

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: NORTH CHICAGO

PHA Number: IL 107

PHA Fiscal Year Beginning: 10/2002

Public Access to Information

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

- Main administrative office of the PHA**
- PHA development management offices
- PHA local offices

Display Locations For PHA Plans and Supporting Documents

The PHA Plans (including attachments) are available for public inspection at: (select all that apply)

- Main administrative office of the PHA**
- PHA development management offices
- PHA local offices
- Main administrative office of the local government
- Main administrative office of the County government
- Main administrative office of the State government
- Public library
- PHA website
- Other (list below)

PHA Plan Supporting Documents are available for inspection at: (select all that apply)

- Main business office of the PHA**
- PHA development management offices
- Other (list below)

5-YEAR PLAN
PHA FISCAL YEARS 2002- 2006
[24 CFR Part 903.5]

A. Mission

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

- The mission of the PHA is the same as that of the Department of Housing and Urban Development: To promote adequate and affordable housing, economic opportunity and a suitable living environment free from discrimination.
- The PHA's mission is: The mission of the Housing Authority of the City of North Chicago is to assist low to moderate income families and seniors with decent, safe, sanitary and affordable housing opportunities.**

B. Goals

The goals and objectives listed below are derived from HUD's strategic Goals and Objectives and those emphasized in recent legislation. PHAs may select any of these goals and objectives as their own, or identify other goals and/or objectives. Whether selecting the HUD-suggested objectives or their own, **PHAS ARE STRONGLY ENCOURAGED TO IDENTIFY QUANTIFIABLE MEASURES OF SUCCESS IN REACHING THEIR OBJECTIVES OVER THE COURSE OF THE 5 YEARS.** (Quantifiable measures would include targets such as: numbers of families served or PHAS scores achieved.) PHAs should identify these measures in the spaces to the right of or below the stated objectives.

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

- PHA Goal: Expand the supply of assisted housing
Objectives:
- Apply for additional rental vouchers:
 - Reduce public housing vacancies:
 - Leverage private or other public funds to create additional housing opportunities:
 - Acquire or build units or developments
 - Other (list below)
NCHA will work with property owner and rental agencies and other Organizations to identify additional affordable housing.
- PHA Goal: Improve the quality of assisted housing
Objectives:
- Improve public housing management: (PHAS score) increase scores from

89 to 95 by 10/1/ 2004 .

- X Improve voucher management: (SEMAP score) Increase scores from 71 85 and 99% lease up by 10/01/2004
- X Increase customer satisfaction: Maintain a positive relationship with the Residents and Resident Councils to improve the delivery of services.
- X Concentrate on efforts to improve specific management functions:
The NCHA will aggressively seek additional funding to continue the Process of computerizing PHA records, staff training and reduce the Contract cost by 10/01/04.
- X Renovate or modernize public housing units: Continue to obligate CFP Funds to renovate and increase security in public housing
- Demolish or dispose of obsolete public housing:
- Provide replacement public housing:
- X Provide replacement vouchers: With Board of Commissioners approval
The NCHA will apply for additional Housing Choice Vouchers .
- X Other: (list below)
 - A. Implement a Preventive Maintenance Program to reduce response time for routine work orders and unit turn around time.
 - B. Establish a Voucher Inspection Program for Initial Inspections to be scheduled within 72 hours of receipt of RFTA.
- X PHA Goal: Increase assisted housing choices
Objectives:
 - Provide voucher mobility counseling:
 - X Conduct outreach efforts to potential voucher landlords
Meet with Lake County Landlord Association to recruit potential program participants.
 - X Increase voucher payment standards in accordance with HUD regulations
 - X Implement voucher homeownership program by December 2004
 - Implement public housing or other homeownership programs:
 - Implement public housing site-based waiting lists:
 - Convert public housing to vouchers:
 - X The NCHA shall establish and maintain a 90% utilization rate by December 2004

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

- X PHA Goal: Provide an improved living environment
Objectives:
 - Implement measures to deconcentrate poverty by bringing higher income public housing households into lower income developments:
 - Implement measures to promote income mixing in public housing by assuring access for lower income families into higher income developments:

- X Implement public housing security improvements: NCHA shall refine the memorandum of understanding between the police department to better define the “edge problem” of crimes that occurs near our property. Using this data, develop a security program to meet those needs.
- 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 households

Objectives:

- Increase the number and percentage of employed persons in assisted families:
- X NCHA will continue to pursue two (2) new partnerships in order to Enhance services to our residents by December 2004
- X Apply to at least two appropriate foundations for grant funds for supportive services for our public housing residents.
- X NCHA shall recruit at least ten new families for its FSS program by December 2003

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

X PHA Goal: Operate the North Chicago Housing Authority in full compliance with all Equal Opportunity laws and regulations. The North Chicago Housing Authority shall ensure equal treatment of all applicants, residents, tenant based participants, employees and vendors.

- X **NCHA shall 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:
- X **NCHA will work with Section 8 property owners to assist families that needs accessible housing or reasonable accommodations.**

Other PHA Goals and Objectives: (list below)

- A. The NCHA shall implement an aggressive outreach program to develop a positive working relationship with the Section 8 property owners.**

- B. The NCHA shall ensure that at least 3 positive stories a year appear in the local media about the Housing Authority or one of its residents.**

- C. The NCHA shall become a more customer oriented organization.**

Annual PHA Plan
PHA Fiscal Year 2002
[24 CFR Part 903.7]

i. Annual Plan Type:

Select which type of Annual Plan the PHA will submit.

Standard Plan

Streamlined Plan:

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

Troubled Agency Plan

ii. 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.

The Housing Authority of the City of North Chicago has prepared this Agency Plan in compliance with Section 511 of the Quality Housing and Work Responsibility Act of 1998 and the ensuing HUD requirements.

We have adopted the following mission statement with the above mention goals and objectives to guide the activities of the North Chicago Housing Authority during the five years.

“The Mission of the Housing Authority of the City of North Chicago is to assist low to moderate income families and seniors with decent, safe, sanitary and affordable housing opportunities.”

Our Annual Plan is based on the premise that if we accomplish our goals and objective we will be working toward the achievement of our mission.

The plans, statements, budget summary, policies, etc. set forth in the annual plan all lead toward the accomplishment of our goals and objective. Taken as a whole, it outlines a comprehensive approach toward our goals and objectives and are consistent with the

Consolidated Plan. These are some of the highlights of our Annual Plan:

Adopted local preferences for elderly, handicapped persons, and victim of domestic violence

We have established flat/ceiling rents for our development

We increased payment standards to the published FMR's for the Section 8 Voucher Program.

Developing a homeownership program for Section 8 Participants

Submit an application to HUD for designation of both Projects as Elderly Only (IL06P107-1 & 2)

Due to a change in Administrative staff during FYE 2002, we have not been able to accomplish all of our goals, however; the Housing Authority of the City of North Chicago is striving to improve and increase affordable housing in the city of North Chicago.

iii. Annual Plan Table of Contents

[24 CFR Part 903.7 9 (r)]

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

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Attachments

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

Required Attachments:

- X Admissions Policy for Deconcentration (il107a04)
- 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)
- X Capital Funds Performance/Evaluation (il107a04)

Optional Attachments:

- X PHA Management Organizational Chart (il107a04)
- X FY 2002 Capital Fund Program 5 Year Action Plan
- Public Housing Drug Elimination Program (PHDEP) Plan
- Comments of Resident Advisory Board or Boards (must be attached if not included in PHA Plan text)
- Other (List below, providing each attachment name)

Supporting Documents Available for Review

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

List of Supporting Documents Available for Review		
Applicable & On Display	Supporting Document	Applicable Plan Component
YES	PHA Plan Certifications of Compliance with the PHA Plans and Related Regulations	5 Year and Annual Plans
YES	State/Local Government Certification of Consistency with the Consolidated Plan	5 Year and Annual Plans
	Fair Housing Documentation: Records reflecting that the PHA has examined its programs	5 Year and Annual Plans

List of Supporting Documents Available for Review		
Applicable & On Display	Supporting Document	Applicable Plan Component
	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.	
YES	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
YES	Most recent board-approved operating budget for the public housing program	Annual Plan: Financial Resources;
YES	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
YES	Section 8 Administrative Plan	Annual Plan: Eligibility, Selection, and Admissions Policies
YES	Public Housing Deconcentration and Income Mixing Documentation: 1. PHA board certifications of compliance with deconcentration requirements (section 16(a) of the US Housing Act of 1937, as implemented in the 2/18/99 <i>Quality Housing and Work Responsibility Act Initial Guidance; Notice</i> and any further HUD guidance) and 2. Documentation of the required deconcentration and income mixing analysis	Annual Plan: Eligibility, Selection, and Admissions Policies
YES	Public housing rent determination policies, including the methodology for setting public housing flat rents <input type="checkbox"/> check here if included in the public housing A & O Policy	Annual Plan: Rent Determination
YES	Schedule of flat rents offered at each public housing development <input checked="" type="checkbox"/> check here if included in the public housing A & O Policy	Annual Plan: Rent Determination
YES	Section 8 rent determination (payment standard) policies <input checked="" type="checkbox"/> check here if included in Section 8 Administrative Plan	Annual Plan: Rent Determination
YES	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
YES	Public housing grievance procedures <input checked="" type="checkbox"/> check here if included in the public housing A & O Policy	Annual Plan: Grievance Procedures

