

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

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# PHA Plans

5 Year Plan for Fiscal Years 2000 - 2004  
Annual Plan for Fiscal Year 2000

**NOTE: THIS PHA PLANS TEMPLATE (HUD 50075) IS TO BE COMPLETED IN**

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

**ACCORDANCE WITH INSTRUCTIONS LOCATED IN APPLICABLE PIH NOTICES**

**PHA Plan  
Agency Identification**

**PHA Name:** Benson County Housing Authority

**PHA Number:** ND 030

**PHA Fiscal Year Beginning: (mm/yyyy)** 01/01/00

**Public Access to Information**

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

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

**Display Locations For PHA Plans and Supporting Documents**

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

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

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

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



**5-Year Plan**  
**PHA Fiscal Years 2000 - 2004**

[24 CFR Part 903.5]

**A. Mission**

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

The mission of the PHA is the same as that of the Department of Housing and Urban Development: To promote adequate and affordable housing, economic opportunity and a suitable living environment free from discrimination.

- x The PHA's mission is: (state mission here)  
Benson County Housing Authority's mission is to provide safe, affordable housing for low-income and moderate-income residents of Benson County and promote the economic self-sufficiency of the families being served without discrimination.

**B. Goals**

The goals and objectives listed below are derived from HUD's strategic Goals and Objectives and those emphasized in recent legislation. PHAs may select any of these goals and objectives as their own, or identify other goals and/or objectives. Whether selecting the HUD-suggested objectives or their own, **PHAS ARE STRONGLY ENCOURAGED TO IDENTIFY QUANTIFIABLE MEASURES OF SUCCESS IN REACHING THEIR OBJECTIVES OVER THE COURSE OF THE 5 YEARS.** (QUANTIFIABLE MEASURES WOULD INCLUDE TARGETS SUCH AS: NUMBERS OF FAMILIES SERVED OR PHAS SCORES ACHIEVED.) PHAS SHOULD IDENTIFY THESE MEASURES IN THE SPACES TO THE RIGHT OF OR BELOW THE STATED OBJECTIVES.

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

- x PHA Goal: Expand the supply of assisted housing  
Objectives:  
    Apply for additional rental vouchers:  
x Reduce public housing vacancies:  
    Leverage private or other public funds to create additional housing opportunities:  
    Acquire or build units or developments  
    Other (list below)
- PHA Goal: Improve the quality of assisted housing  
Objectives:  
    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)
  - x Renovate or modernize public housing units:
  - Demolish or dispose of obsolete public housing:
  - Provide replacement public housing:
  - Provide replacement vouchers:
  - Other: (list below)
- 
- x PHA Goal: Increase assisted housing choices
  - Objectives:
    - Provide voucher mobility counseling:
    - x Conduct outreach efforts to potential voucher landlords
    - Increase voucher payment standards
    - Implement voucher homeownership program:
    - Implement public housing or other homeownership programs:
    - Implement public housing site-based waiting lists:
    - Convert public housing to vouchers:
    - Other: (list below)

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

- 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:
  - Implement measures to promote income mixing in public housing by assuring access for lower income families into higher income developments:
  - Implement public housing security improvements:
  - Designate developments or buildings for particular resident groups (elderly, persons with disabilities)
  - Other: (list below)

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

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

Objectives:

Increase the number and percentage of employed persons in assisted families:  
Provide or attract supportive services to improve assistance recipients' employability:  
Provide or attract supportive services to increase independence for the elderly or families with disabilities.

x Other: (list below)

Refer participants to other services of their needs in the county

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

x PHA Goal: Ensure equal opportunity and affirmatively further fair housing

Objectives:

Undertake affirmative measures to ensure access to assisted housing regardless of race, color, religion national origin, sex, familial status, and disability:

Undertake affirmative measures to provide a suitable living environment for families living in assisted housing, regardless of race, color, religion national origin, sex, familial status, and disability:

Undertake affirmative measures to ensure accessible housing to persons with all varieties of disabilities regardless of unit size required:

X other: (list below) applicants receive landlord & Tenants Right handbook, Housing Discrimination Form, Fair housing booklet, Are you a victim housing of Discrimination booklet.

