

**PHA PLAN  
AGENCY IDENTIFICATION**

PHA Name: Mount Olive Housing Authority

PHA Number: NC-19 P-105

PHA Fiscal Year Beginning: (04/2000)

**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**

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 aim of the Mount Olive Housing Authority is to insure safe, decent, affordable housing: create opportunities for resident self-sufficiency and economic independence: and assure fiscal integrity in all programs administered.*

**B. Goals**

**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)

-Convert 5 Bedroom units into 2 Bedroom units.

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 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**

**X** PHA Goal: Provide an improved living environment

Objectives:

**X** Implement measures to deconcentrate poverty by bringing higher income public housing households into lower income developments

**X** Implement measures to promote income mixing in public housing by assuring access for lower income families into higher income developments

**X** Implement public housing security improvements

**X** Designate developments or buildings for particular resident groups (elderly persons with disabilities)

Other (list below)

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

**X** PHA Goal: Promote self-sufficiency and asset development of assisted households

Objectives:

**X** Increase the number and percentage of employed persons in assisted families

**X** Provide or attract supportive services to improve assistance recipients' employability

**X** Provide or attract supportive services to increase independence for the elderly or families with disabilities

Other (list below)

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

**X** PHA Goal: Ensure equal opportunity and affirmatively further fair housing

Objectives:

- X** Undertake affirmative measures to ensure access to assisted housing regardless of race, color, religion, national origin, sex, familial status, and disability
- X** Undertake affirmative measures to provide a suitable living environment for families living in assisted housing, regardless of race, color, religion, national origin, sex, familial status, and disability
- X** Undertake affirmative measures to ensure accessible housing to persons with all varieties of disabilities regardless of unit size required
- Other (list below)

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

**Annual PHA Plan**  
**PHA Fiscal Year 2000**  
[24 CFR Part 903.7]

**i. Annual Plan Type:**

**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)]

**iii. Annual Plan Table of Contents**

[24 CFR Part 903.7 9(r)]

**Table of Contents**

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**Attachments**

Required Attachments:

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

Optional Attachments:

- PHA Management Organizational Chart
- FY 2000 Capital Fund Program 5-Year Action Plan
- Public Housing Drug Elimination Program (PHDEP) Plan
- Comments of Resident Advisory Board or Boards (must be attached if not included in PHA Plan text)
- Other (List below, providing each attachment name)

## Supporting Documents Available for Review

| List of Supporting Documents Available for Review |  |  |
|---|--|--|
| Applicable & On Display                           | Supporting Document  | Applicable Plan Component                                    |
| ✓   | PHA Plan Certifications of compliance with the PHA Plans and Related Regulations   | 5 Year and Annual Plans                                      |
| ✓   | State/Local Government Certification of Consistency with the Consolidated Plan   | 5 Year and Annual Plans                                      |
| ✓   | 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                                      |
| ✓   | 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                                   |
|   | Most recent board-approved operating budget for the public housing program   | Annual Plan: Final Resources                                 |
| ✓   | 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 |
| ✓   | Public Housing Deconcentration and Income Mixing Documentation:<br>1. PHA board certifications of compliance with deconcentration requirements (section 16(a) of the U.S. Housing Act of 1937, as implemented in the 2/18/99 <i>Quality Housing and Work Responsibility Act Initial Guidance; Notice</i> and any further HUD guidance) and;<br>2. Documentation of the required deconcentration and income mixing analysis   | Annual Plan: Eligibility, Selection, and Admissions Policies |
| ✓   | Public housing rent determination policies, including the methodology for setting public housing flat rents<br><b>X</b> Check here if included in the public housing A&O Policy  | Annual Plan: Rent Determination                              |
| ✓   | Schedule of flat rents offered at each public housing development<br><b>X</b> Check here if included in the public housing A&O Policy  | Annual Plan: Rent Determination                              |
|   | Section 8 rent determination (payment standard) policies<br><b>X</b> Check here if included in Section 8 Administrative Plan   | Annual Plan: Rent Determination                              |
| ✓   | Public housing management and maintenance policy documents, including policies for the prevention or eradication of pest infestation (including cockroach infestation)   | Annual Plan: Operations and Maintenance                      |

