

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

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# PHA Plans

5 Year Plan for Fiscal Years 2000 - 2004

Annual Plan for Fiscal Year 2000

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

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

**PHA Plan  
Agency Identification**

**PHA Name:** Housing Authority of the City of Lyons

**PHA Number:** GA 120

**PHA Fiscal Year Beginning: (mm/yyyy)** 12/99

**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 2000 - 2004**  
[24 CFR Part 903.5]

**A. Mission**

State the PHA's mission for serving the needs of low-income, very low income, and extremely low-income families in the PHA's 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: (state mission here)

The mission of the Housing Authority of the City of Lyons is to be a leader in providing affordable housing for very-low, low and moderate-income persons through effective management and wise stewardship of public funds and partnerships with our residents and others to enhance the quality of life in our communities.

**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 the 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)
- PHA Goal: Improve the quality of assisted housing  
Objectives:
- Improve public housing management: (PHAS score)
  - Improve voucher management: (SEMAP score)
  - Increase customer satisfaction:

- Concentrate on efforts to improve specific management functions:  
(list; e.g., public housing finance; voucher unit inspections)
  - Renovate or modernize public housing units:
  - Demolish or dispose of obsolete public housing:
  - Provide replacement public housing:
  - Provide replacement vouchers:
  - Other: (list below)
- 
- PHA Goal: Increase assisted housing choices  
Objectives:
    - Provide voucher mobility counseling:
    - Conduct outreach efforts to potential voucher landlords
    - Increase voucher payment standards
    - Implement voucher homeownership program:
    - Implement public housing or other homeownership programs:
    - Implement public housing site-based waiting lists:
    - Convert public housing to vouchers:
    - Other: (list below)

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

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

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

- PHA Goal: Promote self-sufficiency and asset development of assisted households  
Objectives:
  - Increase the number and percentage of employed persons in assisted families:

- Provide or attract supportive services to improve assistance recipients' employability:
- Provide or attract supportive services to increase independence for the elderly or families with disabilities.
- Other: (list below)

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

- PHA Goal: Ensure equal opportunity and affirmatively further fair housing  
Objectives:
  - Undertake affirmative measures to ensure access to assisted housing regardless of race, color, religion national origin, sex, familial status, and disability:
  - Undertake affirmative measures to provide a suitable living environment for families living in assisted housing, regardless of race, color, religion national origin, sex, familial status, and disability:
  - Undertake affirmative measures to ensure accessible housing to persons with all varieties of disabilities regardless of unit size required:
  - Other: (list below)

**Other PHA Goals and Objectives: (list below)**

***GOAL NUMBER ONE***

**IMPROVE CUSTOMER SERVICE DELIVERY BY ENHANCING OPERATIONAL EFFICIENCY, COORDINATING WITH COMMUNITY PROVIDERS, AND IMPROVING FACILITIES.**

***Objectives***

By June 1, 2000, the Board of Commissioners and the Executive Director will implement an Authority wide reorganization plan and provide for training where applicable in customer service, program management, and other office management/maintenance areas to focus resources.

As an ongoing process, the HACL will utilize existing community sources and identify sources of funding for programs to improve service delivery and physical improvements to HACL facilities and reduce duplicative costs.

By January 1, 2001, the Executive Director will work in consultation with the Board of Commissioners to implement operational systems to ensure the completion of all job tasks in an efficient manner. This will include investigating contract alternatives and developing systems for contract monitoring, as applicable.

BY January 1, 2001, the Executive Director will work with the Maintenance Superintendent to implement a formal Preventative Maintenance Program, which includes improving the physical appearance of maintenance crew, equipment, and vehicles.

By January 1, 2001, the Executive Director will consider professional grant management services for the capital program. Utilizing the highest and best use of present space will be the impetus to identifying potential problems and finding solutions within budget parameters.

## **HOUSING AUTHORITY OF THE CITY OF LYONS**

### **GOAL NUMBER TWO**

#### **ENHANCE THE ATTRACTIVENESS AND MARKETABILITY OF THE HOUSING STOCK AND NEIGHBORHOODS IN ORDER TO ATTRACT WORKING FAMILIES.**

##### **Objectives**

By January 1, 2001, the Board of Commissioners will establish priorities for the Housing Authority of the City of Lyons (HACL) in removing the stigma from the communities through supportive marketing efforts and establishing preferences that will best suit the residents of the city.

By June 1, 2001, the HACL staff, in consultation with the Resident Council and neighborhood representatives, will draft and promote neighborhood improvement plans for each development.

By January 1, 2002, the role of residents in achieving maximum neighborhood appeal will be established.

By January 1, 2003, the Executive Director and the HACL staff will develop methods of enforcing model neighbor standards, marketing strategies and a marketing plan for future success.

By January 1, 2002, the Board, the Executive Director and the Maintenance Department will initiate, implement, and maintain a preventive maintenance and landscaping plan which includes upgrading the playground areas with seasonal flower planting and creating attractive and consistent signage for the properties.

## **HOUSING AUTHORITY OF THE CITY OF LYONS**

### **GOAL NUMBER THREE**

#### **IMPROVE THE PUBLIC AND COMMUNITY IMAGE OF THE HOUSING AUTHORITY OF THE CITY OF LYONS BY DEVELOPING AND IMPLEMENTING A COMPREHENSIVE PUBLIC RELATIONS PLAN.**

##### **Objectives**

By January 1, 2002, the Board of Commissioners will establish parameters for a superior Public Relations Program for the Housing Authority of the City of Lyons.

By January 1, 2003, the Board of Commissioners and the Executive Director will designate a Public Affairs Officer who will promote the HACL on a community-wide basis.

Routinely, the Public Affairs Officer will participate in collaborative efforts for community growth. The participation will be documented in quarterly reports to the Board of Commissioners.

By January 1, 2002, the Executive Director with assistance from the HACL staff will develop a mailing list for marketing and outreach materials and assess and make recommendations for efficient telecommunications to ensure complaints are minimized.

By January 11, 2003, the Maintenance Department will provide a work force with a professional image by conducting and participating in community efforts, including contracting maintenance services as necessary, to promote the benefits and beautification of the City.

## **HOUSING AUTHORITY OF THE CITY OF LYONS**

### **GOAL NUMBER FOUR**

#### **IMPROVE EMPLOYEE SERVICES AND SUPPORT SYSTEMS.**

##### **Objectives**

By June 1, 2000, the Board of Commissioners will develop strategies to promote maximum efficiency and employee morale among the Housing Authority of the City of Lyons staff.

By January 1, 2001, the Executive Director and HACL staff will assess adequacy and current capabilities of the computer system, identify the need for cross and specialized staff training and develop a plan for such training of employees.

By January 1, 2002, the Executive Director and HACL staff will identify organizational needs such as staffing, adequate office space, and storage. The ED will subsequently identify a method for recognizing outstanding employees.

By January 1, 2002, the Maintenance Superintendent will establish and implement ethical and professional department standards which will dictate a tracked plan of improvement at all performance levels.

As an on-going process, the Executive Director will identify sources of funding to improve employee services and support systems.

## **HOUSING AUTHORITY OF THE CITY OF LYONS**

### **GOAL NUMBER FIVE**

#### **THE HOUSING AUTHORITY OF THE CITY OF LYONS WILL INCREASE THE LEVEL OF RESIDENT SATISFACTION RELATIVE TO MAINTENANCE BY 75% DURING THE NEXT TWO FISCAL YEARS.**

##### **Objectives**

By January 1, 2001, the Executive Director, in consultation with the Maintenance Supervisor, will establish a baseline of resident satisfaction with maintenance services by the implementation of a resident satisfaction survey.

By June 1, 2001, the Executive Director in consultation of the Maintenance Supervisor will develop and begin implementing a plan to enhance resident satisfaction based on the initial results of the survey.

By June 1, 2002, follow-up resident satisfaction surveys will be issued to the residents to determine the increased level of resident satisfaction relative to maintenance services.

By June 1, 2003, the Maintenance Plan will be modified to enhance the quality of services if warranted.

**Annual PHA Plan**  
**PHA Fiscal Year 2000**

[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 purpose of the Agency Plan is to empower and equip the PHA to exercise optimum flexibility in meeting local housing needs within the community while meeting its own needs. The Agency Plan contains a *FY-2000-FY-2004 Five-Year Plan* that includes the Authority's mission and long range goals and objectives.

The *FY-2000 Annual Plan* addresses the Authority's immediate operations, current policies, program participants, programs and services, and the PHA's strategy for handling operational concerns, resident concerns and needs, and programs and services for the upcoming fiscal year. The Agency Plan outlines the PHA's efforts in meeting the needs of the extremely-low, very-low, and low-income populations in its community as well as serves as a management, operational and accountability tool for the PHA.

Preliminary planning sessions were conducted with the Authority's residents, Resident Advisory Board, community leaders and organizations, and State and local authorities during the development of the Agency Plan to ensure that the needs of the residents and community are addressed in the Agency Plan. The Agency Plan is consistent with the State's Consolidated Plan.

