information or data did the PHA used to determine the need for PHA actions to improve safety of residents (select all that apply).
- _X__ Safety and security survey of residents
- _X_ Analysis of crime statistics over time for crimes committed "in and around" public housing authority
- _X__ Analysis of cost trends over time for repair of vandalism and removal of graffiti
- _X___ Resident reports
- _X__ PHA employee reports
- _X___ Police reports
- _X___ Demonstrable, quantifiable success with previous or ongoing anticrime/anti drug programs
- ____ Other (describe below)
- 3. Which developments are most affected? (list below)

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

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

- _X__ Contracting with outside and/or resident organizations for the provision of crimeand/or drug-prevention activities
- _X___ Crime Prevention Through Environmental Design
- _X___ 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) Jericho Circle, Eastwood, Southwind, Indian Trail and Maple Terrace.

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)

- _X__ Police involvement in development, implementation, and/or ongoing evaluation of drug-elimination plan
- _X__ 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)
- _X__ Police regularly testify in and otherwise support eviction cases
- _____ Police regularly meet with the PHA management and residents
- _X___ 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) Jericho Circle, Eastwood, Southwind, Indian Trail and Maple Terrace.

D. Additional information as required by PHDEP/PHDEP Plan

PHAs eligible for FY 2000 PHDEP funds must provide a PHDEP Plan meeting specified requirements

prior Yesceipt of No. Is the PHA eligible to participate in the PHDEP in the fiscal year covered by this PHA Plan?

____Yes _X___No: Has the PHA included the PHDEP Plan for FY 2002 in this PHA Plan?

____Yes _____No: This PHDEP Plan is an Attachment. (Attachment Filename: ____)

14.FRESERVED FOR PET POLICY

DEFINITION

For the purpose of these rules, "pet" is defined as a domesticated small animal traditionally kept in the home for pleasure rather than for utility or commercial purposes. Pet is understood to be limited to: dogs, litter box-trained cats, birds (specifically parakeets, canaries, or finches), small caged rodents (i.e., hamsters, gerbils, guinea pigs), fish and turtles. Exotic animals are not considered "pets". These rules, in compliance with federal

regulations, distinguish cats and dogs from other pets as "fur-bearing" animals. Except where otherwise indicated, these rules apply principally to dogs and cats.

PET RESTRICTIONS

No more than one fur-bearing pet is permitted in an apartment. There may be no more than two birds or small caged animals per apartment. No limit is placed on the number of fish; however, the size of fish tank may not exceed 10 gallons. Guests are not permitted to bring any type of pet onto the premises.

LOCATION OF PETS WITHIN THE BUILDING

Pets shall not be brought into public lobbies, laundry rooms, storage areas, dining areas or other public gathering spaces. When dogs or cats are moved through the building, they must be moved from the resident's apartment to the outside exit. One elevator will be specified for pet use; pets will be limited to that one elevator.

SIZES

Dogs shall weight no more than 10 pounds at the time of maturity and stand no more than 18 inches at the shoulder. Pets acquired as puppies shall be understood to mature at the height and weight not to exceed these height and weight restrictions. American Kennel Club's standards shall determine the height and weight after maturity of the breed. A non-documented animal will be assumed to mature to that size which has been determined by veterinarian evidence to the Management in a signed letter.

LICENSURE AND TAGS

Every dog and cat must wear the appropriate local animal license, a valid rabies tag and a tag bearing the owner's name, address and telephone number. All licenses and tags must be current.

ADMISSION/REGISTRATION

Every dog and cat must be registered with management upon admission and, thereafter, annually on the resident lease expiration and recertification date. Registration of dogs and cats requires proof of current dog or cat licensure, including, but not limited to feline distemper shots. Dogs shall have certifications of appropriate inoculations for heartworm, parvo and rabies, unless otherwise specified by a veterinarian. A verification letter that a cat or dog has been spayed or neutered is required prior to admission. Proof of liability insurance, evidence of a flea control program and verification of alternate care-takers are also required as discussed below.

Prior to admittance of a pet into the facility, residents will be required to complete the pet registration form and sign the Lease Addendum pertaining to pets. All pets must be

registered.

As part of the application the applicant shall acknowledge and agree that Management has the right to refer cases of pet abuse or abandonment to the appropriate Humane Society or other agency and the AHA and its representatives shall be held harmless for such referral made in good faith.

Applicants are encouraged to review and complete the appropriate form for estimating the costs of pet ownership prior to acquiring a pet.

Any change in pet will be treated as a new pet, and the permission procedure must be initiated and approval obtained once again before the new pet is allowed on the property.

ALTERING

All cats must be declawed prior to occupancy. Female dogs and cats over six months must be spayed, and males over eight months must be neutered. Dogs and cats cannot be admitted until they are old enough to be declawed, spayed or neutered.

LIABILITY

Residents owning pets shall be liable for the entire amount of all damages caused by their pet and all cleaning, defleaing and deodorizing required because of such pet. Pet owners shall be strictly liable for the entire amount of any injury to the person or property of other residents, staff or visitors of the Development caused by their pet. (Resident's will hold AHA, owners of the development and its employees harmless and indemnify them from any and all claims arising directly and indirectly from any injury or damage as a result of pet ownership.) Pet owners are encouraged to obtain liability insurance. Pet liability insurance can be obtained through most insurance agents and companies. It can also be included in renter's policies.

PET DEPOSIT

Each dog and cat owner must provide a pet security deposit in the amount of \$200.00 in addition to the standard rental security deposit. This deposit shall be maintained in a separate account as provided for by state law and HUD regulations for the maintenance of security deposits. The amount of pet deposit is established to reflect the potential cost of replacing carpeting and other furnishings as a result of pet odors, stains and damage. This fee also reflects the average pet deposit required by apartment facilities in the market area that permit pet ownership.

SANITATION

Dogs and cats are required to be "house-broken". Cats must be litter-box trained. Dogs must be able to exercise outside the building. Management shall designate a space or

spaces to be used exclusively for the purpose of exercising dogs. Pet owners shall be responsible for the immediate clean up of feces after the exercise of their dog. Resident dog owners must place the waste feces in a plastic bag, securely tie and deposit it in designated outdoor trash receptacles. Cat owners shall place "kitty litter" waste in a plastic bag, tie securely, and drop it in specified outdoor trash receptacles. "Kitty-litter" waste <u>may not</u> be disposed of down any garbage chute.

FLEA CONTROL

Upon admission of a pet, the pet owner shall file with Management, proof that a flea control program acceptable to Management will be maintained for a fur bearing pet. Thereafter, the owner of the fur-bearing pet shall file at intervals determined by Management proof that the pet and/or the apartment is being sprayed for fleas by an accredited exterminator or as recommended by an exterminator.

NOISE

No pet may make noise which disrupts other residents. Barking and/or whining dogs and crying or "caterwauling" cats will not be considered acceptable pets.

PET BEHAVIOR

No pet that bites, attacks, or demonstrates other aggressive behavior toward humans or other domesticated animals may be kept.

LEASHES

Dogs and cats shall be on hand-held leashes no longer than 5 feet in length under the control of a responsible individual at all times outside the confines of the pet owner's apartment.

ALTERNATE CARETAKER

The pet owner must supply the name of a pet sponsor who will be willing to assume immediate responsibility for the pet in case of an emergency (i.e., when the pet owner is absent or unable to adequately maintain the pet). Written verification of the willingness of these persons to assume alternate caretaker responsibility is required. It is the responsibility of the pet owner to inform the management of any change in the name, address or telephone number of the person designated as alternate caretaker. Any expenses relating to alternate caretaker are the responsibility of the pet owner.

In cases of emergency, when management is unable to reach the alternate caretaker, the pet owner agrees to allow management to place the pet in an appropriate boarding facility with all fees and cost borne by the pet owner. Within five days of such an emergency, the resident, his agent, family or estate must make arrangements with the holder of said pet as to its disposition and shall be responsible for all obligations, financial and otherwise, in such disposition.

The resident pet owner absolves Management and/or its agents of any and all liability, financial or otherwise, for actions taken on behalf of the pet owner, or the well-being of the pet.

SICK OR INJURED ANIMALS

No sick or injured pet will be accepted for occupancy without consultation and written acknowledgment of a veterinarian as to the condition of the pet's ability to live in an apartment situation. Acceptance, regardless of documentation and consultation, is the prerogative of the Management. Admitted pets which suffer illness or injury must be immediately taken for veterinarian care at the resident pet owner's expense.