List of Supporting Documents Available for Review (Continued)

| Applicable & On Display | Supporting Document   | Applicable Plan Component                         |
|-------------------------|---|---|
| ✓                       | Public housing grievance procedures<br><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<br><input checked="" type="checkbox"/> check here if included in Section 8 Administrative Plan   | Annual Plan: Grievance Procedures                 |
|                         | The HUD-approved Capital Fund/Comprehensive Grant Program Annual Statement (HUD 52837) for the active grant year  | Annual Plan: Capital Needs                        |
| ✓                       | Most recent CIAP Budget/Progress Report (HUD 52825) for any active CIAP grant   | Annual Plan: Capital Needs                        |
|                         | 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<br><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 |
|                         | Most recent self-sufficiency (ED/SS, TOP or ROSS or other resident services grant) grant program reports  | Annual Plan: Community Service & Self-Sufficiency |
|                         | The most recent Public Housing Drug Elimination Program (PHDEP) semi-annual performance report for any open grant and most recently submitted PHDEP application (PHDEP Plan)                    | Annual Plan: Safety and Crime Prevention          |

|   |   |                           |
|---|---|---------------------------|
| ✓ | 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**

| Housing Needs of Families in the Jurisdiction by Family Type |         |                |        |         |                |      |          |
|--|---------|----------------|--------|---------|----------------|------|----------|
| Family Type  | Overall | Afford-ability | Supply | Quality | Accessi-bility | Size | Location |
| Income <=30% of AMI  | 10      | 3              | 4      | 3       | 3              | 3    | 3        |
| Income >30% but <=50% of AMI                                 | 0       | 3              | 4      | 3       | 3              | 3    | 3        |
| Income > 50% but 80% of AMI                                  | 0       | 3              | 4      | 3       | 3              | 3    | 3        |
| Elderly  | 6       | 3              | 4      | 3       | 3              | 3    | 3        |
| Families with Disabilities                                   | 0       | 3              | 4      | 3       | 3              | 3    | 3        |
| Race/Ethnicity B   | 6       | 3              | 4      | 3       | 3              | 3    | 3        |
| Race/Ethnicity W   | 4       | 3              | 4      | 3       | 3              | 3    | 3        |
| Race/Ethnicity   |         |                |        |         |                |      |          |
| Race Ethnicity   |         |                |        |         |                |      |          |

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

Consolidated Plan of the Jurisdiction(s)

Indicate Year: \_\_\_\_\_

U.S. Census date: 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)

**PHA local survey of jurisdiction 1/2000/ State of North Carolina Consolidated Plan 1998**

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

| HOUSING NEEDS OF FAMILIES ON THE WAITING LIST         |                 |                     |                 |
|---|-----------------|---------------------|-----------------|
| Waiting List Type: Section 8 tenant-based assistance  |                 |                     |                 |
|   | No. of Families | % of Total Families | Annual Turnover |
| Waiting list total                                    |                 |                     |                 |
| Extremely low income (<=30% AMI)                      |                 |                     |                 |
| Very low income (>30 % but <=50% AMI)                 |                 |                     |                 |
| Low income (>50% but <80% AMI)                        |                 |                     |                 |
| Families with children                                |                 |                     |                 |
| Elderly families                                      |                 |                     |                 |
| Families with Disabilities                            |                 |                     |                 |
| Race/ethnicity  |                 |                     |                 |
|   |                 |                     |                 |
| Characteristics by Bedroom Size (Public Housing Only) |                 |                     |                 |
| 1 BR  |                 |                     |                 |
| 2 BR  |                 |                     |                 |
| 3 BR  |                 |                     |                 |
| 4 BR  |                 |                     |                 |
| 5 BR  |                 |                     |                 |
| 5+ BR   |                 |                     |                 |

Is the waiting list closed? Select One:  No  Yes If yes:  
 How long has it been closed? (Number of months) \_\_\_\_\_  
 Does the PHA expect to reopen the list in the PHA Plan year?  No  Yes  
 Does the PHA permit specific categories of families onto the waiting list,  
 even if generally closed?  No  Yes

| HOUSING NEEDS OF FAMILIES ON THE WAITING LIST         |                 |                     |                 |
|---|-----------------|---------------------|-----------------|
| <b>Waiting List Type: Public Housing</b>              |                 |                     |                 |
|   | No. of Families | % of Total Families | Annual Turnover |
| Waiting list total                                    | <b>10</b>       |                     | 2               |
| Extremely low income (<=30% AMI)                      | 10              | 100%                |                 |
| Very low income (>30 % but <=50% AMI)                 | 0               | 0                   |                 |
| Low income (>50% but <80% AMI)                        | 0               | 0                   |                 |
| Families with children                                | 10              | 100%                |                 |
| Elderly families                                      | 0               | 0                   |                 |
| Families with Disabilities                            | 0               | 0                   |                 |
| Race/ethnicity B                                      | 9               | 90%                 |                 |
| Race/ethnicity W                                      | 1               | 10%                 |                 |
| Race/ethnicity H                                      | 0               | 0                   |                 |
| Race/ethnicity  |                 |                     |                 |
| Characteristics by Bedroom Size (Public Housing Only) |                 |                     |                 |
| 1 BR  | 0               | 0                   |                 |
| 2 BR  | 6               | 60%                 |                 |
| 3 BR  | 4               | 40%                 |                 |