## Annual Plan Table of Contents

[24 CFR Part 903.7 9 (r)]

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

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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:

- Attachment A. Admissions Policy for Deconcentration
- FY 2000 Capital Fund Program Annual Statement (Capital Improvement Plan)
- Most recent board-approved operating budget (Required Attachment for PHAs that are troubled or at risk of being designated troubled ONLY)

#### Optional Attachments:

- PHA Management Organizational Chart
- FY 2000 Capital Fund Program 5 Year Action Plan (Capital Improvement 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.

<b>List of Supporting Documents Available for Review</b>		
<b>Applicable &amp; On Display</b>	<b>Supporting Document</b>	<b>Applicable Plan Component</b>
X	PHA Plan Certifications of Compliance with the PHA Plans and Related Regulations	5 Year and Annual Plans
X	State/Local Government Certification of Consistency with the Consolidated Plan	5 Year and Annual Plans
X	Fair Housing Documentation: Records reflecting that the PHA has examined its programs or proposed programs, identified any impediments to fair housing choice in those programs, addressed or is addressing those impediments in a reasonable fashion in view of the resources available, and worked or is working with local jurisdictions to implement any of the jurisdictions’ initiatives to affirmatively further fair housing that require the PHA’s involvement.	5 Year and Annual Plans
X	Consolidated Plan for the jurisdiction/s in which the PHA is located (which includes the Analysis of Impediments to Fair Housing Choice (AI)) and any additional backup data to support statement of housing needs in the jurisdiction	Annual Plan: Housing Needs
X	Most recent board-approved operating budget for the public housing program	Annual Plan: Financial Resources;
X	Public Housing Admissions and (Continued) Occupancy Policy (A&O), which includes the Tenant Selection and Assignment Plan [TSAP]	Annual Plan: Eligibility, Selection, and Admissions Policies
	Section 8 Administrative Plan	Annual Plan: Eligibility, Selection, and Admissions Policies
X	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 2/1999 <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

<b>List of Supporting Documents Available for Review</b>		
<b>Applicable &amp; On Display</b>	<b>Supporting Document</b>	<b>Applicable Plan Component</b>
X	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
X	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
	Section 8 rent determination (payment standard) policies <input type="checkbox"/> check here if included in Section 8 Administrative Plan	Annual Plan: Rent Determination
X	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
X	Public housing grievance procedures <input checked="" type="checkbox"/> check here if included in the public housing A & O Policy	Annual Plan: Grievance Procedures
	Section 8 informal review and hearing procedures <input type="checkbox"/> check here if included in Section 8 Administrative Plan	Annual Plan: Grievance Procedures
X	The HUD-approved Capital Fund/Comprehensive Grant Program Annual Statement (HUD 52837) for the active grant year	Annual Plan: Capital Needs
X	Most recent CIAP Budget/Progress Report (HUD 52825) for any active CIAP grant	Annual Plan: Capital Needs
X	Most recent, approved 5 Year Action Plan for the Capital Fund/Comprehensive Grant Program, if not included as an attachment (provided at PHA option)	Annual Plan: Capital Needs
	Approved HOPE VI applications or, if more recent, approved or submitted HOPE VI Revitalization Plans or any other approved proposal for development of public housing	Annual Plan: Capital Needs
	Approved or submitted applications for demolition and/or disposition of public housing	Annual Plan: Demolition and Disposition
	Approved or submitted applications for designation of public housing (Designated Housing Plans)	Annual Plan: Designation of Public Housing
	Approved or submitted assessments of reasonable revitalization of public housing and approved or submitted conversion plans prepared pursuant to section 202 of the 1996 HUD Appropriations Act	Annual Plan: Conversion of Public Housing
	Approved or submitted public housing homeownership programs/plans	Annual Plan: Homeownership
	Policies governing any Section 8 Homeownership program <input type="checkbox"/> check here if included in the Section 8 Administrative Plan	Annual Plan: Homeownership
	Any cooperative agreement between the PHA and the TANF agency	Annual Plan: Community Service & Self-Sufficiency
	FSS Action Plan/s for public housing and/or Section 8	Annual Plan: Community Service & Self-Sufficiency

<b>List of Supporting Documents Available for Review</b>		
<b>Applicable &amp; On Display</b>	<b>Supporting Document</b>	<b>Applicable Plan Component</b>
	Most recent self-sufficiency (ED/SS, TOP or ROSS or other resident services grant) grant program reports	Annual Plan: Community Service & Self-Sufficiency
X	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
X	The most recent fiscal year audit of the PHA conducted under section 5(h)(2) of the U.S. Housing Act of 1937 (42 U. S.C. 1437c(h)), the results of that audit and the PHA's response to any findings	Annual Plan: Annual Audit
	Troubled PHAs: MOA/Recovery Plan	Troubled PHAs
	Other supporting documents (optional) (list individually; use as many lines as necessary)	(specify as needed)

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

[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.

<b>Housing Needs of Families in the Jurisdiction by Family Type</b>							
Family Type	Overall	Afford-ability	Supply	Quality	Access-ibility	Size	Loca-tion
Income <= 30% of AMI	180	5	4	3	3	2	2
Income >30% but <=50% of AMI	0	NA	NA	NA	NA	NA	NA
Income >50% but <80% of AMI	0	NA	NA	NA	NA	NA	NA
Elderly	25	4	4	3	4	1	3
Families with Disabilities	10	4	4	3	4	1	3
Black	N/A	N/A	N/A	N/A	N/A	N/A	N/A
White	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Other	N/A	N/A	N/A	N/A	N/A	N/A	N/A

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: State of Georgia Consolidated Plan-1995-2000
- U.S. Census data: the Comprehensive Housing Affordability Strategy (“CHAS”) dataset
- American Housing Survey data  
Indicate year:
- Other housing market study  
Indicate year:
- Other sources: (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. **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.

<b>Housing Needs of Families on the Waiting List</b>			
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	8		4
Extremely low income <=30% AMI	7	88	
Very low income (>30% but <=50% AMI)	1	12	
Low income (>50% but <80% AMI)	0	0	
Families with children	5	63	
Elderly families	2	25	
Families with Disabilities	1	12	
Black	5	63	
White	2	25	

<b>Housing Needs of Families on the Waiting List</b>			
Other	1	12	
Characteristics by Bedroom Size (Public Housing Only)			
1BR	4	50	2
2 BR	3	38	0
3 BR	1	13	0
4 BR	0	0	0
Is the waiting list closed (select one)? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
If yes:			
How long has it been closed (# of months)?			
Does the PHA expect to reopen the list in the PHA Plan year? <input type="checkbox"/> No <input type="checkbox"/> Yes			
Does the PHA permit specific categories of families 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

- Employ effective maintenance and management policies to minimize the number of public housing units off-line
- Reduce turnover time for vacated public housing units
- Reduce time to renovate public housing units
- Seek replacement of public housing units lost to the inventory through mixed finance development
- Seek replacement of public housing units lost to the inventory through section 8 replacement housing resources
- Maintain or increase section 8 lease-up rates by establishing payment standards that will enable families to rent throughout the jurisdiction
- Undertake measures to ensure access to affordable housing among families assisted by the PHA, regardless of unit size required

- Maintain or increase section 8 lease-up rates by marketing the program to owners, particularly those outside of areas of minority and poverty concentration
- Maintain or increase section 8 lease-up rates by effectively screening Section 8 applicants to increase owner acceptance of program
- 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: (list below)

The Authority will strive to meet thresholds established by HUD and meet the needs of local low and very low-income families.

**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)

The Authority will strive to meet thresholds established by HUD and meet the needs of local low and very low-income families.

**Need: Specific Family Types: The Elderly**

**Strategy 1: Target available assistance to the elderly:**

Select all that apply

- Seek designation of public housing for the elderly
- Apply for special-purpose vouchers targeted to the elderly, should they become available
- Other: (list below)

The Authority will strive to meet thresholds established by HUD and meet the needs of local low and very low-income families.

**Need: Specific Family Types: Families with Disabilities**

**Strategy 1: Target available assistance to Families with Disabilities:**

Select all that apply

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

The Authority will strive to meet thresholds established by HUD and meet the needs of local low and very low-income families.