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

**1. Fully utilize all Section 8 Contributions available to the PHA**

**Objectives:**

- a) **Monitor HAP payments monthly to ensure that all anticipated ACC is spent.**
- b) **Establish Landlord information newsletters on significant changes that will effect the lease between tenant and landlord.**
- c) **Establish and maintain partnerships with local groups, agencies and business to promote the use of our Section 8.**

**2. Reach 75% occupancy in all Public Housing Stock.**

**Objectives:**

- a) **Establish and monitor flat rents for the project.**
- b) **Establish and maintain partnerships with local groups, agencies, and businesses to promote the use of our public housing.**
- c) **Amend Admissions and Occupancy to accommodate use of public housing units.**

**3. Assess modernization needs of the PHA.**

**Objectives:**

**a) Establish a five-year plan for replacement of equipment.**

**b) Establish a five-year plan for modernization of public housing.**

**4. Develop and support safe and crime free housing.**

**a) Work with public housing and section 8 residents for their support and input.**

**b) Partnership with local law enforcement agencies to promote safe, crime -free housing.**

**c) Amend admissions and Occupancy Policy to promote crime -free housing.**

**d) Amend lease to reflect changes in AOP.**

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

[24 CFR Part 903.7]

**i. Annual Plan Type:**

Select which type of Annual Plan the PHA will submit.

**Standard Plan**

**Streamlined Plan:**

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

**Troubled Agency Plan**

**ii. abExecutive Summary of the Annual PHA Plan**

*ND030a01*

With the assistance of the Board of Commissioners, our residents and the administrative staff of the Housing Authority; we have assembled the Housing Authority of Benson County's annual plan. The Plan addresses all the statutory components as required by the Department of Housing and Urban Development (HUD). In keeping with its mission, the Housing Authority will work towards fully utilizing all funding available to the Authority so as to maximize the results in an environment of limited funding. This Plan was assembled using the most current information available at the time and does not reflect any changes of availability of funding by HUD.

This Plan required that we take a detailed look at the Housing Authority and determine where we are, where we want to be and how we are going to get there. The results of this Authority-wide analysis were not surprising, as we have addressed many of the components in the past.

Three conclusions can be drawn from the results of the analysis. First there is a need for housing assistance in Benson County, secondly, developing and maintaining a networking system with County Agencies to assist participants in identifying services available to meet their needs and provide crime-free, safe, and affordable housing, and third a need for capitol improvements within the public housing stock.

The Benson County Housing Authority will provide the goals and objectives as described in this Plan, and will make annual plans for each specific year. Our Annual plan and the Five-year plans are consistent with North Dakota Consolidated Plan. We will continue to provide the most services possible considering the funds available.

The Benson County Housing Authority's primary market is a low-income American citizen. The most typical customer for our assistance is someone who is in the lower income category and who needs assistance to provide affordable housing for their family. We will continue to sell our housing services through several channels. Our distribution channels include newspapers, bulletin boards and other media outlets.

Lastly, the Housing Authority of Benson County will continue to provide safe, affordable housing for low-income and moderate-income residents of Benson County and to promote economic self-sufficiency of the families being served without discrimination

**iii. Annual Plan Table of Contents**

**[24 CFR Part 903.7 9 (r)]**

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

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  - 8. 0 iii. **bDemolition and Disposition**
  - 9. 0 iii. **bDesignation of Housing**
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  - 12. 0 iii. **bCommunity Service Programs**

- 13. 0 iii. **bCrime and Safety**
- 14. 0 iii. **bPets (Inactive for January 1 PHAs)**
- 15. 0 iii. **bCivil Rights Certifications (included with PHA Plan Certifications)**
- 16. 0 iii. **bAudit**
- 17. 0 iii. **bAsset Management**
- 18. 0 iii. **bOther Information**

**Attachments**

Indicate which attachments are provided by selecting all that apply. Provide the attachment’s name (A, B, etc.) in the space to the left of the name of the attachment. Note: If the attachment is provided as a **SEPARATE FILE SUBMISSION FROM THE PHA PLANS FILE, PROVIDE THE FILE NAME IN PARENTHESES IN THE SPACE TO THE RIGHT OF THE TITLE.**