|  |   |   |  |
|--|---|---|--|
| 4 BR   | 0 | 0 |  |
| 5 BR   | 0 | 0 |  |
| 5+ BR  | 0 | 0 |  |
| <p>Is the waiting list closed? Select One:    <input checked="" type="checkbox"/> No    <input type="checkbox"/> Yes    If yes:<br/> How long has it been closed? (Number of months)    _____<br/> Does the PHA expect to reopen the list in the PHA Plan year?    <input type="checkbox"/> No    <input type="checkbox"/> Yes<br/> Does the PHA permit specific categories of families onto the waiting list,<br/> even if generally closed?    <input type="checkbox"/> No    <input type="checkbox"/> Yes</p> |   |   |  |

| HOUSING NEEDS OF FAMILIES ON THE WAITING LIST                   |                 |                     |                 |
|---|-----------------|---------------------|-----------------|
| <b>Waiting List Type: Combined Section 8 and Public Housing</b> |                 |                     |                 |
|   | No. of Families | % of Total Families | Annual Turnover |
| Waiting list total  |                 |                     |                 |
| Extremely low income (<=30% AMI)                                |                 |                     |                 |
| Very low income (>30 % but <=50% AMI)                           |                 |                     |                 |
| Low income (>50% but <80% AMI)                                  |                 |                     |                 |
| Families with children  |                 |                     |                 |
| Elderly families  |                 |                     |                 |
| Families with Disabilities                                      |                 |                     |                 |
| Race/ethnicity  |                 |                     |                 |
|   |                 |                     |                 |
| Characteristics by Bedroom Size (Public                         |                 |                     |                 |

|   |  |  |  |
|---|--|--|--|
| Housing Only)   |  |  |  |
| 1 BR  |  |  |  |
| 2 BR  |  |  |  |
| 3 BR  |  |  |  |
| 4 BR  |  |  |  |
| 5 BR  |  |  |  |
| 5+ BR   |  |  |  |
| <p>Is the waiting list closed? Select One:    <input type="checkbox"/> No    <input type="checkbox"/> Yes    If yes:<br/> How long has it been closed? (Number of months)    _____<br/> Does the PHA expect to reopen the list in the PHA Plan year?    <input type="checkbox"/> No    <input type="checkbox"/> Yes<br/> Does the PHA permit specific categories of families onto the waiting list,<br/> even if generally closed?    <input type="checkbox"/> No    <input type="checkbox"/> Yes</p> |  |  |  |

| HOUSING NEEDS OF FAMILIES ON THE WAITING LIST  |                 |                     |                 |
|--|-----------------|---------------------|-----------------|
| <b>Waiting List Type: Public Housing Site-Based or sub-jurisdictional waiting list (optional) If used, identify which development / subjurisdiction.</b> |                 |                     |                 |
|  | No. of Families | % of Total Families | Annual Turnover |
| Waiting list total   |                 |                     |                 |
| Extremely low income (<=30% AMI)   |                 |                     |                 |
| Very low income (>30 % but <=50% AMI)  |                 |                     |                 |
| Low income (>50% but <80% AMI)   |                 |                     |                 |
| Families with children   |                 |                     |                 |
| Elderly families   |                 |                     |                 |
| Families with Disabilities   |                 |                     |                 |
| Race/ethnicity   |                 |                     |                 |
| Race/ethnicity   |                 |                     |                 |

|   |  |  |  |
|---|--|--|--|
| Race/ethnicity  |  |  |  |
| Race/ethnicity  |  |  |  |
| Characteristics by Bedroom Size (Public Housing Only)   |  |  |  |
| 1 BR  |  |  |  |
| 2 BR  |  |  |  |
| 3 BR  |  |  |  |
| 4 BR  |  |  |  |
| 5 BR  |  |  |  |
| 5+ BR   |  |  |  |
| <p>Is the waiting list closed? Select One:    <input type="checkbox"/> No   <input type="checkbox"/> Yes   If yes:<br/> How long has it been closed? (Number of months)    _____<br/> Does the PHA expect to reopen the list in the PHA Plan year?    <input type="checkbox"/> No   <input type="checkbox"/> Yes<br/> Does the PHA permit specific categories of families onto the waiting list,<br/> even if generally closed?    <input type="checkbox"/> No   <input type="checkbox"/> Yes</p> |  |  |  |