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

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

Select if applicable

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

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

Select all that apply

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

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

**(2) Reasons for Selecting Strategies**

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

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

**2. Statement of Financial Resources**

[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**

<b>Sources</b>	<b>Planned \$</b>	<b>Planned Uses</b>
<b>1. Federal Grants (FY 2000 grants)</b>		
a) Public Housing Operating Fund	\$180,000	
b) Public Housing Capital Fund	\$243,000	
c) HOPE VI Revitalization		
d) HOPE VI Demolition		
e) Annual Contributions for Section 8 Tenant-Based Assistance		
f) Public Housing Drug Elimination Program (including any Technical Assistance funds)	\$35,000	
g) Resident Opportunity and Self-Sufficiency Grants		
h) Community Development Block Grant		
i) HOME		
Other Federal Grants (list below)		
<b>2. Prior Year Federal Grants (unobligated funds only) (list below)</b>		
<b>3. Public Housing Dwelling Rental Income</b>	\$173,000	Operations
<b>4. Other income (list below)</b>		
Interest	\$6,700	Operations
Other Income	\$500	Operations
<b>4. Non-federal sources (list below)</b>		
<b>Total resources</b>	\$638,200	Operations and Capital Improvements

### **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: (state time)
- Other: (describe)

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

- 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)
  - One
  - Two
  - Three or More
- b.  Yes  No: Is this policy consistent across all waiting list types?
- c. If answer to b is no, list variations for any other than the primary public housing waiting list/s for the PHA:

**(4) Admissions Preferences**

- a. Income targeting:
  - Yes  No: Does the PHA plan to exceed the federal targeting requirements by targeting more than 40% of all new 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)
  - Emergencies

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

c. Preferences

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

Former Federal preferences:

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

Other preferences: (select below)

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

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

1 Date and Time

Former Federal preferences:

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

Other preferences (select all that apply)

- 1 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
- 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)

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

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

- At an annual reexamination and lease renewal
- Any time family composition changes
- At family request for revision
- Other (list)

**(6) Deconcentration and Income Mixing**

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

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

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

Adoption of site-based waiting lists  
If selected, list targeted developments below:

Employing waiting list "skipping" to achieve deconcentration of poverty or income mixing goals at targeted developments  
If selected, list targeted developments below:

Employing new admission preferences at targeted developments  
If selected, list targeted developments below:

All developments

Other (list policies and developments targeted below)

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

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

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

Hardship Exemptions, Rent Reductions based on Reduction of Welfare Benefits, Phase-in rent

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:

All developments

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)

- Criminal or drug-related activity only to the extent required by law or regulation  
 Criminal and drug-related activity, more extensively than required by law or regulation  
 More general screening than criminal and drug-related activity (list factors below)  
 Other (list below)

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

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

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

e. Indicate what kinds of information you share with prospective landlords? (select all that apply)

- Criminal or drug-related activity

Other (describe below)

**(2) Waiting List Organization**

a. With which of the following program waiting lists is the section 8 tenant-based assistance waiting list merged? (select all that apply)

- None
- Federal public housing
- Federal moderate rehabilitation
- Federal project-based certificate program
- Other federal or local program (list below)

b. Where may interested persons apply for admission to section 8 tenant-based assistance? (select all that apply)

- PHA main administrative office
- Other (list below)

**(3) Search Time**

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

If yes, state circumstances below:

**(4) Admissions Preferences**

a. 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
- Other preference(s) (list below)

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

Date and Time

Former Federal preferences

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

Other preferences (select all that apply)

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

- Victims of reprisals or hate crimes
- Other preference(s) (list below)

4. Among applicants on the waiting list with equal preference status, how are applicants selected? (select one)

- 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
- Not applicable: the pool of applicant families ensures that the PHA will meet income targeting requirements

#### **(5) Special Purpose Section 8 Assistance Programs**

a. In which documents or other reference materials are the policies governing eligibility, selection, and admissions to any special-purpose section 8 program administered by the PHA contained? (select all that apply)

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

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

- Through published notices
- Other (list below)

### **4. PHA Rent Determination Policies**

[24 CFR Part 903.7 9 (d)]

#### **A. Public Housing**

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

Hardship Exemptions, Rent Reductions based on Reduction of Welfare Benefits, Phase-in rent

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

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

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

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

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

If yes, state amount/s and circumstances below:

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

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

e. Ceiling rents

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

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

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

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

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

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

f. Rent re-determinations:

1. Between income reexaminations, how often must tenants report changes in income or family composition to the PHA such that the changes result in an adjustment to rent? (select all that apply)

- Never
- At family option
- Any time the family experiences an income increase
- Any time a family experiences an income increase above a threshold amount or percentage: (if selected, specify threshold)\_\_\_\_\_
- Other (list below)

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

## **(2) Flat Rents**

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

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

## **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
- 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)
- Annually
  - Other (list below)
- e. What factors will the PHA consider in its assessment of the adequacy of its payment standard? (select all that apply)
- Success rates of assisted families
  - Rent burdens of assisted families
  - Other (list below)

**(2) Minimum Rent**

- a. What amount best reflects the PHA's minimum rent? (select one)
- \$0
  - \$1-\$25
  - \$26-\$50
- b.  Yes  No: Has the PHA adopted any discretionary minimum rent hardship exemption policies? (if yes, list below)

**5. Operations and Management**

[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)

The Lyons Housing authority is a High Performer and a small PHA and is therefore exempt from completing this section.

**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.
- 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.)

<b>Program Name</b>	<b>Units or Families Served at Year Beginning</b>	<b>Expected Turnover</b>
Public Housing		
Section 8 Vouchers		
Section 8 Certificates		
Section 8 Mod Rehab		
Special Purpose Section 8 Certificates/Vouchers (list individually)		
Public Housing Drug Elimination Program (PHDEP)		
Other Federal Programs(list individually)		

**C. Management and Maintenance Policies**

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

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

(2) Section 8 Management: (list below)

**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.

The Lyons Housing authority is a High Performer and is therefore exempt from completing this section.

**A. Public Housing**

1.  Yes  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)

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

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

1.  Yes  No: Has the PHA established informal review procedures for applicants to the Section 8 tenant-based assistance program and informal hearing procedures for families assisted by the Section 8 tenant-based assistance program in addition to federal requirements found at 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)

- PHA main administrative office  
 Other (list below)

## **7. Capital Improvement Needs**

[24 CFR Part 903.79 (g)]

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

### **A. Capital Fund Activities**

Exemptions from sub-component 7A: 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:

The Capital Fund Program Annual Statement is provided as an attachment to the PHA Plan. (GA120a01)

-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.  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:

The Capital Fund Program 5-Year Action Plan is provided as an attachment to the PHA Plan. (GA120a01)

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

1. Development name:

2. Development (project) number:

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

- Revitalization Plan under development
- Revitalization Plan submitted, pending approval
- Revitalization Plan approved

Activities pursuant to an approved Revitalization Plan underway

Yes  No: c) Does the PHA plan to apply for a HOPE VI Revitalization grant in the Plan year?

If yes, list development name/s below:

Yes  No: d) Will the PHA be engaging in any mixed-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 903.79 (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

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

<b>Demolition/Disposition Activity Description</b>	
1a. Development name:	
1b. Development (project) number:	
2. Activity type: Demolition <input type="checkbox"/>	
Disposition <input type="checkbox"/>	
3. Application status (select one)	
Approved <input type="checkbox"/>	
Submitted, pending approval <input type="checkbox"/>	
Planned application <input type="checkbox"/>	

4. Date application approved, submitted, or planned for submission: <u>(DD/MM/YY)</u>
5. Number of units affected:
6. Coverage of action (select one) <input type="checkbox"/> Part of the development <input type="checkbox"/> Total development
7. Timeline for activity: a. Actual or projected start date of activity: b. Projected end date of activity:

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

[24 CFR Part 903.7 9 (i)]

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

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

2. Activity Description

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

<b>Designation of Public Housing Activity Description</b>
1a. Development name:
1b. Development (project) number:

<p>2. Designation type:</p> <p>Occupancy by only the elderly <input type="checkbox"/></p> <p>Occupancy by families with disabilities <input type="checkbox"/></p> <p>Occupancy by only elderly families and families with disabilities <input type="checkbox"/></p>
<p>3. Application status (select one)</p> <p>Approved; included in the PHA's Designation Plan <input type="checkbox"/></p> <p>Submitted, pending approval <input type="checkbox"/></p> <p>Planned application <input type="checkbox"/></p>
<p>4. Date this designation approved, submitted, or planned for submission: (DD/MM/YY)</p>
<p>5. If approved, will this designation constitute a (select one)</p> <p><input type="checkbox"/> New Designation Plan</p> <p><input type="checkbox"/> Revision of a previously-approved Designation Plan?</p>
<p>6. Number of units affected:</p> <p>7. Coverage of action (select one)</p> <p><input type="checkbox"/> Part of the development</p> <p><input type="checkbox"/> Total development</p>

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

[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.

<b>Conversion of Public Housing Activity Description</b>
1a. Development name:
1b. Development (project) number:

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

**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.)

<b>Public Housing Homeownership Activity Description (Complete one for each development affected)</b>
1a. Development name: 1b. Development (project) number:
2. Federal Program authority: <input type="checkbox"/> 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  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.

The Lyons Housing authority is a High Performer and a small PHA and is therefore exempt from completing this section.

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

1. Cooperative agreements:

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

If yes, what was the date that agreement was signed? 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)

**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. )

<b>Services and Programs</b>				
Program Name & Description (including location, if appropriate)	Estimated Size	Allocation Method (waiting list/random selection/specific criteria/other)	Access (development office / PHA main office / other provider name)	Eligibility (public housing or section 8 participants or both)





### **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.

The Lyons Housing authority is a High Performer, small PHA that has participated in the PHDEP Program for at least the past two years and addresses this component under subcomponent 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
- 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
- Other (describe below)

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
- Other (describe below)

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

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

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

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

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

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

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

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

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

**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: \_\_\_\_)

This PHDEP Plan is attached under a separate file which will be attached to this plan.