List of Supporting Documents Available for Review		
Applicable & On Display	Supporting Document	Applicable Plan Component
YES	Section 8 informal review and hearing procedures <input checked="" type="checkbox"/> check here if included in Section 8 Administrative Plan	Annual Plan: Grievance Procedures
YES	The HUD-approved Capital Fund/Comprehensive Grant Program Annual Statement (HUD 52837) for the active grant year	Annual Plan: Capital Needs
YES	Most recent CIAP Budget/Progress Report (HUD 52825) for any active CIAP grant	Annual Plan: Capital Needs
YES	Most recent, approved 5 Year Action Plan for the Capital Fund/Comprehensive Grant Program, if not included as an attachment (provided at PHA option)	Annual Plan: Capital Needs
N/A	Approved HOPE VI applications or, if more recent, approved or submitted HOPE VI Revitalization Plans or any other approved proposal for development of public housing	Annual Plan: Capital Needs
N/A	Approved or submitted applications for demolition and/or disposition of public housing	Annual Plan: Demolition and Disposition
N/A	Approved or submitted applications for designation of public housing (Designated Housing Plans)	Annual Plan: Designation of Public Housing
N/A	Approved or submitted assessments of reasonable revitalization of public housing and approved or submitted conversion plans prepared pursuant to section 202 of the 1996 HUD Appropriations Act	Annual Plan: Conversion of Public Housing
N/A	Approved or submitted public housing homeownership programs/plans	Annual Plan: Homeownership
N/A	Policies governing any Section 8 Homeownership program <input type="checkbox"/> check here if included in the Section 8 Administrative Plan	Annual Plan: Homeownership
N/A	Any cooperative agreement between the PHA and the TANF agency	Annual Plan: Community Service & Self-Sufficiency
N/A	FSS Action Plan/s for public housing and/or Section 8	Annual Plan: Community Service & Self-Sufficiency
N/A	Most recent self-sufficiency (ED/SS, TOP or ROSS or other resident services grant) grant program reports	Annual Plan: Community Service & Self-Sufficiency
N/A	The most recent Public Housing Drug Elimination Program (PHEDEP) semi-annual performance report for any open grant and most recently submitted PHDEP application (PHDEP Plan)	Annual Plan: Safety and Crime Prevention
YES	The most recent fiscal year audit of the PHA conducted under section 5(h)(2) of the U.S. Housing Act of 1937 (42 U.S.C. 1437c(h)), the results of that audit and the PHA's response to any findings	Annual Plan: Annual Audit
N/A	Troubled PHAs: MOA/Recovery Plan	Troubled PHAs
N/A	Other supporting documents (optional) (list individually; use as many lines as necessary)	(specify as needed)

1. Statement of Housing Needs

[24 CFR Part 903.7 9 (a)]

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

Based upon the information contained in the Consolidated Plan/s applicable to the jurisdiction, and/or other data available to the PHA, provide a statement of the housing needs in the jurisdiction by completing the following table. In the "Overall" Needs column, provide the estimated number of renter families that have housing needs. For the remaining characteristics, rate the impact of that factor on the housing needs for each family type, from 1 to 5, with 1 being "no impact" and 5 being "severe impact." Use N/A to indicate that no information is available upon which the PHA can make this assessment.

Housing Needs of Families in the Jurisdiction by Family Type							
Family Type	Overall	Afford-ability	Supply	Quality	Access-ibility	Size	Loca-tion
Income <= 30% of AMI	197	5	5	5	3	3	2
Income >30% but <=50% of AMI	213	5	5	5	3	3	2
Income >50% but <80% of AMI	152	4	4	3	3	3	2
Elderly	62	5	4	3	3	3	4
Families with Disabilities	45	5	5	4	5	3	4
Race/Ethnicity	410	5	5	5	3	3	2
Race/Ethnicity	107	5	5	5	3	3	2
Race/Ethnicity	45	5	5	5	3	3	2
Race/Ethnicity							

What sources of information did the PHA use to conduct this analysis? (Check all that apply; all materials must be made available for public inspection.)

- Consolidated Plan of the Jurisdiction/s
Indicate year: 1996-2000
- U.S. Census data: the Comprehensive Housing Affordability Strategy ("CHAS") dataset 1990
- American Housing Survey data
Indicate year:
- Other housing market study
Indicate year:
- Other sources: (list and indicate year of information)

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

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

Housing Needs of Families on the Waiting List			
Waiting list type: (select one)			
<input type="checkbox"/> Section 8 tenant-based assistance			
<input checked="" type="checkbox"/> Public Housing			
<input type="checkbox"/> Combined Section 8 and Public Housing			
<input type="checkbox"/> Public Housing Site-Based or sub-jurisdictional waiting list (optional)			
If used, identify which development/subjurisdiction:			
	# of families	% of total families	Annual Turnover
Waiting list total	101		
Extremely low income <=30% AMI	80	80%	
Very low income (>30% but <=50% AMI)	15	15%	
Low income (>50% but <80% AMI)	5	5%	
Families with children	0		
Elderly families	16	16%	
Families with Disabilities	85	85%	
Race/ethnicity	White non-Hispanic	.20%	
Race/ethnicity	Black Non-Hispanic	.77%	
Race/ethnicity	Hispanic	.03%	
Race/ethnicity			
Characteristics by Bedroom Size (Public Housing			

Housing Needs of Families on the Waiting List			
Only)			
1BR	101		
2 BR			
3 BR			
4 BR			
5 BR			
5+ BR			
Is the waiting list closed (select one)? X No <input type="checkbox"/> Yes			
If yes:			
How long has it been closed (# of months)?			
Does the PHA expect to reopen the list in the PHA Plan year? <input type="checkbox"/> No <input type="checkbox"/> Yes			
Does the PHA permit specific categories of families onto the waiting list, even if generally closed? <input type="checkbox"/> No <input type="checkbox"/> Yes			

C. Strategy for Addressing Needs

Provide a brief description of the PHA's strategy for addressing the housing needs of families in the jurisdiction and on the waiting list **IN THE UPCOMING YEAR**, and the Agency's reasons for choosing this strategy.

(1) Strategies

Need: Shortage of affordable housing for all eligible populations

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

Select all that apply

- 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
- X Maintain or increase section 8 lease-up rates by establishing payment standards that will enable families to rent throughout the jurisdiction
- X Undertake measures to ensure access to affordable housing among families assisted by the PHA, regardless of unit size required
- X Maintain or increase section 8 lease-up rates by marketing the program to owners, particularly those outside of areas of minority and poverty concentration

- Maintain or increase section 8 lease-up rates by effectively screening Section 8 applicants to increase owner acceptance of program
- Participate in the Consolidated Plan development process to ensure coordination with broader community strategies
- Other (list below)

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

Select all that apply

- Apply for additional section 8 units should they become available
- Leverage affordable housing resources in the community through the creation of mixed - finance housing
- Pursue housing resources other than public housing or Section 8 tenant-based assistance.
- 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
- Adopt rent policies to support and encourage work
- Other: The majority of our applicants are currently at or below 30% of median Income.

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

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

Select all that apply

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

Need: Specific Family Types: The Elderly

Strategy 1: Target available assistance to the elderly:

Select all that apply

- X Seek designation of public housing for the elderly
- X 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
- X 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
- Other: (list below)

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

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

Select if applicable

- X 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) Reasons for Selecting Strategies

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
- X Evidence of housing needs as demonstrated in the Consolidated Plan and other information available to the PHA
- Influence of the housing market on PHA programs
- Community priorities regarding housing assistance
- Results of consultation with local or state government
- Results of consultation with residents and the Resident Advisory Board
- Results of consultation with advocacy groups
- Other: (list below)

2. Statement of Financial Resources

[24 CFR Part 903.7 9 (b)]

List the financial resources that are anticipated to be available to the PHA for the support of Federal public housing and tenant-based Section 8 assistance programs administered by the PHA during the Plan year. Note: the table assumes that Federal public housing or tenant based Section 8 assistance grant funds are expended on eligible purposes; therefore, uses of these funds need not be stated. For other funds, indicate the use for those funds as one of the following categories: public housing operations, public housing capital improvements, public housing safety/security, public housing supportive services, Section 8 tenant-based assistance, Section 8 supportive services or other.

Financial Resources: Planned Sources and Uses		
Sources	Planned \$	Planned Uses
1. Federal Grants (FY 2002 grants)		
a) Public Housing Operating Fund	206,475.	
b) Public Housing Capital Fund	180,433	
c) HOPE VI Revitalization	N/A	
d) HOPE VI Demolition	N/A	
e) Annual Contributions for Section 8 Tenant-Based Assistance	3,659,897	
f) Public Housing Drug Elimination Program (including any Technical Assistance funds)	N/A	
g) Resident Opportunity and Self-Sufficiency Grants	N/A	
h) Community Development Block Grant	N/A	
i) HOME	N/A	
Other Federal Grants (list below)		

Financial Resources: Planned Sources and Uses		
Sources	Planned \$	Planned Uses
2. Prior Year Federal Grants (unobligated funds only) (list below)		
IL06P107 501-01 (CFP)	2,480.	Energy Audit 2003
3. Public Housing Dwelling Rental Income	314,590.	
4. Other income (list below)		
4. Non-federal sources (list below)		
Total resources	4,363,875.	