RULE ENFORCEMENT

Any tenant who receives three letters of violation of these pet rules and a letter of intent describing these violations from Management may be required, after private conference, to remove the pet from the premises and provide management with a signed affidavit stating that the pet is no longer on the premises and will not return in the future. Misrepresentation of this affidavit will be grounds for eviction of the resident.

Management exercises the right to act immediately in insisting that an offending pet be removed forthwith in situations deemed to be of an emergency nature. In such instances, Management will act as specified in the section on "Alternate Caretaker" in removing a sick, diseased, or injured and/or aggressive animal.

SPECIALLY-TRAINED ANIMALS

Specially-trained animals to assist the visually and/or hearing impaired and other handicapped persons will not be required to meet the limitations as to pet size, limitations on overall number within the complex, location of pets, or pet deposit, but will be required to meet all other aspects of these rules.

COURTESY

Pets can be therapeutic for those who enjoy, own and care for them. However, pets can be threatening to others who, for whatever reason, are fearful of or allergic to animals. Please exercise common courtesy to other residents and AHA staff in dealing with your pet.

COMPLAINT PROCESS

Management has established a system for handling complaints regarding pet ownership. Management will give the pet owner written notification of a pet rule violation or complaint and will give the owner an opportunity to correct the violation. The pet owner has the opportunity to meet with management within ten days of written notice to discuss the violation. If the violation is not adequately resolved, management may initiate action to remove the pet or terminate tenancy.

VISITING ANIMALS

These rules pertain only to residents and resident pet owners. No visiting pets are allowed, with the exception of animals through an approved pet therapy program or a disabled visitor requiring a specially-trained animal.

MANAGEMENT'S DETERMINATION FORM

Management will be required to complete the management's determination form. This form will be used to determine whether the pet should be admitted into the building. Management reserves the right to prohibit the admission of any pet in cases where it determines the pet or pet owner will not be able to meet the requirements of these pet rules.

LEGAL OBLIGATIONS

The State of Illinois and the City of Aurora have many laws relating to dogs and cats. The following is a list of main requirements.

- 1. All dogs and cats must wear a license (available at the City/Village/County Buildings).
- 2. All dogs and cats must wear a valid rabies tag (available at your veterinarian's office).
- 3. All dogs and cats must wear a tag with the owner's name and address on it (available through a pet store).
- 4. All dogs and cats must be leashed and accompanied by the owner or another person at all times when the pet is off the owner's property.
- 5. You may not knowingly keep a vicious animal.
- 6. You may not permit your dog to defecate on the public highway.
- 7. You may not tie your dog or cat so that it can stand on a sidewalk. This means you cannot tie your dog or cat up in your yard so that the pet can reach the sidewalk. Nor can you leave your pet tied outside a store or other building while you go inside.
- 8. If your dog or cat should bite a person, it must be isolated at a veterinarian's office for ten days for rabies observation.
- 9. You must provide veterinary care, food and shelter for your pet.

<u>15.</u> <u>Civil Rights Certifications</u>

[24 CFR Part 903.7 9 (o)]

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

16. Fiscal Audit

[24 CFR Part 903.7 9 (p)]

1X_Yes No: Is the PHA requi	red to have an audit conducted under section
5(h)(2) of the U.S. I	Housing Act of 1937 (42 U S.C. 1437c(h))?
(If no, skip to comp	onent 17.)
2X_Yes No: Was the most rec	ent fiscal audit submitted to HUD?
3Yes _X No: Were there any fi	ndings as the result of that audit?
4Yes No: If there were any	findings, do any remain unresolved?
If yes, how many	unresolved findings remain?
5YesNo: Have responses	to any unresolved findings been submitted to
HUD?	
If not, when are t	hey due (state below)?

<u>17.</u> PHA Asset Management

[24 CFR Part 903.7 9 (q)]

Exemptions from component 17: Section 8 Only PHAs are not required to complete this component. 1.Higx performing and Mall PHAS PFIPAt engagency of many engine to the long-term asset management of its public housing stock , including how the Agency will plan for long-term operating, capital investment, rehabilitation, modernization, disposition, and other needs that have **not** been addressed elsewhere in this PHA Plan?

- 2. What types of asset management activities will the PHA undertake? (select all that apply)
- ____ Not applicable
- _____ Private management
- _____ Development-based accounting
- ____ Comprehensive stock assessment
- _____ Other: (list below)

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

<u>18. Other Information</u>

[24 CFR Part 903.7 9 (r)]

A. Resident Advisory Board Recommendations

1. ____Yes _X__ No: Did the PHA receive any comments on the PHA Plan from the Resident Advisory Board/s?

- 2. If yes, the comments are: (if comments were received, the PHA MUST select one)
- _____ Attached at Attachment (File name)
- _____ Provided below:
- 3. In what manner did the PHA address those comments? (select all that apply)
- ____ Considered comments, but determined that no changes to the PHA Plan were necessary.
- _____ The PHA changed portions of the PHA Plan in response to comments
- ____ List changes below:
- ____ Other: (list below)

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

- 1. ____Yes _X__ 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 _X___No: Was the resident who serves on the PHA Board elected by the residents? (If yes, continue to question 3; if no, skip to sub-component C.)
- 3. Description of Resident Election Process

a. Nomination of candidates for place on the ballot: (select all that apply)

- _____ Candidates were nominated by resident and assisted family organizations
- ____ Candidates could be nominated by any adult recipient of PHA assistance
- _____ Self-nomination: Candidates registered with the PHA and requested a place on ballot

__X_ Other: (describe) Interested residents sent letters to the mayor of Aurora. The Mayor of Aurora appointed a public housing resident that lives at Centennial House (James Cofield) on August 22, 2000.

- b. Eligible candidates: (select one)
- _____ Any recipient of PHA assistance

- _X__ Any head of household receiving PHA assistance
- _____ Any adult recipient of PHA assistance
- _____ Any adult member of a resident or assisted family organization
- ____ Other (list)
- c. Eligible voters: (select all that apply)
- _____ All adult recipients of PHA assistance (public housing and section 8 tenant-based assistance)
- _____ Representatives of all PHA resident and assisted family organizations
- ____ Other (list)

C. Statement of Consistency with the Consolidated Plan

For each applicable Consolidated Plan, make the following statement (copy questions as many times as 1.^{ne}Consolidated Plan jurisdiction: (provide name here)

- 2. The PHA has taken the following steps to ensure consistency of this PHA Plan with the Consolidated Plan for the jurisdiction: (select all that apply)
- _X__ The PHA has based its statement of needs of families in the jurisdiction on the needs expressed in the Consolidated Plan/s.
- _X__ The PHA has participated in any consultation process organized and offered by the Consolidated Plan agency in the development of the Consolidated Plan.
- _X__ The PHA has consulted with the Consolidated Plan agency during the development of this PHA Plan.
- _X__ Activities to be undertaken by the PHA in the coming year are consistent with the initiatives contained in the Consolidated Plan. (list below)
- ____ Other: (list below)
- 4. The Consolidated Plan of the jurisdiction supports the PHA Plan with the following actions and commitments: (describe below)

1. The Consolidated Plan recommends that the AHA and the City of Aurora continue open communication to work out problems and offer solutions to ongoing circumstances.

2. The City of Aurora encourages the continued cooperation between the AHA and the Aurora Police Department to ensure the safety of public housing residents and the reduction of crime in and around public housing sites.

3. As the majority of residents eventually shall depart the umbrella of public housing, the City of Aurora encourages the AHA to embark on a cooperative education program for public housing residents that would instruct them in

terminology and nuances of appropriate credit, house searching, financing and home maintenance. The AHA coordinates activities with various service providers in the area to provide assistance to residents that are considering leaving public housing and renting or purchasing a home.

D. Other Information Required by HUD

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

1. Aurora Housing Authority Progress In Meeting The 5 Year Plan Mission And Goals

HUD Goal: Increase the availability of decent, safe and affordable housing. AHA Goal 1: Expand the supply assisted housing.

Objective: Reduce public housing vacancies.

Result: The AHA has reduced the number of vacant units by 3% over the prior fiscal year.