## **14. RESERVED FOR PET POLICY**

[24 CFR Part 903.7 9 (n)]

## **15. Civil Rights Certifications**

[24 CFR Part 903.7 9 (o)]

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

## **16. Fiscal Audit**

[24 CFR Part 903.7 9 (p)]

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.

The Lyons Housing authority is a High Performer and a small PHA and is therefore exempt from completing this section.

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

2.  Yes  No: Was 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

Other: (describe)

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
- Other (list)

### **C. Statement of Consistency with the Consolidated Plan**

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

1. Consolidated Plan jurisdiction: (State of Georgia Consolidated Plan)

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

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

Other: (list below)

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

THERE IS A NEED FOR AFFORDABLE HOUSING FOR EXTREMELY LOW, VERY-LOW, LOW, AND MODERATE-INCOME FAMILIES IN LYONS. THE WAITING LIST FOR THE LYONS HOUSING AUTHORITY INDICATES AN OVERWHELMING HOUSING NEED FOR FAMILIES WITH CHILDREN

### **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.

### **Non Discrimination**

The Housing Authority will not, on account of race, color, creed, sex or national origin, deny or hinder any applicant family the opportunity to make application or lease a dwelling unit suitable to its needs in any of its developments. Neither will the Housing Authority discriminate because of religion, age, physical handicap, pregnancy, parenthood, or marital or veteran status.

The selection of residents for occupancy of available units will be in conformance with all HUD guidelines and regulations and applicable Fair Housing and Equal Opportunity Requirements.

### **Income Targeting**

The Housing Authority will admit for occupancy eligible families and strive for no less than 40% of available dwelling units occupied by eligible families whose incomes at the time of commencement of occupancy do not exceed 30% of the area median income.

### **Deconcentration**

The Housing Authority will strive to create mixed-income communities and lessen the concentration of very-low income families within the Housing Authority's public housing developments through admissions policies designed to bring in higher income tenants into lower income developments and lower income tenants into higher income developments. This policy shall not be construed to impose or require any specific income or racial quotas for any public housing development owned by the Housing Authority.

# 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      FFY of Grant Approval: (MM/YYYY)

Original Annual Statement

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

**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

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

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

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

Complete one table for each development in which work is planned in the next 5 PHA fiscal years. Complete a table for any PHA-wide physical or management improvements planned in the next 5 PHA fiscal years. 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 Program Annual Statement.

Optional 5-Year Action Plan Tables				
Development Number	Development Name (or indicate PHA wide)	Number Vacant Units	% Vacancies in Development	
Description of Needed Physical Improvements or Management Improvements			Estimated Cost	Planned Start Date (HA Fiscal Year)
<b>Total estimated cost over next 5 years</b>				

**Optional Public Housing Asset Management Table**

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

<b>Public Housing Asset Management</b>	
<b>Development Identification</b>	<b>Activity Description</b>

Name, Number, and Location								
Number and Type of units Capital Fund Program Parts II and III								
<i>Component 7a</i> Developmen t Activities								
<i>Component 7b</i> Demolition / disposition <i>Component 8</i>								
Designated housing <i>Component 9</i> Conversion								
<i>Component 10</i> Home- ownership <i>Component 11a</i>								
Other (describe) <i>Component 17</i>								



**Physical Needs Assessment** U.S. Department of Housing  
 Comprehensive Improvement Assistance Program **and Urban Development**  
 Office of Public and Indian Housing

OMB Approval No. 2577-0157 (Exp. 7/31/98)

HA Name <b>Housing Authority of the City of Lyons</b>		[ x ] Original [ ] Revision No.	
Development Number <b>GA120-001</b>		Development Name <b>Gould Mosley Village</b>	
		DOFA Date or Construction Date <b>1953</b>	
Development Type:	Occupancy Type:	Structure Type:	Number of Buildings
Rental [ X ]	Family [ X ]	Detached/Semi-Detached [ X ]	<b>9</b>
Turnkey III Vacant [ ]	Elderly [ ]	Row [ ]	Current Bedroom Distribution
Turnkey III - Occupied [ ]	Mixed [ ]	Walk-Up [ ]	0 1 2 2 8
Mutual Help [ ]		Elevator [ ]	3 10 4 4 5 0
Section 23, Bond Financed [ ]			0
		Number of Vacant Units <b>12</b>	
		Total Current Units <b>24</b>	
General Description of Needed Physical Improvements		ESTIMATED COSTS	Urgency of Need (1-5)
<b>1450: Site Improvements</b>			
Landscaping/drainage/stabilization		\$24,000	5
Install uniform shrubbery		\$7,200	5
Top 7 trees in contact with buildings		\$3,500	5
<b>1460: Dwelling Structures</b>			
Replace floor tile		\$38,862	3
Make one 2B/R 504 Compliant		\$20,000	1
Abate lead facia,soffit porch & door jam		\$72,000	5
Wrap facia,porch w/vinyl		\$36,000	5
Install heat pump HAVC		\$84,000	1
Replace hot water heater		\$10,200	1
Kitchen Modification		\$84,000	4
Bath Modification		\$84,000	5
Add security screen doors (front & rear)		\$14,400	5
Replace entrance doors (front & rear)		\$20,400	5
Add dryer outlets		\$6,360	2
<b>1465.1 Dwelling Equipment</b>			
Replace ranges		\$8,040	1
Replace Refrigerator		\$11,400	1
Total Preliminary Estimated Hard Cost for Needed Physical Improvements		\$	<b>\$524,362</b>
Per Unit Hard Cost		\$	<b>\$21,848</b>
Physical Improvements Will Result in Structural/System Soundness at a Reasonable Cost		Yes [ X ]	No [ ]
Development Has Long-Term Physical and Social Viability		Yes [ X ]	No [ ]
Date Assessment Prepared		<b>6/30/99</b>	
Source(s) of Information: Physical Needs Assessment prepared by National Facility Consultants, Inc., PHA staff and resident input, and PHMAP Indicators.			

**Physical Needs Assessment** U.S. Department of Housing  
 Comprehensive Improvement Assistance Program **and Urban Development**  
 Office of Public and Indian Housing

OMB Approval No. 2577-0157 (Exp. 7/31/98)

HA Name <b>Housing Authority of the City of Lyons</b>		<input checked="" type="checkbox"/> Original <input type="checkbox"/> Revision No.	
Development Number <b>GA120-002</b>		Development Name <b>Mollie Braziel Village</b>	
		DOFA Date <b>1953</b> or Construction Date	
Development Type:	Occupancy Type:	Structure Type:	Number of Buildings
Rental <input checked="" type="checkbox"/>	Family <input checked="" type="checkbox"/>	Detached/Semi-Detached <input checked="" type="checkbox"/>	<b>10</b>
Turnkey III Vacant <input type="checkbox"/>	Elderly <input type="checkbox"/>	Row <input type="checkbox"/>	Current Bedroom Distribution
Turnkey III - Occupied <input type="checkbox"/>	Mixed <input type="checkbox"/>	Walk-Up <input type="checkbox"/>	0 1 2 2 10
Mutual Help <input type="checkbox"/>		Elevator <input type="checkbox"/>	3 10 4 4 5 0
Section 23, Bond Financed <input type="checkbox"/>			0
		Number of Vacant Units <b>13</b>	
		Total Current Units <b>26</b>	
General Description of Needed Physical Improvements		ESTIMATED COSTS	Urgency of Need (1-5)
<b>1450: Site Improvements</b>			
Landscaping/drainage/stabilization		\$26,000	5
Install uniform shrubbry		\$7,800	5
Top 7 trees in contact with buildings		\$3,500	5
<b>1460: Dwelling Structures</b>			
Replace floor tile		\$41,657	3
Make one 2B/R 504 Compliant		\$20,000	1
Abate lead facia,soffit porch & door jam		\$78,000	5
Wrap facia,porch w/vinyl		\$39,000	5
Install heat pump HAVC		\$91,000	2
Replace hot water heater		\$11,050	3
Kitchen Modification		\$91,000	4
Bath Modification		\$91,000	4
Add security screen doors (front & rear)		\$15,600	5
Replace entrance doors (front & rear)		\$22,100	5
Add dryer outlets		\$6,890	3
<b>1465.1 Dwelling Equipment</b>			
Replace ranges		\$8,710	1
Replace Refrigerator		\$12,350	1
Total Preliminary Estimated Hard Cost for Needed Physical Improvements		\$	<b>\$565,657</b>
Per Unit Hard Cost		\$	<b>\$21,756</b>
Physical Improvements Will Result in Structural/System Soundness at a Reasonable Cost		Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
Development Has Long-Term Physical and Social Viability		Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
Date Assessment Prepared		<b>6/30/99</b>	
Source(s) of Information: Physical Needs Assessment prepared by National Facility Consultants, Inc., PHA staff and resident input, and PHMAP Indicators.			