**Required Attachments:**

- Admissions Policy for Deconcentration
- FY 2000 Capital Fund Program Annual Statement – ND030B01-Capital Fund
- 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
- X Comments of Resident Advisory Board or Boards (must be attached if not included in PHA Plan text)
- Other (List below, providing each attachment name)

**Supporting Documents Available for Review**

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

**List of Supporting Documents Available for Review**

| <b>On Display</b> | <b>Supporting Document</b>  | <b>Applicable &amp; Applicable Plan Component</b> |
|-------------------|---|---|
| X                 | PHA Plan Certifications of Compliance with the PHA Plans and Related Regulations and Annual Plans | 5 Year  |
| X                 | State/Local Government Certification of Consistency with the Consolidated Plan and Annual Plans   | 5 Year  |

**Fair Housing Documentation:**

Records reflecting that the PHA has examined its programs or proposed programs, identified any impediments to fair housing choice in those programs, addressed or is addressing those impediments in a reasonable fashion in view of the resources available, and worked or is working with local jurisdictions to implement any of the jurisdictions’ initiatives to affirmatively further fair housing that require the PHA’s involvement. 5 Year and Annual Plans

- X Consolidated Plan for the jurisdiction/s in which the PHA is located (which includes the Analysis of Impediments to Fair Housing Choice (AI)) and any additional backup data to support statement of housing needs in the jurisdiction Annual Plan: Housing Needs
- X Most recent board-approved operating budget for the public housing program Annual Plan: Financial Resources;
- X Public Housing Admissions and (Continued) Occupancy Policy (A&O), which includes the Tenant Selection and Assignment Plan [TSAP] Annual Plan: Eligibility, Selection, and Admissions Policies
- X Section 8 Administrative Plan Annual Plan: Eligibility, Selection, and Admissions Policies
- Public Housing Deconcentration and Income Mixing Documentation:
1. bbPHA board certifications of compliance with deconcentration requirements (section 16(a) of the US Housing Act of 1937, as implemented in the 2/18/99 *Quality Housing and Work Responsibility Act Initial Guidance; Notice* and any further HUD guidance) and
  2. bbDocumentation of the required deconcentration and income mixing analysis Annual Plan: Eligibility, Selection, and Admissions Policies
- X Public housing rent determination policies, including the methodology for setting public housing flat rents
- X check here if included in the public housing
- A & O Policy Annual Plan: Rent Determination
- X Schedule of flat rents offered at each public housing development
- X check here if included in the public housing
- A & O Policy Annual Plan: Rent Determination
- X Section 8 rent determination (payment standard) policies
- X 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
- X Public housing grievance procedures
- X check here if included in the public housing
- A & O Policy Annual Plan: Grievance Procedures
- X Section 8 informal review and hearing procedures
- X 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  
 Homeownership  
 Policies governing any Section 8 Homeownership program  
 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 (PHEDEP) 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)]

Attachment ND030d01

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

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

**Housing Needs of Families in the Jurisdiction**

**by Family Type**

| Family Type                  | Overall | Afford-ability<br>Access-ibility | Supply<br>Size | Quality<br>Loca-tion |   |   |   |   |   |
|------------------------------|---------|----------------------------------|----------------|----------------------|---|---|---|---|---|
| Income <= 30% of AMI         | 54      | 4                                | 3              | 3                    | 3 | 3 | 3 | 4 |   |
| Income >30% but <=50% of AMI | 23      | 3                                | 3              | 3                    | 3 | 3 | 3 | 3 | 3 |
| Income >50% but <80% of AMI  | 15      | 3                                | 4              | 4                    | 3 | 3 | 3 | 3 |   |
| Elderly 38                   | 4       | 2                                | 3              | 4                    | 3 | 4 |   |   |   |

|                            |    |   |   |   |   |   |   |
|----------------------------|----|---|---|---|---|---|---|
| Families with Disabilities | 17 | 4 | 3 | 3 | 4 | 3 | 3 |
| White                      | 54 | 3 | 3 | 3 | 3 | 3 | 3 |
| Hispanic/Ethnicity         | 0  | 0 | 0 | 0 | 0 | 0 | 0 |
| Black/Ethnicity            | 0  | 0 | 0 | 0 | 0 | 0 | 0 |
| Native American            | 56 | 3 | 3 | 3 | 3 | 3 | 3 |