**C. Strategy for Addressing Needs**

**(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:**

- 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:**

- 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 of 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**

- 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)

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

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

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

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

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

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

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

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

- 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)

**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:**

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

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

- Counsel Section 8 tenants as to location of units outside of areas of poverty of 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)]

| <b>Financial Resources: Planned Sources and Uses</b>  |                   |                     |
|---|-------------------|---------------------|
| <b>Sources</b>  | <b>Planned \$</b> | <b>Planned Uses</b> |
| <b>1. Federal Grants (FY 2000 Grants)</b>   |                   |                     |
| a. Public Housing Operating Fund  | \$ 26,305.        |                     |
| b. Public Housing Capital Fund  | 43,603.           |                     |
| c. HOPE VI Revitalization   | 0                 |                     |
| d. HOPE VI Demolition   | 0                 |                     |
| e. Annual Contributions for Section 8<br>Tenant-Based Assistance                            | 0                 |                     |
| f. Public Housing Drug Elimination<br>Program (including any Technical<br>Assistance Funds) | 0                 |                     |
| g. Resident Opportunity and Self-<br>Sufficiency Grants                                     | 0                 |                     |
| h. Community Development Block<br>Grant   | 0                 |                     |
| i. HOME   | 0                 |                     |
| Other Federal Grants (list below)   | 0                 |                     |
|   |                   |                     |
|   |                   |                     |
|   |                   |                     |
| <b>2. Prior Year Federal Grants</b><br>(unobligated funds only) (list below)                |                   |                     |
|   |                   |                     |
|   |                   |                     |
|   |                   |                     |
| <b>3. Public Housing Dwelling Rental Income</b>   | 21,370.           | Operations          |
|   |                   |                     |
| <b>4. Non-federal sources (list below)</b>  | 0                 |                     |
|   |                   |                     |

|                 |            |  |
|-----------------|------------|--|
|                 |            |  |
| Total Resources | \$ 91,278. |  |

### **3. PHA Policies Governing Eligibility, Selection, and Admissions**

[24 CFR Part 903.7 9(c)]

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

##### **(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) **5 - days**

Other (list below)

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. Incoming 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.

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

**(5) Occupancy**

- a. What reference materials can applicants and residents use to obtain information about the rules of occupancy of public housing? (select all that apply)
- 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:

- Other (list policies and developments targeted below)

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

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

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

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

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

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

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

## B. Section 8

### (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 (list 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 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.

#### 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 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. 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**

##### **(1) Income based Rent Policies**

a. Use of discretionary policies (select one)

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

--OR--

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

b. Minimum Rent

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

\$0

\$1 - \$25

\$26 - \$50

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

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

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

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

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

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

For the earned income of a previously unemployed household member

For increases in earned income

Fixed amount (other than general rent-setting policy)

If yes, state amount(s) and circumstances below:

Fixed percentage (other than general rent-setting policy)

If yes, state percentage(s) and circumstances below:

For household heads

For other family members

For transportation expenses

For non-reimbursed medical expenses of non-disabled or non-elderly families

Other (describe below)

e. Ceiling rents

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

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

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

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

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

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

- 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 below)

## B. Section 8 Tenant-Based Assistance

### (1) Payment Standards

- 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)]

**A. PHA Management Structure**

(select one)

An organization chart showing the PHA's management structure and organization is attached

--OR--

A brief description of the management structure and organization of the PHA follows:

*Executive Director*

*Maintenance Mechanic*

**B. HUD Programs Under PHA Management**

| Program Name  | Units or Families Served at Year Beginning | Expected Turnover |
|---|--|-------------------|
| Public Housing  | 20   | 4                 |
| Section 8 Vouchers  |  |                   |
| Section 8 Certificates  |  |                   |
| Section 8 Mod Rehab New Construction                                |  |                   |
| Special Purpose Section 8 Certificates/Vouchers (list individually) |  |                   |
| Public Housing Drug Elimination Program (PHDEP)                     |  |                   |
|   |  |                   |
|   |  |                   |
| Other Federal Programs (list individually)                          |  |                   |
|   |  |                   |
|   |  |                   |

|  |  |  |
|--|--|--|
|  |  |  |
|  |  |  |

**C. Management and Maintenance Policies**

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

***Maintenance Policy***

(2) Section 8 Management: (list below)