**Physical Needs Assessment** U.S. Department of Housing  
 Comprehensive Improvement Assistance Program **and Urban Development**  
 Office of Public and Indian Housing

OMB Approval No. 2577-0157 (Exp. 7/31/98)

HA Name <b>Housing Authority of the City of Lyons</b>		<input checked="" type="checkbox"/> Original <input type="checkbox"/> Revision No.	
Development Number <b>GA120-002</b>		Development Name <b>Mollie Braziel Village</b>	
		DOFA Date <b>1953</b> or Construction Date	
Development Type:	Occupancy Type:	Structure Type:	Number of Buildings
Rental <input checked="" type="checkbox"/>	Family <input checked="" type="checkbox"/>	Detached/Semi-Detached <input checked="" type="checkbox"/>	<b>10</b>
Turnkey III Vacant <input type="checkbox"/>	Elderly <input type="checkbox"/>	Row <input type="checkbox"/>	Current Bedroom Distribution
Turnkey III - Occupied <input type="checkbox"/>	Mixed <input type="checkbox"/>	Walk-Up <input type="checkbox"/>	0 1 2 2 10
Mutual Help <input type="checkbox"/>		Elevator <input type="checkbox"/>	3 10 4 4 5 0
Section 23, Bond Financed <input type="checkbox"/>			0
		Number of Vacant Units <b>13</b>	
		Total Current Units <b>26</b>	
General Description of Needed Physical Improvements		ESTIMATED COSTS	Urgency of Need (1-5)
<b>1450: Site Improvements</b>			
Landscaping/drainage/stabilization		\$26,000	5
Install uniform shrubbry		\$7,800	5
Top 7 trees in contact with buildings		\$3,500	5
<b>1460: Dwelling Structures</b>			
Replace floor tile		\$41,657	3
Make one 2B/R 504 Compliant		\$20,000	1
Abate lead facia,soffit porch & door jam		\$78,000	5
Wrap facia,porch w/vinyl		\$39,000	5
Install heat pump HAVC		\$91,000	2
Replace hot water heater		\$11,050	3
Kitchen Modification		\$91,000	4
Bath Modification		\$91,000	4
Add security screen doors (front & rear)		\$15,600	5
Replace entrance doors (front & rear)		\$22,100	5
Add dryer outlets		\$6,890	3
<b>1465.1 Dwelling Equipment</b>			
Replace ranges		\$8,710	1
Replace Refrigerator		\$12,350	1
Total Preliminary Estimated Hard Cost for Needed Physical Improvements		\$	<b>\$565,657</b>
Per Unit Hard Cost		\$	<b>\$21,756</b>
Physical Improvements Will Result in Structural/System Soundness at a Reasonable Cost		Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
Development Has Long-Term Physical and Social Viability		Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
Date Assessment Prepared		<b>6/30/99</b>	
Source(s) of Information: Physical Needs Assessment prepared by National Facility Consultants, Inc., PHA staff and resident input, and PHMAP Indicators.			

**Physical Needs Assessment** U.S. Department of Housing  
 Comprehensive Improvement Assistance Program **and Urban Development**  
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OMB Approval No. 2577-0157 (Exp. 7/31/98)

HA Name <b>Housing Authority of the City of Lyons</b>		[ x ] Original [ ] Revision No.	
Development Number <b>GA120-003</b>		Development Name <b>H. D. Youmans Apartments</b>	
		DOFA Date or Construction Date <b>1959</b>	
Development Type:	Occupancy Type:	Structure Type:	Number of Buildings
Rental [ X ]	Family [ X ]	Detached/Semi-Detached [ X ]	<b>8</b>
Turnkey III Vacant [ ]	Elderly [ ]	Row [ ]	Current Bedroom Distribution
Turnkey III - Occupied [ ]	Mixed [ ]	Walk-Up [ ]	0 1 0 2 10
Mutual Help [ ]		Elevator [ ]	3 6 4 0 5 0
Section 23, Bond Financed [ ]			0
		Number of Vacant Units <b>0</b>	
		Total Current Units <b>16</b>	
General Description of Needed Physical Improvements		ESTIMATED COSTS	Urgency of Need (1-5)
<b>1450: Site Improvements</b>			
Install uniform shrubs		\$4,800	5
Landscaping/drainage/stabilization		\$16,000	5
Top 32 trees in contact with buildings		\$16,000	5
<b>1460 Dwelling Structure</b>			
Heat pump conversion		\$56,000	1
Replace Interior doors (frame & hardware)		\$56,210	5
<b>1465.1 Dwelling Equipment</b>			
Replace ranges		\$5,360	1
Replace Refrigerator		\$7,600	1
Total Preliminary Estimated Hard Cost for Needed Physical Improvements		\$	<b>\$161,970</b>
Per Unit Hard Cost		\$	<b>\$10,123</b>
Physical Improvements Will Result in Structural/System Soundness at a Reasonable Cost		Yes [ X ]	No [ ]
Development Has Long-Term Physical and Social Viability		Yes [ X ]	No [ ]
Date Assessment Prepared		<b>6/30/99</b>	
Source(s) of Information: Physical Needs Assessment prepared by National Facility Consultants, Inc., PHA staff and resident input, and PHMAP Indicators.			

**Physical Needs Assessment** U.S. Department of Housing  
 Comprehensive Improvement Assistance Program **and Urban Development**  
 Office of Public and Indian Housing

OMB Approval No. 2577-0157 (Exp. 7/31/98)

HA Name <b>Housing Authority of the City of Lyons</b>		[ x ] Original [ ] Revision No.	
Development Number <b>GA120-003</b>		Development Name <b>H. D. Youmans Apartments</b>	
		DOFA Date or Construction Date <b>1959</b>	
Development Type:	Occupancy Type:	Structure Type:	Number of Buildings
Rental [ X ]	Family [ X ]	Detached/Semi-Detached [ X ]	<b>8</b>
Turnkey III Vacant [ ]	Elderly [ ]	Row [ ]	Current Bedroom Distribution
Turnkey III - Occupied [ ]	Mixed [ ]	Walk-Up [ ]	0 1 0 2 10
Mutual Help [ ]		Elevator [ ]	3 6 4 0 5 0
Section 23, Bond Financed [ ]			0
		Number of Vacant Units <b>0</b>	
		Total Current Units <b>16</b>	
General Description of Needed Physical Improvements		ESTIMATED COSTS	Urgency of Need (1-5)
<b>1450: Site Improvements</b>			
Install uniform shrubs		\$4,800	5
Landscaping/drainage/stabilization		\$16,000	5
Top 32 trees in contact with buildings		\$16,000	5
<b>1460 Dwelling Structure</b>			
Heat pump conversion		\$56,000	1
Replace Interior doors (frame & hardware)		\$56,210	5
<b>1465.1 Dwelling Equipment</b>			
Replace ranges		\$5,360	1
Replace Refrigerator		\$7,600	1
Total Preliminary Estimated Hard Cost for Needed Physical Improvements		\$	<b>\$161,970</b>
Per Unit Hard Cost		\$	<b>\$10,123</b>
Physical Improvements Will Result in Structural/System Soundness at a Reasonable Cost		Yes [ X ]	No [ ]
Development Has Long-Term Physical and Social Viability		Yes [ X ]	No [ ]
Date Assessment Prepared		<b>6/30/99</b>	
Source(s) of Information: Physical Needs Assessment prepared by National Facility Consultants, Inc., PHA staff and resident input, and PHMAP Indicators.			

**Physical Needs Assessment** U.S. Department of Housing  
 Comprehensive Improvement Assistance Program **and Urban Development**  
 Office of Public and Indian Housing

OMB Approval No. 2577-0157 (Exp. 7/31/98)

HA Name <b>Housing Authority of the City of Lyons</b>		<input checked="" type="checkbox"/> Original <input type="checkbox"/> Revision No.	
Development Number <b>GA120-004</b>		Development Name <b>Laura Baker Homes</b>	
		DOFA Date or Construction Date <b>1959</b>	
Development Type:	Occupancy Type:	Structure Type:	Number of Buildings
Rental <input checked="" type="checkbox"/>	Family <input checked="" type="checkbox"/>	Detached/Semi-Detached <input checked="" type="checkbox"/>	<b>2</b>
Turnkey III Vacant <input type="checkbox"/>	Elderly <input type="checkbox"/>	Row <input type="checkbox"/>	Current Bedroom Distribution
Turnkey III - Occupied <input type="checkbox"/>	Mixed <input type="checkbox"/>	Walk-Up <input type="checkbox"/>	0 1 0 2 2
Mutual Help <input type="checkbox"/>		Elevator <input type="checkbox"/>	3 2 4 0 5 0
Section 23, Bond Financed <input type="checkbox"/>			0
		Number of Vacant Units <b>2</b>	
		Total Current Units <b>50.00%</b>	
		Total Current Units <b>4</b>	
General Description of Needed Physical Improvements		ESTIMATED COSTS	Urgency of Need (1-5)
<b>1450: Site Improvements</b>			
Landscaping/drainage/stabilization		\$4,000	5
<b>1460: Dwelling Structures</b>			
Heat pump conversion		\$14,000	2
Replace Interior doors		\$15,400	5
<b>1465.1 Dwelling Equipment</b>			
Replace ranges		\$1,340	2
Replace Refrigerator		\$1,900	2
Total Preliminary Estimated Hard Cost for Needed Physical Improvements		\$	<b>\$36,640</b>
Per Unit Hard Cost		\$	<b>\$9,160</b>
Physical Improvements Will Result in Structural/System Soundness at a Reasonable Cost		Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
Development Has Long-Term Physical and Social Viability		Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
Date Assessment Prepared		<b>06/30/1999</b>	
Source(s) of Information: Physical Needs Assessment prepared by National Facility Consultants, Inc., PHA staff and resident input, and PHMAP Indicators.			