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: 1999
- U.S. Census data: the Comprehensive Housing Affordability Strategy (“CHAS”) dataset 1989  
American Housing Survey data  
Indicate year:  
Other housing market study  
Indicate year:
- Other sources: (list and indicate year of information)  
MTSC,1999

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

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

**Housing Needs of Families on the Waiting List**

- Waiting list type: (select one)
- Section 8 tenant-based assistance
  - Public Housing
  - Combined Section 8 and Public Housing

Public Housing Site-Based or sub-jurisdictional waiting list (optional)  
 If used, identify which development/subjurisdiction:

|                                      | # of families | % of total families | Annual Turnover |
|--------------------------------------|---------------|---------------------|-----------------|
| Waiting list total                   | 3             | 2                   | 2               |
| Extremely low income <=30% AMI       | 1             | 2                   | 2               |
| Very low income (>30% but <=50% AMI) | 1             | 2                   | 2               |
| Low income (>50% but <80% AMI)       | 1             | 1                   | 2               |
| Families with children               | 1             | 66%                 |                 |
| Elderly families                     | 1             | 33%                 |                 |
| Families with Disabilities           | 0             | 0                   |                 |
| White/ethnicity                      | 2             | 100%                |                 |
| Native Am./ethnicity                 | 1             | 0                   |                 |
| Black/ethnicity                      | 0             |                     |                 |
| Hispanic/ethnicity                   | 0             | 0                   |                 |

Characteristics by Bedroom Size (Public Housing Only)

|       |    |   |
|-------|----|---|
| 1BR   | 0  | 0 |
| 2 BR  | 3  | 2 |
| 3 BR  | 1  | 0 |
| 4 BR  | NA |   |
| 5 BR  | NA |   |
| 5+ BR | NA |   |

Is the waiting list closed (select one)?  No  Yes

If yes:

How long has it been closed (# 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

**C. Strategy for Addressing Needs**

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

**(1) Strategies**

**Need: Shortage of affordable housing for all eligible populations**

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

Select all that apply

- Employ effective maintenance and management policies to minimize the number of public housing units off-line
- X  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
- X  Undertake measures to ensure access to affordable housing among families assisted by the PHA, regardless of unit size required
- X  Maintain or increase section 8 lease-up rates by marketing the program to owners, particularly those outside of areas of minority and poverty concentration
  - Maintain or increase section 8 lease-up rates by effectively screening Section 8 applicants to increase owner acceptance of program
- X  Participate in the Consolidated Plan development process to ensure coordination with broader community strategies
  - Other (list below)

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

Select all that apply

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

**Need: Specific Family Types: Families at or below 30% of median**

**Strategy 1: Target available assistance to families at or below 30 % of AMI**

Select all that apply

- X  Exceed HUD federal targeting requirements for families at or below 30% of AMI in public housing

- X 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**

Select all that apply

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

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

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

Select all that apply

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

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

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

Select all that apply

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

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

needs

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

Select if applicable

Affirmatively market to races/ethnicities shown to have disproportionate housing needs

Other: (list below)

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

Select all that apply

Counsel section 8 tenants as to location of units outside of areas of poverty or minority concentration and assist them to locate those units

Market the section 8 program to owners outside of areas of poverty /minority concentrations

Other: (list below)

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

**(2) Reasons for Selecting Strategies**

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

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

## **2. bbStatement of Financial Resources**

[24 CFR Part 903.7 9 (b)]

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

### **Financial Resources:**

#### **Planned Sources and Uses**

| <b>Sources</b>                            | <b>Planned \$</b>  | <b>Planned Uses</b> |
|---|--|---------------------|
| <b>1. Federal Grants (FY 2000 grants)</b> |  |                     |
| a)  | bbPublic Housing Operating Fund  | 33,380.00           |
| b)  | bbPublic Housing Capital Fund  |                     |
| c)  | bbHOPE VI Revitalization   |                     |
| d)  | bbHOPE VI Demolition   |                     |
| e)  | bbAnnual Contributions for Section 8 Tenant-Based Assistance                         |                     |
|   | 23,013.00  |                     |
| f)  | bbPublic Housing Drug Elimination Program (including any Technical Assistance funds) |                     |
| g)  | bbResident Opportunity and Self-Sufficiency Grants                                   |                     |
| h)  | bbCommunity Development Block Grant  |                     |
| i)  | bbHOME   |                     |
| Other Federal Grants (list below)         |  |                     |