## **6. PHA Grievance Procedures**

[24 CFR Part 903.7 9(f)]

### **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 903.7 9(g)]

**A. Capital Fund Activities**

**(1) Capital Fund Program Annual Statement**

Select one:

- The Capital Fund Program Annual Statement is provided as an attachment to the PHA Plan at Attachment (state name)

--OR--

- The Capital Fund Program Annual Statement is provided below: (if selected, copy the CFP Annual Statement from the Table Library and insert here)

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

**Annual Statement -**

**Capital Fund Program (CFP) Part I: Summary**

Capital Fund Grant Number NC-19P-105903

FFY of Grant Approval: (09-1999)

Original Annual Statement

| Line # | Summary by Development Account          | Total Estimated Cost |
|--------|---|----------------------|
| 1      | Total Non-CGP Funds                     |                      |
| 2      | 1406 Operations                         | 43,000..             |
| 3      | 1408 Management                         | 0                    |
| 4      | 1410 Administration                     | 0                    |
| 5      | 1411 Audit                              | 0                    |
| 6      | 1415 Liquidated Damages                 | 0                    |
| 7      | 1430 Fees and Costs                     | 0                    |
| 8      | 1440 Site Acquisition                   | 0                    |
| 9      | 1450 Site Improvement                   | 0                    |
| 10     | 1460 Dwelling Structures                | 0                    |
| 11     | 1465.1 Dwelling Equipment-Nonexpendable | 0                    |
| 12     | 1470 Nondwelling Structures             | 0                    |
| 13     | 1475 Nondwelling Equipment              | 0                    |
| 14     | 1485 Demolition                         | 0                    |
| 15     | 1490 Replacement Reserve                | 0                    |
| 16     | 1492 Moving to Work Demonstration       | 0                    |
| 17     | 1495.1 Relocation Costs                 | 0                    |
| 18     | 1498 Mod Used for Development           | 0                    |
| 19     | 1502 Contingency                        | 0                    |

|    |   |            |
|----|---|------------|
| 20 | <b>Amount of Annual Grant (Sum of lines 2 - 19)</b>       | \$ 43,000. |
| 21 | Amount of line 20 Related to LBP Activities               | 0          |
| 22 | Amount of line 20 Related to Section 504 Compliance       | 0          |
| 23 | Amount of line 20 Related to Security                     | 0          |
| 24 | Amount of line 20 Related to Energy Conservation Measures | 0          |

**Table Library**

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

| Development Number/Name<br>HA-Wide Activities | General Description of Major Work Categories | Development Account Number | Total Estimated Cost |
|---|--|----------------------------|----------------------|
| NC-105 PHA-Wide                               | OPERATIONS                                   | 1406                       | \$ 43,000.           |
|   | TOTAL  |                            | <hr/> \$ 43,000.     |

|  |  |  |  |
|--|--|--|--|
|  |  |  |  |
|--|--|--|--|

**Table Library**

**Annual Statement**

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

| Development<br>Number/Name<br>HA-Wide Activities | All Funds Obligated<br>(Quarter Ending Date) | All Funds Expended<br>(Quarter Ending Date) |
|--|--|---|
| NC—105- 01                                       | 12/31/01                                     | 3/31/02                                     |

|  |  |  |
|--|--|--|
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|--|--|--|

**Table Library**

**(2) Optional 5-Year Action Plan**

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 at Attachment (state name)

--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)**

- 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 approval
    - Revitalization Plan approved
    - Activities pursuant to an approved Revitalization Plan underway
- Yes  No: c) Does the PHA plan to apply for a HOPE VI Revitalization grant in the Plan year? If yes, list development name(s) below:
- 
- 
- Yes  No: d) Will the PHA be engaging in any mixed-finance development activities for public housing in the Plan year? If yes, list developments or activities below:

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

**8. Demolition and Disposition**

[24 CFR Part 903.7 9(h)]