AHA Goal 2: Improve the quality of assisted housing.

Objectives: Improve PHAS score, improve voucher management (SEMAP), increase customer satisfaction and renovate or modernize public housing units.

Results: This years advisory PHAS score was 76.4. We will strive to improve the PHAS score by next year. We have not received a SEMAP score as of this time. However, the independent auditors have reviewed our SEMAP data and voucher management and believe our SEMAP score would be good. Our customer satisfaction rating was 8.4. We will strive to improve that score by next year. There are several ongoing modernization programs that will improve the existing public housing stock.

AHA Goal 3: Increase Assisted Housing Choices.

Objectives: Provide voucher mobility counseling and conduct outreach efforts to landlords. Results: The AHA provides mobility counseling to participants and conducts outreach efforts to landlords in Aurora and surrounding communities through education, mailings and other outreach efforts.

HUD Goal: Improve community quality of life and economic vitality AHA Goal: Provide an improved living environment.

Objectives: Implement measures to promote income mixing end implement security improvements.

Results: Income mixing measures are in place awaiting the final rule. The AHA has reduced crime by an average of 80% at all sites over the past four years and will continue in this effort.

HUD Goal: Promote self-sufficiency and asset development of families.

AHA Goal: Promote self-sufficiency and asset development of assisted households. Objectives: Attract support services for assisted households, elderly and disabled residents. Results: The AHA promotes self-sufficiency and asset development of assisted households by providing basic computer training classes to provide job skills for entry level positions, attracting support services to improve assistance recipients' employability and by attracting support services to increase independence for elderly or families with disabilities.

HUD Goal: Ensure Equal Opportunity in Housing for all Americans.

AHA Goal: Ensure equal opportunity and affirmatively further fair housing. Objectives: Undertake affirmative measures to assure access to assisted housing. Results: The AHA promotes access to assisted housing by undertaking affirmative measures in all policies and program areas to ensure fair access to assisted housing regardless of race, color, religion, national origin, sex, familial status and/or disability. The AHA also contacts appropriate agencies or will provide referral information when it is reported that access to fair housing is denied due to race, color, religion, national origin, sex, familial status and/or disability, or for other questionable reasons.

2. Aurora Housing Authority Resident Board of Commissioner Member

Resident Board Member Name : James Cofield

Method Of Selection: Appointment by David Stover, Mayor of the City of Aurora

Term: 8-22-00 through 9-30-04

3. Aurora Housing Authority Resident Advisory Board Members

- 1. Marilyn O'Neil
- 2. June LeCompte
- 3. James Cofield
- 4. Mary McEntee
- 5. Mary Taylor
- 6. Felicia Thomas

4. AHA Definition of "Substantial Deviation" and "Significant Amendment or Modification" from the Annual Plan

The Aurora Housing Authority (AHA) adopted Resolution 00-06 on March 22, 2000, which defines a "Substantial Deviation" and/or "Significant Amendment or Modification"

to the Annual Plan as follows:

"Discretionary changes in the plans or policies of the AHA that fundamentally change the mission, goals, objectives or plans of the agency and which require formal approval of the Board of Commissioners."

5. Annual Plan Public Hearing Information.

A public hearing for the AHA Annual Plan was conducted on Thursday, November 19, 2001, at 4:30 P.M., at the central office of the AHA, 1630 West Plum Street, Aurora, Illinois.

The only attendees at the public hearing were James Cofield (Board member/resident of Centennial House) and David Kramer of the AHA. No comments or recommendations were received. The AHA did not receive any written or other type of comments or recommendations related to this plan.

This public hearing was advertised in the Legal Notice section of the Aurora Beacon News on September 24, 2000 and again on October 1, 2000, in compliance with HUD regulations.

6. Admissions Policy for Deconcentration

10.4 DECONCENTRATION POLICY

It is AHA's policy to provide for deconcentration of poverty and encourage income mixing by bringing higher income families into lower income developments and lower income families into higher income developments. Toward this end, the AHA will skip families on the waiting list to reach other families with a lower or higher income. The AHA will accomplish this in a uniform and non-discriminatory manner.

The AHA will affirmatively market our housing to all eligible income groups. Lower income residents will not be steered toward lower income developments and higher income people will not be steered toward higher income developments.

Prior to the beginning of each fiscal year, the AHA will analyze the income levels of families residing in each of our developments, the income levels of census tracts in which the AHA developments are located, and the income levels of the families on the waiting list. Based on this analysis, the AHA will determine the level of marketing strategies and deconcentration incentives it will implement.

10.5 DECONCENTRATION INCENTIVES

The AHA may offer one or more incentives to encourage applicant families whose income classification would help to meet the deconcentration goals of a particular development.

Various incentives may be used at different times, or under different conditions, but will always be provided in a consistent and nondiscriminatory manner.

Attachments

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

- 1. il090a02 CFAnnualStatement (Capital Fund Annual Statement)
- 2. il090b02 CFFiveYearPlan (Capital Fund 5 Year Plan)
- 3. il090c02 PerfEval708 (Performance and Evaluation Reports for period ending 9-30-01 for Comp Grant Program IL06-PO90-708-99).
- 4. il090d02 PerfEavlCF501 (Performance and Evaluation Reports for period ending 9-30-01 for the Capital Fund Program IL06-PO90-501-00)
- 5.il090e02 Resident Assessment Survey Follow Up Plan

PHA Plan Component 7 Table Library Capital Fund Program Annual Statement Parts I, II, and II

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

Line No.	Summary by Development Account	Total Estimated
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 Acauisition	
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	Amount of Annual Grant (Sum of lines 2-19)	
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	

Annual Statement Capital Fund Program (CFP) Part II: Supporting Table

Development Number/Name HA-Wide Activities	General Description of Major Work Categories	Development Account Number	Total Estimated Cost

Table Library

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

Development Number/Name HA-Wide Activities	All Funds Obligated (Quarter Ending Date)	All Funds Expended (Quarter Ending Date)

Optional Table for 5-Year Action Plan for Capital Fund (Component 7)

Complete one table for each development in which work is planned in the next 5 PHA fiscal years. Complete a table for any PHA-wide physical or management improvements planned in the next 5 PHA fiscal year. Copy this table as many times as necessary. Note: PHAs need not include information from Year One of the 5-Year cycle, because this information is included in the Capital Fund Program Annual Statement.

	Optional 5-Year Actio	n Plan Tables			
Development Number	Development Name (or indicate PHA wide)	Number Vacant Units	% Vaca in Deve	ancies lopment	
Description of Ne Improvements	eded Physical Improvements or M	lanagement		Estimated Cost	Planned Start Date (HA Fiscal Year)
Total estimated c	ost over next 5 years				

Expires: 03/31/2002

Optional Public Housing Asset Management Table

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

		Public Hous	sing Asset M	anagement				
	opment fication							
Name, Number, and Location	Number and	Capital Fund Program Parts II and III	Development Activities	Demolition / disposition	Designated housing	Conversion	Home- ownership <i>Component</i>	Other (describe) <i>Component</i>

CAPITALFUNDPROGRAMTABLESSTARTHERE

	ualStatement/PerformanceandEvalua								
Cap	italFundProgramandCapitalFundProg	gramReplacementH	ousingFactor(CFP/C	FPRHF)Part1:Su	mmary				
PHAN	ame: AuroraHousingAuthority	GrantTypeandNumber			FederalFYofGrant:				
		CapitalFundProgramGrantNo	: IL06-PO90-502-	02	2002				
		ReplacementHousingFactorG	rantNo:						
V o	riginalAnnualStatement	· □n · 14	16/ / · · · ·						
	formanceandEvaluationReportforPeriodEnding:	Q							
Line	SummarybyDevelopmentAccount		□FinalPerformanceandEvaluationReport TotalEstimatedCost TotalA						
Line No.	SummarybyDevelopmentAccount	IotalEsti	matedCost	I otalA	ctualCost				
140.		Original	Revised	Obligated	Expended				
1	Totalnon-CFPFunds	0	Revised	Obligated	Expended				
2	1406Operations	200,000							
3	1408ManagementImprovementsSoftCosts	40.000	1						
5	ManagementImprovementsHardCosts	0							
4	1410Administration	139.793	+		-				
5	1411Audit	0	1						
6	1415LiquidatedDamages	0	++		-				
7	1430FeesandCosts	87.000	1						
8	1440SiteAcquisition	0	1						
9	1450SiteImprovement	290.000	1 1		1				
10	1460DwellingStructures	543,000	1						
11	1465.1DwellingEquipment —Nonexpendable	36,143	+ +						
12	1470NondwellingStructures	0							
13	1475NondwellingEquipment	50,000	1						
14	1485Demolition	0	1						
15	1490ReplacementReserve	0							
16	1492MovingtoWorkDemonstration	0							
17	1495.1RelocationCosts	12,000							
18	1499DevelopmentActivities	0							
19	1502Contingency	0							
	AmountofAnnualGrant:(sumoflines)	1,397,936							
	AmountoflineXXRelatedtoLBPActivities	50,000							
	AmountoflineXXRelatedtoSection504compliance	1							
	AmountoflineXXRelatedtoSecurity -SoftCosts	T							
	AmountofLineXXrelatedtoSecurityHardCosts								
	Amount of line XX Related to Energy Conservation Measures	125,000							
	CollateralizationExpensesorDebtService								