**Physical Needs Assessment** U.S. Department of Housing  
 Comprehensive Improvement Assistance Program **and Urban Development**  
 Office of Public and Indian Housing

OMB Approval No. 2577-0157 (Exp. 7/31/98)

HA Name <b>Housing Authority of the City of Lyons</b>		[ x ] Original [ ] Revision No.	
Development Number <b>GA120-005</b>		Development Name <b>Harry Thompson Homes</b>	
		DOFA Date <b>1965</b> or Construction Date	
Development Type:	Occupancy Type:	Structure Type:	Number of Buildings
Rental [ X ]	Family [ X ]	Detached/Semi-Detached [ X ]	<b>29</b>
Turnkey III Vacant [ ]	Elderly [ ]	Row [ ]	Current Bedroom Distribution
Turnkey III - Occupied [ ]	Mixed [ ]	Walk-Up [ ]	0 1 14 2 18
Mutual Help [ ]		Elevator [ ]	3 10 4 2 5 2
Section 23, Bond Financed [ ]			0
		Number of Vacant Units <b>7</b>	
		Total Current Units <b>46</b>	
General Description of Needed Physical Improvements		ESTIMATED COSTS	Urgency of Need (1-5)
<b>1450: Site Improvements</b>			
Top 16 trees in contact with buildings		\$8,000	5
<b>1460: Dwelling Structures</b>			
Heat pump conversion		\$161,000	1
Replace interior doors		\$106,260	5
Replace windows		\$192,500	5
<b>1465 Dwelling Equipment</b>			
Install new ranges		\$15,410	1
Install new refrigerators		\$21,850	5
Total Preliminary Estimated Hard Cost for Needed Physical Improvements		\$	<b>\$505,020</b>
Per Unit Hard Cost		\$	<b>\$10,979</b>
Physical Improvements Will Result in Structural/System Soundness at a Reasonable Cost		Yes [ X ]	No [ ]
Development Has Long-Term Physical and Social Viability		Yes [ X ]	No [ ]
Date Assessment Prepared		<b>6/30/99</b>	
Source(s) of Information: Physical Needs Assessment prepared by National Facility Consultants, Inc., PHA staff and resident input, and PHMAP Indicators.			

**Physical Needs Assessment** U.S. Department of Housing  
 Comprehensive Improvement Assistance Program **and Urban Development**  
 Office of Public and Indian Housing

OMB Approval No. 2577-0157 (Exp. 7/31/98)

HA Name <b>Housing Authority of the City of Lyons</b>		[ x ] Original [ ] Revision No.	
Development Number <b>GA120-005</b>		Development Name <b>Harry Thompson Homes</b>	
		DOFA Date <b>1965</b> or Construction Date	
Development Type:	Occupancy Type:	Structure Type:	Number of Buildings
Rental [ X ]	Family [ X ]	Detached/Semi-Detached [ X ]	<b>29</b>
Turnkey III Vacant [ ]	Elderly [ ]	Row [ ]	Current Bedroom Distribution
Turnkey III - Occupied [ ]	Mixed [ ]	Walk-Up [ ]	0 1 14 2 18
Mutual Help [ ]		Elevator [ ]	3 10 4 2 5 2
Section 23, Bond Financed [ ]			0
		Number of Vacant Units <b>7</b>	
		Total Current Units <b>46</b>	
General Description of Needed Physical Improvements		ESTIMATED COSTS	Urgency of Need (1-5)
<b>1450: Site Improvements</b>			
Top 16 trees in contact with buildings		\$8,000	5
<b>1460: Dwelling Structures</b>			
Heat pump conversion		\$161,000	1
Replace interior doors		\$106,260	5
Replace windows		\$192,500	5
<b>1465 Dwelling Equipment</b>			
Install new ranges		\$15,410	1
Install new refrigerators		\$21,850	5
Total Preliminary Estimated Hard Cost for Needed Physical Improvements		\$	<b>\$505,020</b>
Per Unit Hard Cost		\$	<b>\$10,979</b>
Physical Improvements Will Result in Structural/System Soundness at a Reasonable Cost		Yes [ X ]	No [ ]
Development Has Long-Term Physical and Social Viability		Yes [ X ]	No [ ]
Date Assessment Prepared		<b>6/30/99</b>	
Source(s) of Information: Physical Needs Assessment prepared by National Facility Consultants, Inc., PHA staff and resident input, and PHMAP Indicators.			

**Physical Needs Assessment** U.S. Department of Housing  
**Comprehensive Improvement Assistar and Urban Development**  
Office of Public and Indian Housing

OMB Approval No. 2577-0157 (Exp. 7/31/98)

HA Name <b>Housing Authority of the City of Lyons</b>		<input checked="" type="checkbox"/> Original <input type="checkbox"/> Revision No.	
Development Number <b>GA120-006</b>		Development Name <b>Gene Wilkns Homes</b>	
		DOFA Date <b>1977</b> or Construction Date	
Development Type:	Occupancy Type:	Structure Type:	Number of Buildings
Rental <input checked="" type="checkbox"/>	Family <input checked="" type="checkbox"/>	Detached/Semi-Detachec <input checked="" type="checkbox"/>	<b>14</b>
Turnkey III Vacant <input type="checkbox"/>	Elderly <input type="checkbox"/>	Row <input type="checkbox"/>	Current Bedroom Distribution
Turnkey III - Occupied <input type="checkbox"/>	Mixed <input type="checkbox"/>	Walk-Up <input type="checkbox"/>	0 1 0 2 0
Mutual Help <input type="checkbox"/>		Elevator <input type="checkbox"/>	3 11 4 3 5 0
Section 23, Bond Financec <input type="checkbox"/>			0
General Description of Needed Physical Improvements			ESTIMATED COSTS
			Urgency of Need (1-5)

**1450: Site Improvements**

Install uniform shrubby	\$4,200	5
Landscaping/drainage/stabilization	\$14,000	5

**1460: Dwelling Structures**

Replace roof	\$21,000	5
Wrap facia,porch w/vinyl	\$21,000	5
Modernize Kitchen	\$49,000	3
Modernize bathrooms	\$49,000	5
Install dryer vents	\$4,200	5
Replace hot water heater	\$6,300	5
Replace interior doors	\$68,145	2
Heat pump conversion	\$49,000	2
Replace floor tile	\$29,549	2

**1465.1 Dwelling Equipment**

Install new ranges	\$4,690	3
Install new refrigerators	\$6,650	3

Total Preliminary Estimated Hard Cost for Needed Physical Improvements	\$	<b>\$326,734</b>
Per Unit Hard Cost	\$	<b>\$23,338</b>
Physical Improvements Will Result in Structural/System Soundness at a Reasonable Cost	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
Development Has Long-Term Physical and Social Viability	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
Date Assessment Prepared		<b>6/30/99</b>

Source(s) of Information: Physical Needs Assessment prepared by National Facility Consultants, Inc., PHA staff and resident input, and PHMAP Indicators.

**Annual Statement /  
Performance and Evaluation Report  
Part II: Supporting Pages  
Comprehensive Improvement Assistance Program (CIAP)**

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

OMB Approval 2577-0157 (Exp. 3/31/2002)

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 (2)
				Original	Revised (1)	Funds Obligated (2)	Funds Expended (2)	
<b>PHA-Wide</b>	<b>Operations</b> -Operations	<b>1406</b>	10%	\$26,510				
	<b>Total Account 1406</b>			<b>\$26,510</b>				
<b>PHA-Wide</b>	<b>Management Improvements</b> -Staff training	<b>1408</b>	l/s	\$500				
	<b>Total Account 1408</b>			<b>\$500</b>				
<b>PHA-Wide</b>	<b>Fees and Costs</b> <del>Contract administration/constructi</del> <del>management</del>	<b>1410</b>	5%	\$13,250				
	-Capital Fund Update Fee		l/s	\$2,500				
	-Advertising costs		l/s	\$250				
	<b>Total Account 1410</b>		<b>\$16,000</b>					
<b>GA 120-001 Gould Mosley Village</b>	<b>Dwelling Structure</b> -Make (1) 2B/R unit 504 accessible	<b>1460</b>	1 unit	\$20,000				
	<b>Subtotal 1460</b>			<b>\$20,000</b>				
	<b>Total GA 120-001 Gould Mosley Village</b>			<b>\$20,000</b>				

(1) To be completed for the Performance and Evaluation Report or a Revised Annual Statement (2) To be completed for the Performance and Evaluation Report.