3. PHA Policies Governing Eligibility, Selection, and Admissions

[24 CFR Part 903.7 9 (c)]

A. Public Housing

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

(1) Eligibility

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

- When families are within a certain number of being offered a unit: (state number)
- When families are within a certain time of being offered a unit: (One month)
- Other: (describe)

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

- Criminal or Drug-related activity
- Rental history
- Housekeeping
- Other (describe)

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

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

e. Yes No: Does the PHA access FBI criminal records from the FBI for screening purposes? (either directly or through an NCIC-authorized source)

(2)Waiting List Organization

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

- Community-wide list
- Sub-jurisdictional lists
- Site-based waiting lists
- Other (describe)

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

- 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)

- X One
- 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 X 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
- X 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)

c. 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**)

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:

X Involuntary Displacement (Disaster, Government Action, Action of Housing Owner, Inaccessibility, Property Disposition)

X Victims of domestic violence

Substandard housing

Homelessness

High rent burden (rent is > 50 percent of income)

Other preferences: (select below)

Working families and those unable to work because of age or disability

Veterans and veterans’ families

Residents who live and/or work in the jurisdiction

Those enrolled currently in educational, training, or upward mobility programs

Households that contribute to meeting income goals (broad range of incomes)

Households that contribute to meeting income requirements (targeting)

Those previously enrolled in educational, training, or upward mobility programs

Victims of reprisals or hate crimes

X Other preference(s) (list below)

Senior Citizen, handicapped or Disabled

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.

2 Date and Time

Former Federal preferences:

1 Involuntary Displacement (Disaster, Government Action, Action of Housing Owner, Inaccessibility, Property Disposition)

1 Victims of domestic violence

Substandard housing

Homelessness

High rent burden

1 Senior Citizen, handicapped or disabled

Other preferences (select all that apply)

- Working families and those unable to work because of age or disability
- Veterans and veterans' families
- Residents who live and/or work in the jurisdiction
- Those enrolled currently in educational, training, or upward mobility programs
- 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
- X 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
- PHA briefing seminars or written materials
- X Other source (list)
NCHA'S HOUSE RULES

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

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

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

f. Based on the results of the required analysis, in which developments will the PHA make special efforts to attract or retain higher-income families? (select all that apply)

- Not applicable: results of analysis did not indicate a need for such efforts
- List (any applicable) developments below:

g. Based on the results of the required analysis, in which developments will the PHA make special efforts to assure access for lower-income families? (select all that apply)

- Not applicable: results of analysis did not indicate a need for such efforts
- List (any applicable) developments below:

B. Section 8

Exemptions: PHAs that do not administer section 8 are not required to complete sub-component 3B. **Unless otherwise specified, all questions in this section apply only to the tenant-based section 8 assistance program (vouchers, and until completely merged into the voucher program, certificates).**

(1) Eligibility

- 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 below)
- Other (list below)
- b. X Yes No: Does the PHA request criminal records from local law enforcement agencies for screening purposes?
- c. Yes X No: Does the PHA request criminal records from State law enforcement agencies for screening purposes?
- d. Yes X No: Does the PHA access FBI criminal records from the FBI for screening purposes? (either directly or through an NCIC-authorized source)
- e. Indicate what kinds of information you share with prospective landlords? (select all that apply)
- Criminal or drug-related activity
- X Other (describe below)
Names of current and previous landlords

(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)

- PHA main administrative office
 Other (list below)

(3) Search Time

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

If yes, state circumstances below:

Section 8 applicants are given a “contact form” to list names and telephone numbers of prospective landlords they have contacted during the initial 60 days. If they are able to show at least three contacts per week and extension is granted.

(4) Admissions Preferences

a. Income targeting

Yes No: Does the PHA plan to exceed the federal targeting requirements by targeting more than 75% of all new admissions to the section 8 program to families at or below 30% of median area income?

b. Preferences

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

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

Former Federal preferences

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

Other preferences (select all that apply)

- Working families and those unable to work because of age or disability

- Veterans and veterans' families
- Residents who live and/or work in your jurisdiction
- Those enrolled currently in educational, training, or upward mobility programs
- Households that contribute to meeting income goals (broad range of incomes)
- Households that contribute to meeting income requirements (targeting)
- Those previously enrolled in educational, training, or upward mobility programs
- Victims of reprisals or hate crimes
- X Other preference(s) (list below)
Senior Citizen, handicapped or disabled

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.

2 Date and Time

Former Federal preferences

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

Other preferences (select all that apply)

- Working families and those unable to work because of age or disability
- Veterans and veterans' families
- Residents who live and/or work in your jurisdiction
- Those enrolled currently in educational, training, or upward mobility programs
- Households that contribute to meeting income goals (broad range of incomes)
- Households that contribute to meeting income requirements (targeting)
- Those previously enrolled in educational, training, or upward mobility programs
- Victims of reprisals or hate crimes
- X Other preference(s) (list below)
Persons 62 years and older, handicapped or disabled

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)

- 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)

- X The Section 8 Administrative Plan
X Briefing sessions and written materials
X Other (list below)

Contract with DCFS, Family Unification special allocations

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

- X Through published notices
X Other (list below)

Family unification Contractors (DCFS)

4. PHA Rent Determination Policies

[24 CFR Part 903.7 9 (d)]

A. Public Housing

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

(1) Income Based Rent Policies

Describe the PHA’s income based rent setting policy/ies for public housing using, including discretionary (that is, not required by statute or regulation) income disregards and exclusions, in the appropriate spaces below.

a. Use of discretionary policies: (select one)

The PHA will not employ any discretionary rent-setting policies for income based rent in public housing. Income-based rents are set at the higher of 30% of adjusted monthly income, 10% of unadjusted monthly income, the welfare rent, or minimum rent (less HUD mandatory deductions and exclusions). (If selected, skip to sub-component (2))

---or---

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

b. Minimum Rent

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

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

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

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

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

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

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

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

- For the earned income of a previously unemployed household member
- For increases in earned income
- Fixed amount (other than general rent-setting policy)

If yes, state amount/s and circumstances below:

Fixed percentage (other than general rent-setting policy)

If yes, state percentage/s and circumstances below:

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

e. Ceiling rents

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

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

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

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

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

- Market comparability study
- Fair market rents (FMR)
- 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)
90% of FMR (1999)

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
- Any time a family experiences an income increase above a threshold amount or percentage: (if selected, specify threshold)_____

X Other (list below)

Only when there is a change in the source of income

g. Yes X 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)

Published FMR (1999)

B. Section 8 Tenant-Based Assistance

Exemptions: PHAs that do not administer Section 8 tenant-based assistance are not required to complete sub-component 4B. **Unless otherwise specified, all questions in this section apply only to the tenant-based section 8 assistance program (vouchers, and until completely merged into the voucher program, certificates).**

(1) Payment Standards

Describe the voucher payment standards and policies.

a. What is the PHA's payment standard? (select the category that best describes your standard)

- At or above 90% but below 100% of FMR
- 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)

- FMRs are adequate to ensure success among assisted families in the PHA's segment of the FMR area
- The PHA has chosen to serve additional families by lowering the payment standard
- Reflects market or submarket
- Other (list below)

c. If the payment standard is higher than FMR, why has the PHA chosen this level? (select all that apply)

- FMRs are not adequate to ensure success among assisted families in the PHA's segment of the FMR area
- Reflects market or submarket
- To increase housing options for families
- Other (list below)

d. How often are payment standards reevaluated for adequacy? (select one)

- 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)

- X Success rates of assisted families
- Rent burdens of assisted families
- Other (list below)

(2) Minimum Rent

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

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

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

5. Operations and Management

[24 CFR Part 903.7 9 (e)]

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

A. PHA Management Structure

Describe the PHA's management structure and organization.

(select one)

- An organization chart showing the PHA's management structure and organization is attached. (Attachment E)
- A brief description of the management structure and organization of the PHA follows:

B. HUD Programs Under PHA Management

List Federal programs administered by the PHA, number of families served at the beginning of the upcoming fiscal year, and expected turnover in each. (Use "NA" to indicate that the PHA does not operate any of the programs listed below.)

Program Name	Units or Families Served at Year Beginning	Expected Turnover
Public Housing	146	25
Section 8 Vouchers	456	45
Section 8 Certificates	N/A	
Section 8 Mod Rehab	N/A	
Special Purpose Section 8 Certificates/Vouchers (list individually)	15 VOUCHERS- Family unification	3
Public Housing Drug Elimination Program (PHDEP)	N/A	
Other Federal Programs(list individually)	N/A	

C. Management and Maintenance Policies

List the PHA's public housing management and maintenance policy documents, manuals and handbooks that contain the Agency's rules, standards, and policies that govern maintenance and management of public housing, including a description of any measures necessary for the prevention or eradication of pest infestation (which includes cockroach infestation) and the policies governing Section 8 management.