	ortingPages								
PHAName: Auro	raHousingAuthority	GrantTy	•		FederalFYofG				
	-			2002					
Development GeneralDescriptionofMajorWork Number Categories Name/HA-Wide Activities		Dev.Acc		singFactorGrantNo: Quantity	TotalEstimatedCost		TotalActualCost		Statusof Work
					Original	Revised	Funds Obligated	Funds Expended	
IL90-1 MapleTerrace	-Exterior,interiorandmajorsystem replacement/repairs/replacefirealarm system-2buildings		1460	186units	\$47,000				
IL90-3 JerichoCircle	-Exterior, interior and major system replacement/repairs		1460	146units	\$25,000				
IL90-4 Eastwood, Southwind& IndianTrail	-A&EFees		1430	15units	\$38,000				
	-ModernizationUpdate		1460	15units	\$350,000				
IL90-5 Centennial House	-A&EFees-replaceparking lot/landscaping		1430	1lot	\$16,000				
	-Replaceparkinglot/landscaping		1450	1lot	\$160,000				
	-Replace1W/H 's1460		1460	1building 81units	\$8,000				

AnnualStatement/PerformanceandEvaluationReport CapitalFundProgramandCapitalFundProgramReplacementHousingFactor(CFP/CFPRHF) PartII:SupportingPages											
PHAName: Auror	aHousingAuthority		umber camGrantNo: ILO .ingFactorGrantNo:	FederalFYofGrant: 2002							
Development Number Name/HA-Wide Activities	GeneralDescriptionofMajorWork Categories	Dev.AcctNo.	<u> </u>		TotalEstimatedCost		ualCost	Statusof Work			
				Original	Revised	Funds Obligated	Funds Expended				

IL90-6	-A&EFees-replaceparking	T	1430	1lot	\$13,000		Γ	
Centennial	lot/landscaping							
House								
Annex								
	-Replaceparkinglot/landscaping		1450	1lot	\$130,000	 		
	-Replace1W/H 's		1460	1building 46units	\$8,000			
IL90-007	-A&EFees/LBPAbatement/	1430		Houmas	\$20,000			
ScatteredSite	ClearanceTesting							
	-LBPAbatement	1460			\$50,000			
	-Exterior,interiorandmajorsystem replacement/repairs	1460			\$20,000			
ILPO90-008 ScatteredSite	-Exterior,interiorandmajorsystem replacement/repairs	1460		41units	\$25,000			

	ortingPages	-				т		
PHAName: Aur	oraHousingAuthority		indNumber ProgramGrantNo: II HousingFactorGrantNo		-02	FederalFYofG	rant: 2002	
Development Number Name/HA-Wide Activities	GeneralDescriptionofMajorWork Categories	Dev.AcctNo. Quantity TotalEstimatedCost		TotalAct	TotalActualCost Statu Wo			
				Original	Revised	Funds Obligated	Funds Expended	-
ILPO90-009 ScatteredSite	-Exterior,interiorandmajorsystem replacement/repairs	1460	8units	\$10,000		-		
AgencyWide Improvements	-Operations	1406		\$200,000				
	-ManagementImprovements Stafftrainingtomaintainphysicaland managementimprovements 10staffpersons	1408		\$20,000				
	Lawenforcementservices	1408		\$20,000				

-Administration	1410	2staff	\$139,793		
-Appliances	1465	Varied	\$36,143		
-Non-DwellingEquipment-vehicles, computerhardware,communication equipment,officeequipment&tools	1475	Varied	\$50,000		
-ResidentRelocation	1495	20residents	\$12,000		
Total			\$1,397,936		

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

PHAName: AuroraHou	singAuthority	Capita	TypeandNumb alFundProgram ementHousingF	No: IL06-PO90-5	602-02	FederalFYofGrant: 2002	
DevelopmentNumber Name/HA-Wide Activities		FundObligated rterEndingDat			FundsExpended arterEndingDate)		ReasonsforRevisedTargetDates
	Original	Revised	Actual	Original	Revised	Actual	
IL90-001	6-30-04			12-31-05			
IL90-003	6-30-04			12-31-05			
IL90-004	6-30-04			12-31-05			
IL90-005	6-30-04			12-31-05			
IL90-006	6-30-04			12-31-05			
IL90-007	6-30-04			12-31-05			
IL90-008	6-30-04			12-31-05			
IL90-009	6-30-04			12-31-05			
AgencyWide	6-30-04			12-31-05			

		ve-YearActionPlan				
PartI:Summary PHAName				XOriginal5-YearPlan □RevisionNo:		
Development Number/Name/ HA-Wide	Year1	WorkStatementforYear2 FFYGrant:2003 PHAFY:2003	WorkStatementforYear3 FFYGrant:2004 PHAFY:2004	WorkStatementfor Year4 FFYGrant:2005 PHAFY:2005	WorkStatementfor Year5 FFYGrant:2006 PHAFY:2006	
MapleTerrace IL90-001	Annual Statem ent	\$15,000	\$15,000	\$20,000	\$20,000	
JerichoCircle IL90-003		\$30,500	\$50,000	\$50,143	\$40,143	
Eastwood, IndianTrail& Southwind IL90-004		\$683,015	\$610,000	\$660,000	\$690,000	
Centennial House IL90-005		\$30,500	\$148,143	\$38,000	\$38,000	
Centennial HouseAnnex IL9-006		\$30,500	\$90,000	\$37,000	\$37,000	
ScatteredSites IL90-007		\$80,000	\$25,000	\$50,000	\$50,000	
ScatteredSites IL90-008		\$123,000	\$30,000	\$98,000	\$68,000	
ScatteredSites IL90-009		\$20,000	\$20,000	\$25,000	\$25,000	
AgencyWide		\$385,421	\$409,793	\$419,793	\$429,793	
Total		\$1,397,936	\$1,397,936	\$1,397,936	\$1,397,936	
CFPFundsListedfor 5-yearplanning		\$10,000	\$10,000	\$10,000	\$10,000	

ReplacementHousing						
FactorFunds						
Activitiesfor		ActivitiesforYear:2			ActivitiesforYear:_3	
---------------	--	--	---------------	--	---	---------------
Year1		FFYGrant:2003			FFYGrant:2004	
		PHAFY:2003			PHAFY:2004	
	Development Name/Number	MajorWorkCategories	EstimatedCost	Development Name/Number	MajorWorkCategories	EstimatedCost
See	MapleTerrace IL90-001	Exterior, interior& majorsystem replacements/repairs	\$15,000	MapleTerrace IL90-001	Exterior,interior& majorsystem replacements/repairs	\$15,000
Statement						
	JerichoCircle IL90-003	Exterior,interior& majorsystem replacements/repairs	\$30,500	JerichoCircle IL90-003	Exterior,interior& majorsystem replacements/repairs	\$50,000
	Eastwood,IndianTrail &Southwind IL90-004	A&EServices	\$70,000	Eastwood,IndianTrail &Southwind IL90-004	A&EServices	\$50,000
		ModernizationUpdate 17units	\$613,015		ModernizationUpdate 16units	\$560,000
	CentennialHouse IL90-005	A&EServices	\$2,500	CentennialHouse IL90-005	A&EServices	\$8,143
		Exterior,interior& majorsystem replacements/repairs	\$8,000		Exterior,interior& majorsystem replacements/repairs	\$20,000
		ElevatorUpdate	\$20,000		ElevatorUpdate	\$120,000
	CentennialHouse Annex IL90-006	A&EServices	\$2,500	CentennialHouse Annex IL90-006	Exterior,interior& majorsystem replacements/repairs	\$20,000
		Exterior,interior& majorsystem replacements/repairs	\$8,000		ElevatorUpdate	\$70,000
		ElevatorUpdate	\$20,000			
	ScatteredSites IL90-007	A&EServices/Project Management	\$10,000	ScatteredSites IL90-007	Exterior,interior& majorsystem replacements/repairs	\$25,000
		Exterior,interior& majorsystem replacements/repairs	\$70,000			
	ScatteredSites IL90-008	A&EServices	\$15,000	ScatteredSites IL90-008	Exterior,interior& majorsystem replacements/repairs	\$30,000
		Exterior,interior& majorsystem replacements/repairs	\$108,000			