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>   |  |
|--|--|
| 1. a. Development name: _____  |  |
| b. Development (project) number: _____   |  |
| 2. Activity type: Demolition <input type="checkbox"/> Disposition <input type="checkbox"/>   |  |
| 3. Application status: (select one)<br>Approved <input type="checkbox"/> Submitted, pending approval <input type="checkbox"/> Planned application <input type="checkbox"/> |  |
| 4. Date application approved, submitted, or planned for submission: (MM/DD/YY) _____   |  |
| 5. Number of units affected: _____   |  |
| 6. Coverage of action (select one)<br><input type="checkbox"/> Part of the development<br><input type="checkbox"/> Total development                                       |  |
| 7. Timeline for activity:<br>a. Actual or projected start date of activity: _____<br><br>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)]

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>   |  |
|---|--|
| 1. a. Development name: _____   |  |
| b. Development (project) number: _____  |  |
| 2. Designation type: Occupancy by only the elderly <input type="checkbox"/>   |  |
| Occupancy by families with disabilities <input type="checkbox"/>  |  |
| Occupancy by only elderly families and families with disabilities <input type="checkbox"/>                                |  |
| 3. Application status: (select one)   |  |
| Approved; included in the PHA's Designated Plan <input type="checkbox"/>  |  |
| Submitted, pending approval <input type="checkbox"/> Planned application <input type="checkbox"/>                         |  |
| 4. Date this application approved, submitted, or planned for submission: (MM/DD/YY) _____                                 |  |
| 5. If approved, will this designation constitute a (select one)   |  |
| <input type="checkbox"/> New Designation Plan <input type="checkbox"/> Revision of a previously-approved Designation Plan |  |
| 6. Number of units affected: _____  |  |
| 7. Coverage of action (select one)  |  |
| <input type="checkbox"/> Part of the development <input type="checkbox"/> Total development                               |  |

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

[24 CFR Part 903.7 9(j)]

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

1.  Yes  No: Have any of 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 on the following page.)

### Conversion of Public Housing Activity Description

1. a. Development name: \_\_\_\_\_

b. Development (project) number: \_\_\_\_\_

2. What is the status of the required assessment?

- Assessment underway
- Assessment results submitted to HUD
- Assessment results approved by HUD (if marked, proceed to next question)
- Other (explain below)

3.  Yes  No Is a Conversion Plan required? (If yes, go to block 4; if no, go to block 5.)

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

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

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

- Units addressed in a pending or approved demolition application  
Date submitted or approved: \_\_\_\_\_
- Units addressed in a pending or approved HOPE VI demolition application  
Date submitted or approved: \_\_\_\_\_
- Units addressed in a pending or approved HOPE VI Revitalization Plan  
Date submitted or approved: \_\_\_\_\_
- Requirements no longer applicable: vacancy rates are less than 10%
- Requirements no longer applicable: site now has less than 300 units
- Other (describe below)

**11. Homeownership Programs Administered by the PHA**

[24 CFR Part 903.7 9(k)]

**A. Public Housing**

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. 1437 aaa) 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 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 Activity Description</b><br>(Complete one for each development affected)                   |  |
|--|--|
| 1. a. Development name: _____  |  |
| b. Development (project) number: _____   |  |
| 2. Federal Program authority:  |  |
| <input type="checkbox"/> HOPE I <input type="checkbox"/> 5(h)  |  |
| <input type="checkbox"/> Turnkey <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: (MM/DD/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)]

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

1. Cooperative agreements:

- Yes  No: Has the PHA entered into a cooperative agreement with the TANF Agency, to share information and/or target supportive services (as contemplated by Section 12(d)(7) of the Housing Act of 1937)?  
If yes, what was the date that agreement was signed? DD/MM/YY

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

- Client referrals  
 Information sharing regarding mutual clients (for rent determinations and otherwise)  
 Coordinate the provision of specific social and self-sufficiency services and programs to eligible families  
 Jointly administer programs  
 Partner to administer a HUD Welfare-to-Work voucher program  
 Joint administration of other demonstration program  
 Other (describe)

**B. Services and programs offered to residents and participants**

**(1) General**

a. Self-Sufficiency Policies

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

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

b. Economic and Social self-sufficiency programs

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

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

|  |  |  |  |  |
|--|--|--|--|--|
|  |  |  |  |  |
|--|--|--|--|--|

**(2) Family Self Sufficiency Program(s)**

a. Participation Description

| Family Self Sufficiency (FSS) Participation |  |   |
|---|--|---|
| Program                                     | Required Number of Participants<br>(start of FY 2000 Estimate) | Actual Number of Participants<br>(As of DD/MM/YY) |
| Public Housing                              |  |   |
| Section 8                                   |  |   |