(1) Public Housing Maintenance and Management: (list below)

- A. Admission and Continued Occupancy**
- B. Blood Borne Disease Policy**
- C. Capitalization policy**
- D. Check Signing Policy**
- E. Criminal Management Policy**
- F. Disposition Policy**
- G. Equal Opportunity Policy**
- H. Fund Transfer Policy**
- I. Hazardous Material Policy**
- J. Investment policy**
- K. Maintenance Policy (Pest Control)**
- L. Personnel Policy**
- M. Procurement Policy**

(2) Section 8 Management: (list below)

- A. Section 8 Administrative Plan**

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
- 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 tenant-based assistance program in addition to federal requirements found at 24 CFR 982?

If yes, list additions to federal requirements below:

2. Which PHA office should applicants or assisted families contact to initiate the informal review and informal hearing processes? (select all that apply)
- 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 may skip to Component 8.

A. Capital Fund Activities

Exemptions from sub-component 7A: PHAs that will not participate in the Capital Fund Program may skip to component 7B. All other PHAs must complete 7A as instructed.

(1) Capital Fund Program Annual Statement

Using parts I, II, and III of the Annual Statement for the Capital Fund Program (CFP), identify capital activities the PHA is proposing for the upcoming year to ensure long-term physical and social viability of its public housing developments. This statement can be completed by using the CFP Annual Statement tables provided in the table library at the end of the PHA Plan template **OR**, at the PHA's option, by completing and attaching a properly updated HUD-52837.

Select one:

- X The Capital Fund Program Annual Statement is provided as an attachment to the PHA Plan at Attachment **B**

-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 5-Year Action Plan

Agencies are encouraged to include a 5-Year Action Plan covering capital work items. This statement can be completed by using the 5 Year Action Plan table provided in the table library at the end of the PHA Plan template **OR** by completing and attaching a properly updated HUD-52834.

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

b. If yes to question a, select one:

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

-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.

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

1. Development name:

2. Development (project) number:

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

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

Yes X 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 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 N/A

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: N/A	
2. Activity type: Demolition <input type="checkbox"/>	
Disposition <input type="checkbox"/> N/A	
3. Application status (select one)	
Approved <input type="checkbox"/>	
Submitted, pending approval <input type="checkbox"/> N/A	
Planned application <input type="checkbox"/>	
4. Date application approved, submitted, or planned for submission: (DD/MM/YY)	
5. Number of units affected:	
6. Coverage of action (select one)	
<input type="checkbox"/> Part of the development	
<input type="checkbox"/> Total development	

7. Timeline for activity:
- a. Actual or projected start date of activity:
 - b. Projected end date of activity:

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

[24 CFR Part 903.7 9 (i)]

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

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

2. Activity Description

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

Designation of Public Housing Activity Description	
1a. Development name:	Kukla Towers and Thompson Manor
1b. Development (project) number:	IL107- 1 & 2
2. Designation type:	Occupancy by only the elderly X Occupancy by families with disabilities <input type="checkbox"/> Occupancy by only elderly families and families with disabilities <input type="checkbox"/>
3. Application status (select one)	Approved; included in the PHA’s Designation Plan <input type="checkbox"/> Submitted, pending approval <input type="checkbox"/> Planned application X
4. Date this designation approved, submitted, or planned for submission:	10/01/05

<p>5. If approved, will this designation constitute a (select one)</p> <p><input checked="" type="checkbox"/> New Designation Plan</p> <p><input type="checkbox"/> Revision of a previously-approved Designation Plan?</p>
<p>6. Number of units affected: 146</p> <p>7. Coverage of action (select one)</p> <p><input type="checkbox"/> Part of the development</p> <p><input checked="" type="checkbox"/> Total development</p>

10. Conversion of Public Housing to Tenant-Based Assistance

ATTACHMENT P

[24 CFR Part 903.7 9 (j)]

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

A. Assessments of Reasonable Revitalization Pursuant to section 202 of the HUD FY 1996 HUD Appropriations Act

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

2. Activity Description

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

Conversion of Public Housing Activity Description	
1a. Development name: KUKLA TOWERS	THOMPSON MANOR
1b. Development (project) number IL-107-01	IL-107-2
<p>2. What is the status of the required assessment?</p> <p><input type="checkbox"/> Assessment underway</p> <p><input type="checkbox"/> Assessment results submitted to HUD</p> <p><input type="checkbox"/> Assessment results approved by HUD (if marked, proceed to next question)</p> <p><input checked="" type="checkbox"/> Other (explain below) Elderly/Disabled public housing units</p>	
<p>3. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No: Is a Conversion Plan required? (If yes, go to block 4; if no, go to</p>	

block 5.)

4. Status of Conversion Plan (select the statement that best describes the current status)

- Conversion Plan in development
- Conversion Plan submitted to HUD on: (DD/MM/YYYY)
- Conversion Plan approved by HUD on: (DD/MM/YYYY)
- Activities pursuant to HUD-approved Conversion Plan underway

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

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

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

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

11. Homeownership Programs Administered by the PHA

[24 CFR Part 903.7 9 (k)]

A. Public Housing

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

1. Yes 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:	<input type="checkbox"/> HOPE I <input type="checkbox"/> 5(h) <input type="checkbox"/> Turnkey III <input type="checkbox"/> Section 32 of the USHA of 1937 (effective 10/1/99)
3. Application status: (select one)	<input type="checkbox"/> Approved; included in the PHA’s Homeownership Plan/Program <input type="checkbox"/> Submitted, pending approval <input type="checkbox"/> Planned application
4. Date Homeownership Plan/Program approved, submitted, or planned for submission: (DD/MM/YYYY)	
5. Number of units affected:	
6. Coverage of action: (select one)	<input type="checkbox"/> Part of the development <input type="checkbox"/> Total development

B. Section 8 Tenant Based Assistance

1. Yes 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 component. Section 8-Only PHAs are not required to complete sub-component C.

A. PHA Coordination with the Welfare (TANF) Agency

1. Cooperative agreements:

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

If yes, what was the date that agreement was signed? DD/MM/YY

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

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

- Coordinate the provision of specific social and self-sufficiency services and programs to eligible families
- Jointly administer programs
- Partner to administer a HUD Welfare-to-Work voucher program
- Joint administration of other demonstration program
- Other (describe) North Chicago Housing Authority meets the exemption for this program, both developments are elderly public housing.

B. Services and programs offered to residents and participants

(1) General

a. Self-Sufficiency Policies

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

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

b. Economic and Social self-sufficiency programs

- Yes No: Does the PHA coordinate, promote or provide any programs to enhance the economic and social self-sufficiency of residents? (If “yes”, complete the following table; if “no” skip to sub-component 2, Family Self Sufficiency Programs. The position of the table may be altered to facilitate its use.)

Services and Programs				
Program Name & Description (including location, if appropriate)	Estimated Size	Allocation Method	Access (development office /	Eligibility (public housing or

		(waiting list/random selection/specific criteria/other)	PHA main office / other provider name)	section 8 participants or both)
Family Self Sufficiency	12	Waiting list	Catholic Charities of Lake County	Section 8
Public Housing	146	Waiting list	PHA Main Office	Public Housing
Section 8	471	Waiting list	PHA Main Office	Section 8

(2) Family Self Sufficiency program/s

a. Participation Description

Family Self Sufficiency (FSS) Participation		
Program	Required Number of Participants (start of FY 2000 Estimate)	Actual Number of Participants (As of: 04/01/02)
Public Housing	N/A	
Section 8	12	7

- b. X Yes No: If the PHA is not maintaining the minimum program size required by HUD, does the most recent FSS Action Plan address the steps the PHA plans to take to achieve at least the minimum program size?
If no, list steps the PHA will take below:

C. Welfare Benefit Reductions

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
 - Informing residents of new policy on admission and reexamination
 - Actively notifying residents of new policy at times in addition to admission and reexamination.

- Establishing or pursuing a cooperative agreement with all appropriate TANF agencies regarding the exchange of information and coordination of services
- Establishing a protocol for exchange of information with all appropriate TANF agencies
- Other: (list below)

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

13. PHA Safety and Crime Prevention Measures

[24 CFR Part 903.7 9 (m)]

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

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

1. Describe the need for measures to ensure the safety of public housing residents

(select all that apply)

- High incidence of violent and/or drug-related crime in some or all of the PHA's developments
- High incidence of violent and/or drug-related crime in the areas surrounding or adjacent to the PHA's developments
- X Residents fearful for their safety and/or the safety of their children
- 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)
Resident Assessment Satisfaction Survey

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).

- Safety and security survey of residents
- Analysis of crime statistics over time for crimes committed "in and around" public housing authority
- Analysis of cost trends over time for repair of vandalism and removal of graffiti
- Resident reports
- PHA employee reports
- Police reports
- Demonstrable, quantifiable success with previous or ongoing anticrime/anti drug programs
- X Other (describe below)

RESIDENT ASSESSMENT SATISFACTION SURVEY

3. Which developments are most affected? (list below)
Survey does not specify which development was most affected.

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

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

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

Install close-circuit cameras at the entrance door in conjunction with Other surveillance equipment approved in the current Capital Funds Program. Work with local police department to improve ongoing Activities with Community Policing Project.

2. Which developments are most affected? (list below)
Results of survey did not specify

C. Coordination between PHA and the police

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

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

North Chicago Police Department is willing to support the efforts of the NCHA in its crime preventions and safety awareness programs.