ScatteredSites	Exterior, interior&	\$20,000	ScatteredSites	Exterior, interior&	\$20,000
IL90-009	majorsystem		IL90-009	majorsystem	
	replacements/repairs			replacements/repairs	
AgencyWide	Operations1406	\$100,000	AgencyWide	Operations1406	\$100,000
	Management	\$25,000		Management	\$25,000
	Improvements1408			Improvements1408	
Ţ	Lawenforcement	\$25,000		Lawenforcement	\$25,000
	services-1408			services-1408	
	Administration1410	\$139,793		Administration1410	\$139,793
	Appliances1465	\$55,000		Appliances1465	\$50,000
	Non-Dwelling	\$40,628		Non-Dwelling	\$50,000
	Equipment1475			Equipment1475	
				Relocation1495	\$20,000
	TotalCFPEstimatedCost	\$1,397,936			\$1,397,936

Activitiesfor Year1		ActivitiesforYear:_4 FFYGrant:2005			ActivitiesforYear:_5 FFYGrant:2006		
		PHAFY:2005	-		PHAFY:2006	-	
	Development Name/Number	MajorWorkCategories	EstimatedCost	Development Name/Number	MajorWorkCategories	EstimatedCost	
See	MapleTerrace IL90-001	Exterior,interior& majorsystem replacements/repairs	\$20,000	MapleTerrace IL90-001	Exterior,interior& majorsystem replacements/repairs	\$20,000	
Annual							
Statement	JerichoCircle IL90-003	Exterior, interior& majorsystem replacements/repairs	\$50,143	JerichoCircle IL90-003	Exterior,interior& majorsystem replacements/repairs	\$40,143	
	Eastwood,IndianTrail &Southwind IL90-004	A&EServices	\$60,000	Eastwood,IndianTrail &Southwind IL90-004	A&EServices	\$60,000	
		ModernizationUpdate 18units	\$600,000		ModernizationUpdate 18units	\$630,000	
	CentennialHouse IL90-005	Exterior,interior& majorsystem replacements/repairs	\$38,000	CentennialHouse IL90-005	Exterior,interior& majorsystem replacements/repairs	\$38,000	
	CentennialHouse Annex IL90-006	Exterior,interior& majorsystem replacements/repairs	\$37,000	CentennialHouse Annex IL90-006	Exterior,interior& majorsystem replacements/repairs	\$37,000	
	ScatteredSites IL90-007	Exterior,interior& majorsystem replacements/repairs	\$50,000	ScatteredSites IL90-007	Exterior,interior& majorsystem replacements/repairs	\$50,000	
	ScatteredSites IL90-008	Exterior, interior& majorsystem replacements/repairs	\$98,000	ScatteredSites IL90-008	Exterior,interior& majorsystem replacements/repairs	\$68,000	
	<u>т</u>	otalCFPEstimatedCost	\$			\$	

Activitiesfor Year1		ActivitiesforYear:4 FFYGrant:2005			ActivitiesforYear:_5 FFYGrant:2006	
reari		PHAFY:2005			PHAFY:2006	
	Development Name/Number	MajorWorkCategories	EstimatedCost	Development Name/Number	MajorWorkCategories	EstimatedCost
See	ScatteredSites IL90-009	Exterior,interior& majorsystem replacements/repairs	\$25,000	ScatteredSites IL90-008	Exterior,interior& majorsystem replacements/repairs	25,000
Annual						
Statement	AgencyWide	Operations1406	\$100,000		Operations1406	\$100,000
		Management Improvements1408	\$25,000	ScatteredSites IL90-009	Management Improvements1408	\$25,000
		Lawenforcement services-1408	\$25,000		Lawenforcement services-1408	\$25,000
		Administration1410	\$139,793	AgencyWide	Administration1410	\$139,793
		Appliances1465	\$50,000		Appliances1465	\$50,000
		Non-Dwelling Equipment1475	\$70,000		Non-Dwelling Equipment1475	\$80,000
		ResidentRelocation 1495	\$10,000		ResidentRelocation 1495	\$10,000
T		TotalCFPEstimatedCost	\$1,397,936			\$1,397,936
CFPFundsListed	for				T	
ReplacementHou FactorFunds	sing			_		

	dProgramFive-Y portingPages —						
Activitiesfor Yearl FFYGrant: PHAFY:				ActivitiesforYear: FFYGrant: PHAFY:			
	Development Name/Number	MajorWorkCategories	EstimatedCost	Development Name/Number	MajorWorkCategories	EstimatedCost	
See							
Annual							
Statement							
Ŧ		FotalCFPEstimatedCost	\$			\$	

CAPITALFUNDPROGRAMTABLESSTARTHERE

Ann	ualStatement/PerformanceandEvalua	tionReport						
Cap	italFundProgramandCapitalFundPro	gramReplacement	HousingFactor(CF	P/CFPRHF)Part1:S	ummary			
	ame: AuroraHousingAuthority		ompGrantIL06-PO90-708-99		FederalFYofGrant: 1999			
		CapitalFundProgramGran	CapitalFundProgramGrantNo:					
		ReplacementHousingFacto	ar Grant No.					
	iginalAnnualStatement ReserveforDisasters/Eme	8		·				
	formanceandEvaluationReportforPeriodEnding:X		ceandEvaluationReport:	9-30-01				
Line No.	SummarybyDevelopmentAccount	TotalE	stimatedCost	Total	ActualCost			
110.		Original	Revised	Obligated	Expended			
1	Totalnon-CFPFunds	0	0	0	0			
2	1406Operations	0	0	0	0			
3	1408ManagementImprovementsSoftCosts	25.000	20.000	20.000	20,000			
-	ManagementImprovementsHardCosts	0	0	0	0			
4	1410Administration	131,187	131,187	131,187	131,187			
5	1411Audit	0	0	0	0			
6	1415LiquidatedDamages	0	0	0	0			
7	1430FeesandCosts	65,000	50,000	50,470.67	50,470.67			
8	1440SiteAcquisition	0	0	0	0			
9	1450SiteImprovement	40,000	0	0	0			
10	1460DwellingStructures	892,591	1,015,591	1,015,591	1,015,591			
11	1465.1DwellingEquipment —Nonexpendable	58,100	28,100	28,100	28,100			
12	1470NondwellingStructures	0	0	0	0			
13	1475NondwellingEquipment	60,000	40,000	39,999.90	39,999.90			
14	1485Demolition	0	0	0	0			
15	1490ReplacementReserve	0	0	0	0			
16	1492MovingtoWorkDemonstration	0	0	0	0			
17	1495.1RelocationCosts	40,000	27,000	26,529.43	26,529.43			
18	1499DevelopmentActivities	0	0	0	0			
19	1502Contingency	0	0	0	0			
	AmountofAnnualGrant:(sumoflines)	1,311,878	1,311,878	1,311,878	1,311,878			
	AmountoflineXXRelatedtoLBPActivities	0	0	0	0			
	AmountoflineXXRelatedtoSection504compliance	0	0	0	0			
	AmountoflineXXRelatedtoSecurity -SoftCosts	0	0	0	0			
	AmountofLineXXrelatedtoSecurityHardCosts	0	0	0	0			
	Amount of line XX Related to Energy Conservation Measures	892,591	939,500	939,500	939,500			
	CollateralizationExpensesorDebtService	0						