Signature of Executive Director and Date

Signature of Public Housing Director/Office of Native American Programs Administrator and Date

<b>GA 120-002 Mollie Brazier Village</b>	<b>Dwelling Structure</b> -Make (1) 2B/R unit 504 accessible	<b>1460</b>	1 unit	\$20,000				
	<b>Subtotal 1460</b>			<b>\$20,000</b>				
	<b>Dwelling Equipment</b> -Replace ranges (phase 2)	<b>1465</b>	20 units	\$6,700				
	-Replace refrigerators (phase 2)		20 units	\$9,500				
	<b>Subtotal 1465</b>		<b>\$16,200</b>					

**Annual Statement /  
Performance and Evaluation Report  
Part III: Implementation Schedule  
Comprehensive Improvement Assistance Program (CIAP)**

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

OMB Approval No. 2577-0157 (Exp. 3/31/2002)

Development Number / Name HA - Wide Activities	All Funds Obligated (Quarter Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates (2)
	Original	Revised (1)	Actual (2)	Original	Revised (1)	Actual (2)	
1406	Mar-02			Sep-03			
1408	Mar-02			Sep-03			
1430	Mar-02			Sep-03			
Gould Mosley	Mar-02			Sep-03			
Mollie Braziel	Mar-02			Sep-03			
H. D. Youmans Apartments	Mar-02			Sep-03			
Harry Thompson Homes	Mar-02			Sep-03			
Gene Wilkns Homes	Mar-02			Sep-03			

To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

(2) To be completed for the Performance and Evaluation Report.

Signature of Executive Director and Date

Signature of Public Housing Director/Office of Native American Programs Administrator and Date

# Five-Year Action Plan

## Part I: Summary

Comprehensive Improvement Assistance Program Office of Public and Indian Housing

# U.S. Department of Housing and Urban Development

OMB Approval No. 2577-0157 (Exp. 7/31/98)

HA Name: <b>Housing Authority of the City of Lyons</b>		Locality: (City/County & State) <b>Lyons/Toombs/Georgia</b>				[ x ] Original [ ] Revision No.: _____		
A. Development Number/Name	Work Statement for Year 1	Work Statement for Year 2 FFY: 2001	Work Statement for Year 3 FFY: 2002	Work Statement for Year 4 FFY: 2003	Work Statement for Year 5 FFY: 2004			
	FFY: 2000							
GA120-001, Gould Mosley Village	See Annual Statement	\$6,360	\$38,862	\$84,000	\$84,000			
GA120-002, Mollie Braziel Village		\$85,360	\$65,237	\$107,026	\$74,974			
GA120-003, H. D. Youmans Apartments		\$8,100	\$0	\$0	\$0			
GA120-004, Laura Baker Homes		\$17,240	\$0	\$0	\$0			
GA120-005, Harry Thompson Homes		\$11,340	\$0	\$0	\$0			
GA120-006, Gene Wilkns Homes		\$72,482	\$96,783	\$9,856	\$41,908			
					\$0			
					\$0			
					\$0			
					\$0			
<b>B. Physical Improvements Subtotal</b>			\$200,882	\$200,882	\$200,882	\$200,882		
<b>C. Management Improvements (1408)</b>			\$500	\$500	\$500	\$500		
<b>D. HA - Wide Nondwelling Structures and Equipment (1470/1475)</b>			\$0	\$0	\$0	\$0		
<b>E. Administration (1410)</b>			\$0	\$0	\$0	\$0		
<b>F. Other (1430,1495, 1502)</b>		\$16,000	\$16,000	\$16,000	\$16,000			
<b>G. Operations (1406)</b>		\$26,510	\$26,510	\$26,510	\$26,510			
<b>H. Demolition</b>		\$0	\$0	\$0	\$0			
<b>I. Replacement Reserve</b>		\$0	\$0	\$0	\$0			
<b>J. Mod Used for Development</b>		\$0	\$0	\$0	\$0			
<b>K. Total CGP Funds</b>		<b>\$243,892</b>	<b>\$243,892</b>	<b>\$243,892</b>	<b>\$243,892</b>			
<b>L. Total Non-CGP Funds</b>		\$0	\$0	\$0	\$0			
<b>M. Grand Total</b>		<b>\$243,892</b>	<b>\$243,892</b>	<b>\$243,892</b>	<b>\$243,892</b>			
Signature of Executive Director		Date:	Signature of Public Housing Director/Office of Native American Programs Admini		Date:			

**Five-Year Action Plan**  
**Part II: Supporting Pages**  
Physical Needs Work Statement(s)  
Comprehensive Improvement Assistance Program (CIAP)

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

Work Statement for Year 1 FFY: 2000	Work Statement for Year 2001 FFY: 2001			Work Statement for Year 2002 FFY: 2002		
	Development Number/Name/General Description of Major Work Categories	Quantity	Estimated Cost	Development Number/Name/General Description of Major Work Categories	Quantity	Estimated Cost
	<b>See Annual Statement</b>					
	<b>GA 120-001, Gould Mosley Village</b> <u>Dwelling Structure</u> -Add dryer outlets	24 units	\$6,360	<b>GA 120-001, Gould Mosley Village</b> <u>Dwelling Structure</u> -Replace floor tile	24 units	\$38,862
	<b>Subtotal</b>		<b>\$6,360</b>	<b>Subtotal</b>		<b>\$38,862</b>
	<b>Total GA 120-001, Gould Mosley Village</b>		<b>\$6,360</b>	<b>Total GA 120-001, Gould Mosley Village</b>		<b>\$38,862</b>
	<b>GA 120-002, Mollie Braziel Village</b> <u>Dwelling Structure</u> -Install heat pump HVAC (phase 1)	24 units	\$85,360	<b>GA 120-002, Mollie Braziel Village</b> <u>Dwelling Structure</u> -Install heat pump HVAC (phase 2) -Replace floor tile -Add dryer vents -Replace hot water heaters	2 units 26 units 26 units 26 units	\$5,640 \$41,657 \$6,890 \$11,050
	<b>Subtotal</b>		<b>\$85,360</b>	<b>Subtotal</b>		<b>\$65,237</b>
	<b>Total GA 120-002, Mollie Braziel Village</b>		<b>\$85,360</b>	<b>Total GA 120-002, Mollie Braziel Village</b>		<b>\$65,237</b>
	<b>GA 120-003, H. D. Youmans Apartments</b> <u>Dwelling Equipment</u> -Replace ranges (phase 2) -Replace refrigerators (phase 2)	10 units 10 units	\$3,350 \$4,750	<b>GA 120-006, Gene Wilkns Homes</b> <u>Dwelling Structure</u> -Modernize kitchens (phase 1) -Replace interior doors (phase 2) -Replace floor tile	11 units 4 units 14 units	\$39,144 \$16,750 \$29,549
	<b>Subtotal</b>		<b>\$8,100</b>	<b>Subtotal</b>		<b>\$85,443</b>
	<b>Total GA 120-003, H. D. Youmans Apartments</b>		<b>\$8,100</b>	<b>Total GA 120-006, Gene Wilkns Homes</b>		<b>\$96,783</b>
	<b>GA 120-004, Laura Baker Homes</b> <u>Dwelling Structure</u> -Install heat pump HVAC	4 units	\$14,000	<u>Dwelling Equipment</u> -Replace ranges -Replace refrigerators	14 units 14 units	\$4,690 \$6,650
	<b>Subtotal</b>		<b>\$14,000</b>	<b>Subtotal</b>		<b>\$11,340</b>
	<u>Dwelling Equipment</u> -Replace ranges -Replace refrigerators	4 units 4 units	\$1,340 \$1,900	<b>Total GA 120-006, Gene Wilkns Homes</b>		<b>\$96,783</b>
	<b>Subtotal</b>		<b>\$3,240</b>	<b>Operations</b> -Operations	10%	\$26,510
	<b>Total GA 120-004, Laura Baker Homes</b>		<b>\$17,240</b>	<b>Subtotal</b>		<b>\$26,510</b>
				<b>Fees and Costs</b> -Contract administration/construction management -Capital fund update fee -Advertising	5% l/s l/s	\$13,250 \$2,500 \$250
				<b>Subtotal</b>		<b>\$16,000</b>
	<b>Subtotal of Estimated Cost</b>		<b>\$117,060</b>	<b>Subtotal of Estimated Cost</b>		<b>\$243,392</b>
	<b>GA 120-005, Harry Thompson Homes</b> <u>Dwelling Equipment</u> -Replace ranges (phase 1) -Replace refrigerators (phase 1)	14 units 14 units	\$4,690 \$6,650			
	<b>Subtotal</b>		<b>\$11,340</b>			
	<b>Total GA 120-005, Harry Thompson Homes</b>		<b>\$11,340</b>			

**Five-Year Action Plan**  
**Part III: Supporting Pages**  
**Management Needs Work Statement(s)**  
**Comprehensive Improvement Assistance Program (CIAP)**