2. Which developments are most affected? (list below)
Unable to determine from surveys

D. Additional information as required by PHDEP/PHDEP Plan

PHAs eligible for FY 2000 PHDEP funds must provide a PHDEP Plan meeting specified requirements prior to receipt of PHDEP funds.

- Yes No: Is the PHA eligible to participate in the PHDEP in the fiscal year covered by this PHA Plan?
- Yes No: Has the PHA included the PHDEP Plan for FY 2000 in this PHA Plan?
- Yes No: This PHDEP Plan is an Attachment. (Attachment Filename: ____)

14. RESERVED FOR PET POLICY

[24 CFR Part 903.7 9 (n)] **(ATTACHMENT O)**

15. Civil Rights Certifications (ATTACHMENT D)

[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.(ATTACHMENT D)

16. Fiscal Audit (ATTACHMENT E)

[24 CFR Part 903.7 9 (p)]

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

17. PHA Asset Management

[24 CFR Part 903.7 9 (q)]

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

1. Yes No: Is the PHA engaging in any activities that will contribute to the long-term asset management of its public housing stock , including how the Agency will plan for long-term operating, capital investment, rehabilitation, modernization, disposition, and

other needs that have **not** been addressed elsewhere in this PHA Plan?

2. What types of asset management activities will the PHA undertake? (select all that apply)

- Not applicable
- Private management
- Development-based accounting
- Comprehensive stock assessment
- Other: (list below)

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

18. Other Information

[24 CFR Part 903.7 9 (r)]

A. Resident Advisory Board Recommendations

1. Yes 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 No: x 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: **Resident/participants are invited to submit letters of interest and or resume' for selection. Names are submitted to the Mayor for consideration. Resident Commissioner was selected and appointed by the Mayor of the City of North Chicago.**

b. Eligible candidates: (select one)

- Any recipient of PHA assistance
 Any head of household receiving PHA assistance
 Any adult recipient of PHA assistance
 Any adult member of a resident or assisted family organization
 Other (list)

c. Eligible voters: (select all that apply)

- All adult recipients of PHA assistance (public housing and section 8 tenant-based assistance)
 Representatives of all PHA resident and assisted family organizations
X Other (list) **Residents interested in serving on the Board of Commissioners are submitted to the Mayor for interviews and selection.**

C. Statement of Consistency with the Consolidated Plan

For each applicable Consolidated Plan, make the following statement (copy questions as many times as necessary).

1. Consolidated Plan jurisdiction: (State of Illinois)
 2. The PHA has taken the following steps to ensure consistency of this PHA Plan with the Consolidated Plan for the jurisdiction: (Lake County)
- X The PHA has based its statement of needs of families in the jurisdiction on the needs expressed in the Consolidated Plan/s.(Lake County Consortium)

- 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.
- Activities to be undertaken by the PHA in the coming year are consistent with the initiatives contained in the Consolidated Plan. (list below)

- Other: (list below)

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

D. Other Information Required by HUD

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

Attachments

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

- A) CAPITAL FUND
- B) PERFORMANCE AND EVALUATION (906-98, 905-99, II107501-00, II107501-01)
- C) COMMUNITY SERVICE
- D) CIVIL RIGHTS CERTIFICATION
- E) ANNUAL AUDIT
- F) ORGANIZATION CHART
- G) CONSISTENCY WITH CONSOLIDATED PLAN
- H) PHA CERTIFICATION OF COMPLIANCE WITH THE PHAS PLAN AND RELATED REGULATIONS
- I) DISCLOSURE OF LOBBY ACTIVITIES (SF LLL)
- J) CERTIFICATION OF PAYMENTS TO INFLUENCE FEDERAL TRANSACTION (HUD 50071)
- K) CERTIFICATION OF A DRUG FREE WORKPLACE (HUD FORM 50070)
- L) DECONCENTRATION POLICY
- M) BOARD RESOLUTION #2002-17
- N) OPTIONAL FIVE YEAR PLANS
- O) PET POLICY
- P) VOLUNTARY CONVERSION INITIAL ASSESSMENT

PHA Plan Table Library

Component 7 Capital Fund Program Annual Statement Parts I, II, and II

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

Capital Fund Grant Number IL107501-02 FFY of Grant Approval: 10/2002

X Original Annual Statement

Line No.	Summary by Development Account	Total Estimated Cost
1	Total Non-CGP Funds	
2	1406 Operations	
3	1408 Management Improvements	\$7,550.00
4	1410 Administration	\$18,043.00
5	1411 Audit	2,450.00
6	1415 Liquidated Damages	
7	1430 Fees and Costs	
8	1440 Site Acquisition	
9	1450 Site Improvement	\$152,390.00
10	1460 Dwelling Structures	
11	1465.1 Dwelling Equipment-Nonexpendable	
12	1470 Nondwelling Structures	
13	1475 Nondwelling Equipment	
14	1485 Demolition	
15	1490 Replacement Reserve	
16	1492 Moving to Work Demonstration	
17	1495.1 Relocation Costs	
18	1498 Mod Used for Development	
19	1502 Contingency	
20	Amount of Annual Grant (Sum of lines 2-19)	\$180,433.00
21	Amount of line 20 Related to LBP Activities	
22	Amount of line 20 Related to Section 504 Compliance	
23	Amount of line 20 Related to Security	
24	Amount of line 20 Related to Energy Conservation Measures	

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

Development Number/Name HA-Wide Activities	General Description of Major Work Categories	Development Account Number	Total Estimated Cost
HA- Wide	Management Improvement	1408	7,550.00
HA-Wide	Administration	1410	18,043.00
HA-Wide	Audit	1411	2,450.00
IL 107-1	Plumbing Repair	1460	30,000.00
IL 107-1	Replace Zone Valve	1460	5,000.00
IL 107-1	Resurface Parking Lot	1460	17,195.00
IL-107-1	Replace Apt. Doors (98)	1460	75,000.00
IL 107-2	Resurface Parking Lot	1460	12,000.00
IL 107-2	Replace Garage Doors/Locks	1460	6,195.00
HA-Wide	Architect/Engineer	1430	7,000.00

**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)
HA-WIDE	9/30/02	9/30/05
HA-WIDE	9/30/02	9/30/04
HA-WIDE	12/31/03	9/30/04
IL 107-1	9/30/04	12/31/05
IL 107-1	9/30/04	12/31/05
IL 107-1	3/31/04	9/30/04
IL 107-1	6/30/03	9/30/05
IL 107-2	3/31/03	12/31/03
IL 107-2	3/31/03	9/30/03
HA-WIDE	6/30/03	9/30/05

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 Action Plan Tables				
Development Number	Development Name (or indicate PHA wide)	Number Vacant Units	% Vacancies in Development	
HA WIDE	PHA WIDE	3	.02	
Description of Needed Physical Improvements or Management Improvements			Estimated Cost	Planned Start Date (HA Fiscal Year)
ADMINISTRATIVE SALARY			78,048.00	2002
ARCHITECT AND ENGINEERING			19,335.00	2002
REPLACE ENTRANCE DOORS			75,000.00	2002
UPGRADE COMPUTER SYSTEM			44,000.00	2003
LAND ACQUISITION			15,000.00	2003
PHASE II PLAN FOR NEW OFFICE			30,000.00	2003
REPLACE STOVES			71,000.00	2005
REPLACE REFRIGERATORS			10,000.00	2002
PAINT OCCUPIED APARTMENTS			15,000.00	2003
PHASE III CONSTRUCTION OF NEW OFFICE			36,135.00	2004
			171,635.00	2006
Total estimated cost over next 5 years			564,153.00	

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 Action Plan Tables			
Development Number	Development Name (or indicate PHA wide)	Number Vacant Units	% Vacancies in Development
IL 107-1	KUKLA TOWERS	3	.03
Description of Needed Physical Improvements or Management Improvements		Estimated Cost	Planned Start Date (HA Fiscal Year)
REPAIR PLUMBING		30,000.00	2002
INSTALL GFCI OUTLETS		20,000.00	2005
TUCKPOINTING		25,000.00	2005
REPLACE HOT WATER LINES		45,000.00	2004
Total estimated cost over next 5 years		120,000.00	

Optional 5-Year Action Plan Tables				
Development Number	Development Name (or indicate PHA wide)	Number Vacant Units	% Vacancies in Development	
IL 107-2	THOMPSON MANOR	-0-	-0-	
Description of Needed Physical Improvements or Management Improvements			Estimated Cost	Planned Start Date (HA Fiscal Year)
INSTALL GFCI			10,000.00	2005
INSTALL CANOPY			7,000.00	2005
INSTALL ATRIUM			28,626.00	2005
REPLACE COMMUNITY ROOM FURNITURE			3,000.00	2003
Total estimated cost over next 5 years			48,625.00	

Annual Statement/Performance and Evaluation Report (ATTACHMENT A)
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary

PHA Name: HOUSING AUTHORITY OF THE CITY OF NORTH CHICAGO	Grant Type and Number Capital Fund Program: IL06P-107-501-01 Capital Fund Program Replacement Housing Factor Grant No:	Federal FY of Grant: 2001
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Original Annual Statement Reserve for Disasters/ Emergencies Revised Annual Statement (revision no:)
 XPerformance and Evaluation Report for Period Ending: 3/31/02 Final Performance and Evaluation Report