AnnualSta	ntement/ ce and Evaluation		and Urban De		Performance	e & Evaluation Repo	ort 6-30-01	
Part II: ेनचच			वींपेबम वच्निइसपब	ंदक प्दकपंद भ्वनेपदह				
	। ळतंदज च्तवहतंउ ;ळच्द्व				व्डठ ।चचतवअंस	छवण 2577.0157 ;म्गचण	7ध्31ध्95द्ध 708 F	INAL
क्मअमसवचउमदज छनउइमतध् छंउम २१ . ॅपकम बिजपअपजपमे	नअमसवचउमदज छनउइमतः छंउम २। ॅपकम ळमदमतंस क्मेबतपचजपवद वर्डिरवत			ज्वजंस म्जपउंजमक		क बेज ज्वजंस ।वजनंस बेज		ैजंजने वच्चिवचवेमक [ॅ] वता :2द्ध
			फनंदजपजल	व्तपहपदंस	त्मअपेमक ;1द्ध	थ्नदके व्इसपहंजमक ;2द्ध	थ्नदके म्गचमदकमक ;2द्ध	-
प्स्90.1 डंचसम ज्मततंबम	त्मचसंबम ूंजमत कपेजतपइनजपवद`लेजमउ	1460	2 उनपसकपदहे	+702ए591	+939ए591	939ए591	939ए591	ब्वउचसमजमक
	I− म थ ममे	1430	2 ठनपसकपदहे	+ 65ए000	+ 50ए000	50ए470ण67	50ए470 ⁰ 67	ब्वउचसमजमक
	त्मसवबंजपवद म्गचमदेमे	1495	60 तमेपकमदजे	+ 40ए000	+ 27ए000	26ए529ण43	26ए529ण43	ब्वउचसमजमक
प्स्90.3 श्रमतपबीव ब्पतबसम	त्मचसंबमउमदजध्तमचंपत वतिवर्वोऐूपदकवेूए `जवतजूपदकवूं दक कववतेए`पकपदहए हनजजमत`लेजमउ`दक चंपदजपदह	1460	146 न्दपजे	+ 10ऎ000	+ 10ऎ000	10ऎ000	10ऎ000	ब्वउचसमजमक
प्स्90.4 मेंजूववकए ैवनजीूपदक — प्दकपंद ज्तंपस	.त्मचसंबमउमदजध्तमचंपत व तिववॉऐ ूपदकवेूए`जवतउ ूपदकवूें दक कववतेए `पकपदहए हनजजमत`लेजमजे दक चंपदजपदह	1460	128 न्दपजे	+ 10ऎ000	+ 10ऎ000	10哎000	10ऎ000	ब्वउचसमजमक
	. संदकेबंचपदह	1450	3`पजमे	+ 40ए000	+ 0	0	0	त्मअपेमक
प्स्90.5 ब्मदजमददपंस भ्वनेम	म्गजमतपवत तमचंपते जव जीतमम`जवतल इनपसकपदह	1460	1 उनपसकपदह	+ 20叉000	+ 0	0	0	त्मअपेमक
प्स्90.6 ब्मदजमददपंस भ्वनेम ।ददमग	म्गजमतपवत तमचंपते जव जीतमम`जवतल इनपसकपदह	1460	१ उनपसकपदह	+ 15ऎ000	+ 0	0	0	त्मअपेमक
प्स्90.7 ैबंजजमतमक ैपजमे	त्मचसंबमउमदजध्तमचंपत वतिवर्वोऐूपदकवेूए `जवतजूपदकवूं दक कववतेए`पकपदहए हनजजमत`लेजमउं दक चंपदजपदह	1460	20 न्दपजे	+ 300000	+ 15ए000	15ए000	15ए000	ब्वउचसमजमक
प्स्90.8 ैबंजजमतमक ैपजमे	त्मचसंबमउमदजध्तमचंपत वतिवर्वोऐूपदकवेूए `जवतज्रूपदकवूं दक कववतेए`पकपदहए हनजजमत`लेजमउं दक चंपदजपदह	1460	41 न्दपजे	+ 63ऎ000	+ 20ऎ000	20ऎ000	20ऎ000	ब्वउचसमजमक
प्स्90.9 ैबंजजमतमक ैपजमे	त्मचसंबमउमदजध्तमचंपत वत्तिववॉरिूपदकवेूए `जवतज पदकवूं दक कववतेए`पकपदहए हनजजमत`लेजमउं दक चंपदजपदह	1460	8 न्दपजे	+ 12ऎ000	+ 000万9	000万多	6 <u>7</u> 000	ब्वउचसमजमक
	समजमक वित च्मतवितउंदबम दक म्अंसनंजपवद त्म 	चवतज वतं त्मअपेमक ।						
ँपहदजनतम वो म्ग	मबनजपअम क्पतमबजवत दक कंजम		ँपहद	रजनतम वो च्नइसपब भ्वनेपव	रह क्पतमबजवतर्ध्वपिबम व [ि] छं	ज्जपअम ।उमतपबद च्तवहतर	किउपदर्पजतजवत दक क	नम
			चंहम <u> 2</u> व <u>ि</u> 4 Facs	imile ব` वितउ HUD-5	2842 ;01 ^६ 05 ^६ 95द्ध	ਰਾ	ाभिंदकइववा 7485ण्3	
AnnualSta	ntement/		U.S. Departm	ent of Housing	Performance	e & Evaluation Repo	•	

and Urban Development वीपिबम वच्चिइसपब दक प्दकपंद भ्वनेपदह Performance and Evaluation Part II: [°]नचचवतजपदह चंहमे व्डठ ।चचतवअंस छवण २५७७.०१५७ ;म्मचण ७६३१६७५५५ **708 FINAL** व्यउचतमीमदेपअम ळतंदज च्तवहतंउ ;ळच्द्व क्मअमसवचउमदज छनउइमतध छंउम ज्वजंस म्जेपउंजमक ब्वेज ज्वजंस ।बजनंस ब्वेज क्मअमसवचउमदज भ। . ॅपकम ळमदमतंस क्मेबतपचजपवद वर्िंरवत बबवनदज ेजंजने वच्तिवचवेमक वता ॅवता ब्जमहवतपमे बजपअपजपमे छनउइमत ;2द्ध फनंदजपजल थ्नदके थ्नदके व्तपहपदंस त्मअपेमक :1द्ध व्हसपहंजमक ;2द्ध म्गचमदकमक ;2द्ध ।हमदबल ॅपकम त्मचसंबम नितदंबमेएँधे-ंदक वजीमत उंरवत ।हमदबल पकम ब्वउचसमजमक 1460 + 307000 + 15ए000 15ए000 15ए000 `लेजमउे त्मचसंबम तमतिपहमतंजवते ;27द्ध ंदक तंदहमे 1465 ।हमदबल पकम + 58ए100 28ए100 ब्वउचसमजमक + 28ए100 28ए100 ;154द्ध

डंदंहमउमदज	डंदंहमउमदज प्उचतवअमउमदजे . [°] जांिजतंपदपदह	1408	15`जॉीिं चमतेवदे	+ 25ऎ000	+ 20ऎ000	20ए000	20ऎ000	ब्वउचसमजमक
कउपद	।कउपदपेजतंजपअम [*] संतपमे	1410	2ँजॉि	+131ए187	+131ए187	131ए187	131ए187	ब्वउचसमजमक
छवद. कूमससपदह	छवद.कूमससपदह मुनपचउमदज	1475	।हमदबलॅंपकम	+ 60哎000	+ 40핏000	397999 ⁰ 90	39799900	ब्वउचसमजमक
मुनपचउमदज	. २ डपदजमददबम अमीपबसमे							
	. त्मचसंबम बवउचनजमत मुनपचउमदज . वीपिबम कमोए जंइसमेए मुनपचउमदज —							
	. वीपिबम कमोए जंइसमेए मुनपचउमदज – नितदपजनतम							
	Total Comp Grant Funds:			\$1,311,878	\$1,311,878	\$1,311,878	\$1,311,878	
			_					

ाञ्च जव इम बवउचसमजमक वित च्यतवितउंदबम दक म्अंसनंजपवद त्मचवतज वत त्मअपेमक ।ददनंस[®]जंजमउमदजण 2द्ध ज्व इम बवउचसमजमक वित जीम च्यतवितउंदबम दक म्अंसनंजपवद त्मचवतजण ेपहदंजनतम वच्निइसपब भ्वनेपदह क्पतमबजवतध्वीपिबम वछिंजपअम ।उमतपबंद च्तवहतंउे ।कउपदपेजतंजवत दक कंजम