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

**C. Welfare Benefit Reductions**

- The PHA is complying with the statutory requirements of Section 12(d) of the U.S. Housing Act of 1937 (relating to the treatment of income changes resulting from welfare program requirements) by: (select all that apply)
  - Adopting appropriate changes to the PHA's public housing rent determination policies and train staff to carry out those policies
  - Informing residents of new policy on admission and reexamination
  - Actively notifying residents of new policy at times in addition to admission and reexamination
  - Establishing or pursuing a cooperative agreement with all appropriate TANF agencies regarding the exchange of information and coordination of services
  - Establishing a protocol for exchange of information with all appropriate TANF agencies
  - Other (list below)

### **13. PHA Safety and Crime Prevention Measures**

[24 CFR Part 903.7 9(m)]

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

1. Describe the need for measures to ensure the safety of public 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 (list below)

2. What information or data did the PHA use 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 PHDEP/PHDEP Plan**

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

**14. (Reserved for Pet Policy)**

[24 CFR Part 903.7 9(n)]

## **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 Regulated 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)]

1.  Yes  No: Is the PHA engaging in any activities that will constitute 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 Consolidated Plan**

1. Consolidated Plan jurisdiction (provide name here)

*State of North Carolina*

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 commandments (describe below)

**D. Other Information Required by HUD**

## ATTACHMENTS

### Public Housing Drug Elimination Program Plan

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

#### Annual PHDEP Plan Table of Contents:

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

#### Section 1: General Information/History

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

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

#### **E. Target Areas**

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

| PHDEP Target Areas<br>(Name of development(s) or site) | Total # of Units<br>within the PHDEP<br>Target Area(s) | Total Population<br>to be Served<br>within the<br>PHDEP Target<br>Area(s) |
|--|--|---|
|  |  |   |
|  |  |   |
|  |  |   |

#### **F. Duration of Program**

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

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

**G. PHDEP Program History**

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

| <b>Fiscal Year of Funding</b> | <b>PHDEP Funding Received</b> | <b>Grant #</b> | <b>Fund Balance as of Date of this Submission</b> | <b>Grant Extensions or Waivers</b> | <b>Anticipated Completion Date</b> |
|-------------------------------|-------------------------------|----------------|---|------------------------------------|------------------------------------|
| FY 1995                       |                               |                |   |                                    |                                    |
| FY 1996                       |                               |                |   |                                    |                                    |
| FY 1997                       |                               |                |   |                                    |                                    |
| FY 1998                       |                               |                |   |                                    |                                    |
| FY 1999                       |                               |                |   |                                    |                                    |

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

**A. PHDEP Plan Summary**

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

**B. PHDEP Budget Summary**

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

| <b>FY ____ PHDEP Budget Summary</b>     |                      |
|---|----------------------|
| <b>Budget Line Item</b>                 | <b>Total Funding</b> |
| 9110 - Reimbursement of Law Enforcement |                      |
| 9120 - Security Personnel               |                      |
| 9130 - Employment of Investigators      |                      |
| 9140 - Voluntary Tenant Patrol          |                      |
| 9150 - Physical Improvements            |                      |
| 9160 - Drug Prevention                  |                      |
| 9170 - Drug Intervention                |                      |
| 9180 - Drug Treatment                   |                      |
| 9190 - Other Program Costs              |                      |
|   |                      |

|                            |  |
|----------------------------|--|
| <b>TOTAL PHDEP FUNDING</b> |  |
|----------------------------|--|

**C. PHDEP Plan Goals and Activities**

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

|  |                     |                   |            |                        |                                |                               |                        |
|--|---------------------|-------------------|------------|------------------------|--------------------------------|-------------------------------|------------------------|
| <b>9110 - Reimbursement of Law Enforcement</b> |                     |                   |            |                        | <b>Total PHDEP Funding: \$</b> |                               |                        |
| Goal(s)  |                     |                   |            |                        |                                |                               |                        |
| Objectives                                     |                     |                   |            |                        |                                |                               |                        |
| Proposed Activities                            | # of Persons Served | Target Population | Start Date | Expected Complete Date | PHDEP Funding                  | Other Funding (Amount/Source) | Performance Indicators |
| 1.   |                     |                   |            |                        |                                |                               |                        |
| 2.   |                     |                   |            |                        |                                |                               |                        |
| 3.   |                     |                   |            |                        |                                |                               |                        |