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations	\$ 3,092.00	\$ 3,092.00		
3	1408 Management Improvements				
4	1410 Administration	\$ 13,500.00	13,500.00	13,500.00	2,500.00
5	1411 Audit	\$ 2,480.00	2,480.00		
6	1415 liquidated Damages				
7	1430 Fees and Costs	\$ 10,465.00	10,465.00	10,465.00	7,030.00
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	-0-	120,000.00	20,183.00	20,183.00
11	1465.1 Dwelling Equipment—Non expendable				
12	1470 Non dwelling Structures	\$120,000.00	(120,000.00)		
13	1475 Non dwelling Equipment	\$ 44,190.00	44,190.00		
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1498 Mod Used for Development				
19	1502 Contingency				
20	Amount of Annual Grant: (sum of lines 2-19)	\$193,727.00	\$193,727.00		
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 Compliance				
23	Amount of line 20 Related to Security	\$44,190.00	44,190.00		

Annual Statement/Performance and Evaluation Report (ATTACHMENT A) Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary				
PHA Name: HOUSING AUTHORITY OF THE CITY OF NORTH CHICAGO		Grant Type and Number Capital Fund Program: IL06P-107-501-01 Capital Fund Program Replacement Housing Factor Grant No:		Federal FY of Grant: 2001
Original Annual Statement		<input type="checkbox"/> Reserve for Disasters/ Emergencies		<input type="checkbox"/> Revised Annual Statement (revision no:)
XPerformance and Evaluation Report for Period Ending: 3/31/02		<input type="checkbox"/> Final Performance and Evaluation Report		
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost
24	Amount of line 20 Related to Energy Conservation Measures			

**Annual Statement/Performance and Evaluation Report (ATTACHMENT B)
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary**

PHA Name: HOUSING AUTHORITY OF THE CITY OF NORTH CHICAGO	Grant Type and Number Capital Fund Program: ILOP107-906-98 Capital Fund Program Replacement Housing Factor Grant No:	Federal FY of Grant: 1998
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Original Annual Statement Reserve for Disasters/ Emergencies Revised Annual Statement (revision no:)
 Performance and Evaluation Report for Period Ending: 03/31/02 Final Performance and Evaluation Report

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations(may not exceed 10% of line 16)	\$4,330.00	\$5,018.40	\$5,018.40	\$5,018.40
3	1408 Management Improvements				
4	1410 Administration	\$16,500.00	\$16,500.00	\$16,500.00	\$16,500.00
5	1411 Audit				
6	1415 liquidated Damages				
7	1430 Fees and Costs	\$29,000.00	\$28,314.60	\$28,314.60	\$28,314.60
8	1440 Site Acquisition				
9	1450 Site Improvement	\$2,500.00	\$2,500.00	\$2,500.00	\$2,500.00
10	1460 Dwelling Structures	\$422,670.00	\$422,667.00	\$422,667.00	\$422,667.00
11	1465.1 Dwelling Equipment—Non expendable				
12	1470 Non dwelling Structures				
13	1475 Non dwelling 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)	\$475,000.00	\$475,000.00	\$475,000.00	\$475,000.00
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 Compliance				
23	Amount of line 20 Related to Security				

Annual Statement/Performance and Evaluation Report (ATTACHMENT B)				
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary				
PHA Name: HOUSING AUTHORITY OF THE CITY OF NORTH CHICAGO		Grant Type and Number Capital Fund Program: ILOP107-906-98 Capital Fund Program Replacement Housing Factor Grant No:		
		Federal FY of Grant: 1998		
Original Annual Statement		<input type="checkbox"/> Reserve for Disasters/ Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:)		
Performance and Evaluation Report for Period Ending: 03/31/02		<input checked="" type="checkbox"/> Final Performance and Evaluation Report		
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost
24	Amount of line 20 Related to Energy Conservation Measures			

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

PHA Name: HOUSING AUTHORITY OF THE CITY OF NORTH CHICAGO		Grant Type and Number Capital Fund Program #: ILOP107-906-98 Capital Fund Program Replacement Housing Factor #:			Federal FY of Grant: 1998			
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Development Account Number	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work
				Original	Revised	Funds Obligated	Funds Expended	
IL107-2	ELEVATOR UPGRADES	1460		\$138,856.00	\$138,856.00	\$138,856.00	\$138,856.00	C
107-1	REPLACE ROOF	1460		\$121,368.00	\$121,368.00	\$121,368.00	\$121,368.00	C
107-2	REPLACE ROOF	1460		\$64,900.00	\$64,900.00	\$64,900.00	\$64,900.00	C
PHA-WIDE	A & E FEES	1430		\$29,000.00	\$29,000.00	\$29,000.00	\$28,314.60	C
107-2	TUCKPOINT. CAULK	1460		\$57,750.00	\$57,750.00	\$57,750.00	\$57,750.00	C
107-1	REPLACE ROOF MOUNTED EXHASUTS FANS	1460		\$11,027.00	\$11,027.00	\$11,027.00	\$11,027.00	C
107-2	REPLACE ROOF MOUNTED EXHASUST FANS	1460		\$12,766.00	\$12,766.00	\$12,766.00	\$12,766.00	C
107-2	REPAIR/REPLACE CONCRETE FLATWORK	1450		.00	.00	\$2,500.00	\$2,500.00	C
107-2	AUTOMATIC ENTRANCE DOOR OPENER	1460		.00	.00	\$4,000.00	\$3528.00	C
107-2	REPLACE EMERGENCY LIGHTS	1460		.00	.00	\$12,000.00	\$11,975.00	C
107-2	ADMINISTRATION	1410		.00	.00	\$16,500.00	\$16,500.00	C
107-1	REPLACE FIRE PUMP	1406		\$4,330.00	\$4330.00	\$4,330.00	\$4,031.00	C
PHA WIDE	OPERATIIONS	1406		.00	\$1484.40	\$1484.40	\$1484.40	C

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

PHA Name: HOUSING AUTHORITY OF THE CITY OF NORTH CHICAGO		Grant Type and Number Capital Fund Program #: ILOP107-906-98 Capital Fund Program Replacement Housing Factor #:			Federal FY of Grant: 1998			
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Development Account Number	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work
				Original	Revised	Funds Obligated	Funds Expended	

**Annual Statement/Performance and Evaluation Report (ATTACHMENT B)
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary**

PHA Name: Housing Authority of the City of North Chicago	Grant Type and Number Capital Fund Program: IL06P107-905-99 Capital Fund Program Replacement Housing Factor Grant No:	Federal FY of Grant: 1999
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Original Annual Statement Reserve for Disasters/ Emergencies Revised Annual Statement (revision no:)
 Performance and Evaluation Report for Period Ending 03/31/02 Final Performance and Evaluation Report

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations(may not exceed 10% of line 16)	\$188706.00	\$86,106.00	\$86,106.00	\$81,866.00
3	1408 Management Improvements				
4	1410 Administration				
5	1411 Audit				
6	1415 liquidated Damages				
7	1430 Fees and Costs		\$11,050.00	\$11,050.00	\$8,845.00
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures		\$67,510.00	\$67,510.00	\$49,475.00
11	1465.1 Dwelling Equipment—Non expendable	\$9,850.00	\$12,560.00	\$12,560.00	\$12,560.00
12	1470 Non dwelling Structures	\$2,710.00	(2,710.00)		
13	1475 Non dwelling Equipment		\$36,000.00	\$36,000.00	\$31,575.00
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1498 Mod Used for Development				
19	1502 Contingency				
20	Amount of Annual Grant: (sum of lines 2-19)	\$200,666.00	\$200,666.00	\$200,666.00	\$184,321.00
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 Compliance				

Annual Statement/Performance and Evaluation Report (ATTACHMENT B) Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary						
PHA Name: Housing Authority of the City of North Chicago		Grant Type and Number Capital Fund Program: IL06P107-905-99 Capital Fund Program Replacement Housing Factor Grant No:			Federal FY of Grant: 1999	
<input type="checkbox"/> Original Annual Statement <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending 03/31/02		<input type="checkbox"/> Reserve for Disasters/ Emergencies		<input type="checkbox"/> Revised Annual Statement (revision no:)		
<input type="checkbox"/> Final Performance and Evaluation Report						
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost		
23	Amount of line 20 Related to Security					
24	Amount of line 20 Related to Energy Conservation Measures					

Table Library

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

PHA Name: Housing Authority of the City of North Chicago		Grant Type and Number Capital Fund Program #: IL06P-107-905-99 Capital Fund Program Replacement Housing Factor #:				Federal FY of Grant: 1999	
Development Number Name/HA-Wide Activities	All Fund Obligated (Quart Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates
	Original	Revised	Actual	Original	Revised	Actual	
PHA WIDE	12/31/00	12/30/01		12/31/01	09/30/02		
IL107-2	12/31/00	12/30/01		12/31/01	09/30/02		

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

PHA Name: Housing Authority of the City of North Chicago	Grant Type and Number Capital Fund Program #: IL06P-107-905-99 Capital Fund Program Replacement Housing Factor #:	Federal FY of Grant: 1999
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Development Number Name/HA-Wide Activities	All Fund Obligated (Quart Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates
	Original	Revised	Actual	Original	Revised	Actual	