ेपहदंजनतम वन्मिमबनजपअम क्पतमबजवत दक कंजम

चंहम<u> 3</u> व<u>ि</u> Facsimile व वितज HUD-52842 ;01ध्05ध्95द्ध

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AnnualStatement/ Performance and Evaluation Part III: प्रचल्रसगउमदर्जाजपवद [*] बीमकनल्सम बजचतमीमदेपअम ळतंदज च्लवहतंउ ,ळ्व्द्व			U.S. Departme and Urban Dev वर्षिबम वच्चिइसपब व	elopment	Performance	e & Evaluation Repo	rt 6-30-01
					ब्हट ।चचतवअंस छवण् 2577.	0157 ,파리미 7431485중 708 FINAL	
क्मअमसवचउमदज छनउइ्मतध्छंउम १। . ॅपकम ।बजपअपजपमे	।सस थ्नदके	द्सपहंजमक ;फनंतजमत म्दक	पदह कंजमद्ध	।सस ध्नदके	स थ्नदके माचमदकमक ,फ़नंतजमत म्दकपदह कंजमद्ध		त्मेंवदे वित त्मअपेमक जंतहमज कंजमे ;2द्ध
	व्तपहपदंस	त्मअपेमक ;1द्ध	।बजनंस ;2द्ध	व्तपहपदंस	त्मअपेमक ;1द्ध	।बजनंस ;2द्ध	
प्स्06.च्द्र90.001	12.30.2000		12.30.00	12.31.2001		9.30.01	
प्स्06.च्द्र90.003	12.30.2000		12.30.00	12.31.2001		6.30.01	
प्स्06.च्य90.004	12.30.2000		12.30.00	12.31.2001		6.30.01	
प्स्06.च्य90.005	12.30.2000		12.30.00	12.31.2001		6.30.01	
प्स्06.च्य90.006	12.30.2000		12.30.00	12.31.2001		6.30.01	
吨06.亚90.007	12.30.2000		12.30.00	12.31.2001		9.30.01	
प्स्06.च्य90.008	12.30.2000		12.30.00	12.31.2001		9.30.01	
प्र्स्06.च्य्90.009	12.30.2000		12.30.00	12.31.2001		6.30.01	
हमदबलॅ पकम	12.30.2000		12.30.00	12.31.2001		9.30.01	
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-						L	
	1			1	I	1	

		-		1	-	-			
1इ जव इम बवउचसमजमक वित जीम च्यतवितउंदबम दक म्अंसनंजपवद त्मववतज वतं त्मअपेमक ।ददनंस [®] जंजमउमदजण ,2द ज्व इम बवउचसमजमक वित जीम च्यतवितउंदबम दक म्अंसनंजपवद त्मचवतजण									
ैपहदांजनतम वा म्गिमबनजपअम क्यतमबजवतं दक कंजम									
चंहम 4 व4ि Facsimile वीवित्तज HUD-52842_0100595द									

तमभिंदकइववा 7485ण्3

CAPITALFUNDPROGRAMTABLESSTARTHERE

	ualStatement/PerformanceandEvalua italFundProgramandCapitalFundPro	-	HousingFactor(CF	P/CFPRHF)Part1:S	Summary			
	ame: AuroraHousingAuthority	GrantTypeandNumber	GrantTypeandNumber					
		CapitalFundProgramGran	tNo: IL06-090-501	-00	2000			
		ReplacementHousingFacto	orGrantNo:					
				``				
	iginalAnnualStatement LReserveforDisasters/Emo	0	ualStatement(revisionno:	,				
	rformanceandEvaluationReportforPeriodEnding:9-		formanceandEvaluationRe					
Line No.	SummarybyDevelopmentAccount	TotalE	stimatedCost	Tota	lActualCost			
NO.		Original	Revised	Obligated	Expended			
1	Totalnon-CFPFunds	0	0	0	0			
2	1406Operations	0	0	0	0			
3	1406Operations 1408ManagementImprovementsSoftCosts	20,000	20,000	2,936.72	2,936.72			
	ManagementImprovementsHardCosts	0	0	0	0			
4	1410Administration	139.793	139,793	139.793	54,198.58			
4 5	1410Administration 1411Audit	0	0	0	0			
5 6	1411Audit 1415LiquidatedDamages	0	0	0	0			
0 7	1415LiquidatedDamages 1430FeesandCosts	85,000	85,000	70.000	0			
			0		14,560.00			
8	1440SiteAcquisition	0	0	0	0			
9	1450SiteImprovement	20,000	20,000	0	0			
10	1460DwellingStructures	1,058,143	1,058,143	839,900	282,986.19			
11	1465.1DwellingEquipment —Nonexpendable	15,000	15,000	0	0			
12	1470NondwellingStructures	0	0	0	0			
13	1475NondwellingEquipment	40,000	40,000	0	0			
14	1485Demolition	0	0	0	0			
15	1490ReplacementReserve	0	0	0	0			
16	1492MovingtoWorkDemonstration	0	0	0	0			
17	1495.1RelocationCosts	20,000	20,000	0	0			
18	1499DevelopmentActivities	0	0	0	0			
19	1502Contingency	0	0	0	0			
	AmountofAnnualGrant:(sumoflines)	1,397,936	1,397,936	1,052,629.72	359,300.05			
	AmountoflineXXRelatedtoLBPActivities	100,175	100,175	0	0			
	AmountoflineXXRelatedtoSection504compliance	0	0	0	0			
	AmountoflineXXRelatedtoSecurity -SoftCosts	0	0	0	0			
	AmountofLineXXrelatedtoSecurityHardCosts	0	0	0	0			
	Amount of line XX Related to Energy Conservation Measures	857,967	857,967	857,967	282,986.19			
	CollateralizationExpensesorDebtService	0	0	0	0			

AnnualStatement/PerformanceandEvaluationReportforPeriodEnding9-30-01 CapitalFundProgramandCapitalFundProgramReplacementHousingFactor(CFP/CFPRHF) PartII:SupportingPages

PHAName: AuroraHousingAuthority	GrantTypeandNumber CapitalFundProgramGrantNo: IL06-PO90-501-00	Federal FY of Grant: 2000
	ReplacementHousingFactorGrantNo:	

DevelopmentNumber	GeneralDescriptionofMajorWork	Dev.	Quantity	TotalEstimated	TotalActual	StatusofWork
Name/HA-WideActivities	Categories	Acct No.		Cost	Cost	
IL90-001	A&EFees	1430		50,000	14,560	InProcess
	Replace Water Piping Supply System	1460	1building	857,967	282,986.19	InProcess
	Relocationofresidents	1495	90	20,000	4,618.56	InProcess
IL90-3,4,5&6	Exterior & major system repairs/replacement	1460	401units	100,000		InProcess
	SiteImprovements	1450	401units	20,000		Planning
IL90-7,8&9	LBP A&E Fees - project rep/testing/risk assessment/abatement	1430	40units	35,000		Planning
	LBP Abatement & Exterior & majorsystemrepairs/replacement	1460	40nits	100,176		Planning
AgencyWide	Management Improvements – staff trainingto administer Capital Fund Program & training to sustain management and physical improvements	1408	14persons	20,000	2,936.72	InProcess
	Administration	1410	2staff	139,793	54,198.58	InProcess
	Non-dwellingequipment -appl.	1465	-	15,000		InProcess
	Non-dwellingequipment -vehicles, computer equip., communication equip.,etc	1475		40,000		InProcess

AnnualStatement/PerformanceandEvaluationReportforPeriodEnding9-30-01 CapitalFundProgramandCapitalFundProgramReplacementHousingFactor(CFP/CFPRHF) PartIII:ImplementationSchedule

PHA Name: Aurora	a Housing	Grant	TypeandNumb	er IL06PO90	501-00		FederalFYofGrant: 2000	
Authority			lFundProgram	No:				
			ementHousingF	actorNo:				
Development AllFundO			bligated AllFundsExpended			ReasonsforRevisedTargetDates		
Number	(QuarterEndingDate		ate)	(QuarterEndingDate)				
Name/HA-Wide								
Activities								
	Original	Revised	Actual	Original	Revised	Actual		
IL90-001	12-30-02			9-30-03				
IL90-003	12-30-02			9-30-03				
IL90-004	12-30-02			9-30-03				
IL90-005	12-30-02			9-30-03				

IL90-006	12-30-02	9-30-03		
IL90-007	12-30-02	9-30-03		
IL90-008	12-30-02	9-30-03		
IL90-009	12-30-02	9-30-03		
AgencyWide	12-30-02	9-30-03		

$\label{eq:autora} AuroraHousingAuthority (AHA) IL090 \\ Resident Satisfaction Survey Follow UpPlan$

The following is a description of the follow upplant oaddress problem are as identified by aggregate Resident Satisfaction Survey results. Follow upplan information for the REAC system will also be completed when the system is available.