|                                  |                     |                   |            |                        |                                |                               |                        |
|----------------------------------|---------------------|-------------------|------------|------------------------|--------------------------------|-------------------------------|------------------------|
| <b>9120 - Security Personnel</b> |                     |                   |            |                        | <b>Total PHDEP Funding: \$</b> |                               |                        |
| Goal(s)                          |                     |                   |            |                        |                                |                               |                        |
| Objectives                       |                     |                   |            |                        |                                |                               |                        |
| Proposed Activities              | # of Persons Served | Target Population | Start Date | Expected Complete Date | PHDEP Funding                  | Other Funding (Amount/Source) | Performance Indicators |
| 1.                               |                     |                   |            |                        |                                |                               |                        |
| 2.                               |                     |                   |            |                        |                                |                               |                        |
| 3.                               |                     |                   |            |                        |                                |                               |                        |

| <b>9130 - Employment of Investigators</b> |                     |                   |            |                        | <b>Total PHDEP Funding: \$</b> |                                |                        |
|---|---------------------|-------------------|------------|------------------------|--------------------------------|--------------------------------|------------------------|
| Goal(s)                                   |                     |                   |            |                        |                                |                                |                        |
| Objectives                                |                     |                   |            |                        |                                |                                |                        |
| Proposed Activities                       | # of Persons Served | Target Population | Start Date | Expected Complete Date | PHDEP Funding                  | Other Funding (Amount /Source) | Performance Indicators |
| 1.  |                     |                   |            |                        |                                |                                |                        |
| 2.  |                     |                   |            |                        |                                |                                |                        |
| 3.  |                     |                   |            |                        |                                |                                |                        |

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

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

| <b>9160 - Drug Prevention</b> |                     |                   |            |                        |               | <b>Total PHDEP Funding: \$</b> |                        |
|-------------------------------|---------------------|-------------------|------------|------------------------|---------------|--------------------------------|------------------------|
| Goal(s)                       |                     |                   |            |                        |               |                                |                        |
| Objectives                    |                     |                   |            |                        |               |                                |                        |
| Proposed Activities           | # of Persons Served | Target Population | Start Date | Expected Complete Date | PHDEP Funding | Other Funding (Amount /Source) | Performance Indicators |
| 1.                            |                     |                   |            |                        |               |                                |                        |
| 2.                            |                     |                   |            |                        |               |                                |                        |
| 3.                            |                     |                   |            |                        |               |                                |                        |

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

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

|                                   |                            |                          |                   |                               |                              |                                       |                               |
|-----------------------------------|----------------------------|--------------------------|-------------------|-------------------------------|------------------------------|---------------------------------------|-------------------------------|
| <b>9190 - Other Program Costs</b> |                            |                          |                   |                               | <b>Total PHDEP Funds: \$</b> |                                       |                               |
| <b>Goal(s)</b>                    |                            |                          |                   |                               |                              |                                       |                               |
| <b>Objectives</b>                 |                            |                          |                   |                               |                              |                                       |                               |
| <b>Proposed Activities</b>        | <b># of Persons Served</b> | <b>Target Population</b> | <b>Start Date</b> | <b>Expected Complete Date</b> | <b>PHDEP Funding</b>         | <b>Other Funding (Amount /Source)</b> | <b>Performance Indicators</b> |
| 1.                                |                            |                          |                   |                               |                              |                                       |                               |
| 2.                                |                            |                          |                   |                               |                              |                                       |                               |
| 3.                                |                            |                          |                   |                               |                              |                                       |                               |

**Section 3: Expenditure/Obligation Milestones**

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

| <b>Budget Line Item #</b>          | <b>25% Expenditure of Total Grant Funds By Activity #</b> | <b>Total PHDEP Funding Expended (sum of the activities)</b> | <b>50% Obligation of Total Grant Funds by Activity #</b> | <b>Total PHDEP Funding Obligated (sum of the activities)</b> |
|------------------------------------|---|---|--|--|
| <i>e.g Budget Line Item # 9120</i> | <i>Activities 1, 3</i>                                    |   | <i>Activity 2</i>  |  |
|                                    |   |   |  |  |
| 9110                               |   |   |  |  |
| 9120                               |   |   |  |  |
| 9130                               |   |   |  |  |
| 9140                               |   |   |  |  |
| 9150                               |   |   |  |  |
| 9160                               |   |   |  |  |
| 9170                               |   |   |  |  |
| 9180                               |   |   |  |  |
| 9190                               |   |   |  |  |
|                                    |   |   |  |  |
| <b>TOTAL</b>                       |   | \$  |  | \$   |

**Section 4: Certifications**

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