Development Number Name/HA-Wide Activities	All Fund Obligated (Quart Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates
	Original	Revised	Actual	Original	Revised	Actual	

Annual Statement/Performance and Evaluation Report (ATTACHMENT B)
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary

PHA Name: NORTH CHICAGO HOUSING AUTHORITY	Grant Type and Number Capital Fund Program: IL06P-107-501-00 Capital Fund Program Replacement Housing Factor Grant No:	Federal FY of Grant: 2000
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Original Annual Statement
 Performance and Evaluation Report for Period Ending 03/31/02
 Reserve for Disasters/ Emergencies
 Revised Annual Statement (revision no: 1)
 Final Performance and Evaluation Report

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations(may not exceed 10% of line 16)				
3	1408 Management Improvements		\$23,205.00	\$22,422.00	\$22,422.00
4	1410 Administration	\$13,500.00	\$13,500.00	\$13,500.00	\$13,500.00
5	1411 Audit	\$2,480.00	(2,480.00)		
6	1415 liquidated Damages				
7	1430 Fees and Costs	\$7,800.00	\$7,800.00	\$ 7,800.00	-0-
8	1440 Site Acquisition	\$5,000.00	\$5,000.00	\$ 5,000.00	-0-
9	1450 Site Improvement	\$10,600.00	\$10,600.00		-0-
10	1460 Dwelling Structures	\$94,530.00	\$106,770.00	\$98,000.00	-0-
11	1465.1 Dwelling Equipment—Non expendable				
12	1470 Non dwelling Structures	\$36,000.00	\$23,760.00	\$23,760.00	\$23,760.00
13	1475 Non dwelling Equipment	\$20,725.00	(\$20,725.00)		
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1498 Mod Used for Development				
19	1502 Contingency				
20	Amount of Annual Grant: (sum of lines 2-19)	\$190,635.00	\$190,635.00		
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 Compliance				

Annual Statement/Performance and Evaluation Report (ATTACHMENT B)
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary

PHA Name: NORTH CHICAGO HOUSING AUTHORITY	Grant Type and Number Capital Fund Program: IL06P-107-501-00 Capital Fund Program Replacement Housing Factor Grant No:	Federal FY of Grant: 2000
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Original Annual Statement
 Performance and Evaluation Report for Period Ending 03/31/02
 Reserve for Disasters/ Emergencies
 Revised Annual Statement (revision no: 1)
 Final Performance and Evaluation Report

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
23	Amount of line 20 Related to Security	\$20,725.00	(\$20,725.00)		
24	Amount of line 20 Related to Energy Conservation Measures				

(ATTACHMENT N)

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 Action Plan Tables			
Development Number	Development Name (or indicate PHA wide)	Number Vacant Units	% Vacancies in Development
HA-WIDE	PHA WIDE	2	1%
Description of Needed Physical Improvements or Management Improvements		Estimated Cost	Planned Start Date (HA Fiscal Year)
ADMINISTRATIVE SALARY		73,505	2001
ARCHITECT AND ENGINEER (PHASE I)		12,335	2002
REPLACE ENTRANCE DOORS		75,000	2002
PURCHASE VEHICLES		23,887	2003
UPGRADE COMPUTER		15,000	2003
LAND ACQUISITION (PHASE II)		30,000	2003
PHASE II PLAN FOR NEW OFFICE		71,000	2003
REPLACE STOVES		10,000	2002
REPLACE REFRIGERATORS		18,092	2002
PAINT OCCPIED APARTMENTS		36,135	2003
PHASE III CONSTRUCTION OF NEW OFFICE		171,635	2004
SECURITY PERSONNEL		23,400	2005
OFFICE PROCEDURE MANUAL		3,092	2004
INSTALL SECURITY CAMERAS		68,000	2005
Total estimated cost over next 5 years		\$627,989	

(ATTACHMENT N)

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 Action Plan Tables				
Development Number	Development Name (or indicate PHA wide)	Number Vacant Units	% Vacancies in Development	
IL107-2	THOMPSON MANOR	1	4%	
Description of Needed Physical Improvements or Management Improvements			Estimated Cost	Planned Start Date (HA Fiscal Year)
RESURFACE PARKING LOT			20,000	2003
INSTALL GFCI			7,000	2005
INSTALL CANOPY			7,000	2005
INSTALL ATRIUM			28,626	2005
Total estimated cost over next 5 years			\$62,626	

(ATTACHMENT N)

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 Action Plan Tables				
Development Number	Development Name (or indicate PHA wide)	Number Vacant Units	% Vacancies in Development	
IL107-1	KUKLA TOWERS	1	1%	
Description of Needed Physical Improvements or Management Improvements			Estimated Cost	Planned Start Date (HA Fiscal Year)
REPAIR PLUMBING			30,000	2002
REPLACE ZONE CONTROL VALVE			5,000	2002
INSTALL GFCI OUTLETS			20,000	2005
TUCKPOINTING			25,000	2005
Total estimated cost over next 5 years			\$80,000	

COMMUNITY SERVICE

The North Chicago Housing Authority meets the exemption requirement for this program. We will be designating our units as “Elderly Only”. The NCHA’S Admission and Continued Occupancy Policy informs residents of this requirement. Should any resident not meet this exemption they will be informed of the Community Service requirement and which agencies in North Chicago are in need of volunteers.

ATTACHMENT C

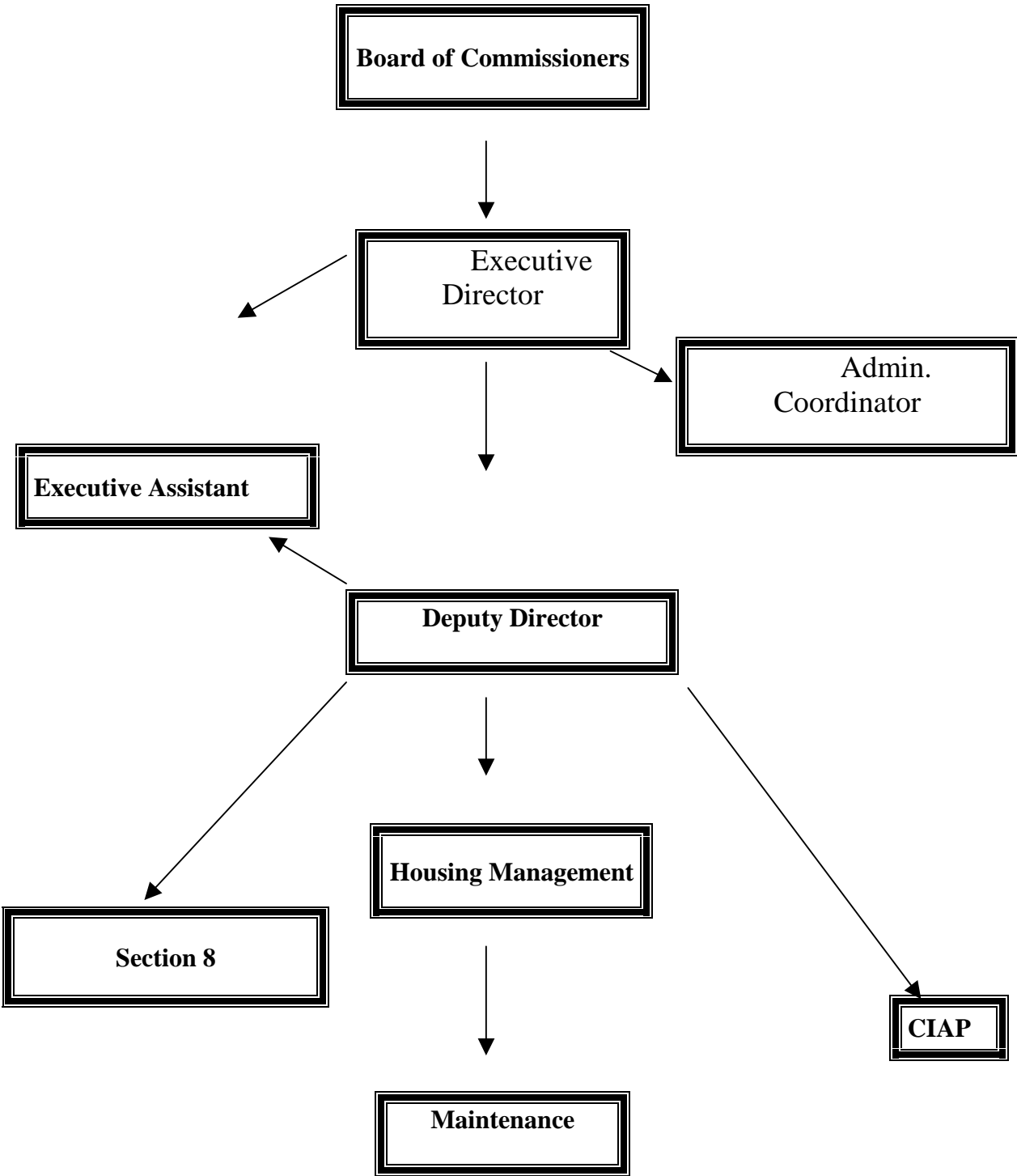
NORTH CHICAGO HOUSING AUTHORITY

ANNUAL AUDIT

In compliance with the instructions of the Interim rule on Preparing the Agency Plan (published February 18, 1999), in the Federal Register, our annual audit is not being submitted with this document because HUD has already received a copy of the audit. A copy of the annual audit is available at the administrative office of the NORTH CHICAGO HOUSING AUTHORITY for review during normal working hours.