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

Work Statement for Year 1 FFY: 2000	Work Statement for Year 2001			Work Statement for Year 2002		
	FFY: 2001			FFY: 2002		
	General Description of Major Work Categories	Quantity	Estimated Cost	General Description of Major Work Categories	Quantity	Estimated Cost
	<b><u>1408 Management Improvements</u></b>			<b><u>1408 Management Improvements</u></b>		
	-Staff training	I/s	<u>\$500</u>	-Staff training	I/s	<u>\$500</u>
	<b>Total 1408</b>		<b>\$500</b>	<b>Total 1408</b>		<b>\$500</b>
	Subtotal of Estimated Cost		\$500	Subtotal of Estimated Cost		\$500

**Five-Year Action Plan**  
**Part II: Supporting Pages**  
 Physical Needs Work Statement(s)  
 Comprehensive Improvement Assistance Program (CIAP)

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

Work Statement for Year 1 FFY: 2000	Work Statement for Year 2003 FFY: 2003			Work Statement for Year 2004 FFY: 2004		
	Development Number/Name/General Description of Major Work Categories	Quantity	Estimated Cost	Development Number/Name/General Description of Major Work Categories	Quantity	Estimated Cost
<b>See Annual Statement</b>	<b><u>GA 120-001, Gould Mosley Village</u></b> <u>Dwelling Structure</u> -Kitchen Modernization	24 units	<u>\$84,000</u> <b>\$84,000</b>	<b><u>GA 120-001, Gould Mosley Village</u></b> <u>Dwelling Structure</u> -Bath Modernization	24 units	<u>\$84,000</u> <b>\$84,000</b>
	<b>Subtotal</b>			<b>Subtotal</b>		
	<b>Total GA 120-001, Gould Mosley Village</b>		<b>\$84,000</b>	<b>Total GA 120-001, Gould Mosley Village</b>		<b>\$84,000</b>
	<b><u>GA 120-002, Mollie Braziel Village</u></b> <u>Dwelling Structure</u> -Kitchen Modernization -Bath Modernization (phase 1)	26 units 4 units	\$91,000 <u>\$16,026</u> <b>\$107,026</b>	<b><u>GA 120-002, Mollie Braziel Village</u></b> <u>Dwelling Structure</u> -Bath Modernization (phase 2)	22 units	<u>\$74,974</u> <b>\$74,974</b>
	<b>Subtotal</b>			<b>Subtotal</b>		
	<b>Total GA 120-002, Mollie Braziel Village</b>		<b>\$107,026</b>	<b>Total GA 120-002, Mollie Braziel Village</b>		<b>\$74,974</b>
	<b><u>GA 120-006, Gene Wilkns Homes</u></b> <u>Dwelling Structure</u> -Modernize kitchens (phase 2)	3 units	<u>\$9,856</u> <b>\$9,856</b>	<b><u>GA 120-006, Gene Wilkns Homes</u></b> <u>Dwelling Structure</u> -Modernize bathrooms (phase 1)	12 units	<u>\$41,908</u> <b>\$41,908</b>
	<b>Subtotal</b>			<b>Subtotal</b>		
	<b>Total GA 120-006, Gene Wilkns Homes</b>		<b>\$9,856</b>	<b>Total GA 120-006, Gene Wilkns Homes</b>		<b>\$41,908</b>
	<b><u>Operations</u></b> -Operations	10%	<u>\$26,510</u> <b>\$26,510</b>	<b><u>Operations</u></b> -Operations	10%	<u>\$26,510</u> <b>\$26,510</b>
	<b>Subtotal</b>			<b>Subtotal</b>		
	<b><u>Fees and Costs</u></b> -Contract administration/construction management -Capital fund update fee -Advertising	5% l/s l/s	\$13,250 \$2,500 <u>\$250</u> <b>\$16,000</b>	<b><u>Fees and Costs</u></b> -Contract administration/construction management -Capital fund update fee -Advertising	5% l/s l/s	\$13,250 \$2,500 <u>\$250</u> <b>\$16,000</b>
<b>Subtotal</b>			<b>Subtotal</b>			
<b>Subtotal of Estimated Cost</b>			<b>\$243,392</b>	<b>Subtotal of Estimated Cost</b>		
				<b>\$243,392</b>		

**Five-Year Action Plan**  
**Part III: Supporting Pages**  
**Management Needs Work Statement(s)**  
**Comprehensive Improvement Assistance Program (CIAP)**

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

Work Statement for Year 1 FFY: 2000	Work Statement for Year 2003			Work Statement for Year 2004		
	FFY: 2003			FFY: 2004		
	General Description of Major Work Categories	Quantity	Estimated Cost	General Description of Major Work Categories	Quantity	Estimated Cost
	<b><u>1408 Management Improvements</u></b>			<b><u>1408 Management Improvements</u></b>		
	-Staff training	I/s	<u>\$500</u>	-Staff training	I/s	<u>\$500</u>
	<b>Total 1408</b>		<b>\$500</b>	<b>Total 1408</b>		<b>\$500</b>
	Subtotal of Estimated Cost		\$500	Subtotal of Estimated Cost		\$500

**Five-Year Action Plan**  
**Part II: Supporting Pages**  
 Physical Needs Work Statement(s)  
 Comprehensive Improvement Assistance Program (CIAP)

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

Work Statement for Year 1 FFY: 2000	Work Statement for Year 2001 FFY: 2001			Work Statement for Year 2002 FFY: 2002		
	Development Number/Name/General Description of Major Work Categories	Quantity	Estimated Cost	Development Number/Name/General Description of Major Work Categories	Quantity	Estimated Cost
	<b>GA 120-006, Gene Wilkns Homes</b>					
<u>Dwelling Structure</u>						
-Replace interior doors (phase 1)			10 units	\$51,395		
-Install heat pump HVAC (phase 2)			6 units	\$21,087		
<b>Subtotal</b>				<b>\$72,482</b>		
<b>Total GA 120-006, Gene Wilkns Homes</b>				<b>\$72,482</b>		
 <u>Operations</u>						
-Operations			10%	\$26,510		
<b>Subtotal</b>				<b>\$26,510</b>		
 <u>Fees and Costs</u>						
-Contract administration/construction management			5%	\$13,250		
-Capital fund update fee			l/s	\$2,500		
-Advertising			l/s	\$250		
<b>Subtotal</b>				<b>\$16,000</b>		
Subtotal of Estimated Cost				\$126,332	Subtotal of Estimated Cost	\$0

**Annual Statement /  
Performance and Evaluation Report**  
Part II: Supporting Pages  
Comprehensive Improvement Assistance Program (CIAP)

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

OMB Approval 2577-0157 (Exp. 3/31/2002)

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 (2)
				Original	Revised (1)	Funds Obligated (2)	Funds Expended (2)	
	<b>Total GA 120-002 Mollie Braziel Village</b>			<b>\$36,200</b>				
<b><u>GA 120-003</u></b> <b><u>H. D Youmans</u></b> <b><u>Apartments</u></b>	<b><u>Dwelling Equipment</u></b> -Replace ranges (phase 1) -Replace refrigerators (phase 1) <b>Subtotal 1465</b>	<b>1465</b>	6 units 6 units	\$2,010 <u>\$2,850</u> <b>\$4,860</b>				
	<b>Total GA 120-002 Mollie Braziel Village</b>			<b>\$4,860</b>				
<b><u>GA 120-005</u></b> <b><u>Harry</u></b> <b><u>Thompson</u></b> <b><u>Homes</u></b>	<b><u>Dwelling Structure</u></b> -Heat pump conversion (phase 2) <b>Subtotal 1460</b>	<b>1460</b>	32 units	<u>\$111,909</u> <b>\$111,909</b>				
	<b>Total GA 13-005, Harry Thompson</b>			<b>\$111,909</b>				

(1) To be completed for the Performance and Evaluation Report or a Revised Annual Statement (2) To be completed for the Performance and Evaluation Report.

Signature of Executive Director and Date

Signature of Public Housing Director/Office of Native American Programs Administrator and Date

<b><u>GA 120-006</u></b> <b><u>Gene Wilkins</u></b> <b><u>Homes</u></b>	<b><u>Dwelling Structure</u></b> -Heat pump conversion (phase 1) <b>Subtotal 1460</b>	<b>1460</b>	8 units	<u>\$27,913</u> <b>\$27,913</b>				
	<b>Total GA 13-005, Harry Thompson</b>			<b>\$27,913</b>				

**Annual Statement /  
Performance and Evaluation Report**  
Part II: Supporting Pages  
Comprehensive Improvement Assistance Program (CIAP)

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

OMB Approval 2577-0157 (Exp. 3/31/2002)

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 (2)
				Original	Revised (1)	Funds Obligated (2)	Funds Expended (2)	

(1) To be completed for the Performance and Evaluation Report or a Revised Annual Statement (2) To be completed for the Performance and Evaluation Report.

Signature of Executive Director and Date	Signature of Public Housing Director/Office of Native American Programs Administrator and Date
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