ProblemArea#1:MaintenanceandRepairs (Score:79%)

TheAHAisworkingonimprovingmaintenanceandrepairstobetteraddresstheliving conditions of residents and improve the long term physical viability of the properties.

Allemergencyworkordersarehandledin24hoursorless.Ondemandworkordersare completedinsevendaysorless.Periodicandroutinemaintenanceworkordersarecompleted accordingtothescheduleoutlinedinthe "PreventativeandPeriodicMaintenancePlan."

TheAHAwillstrivetoimprovethisscoreinthefuture.

ProblemArea#2:Communication (Score:62%)

In an ongoing effort to improve communications and relations between AHA staff and residents, the following corrective steps have been taken:

• AHAstaffwillmaintainregularlyscheduledofficehoursandmakecertainthese hoursareclearlypostedateachsite;

- •AHAstaffwillpromptlyreturnallphonecalls,voicemailcalls,etc.;
- •AHAstaffwillrespondtospecialresidentrequestswhenpossible;
- •AHAstaffwillgenerateworkorderswhenmaintenanceproblemsarereported;and

 $\bullet AHA staff will schedule requested meetings when possible and generally facilitate resident requests within reason dependent on the scope of daily work activities and other related duties and responsibilities.$

It is believed that the primary reason for this lows core is that residents feel they should have immediate, in personaccess to staff during the working hours of 8:00 A.M. to 5:00 P.M., Monday through Friday. Due to the work load of the four Property Managers, it is not possible for them to be in the office at all times to meet with residents, take work orders, accept rent and otherwise meet in person with residents. In addition, there are no longer clerks at each site office to speak with residents due to staff changes with in the agency.

In order to meet residents in eds, Property Mangershaved esignated set of fice hours scheduled each week. These of fice hours are clearly posted at each site. If residents want to personally meet with their Property Manager, they need to meet with them during the seschedule doffice hours or schedule an appoint mention advance of a desired meeting date and time.

AllAHA phone systems have voice mails oare sident may report mainten ance problems (work order requests), leave a message or request the Property Manager or other staff person to call

thematanytime. Although this is not personal communication, the voice mail system does provide residents with the opport unity to contact a Property Manageror other AHA staff person and leave a message to report maintenance problems, report changes required by program regulations or request a call back to answer questions, schedule an appointment, etc..

Allresidents are provided with written notification (usually hand delivered), to inform them of scheduled site meetings or other meetings that pertain to residents, programs or policies, contract work that may be beginning or ongoing or for other reasons deemed necessary. This effort certainly meets the intent of open and clear communication between the AHA and residents.

ProblemArea#3:Safety (Score:61%)

In an ongoing effort to improve residents a fety, as well as resident perception of their safety, the following corrective steps have been taken:

• The AHA will continue to diligently and aggressively strive to make all of our sites as safe and secure as possible for our residents, their family members, guests and the surrounding community;

• TheAHAwillcontinuetoworkwiththeAuroraPoliceDepartmentandassigned CommunityOrientedPolicing(COP)officerstoprovideadditionallawenforcement servicesasneededtoaddresscriminalactivity;

• The AHA will continue to analyzesite safety and under take physical security and otherse curity improvements as identified by AHA staff, COP officers or residents to improve residents afety; and

• The AHA will provide information to residents related to present crimerates and statistics at their respectives it es and priory ear crimerates to emphasize the reduction in the overall crimerates over the pasts everally ears. Perhaps this will enlight en residents and modify their perception as to their safety.

ItisquiteunusualthattheAHAscoredlowinthisareasincereportedcrimeatallofoursiteshas droppedbyapproximately85% overthepastfouryears. Callsforservicehavebeenreducedby approximately50% and most callsforservice involved omestic disputes or other nonviolent calls that are not criminal in nature. It seems apparent that the perception by resident shat they are not safe in their unit, building or parking lotis exactly that, aperception, not necessarily areality.

TheAHAworksverycloselywith the Aurorapolice Department, in particular with Community Oriented Policing (COP) officers that work atoursites. We meet weekly to obtain copies of police reports involving AHA residents or sites, discuss security issues and residents afety, develops trategy to address problems as they arise and discuss and consider pro-active approaches to prevent possible violent, drug-related or other crime from our sites.

Therehavebeenagreatdealofphysicalsecurityimprovementsatallsitesintendedtoreduce criminalactivitythatincludesecuritylighting,securityfences,sitereconfiguration,trimmingor removalofbushesandtreesthatprovidehidingareas,installationofsecuritycamerasystems, installationofsecurityhardwaretopreventillegalentrytosecurebuildings,etc..Thesephysical improvementscombinedwithadditionallawenforcementservices,strictscreeningandlease

enforcementandswiftevictionactionforviolentordrug-relatedcriminalactivityandother managementactivityhavegreatlyincreasedthesafetyandsecurityofourresidentsandhave greatlydecreasedthecrimerateatallAHAsites.

Inadditiontothesephysical, lawenforcement and management improvements in this area, the AHA has also adopted an Excluded Persons Policy that bans individuals that have been involved incriminal ordrug-related activity on AHA owned property or have received two trespass notices for trespassing on AHA owned property.

ProblemArea#4:Services (Score:87%)

Witharating of 87%, services provided by the AHA do not seem to be a problem area. However, the AHA will still strive to improve services for resident sto improve the irover all quality of life. The national average is 91%. The AHA will strive to meet this score.

ProblemArea#5:Appearance (Score:63%)

In an ongoing effort to improve communications and relations between AHA staff and residents, the following corrective steps have been taken:

• Moretimehasbeenallocatedtopickupgarbage,debrisandlitterateachproblem siteandarounddumpsterenclosures.Apersonhasbeenhiredfulltime/parttime(20 hoursperweek)topickuplitter.TheAHAusescommunityserviceworkerstopick upsites;

• Signshavebeeninstalledateachdumpsterlocationrequestingthatresidentshelpto keeptheirneighborhoodcleanbyproperlybagginggarbageandplacinggarbagein thedumpsterinsteadofthrowingitontheground;

• The AHA is working to educate residents as to the importance of the irpart in helping to keep sites clean;

• The AHA is performing landscape improvements to help be autify each site in order to encourage better resident participation in keeping each site clean and improving the overall curbappeal of each site; and

• TheAHAwillcontinuetoworkwithneighborhoodgroupsandtheCityofAurora InspectionsDepartmenttoimproveneighborhoodappearancearoundAHA developments.

There are three are as that need to be considered in this category. They are the developments ite property, lands caping at each development and the surrounding neighborhood.

Thereis nodoubt that there are times when certain developments it eshave garbage and debris on the ground, by dumpsterenclosures or blowing around the site. This problem is directly related to residents, their family members and guests carelessly disposing of debris and garbage with no concern for other sortheir neighborhood. There is little that the AHA or any one can do except pickuplitter and garbage after the fact which is costly and time consuming. If residents complain about this type of problem, they are the basic cause. It will take resident participation

and cooperation to reduce this problem.

The AHA has under taken some landscape improvements to help be autify each site in order to encourage better resident participation in keeping each site clean and improve the overall curb appeal of each site (for resident sand the general public).

The third possible problem is the surrounding neighborhood. Since the AHA only owns and managese achdevelopment, there is little we can do to control are asouts idee achdevelopment. The AHA works with various neighborhood groups to help improve the overall neighborhood appearance arounds ites and reports problem are astothe City of Aurora Inspections Department who have the power to make owners comply with code requirements related to neighborhood appearance.