ATTACHMENT E

The Housing Authority of the City of North Chicago, Illinois Organizational Chart



Deconcentration Policy Excerpt From The NCHA Admission and Continual Occupancy
Policy (Approved 1/20/00)

10.4 DECONDENTRATION POLICY

It is NORTH CHICAGO Housing Authority'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, we will skip families on the waiting list to reach other families with a lower or higher income. We will accomplish this in a uniform and non-discriminating manner.

The NORTH CHICAGO Housing Authority 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, we will analyze the income levels of families residing in each of our developments, the income levels of census tracts in which our developments are located, and the income levels of the families in the waiting list. Based on this analysis, we will determine the level of marketing strategies and deconcentration incentives to implement. The worksheet for the analysis can be found in **Appendix 1**.

10.5 DECONCENTRATION INCENTIVES

The NORTH CHICAGO Housing Authority 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.

Attachment L

NORTH CHICAGO HOUSING AUTHORITY PET POLICY

In compliance with Section 227 of Title II of the Housing and Urban-Rural Recovery Act of 1983, the North Chicago Housing Authority will permit residents of housing projects built exclusively for occupancy by the elderly and handicapped, to own and keep common household pets in apartments. The pet policy is not applicable to trained animals that are used to assist the handicapped as defined in 24 CFR Part 942.2. The NCHA will provide formal applications to tenants or applicants who desire to have common household pets. Pets will only be permitted upon NCHA approval of a tenant's application.

COMMON HOUSEHOLD PETS ARE DEFINED AS FOLLOWS:

1. Bird- Including canary, parakeet, finch, and other species that are normally kept caged; birds of prey are not permitted.
2. Fish- In tanks or aquariums, not to exceed 20 gallons in capacity; poisonous or dangerous fish is not permitted.
3. Dog- Not to exceed 20lbs. Weight at maturity.
4. Cat- Species commonly used for household pets (*felis catus*); may not weight more than 15lbs. At maturity.

RULES OF OWNERS OF PETS

Tenants permitted pets are those who reside in buildings designed for the elderly or handicapped.

The North Chicago Housing Authority may designate specific buildings or floors in each building as areas in which dogs or cats are not permitted for health reasons. A listing of eligible pet areas will be kept at each building. Areas may be adjusted to accommodate for tenancy or meet the changing needs of existing tenants.

The North Chicago Housing Authority may direct and approve such initial moves as may be necessary to establish pet and no pet areas or to meet the changing needs of existing tenants.

Should a resident living a designated non-pet area desire to have a dog or cat he/she may apply for a transfer to a building or a section of a building where pets are permitted. The North Chicago Housing Authority will consider requests for transfer in the same order they are received.

All pets must be registered with the North Chicago Housing Authority. Tenants must receive a written permit to keep any animal on or about the premises. This privilege may be revoked at any time subject to the Housing Authority grievance procedure if the animal becomes destructive or a nuisance to others, or if the tenant/owner fails to comply with the following:

1. A maximum number of (1) four-legged common household pets are allowed per dwelling. Tenant may keep a bird or aquarium in addition.
2. Dogs are to be licensed yearly with the City of North Chicago, and tenants must show proof of yearly distemper, rabies boosters and any other required vaccinations. Cats are to be vaccinated yearly for distemper.
3. Dogs and cats over the age of six months shall be sprayed or neutered as appropriate for the sex unless a letter is received from a licensed veterinarian giving medical reason why such is detrimental to the pet health.
4. No pet may be kept in violation of humane or health laws of the City, County or State.
5. Tenant must identify an alternate custodian for their pet(s) in the event of absence from the unit including employed tenants, or tenant illness, which would prevent the tenant from properly caring for the pet.
6. Cancellation of the pet permit will result if the pet becomes a documented nuisance or health threat. The resident will be given two written notices to enable him/her to correct the situation. The third notice will

require removal of the pet or eviction of the resident. In emergency situation, cancellation of this Amendment may result without issuance of the warning notices.

7. If pets are left unattended for twenty-four (24) hours or more, the Housing Authority may enter to remove the pet and transfer it to the proper authorities subject to the provisions of Chapter 8, paragraphs 703 and 704 of the Humane Care for Animals Act of Illinois. The Housing Authority accepts no responsibility for the pet under such circumstances.
8. Tenant shall not permit any disturbance by their pet which would interfere with the quiet enjoyment of other tenants; whether by loud barking, howling, biting, scratching or other such activities.
9. Tenants shall not alter their unit, patio or unit area to create an enclosure for the animal.
10. Tenant is responsible for all damages caused by their pet including the cost of fumigation necessitated as a result of their pet.
11. Dogs and cats shall remain inside a tenant's unit unless they are on a leash and directly controlled by an adult. Pets are not permitted in public areas of the building except while directly entering or exiting the building. Birds must be housed in a cage. Dogs and cats must be identifiable by an identification collar.
12. Cats are to use litter boxes kept in tenant's premises. Tenant is not allowed to let waste accumulate.
13. Only one pet (dog or cat) will be permitted on an elevator at any time.
14. The owner of a dog or cat must properly remove and dispose of all waste caused by animals in building interiors and on grass and paved areas of the project (this includes washing and disinfecting affected areas in building interiors following "accident"). If no area is designated as a pet exercise or waste deposit area, the pet owner must remove the pet from the premises for such purposes. Manager will notify pet owner of building plan for disposal of animal waste.

15. Tenants shall take adequate precautions to eliminate any pet odors within or around unit and maintain unit in a sanitary condition at all times.
16. Tenants are prohibited from feeding stray animals. The feeding of stray animals shall constitute having a pet without permission of the Housing Authority.
17. Tenant shall pay an additional security deposit for each pet as follows: a dog, \$200.00; a cat \$200.00; fish or bird, none. This deposit shall be paid in advance or on the acceptance of said pets by the tenant. Deposit may be paid in three (3) payment. First payment must be made at the time the pet is allowed on permise. This deposit is refundable if no damage is done, as verified by the Housing Authority, after tenant disposes of the pet/pets, or moves. The tenant is responsible for damage in excess of the combined total security deposits. The security deposit may be paid in up to three approximately equal payment under auto-billing procedures. The pet deposit shall not earn interest payable to the tenant and shall not be segregated.
18. NO VISITING PETS ALLOWED.

I have reviewed and understand the above regulations and agree to conform to the same and understand that violation of the rules may result in a requirement to permanently remove the pet from the unit within 14 days or termination of the tenancy of the pet owner. I understand that in emergency situations, the tenant may be required to permanently remove the pet with shorter notice.

Tenant

Date

Housing Authority Staff Member

Date

NORTH CHICAGO HOUSING AUTHORITY
PET POLICY
ADDENDUM TO LEASE

THIS AGREEMENT entered into this _____ day of _____, 19__, by and between the NORTH CHICAGO HOUSING AUTHORITY, Owner, and _____, Tenant, in consideration of their mutual promises agree as follows:

1. Tenant desires and has received permission from the Owner to keep the pet named _____ and described as: _____.
2. This Agreement is an Addendum to and part of the Lease between Owner and Tenant executed on _____. In the event of default by Tenant of any of the terms of this Agreement, Tenant agrees, upon proper written notice of default from Owner, to cure the default, remove the Pet or vacate the Premises.
3. As a special deposit, Tenant agrees to pay Owner the sum of TWO HUNDRED DOLLARS (\$200.00) which shall be paid initial payment of _____ and _____ monthly payments of _____. The Pet Deposit under this Pet Agreement is not a limit of Tenant's liability for property damages, cleaning, deodorization, defleaing, replacements, and/or personal injuries as herein further specified.

The Tenant's liability applies to carpets, doors, walls, drapes, windows, screens, furniture, appliances and any other part of the dwelling unit, landscaping, or other improvements to Owner's property. Tenant shall be strictly liable for the entire amount of any injury to the person or property of others, caused by such pet.

4. Tenant Agrees to comply with:
 - a. The Health & Safety Code; and
 - b. All other applicable governmental laws and regulations such as, but not limited to, licensing, inoculations, etc.

Attachment O

Component 10 (B) Voluntary Conversion Initial Assessments

- a. How many of the PHA’s developments are subject to the Required Initial Assessments? **None (NCHA only have two elderly/disabled developments)**
- b. How many of the PHA’s developments are not subject to the Required Initial Assessments based on exemptions (e.g., elderly and/or disabled developments not general occupancy projects)? **All**
- c. How many Assessments were conducted for the PHA’s covered developments? **None (All elderly/disabled developments)**
- d. Identify PHA developments that may be appropriate for conversion based on the Required Initial Assessments: **N/A**

Development Name	Number of Units

- d. If the PHA has not completed the Required Initial Assessments, describe the status of these assessments: **NCHA is exempt from conversion, due to all units being elderly/handicap units.**