#### **2. Prior Year Federal Grants (unobligated funds only) (list below)**

**3. Public Housing Dwelling Rental Income** 16,596.50

**4. Other income (list below)** 540.00

**4. Non-federal sources** (list below)

**Total resources**        73,529.50

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

[24 CFR Part 903.7 9 (c)]

**A. Public Housing**

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

**(1) Eligibility**

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

- X    When families are within a certain number of being offered a unit: (state number 1)  
      When families are within a certain time of being offered a unit: (state time)
- X    Other: (describe) when there's no waiting list, immediately after receiving application.

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

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

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

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

e. Yes X 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

X Other (describe)  
Benson County Housing Authority administrative office

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

X PHA main administrative office  
PHA development site management office  
Other (list below)

c. If the PHA plans to operate one or more site-based waiting lists in the coming year, answer each of the following questions; if not, skip to subsection **(3) Assignment**

1. How many site-based waiting lists will the PHA operate in the coming year? 1

2. YesX 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 X 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)?

X 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.X Yes No: Is this policy consistent across all waiting list types?

c. If answer to b is no, list variations for any other than the primary public housing waiting list/s for the PHA:

#### **(4) Admissions Preferences**

a. Income targeting:

X 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. bbPreferences

1.X Yes No: Has the PHA established preferences for admission to public housing (other than date and time of application)? (If "no" is selected, skip to subsection **(5) Occupancy**)

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

Former Federal preferences:

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

Other preferences: (select below)

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

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

1 Date and Time

Former Federal preferences:

- 2 Involuntary Displacement (Disaster, Government Action, Action of Housing Owner, Inaccessibility, Property Disposition)
- 3 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. Relationship of preferences to income targeting requirements:

- The PHA applies preferences within income tiers
- X Not applicable: the pool of applicant families ensures that the PHA will meet income targeting requirements

**(5) Occupancy**

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

- X The PHA-resident lease
- The PHA's Admissions and (Continued) Occupancy policy
- X 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)

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

**(6) Deconcentration and Income Mixing**

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

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

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

Adoption of site-based waiting lists

If selected, list targeted developments below:

Employing waiting list “skipping” to achieve deconcentration of poverty or income mixing goals at targeted developments

If selected, list targeted developments below:

Employing new admission preferences at targeted developments

If selected, list targeted developments below:

Other (list policies and developments targeted below)

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

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

Additional affirmative marketing

Actions to improve the marketability of certain developments

Adoption or adjustment of ceiling rents for certain developments

Adoption of rent incentives to encourage deconcentration of poverty and income-mixing

Other (list below)

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

Not applicable: results of analysis did not indicate a need for such efforts

List (any applicable) developments below:

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

Not applicable: results of analysis did not indicate a need for such efforts

List (any applicable) developments below:

## **B. Section 8**

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

### **(1) Eligibility**

- a. What is the extent of screening conducted by the PHA? (select all that apply)
- X Criminal or drug-related activity only to the extent required by law or regulation  
Criminal and drug-related activity, more extensively than required by law or regulation  
More general screening than criminal and drug-related activity (list factors below)  
Other (list below)
- b.X Yes No: Does the PHA request criminal records from local law enforcement agencies for screening purposes?
- c. Yes X No: Does the PHA request criminal records from State law enforcement agencies for screening purposes?
- d. Yes X No: Does the PHA access FBI criminal records from the FBI for screening purposes? (either directly or through an NCIC-authorized source)
- e. Indicate what kinds of information you share with prospective landlords? (select all that apply)
- Criminal or drug-related activity
- X Other (describe below)  
Criminal or drug-related activity will be shared only if applicant/tenant signs a release form and will only be release to the landlord if they request it.

### **(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
- X Federal public housing  
Federal moderate rehabilitation

Federal project-based certificate program  
Other federal or local program (list below)

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

- X PHA main administrative office
- X Other (list below)  
Benson County Social Services

### **(3) Search Time**

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

If yes, state circumstances below:

When the family verifies extenuating circumstances to BCHA's satisfaction or is hard to house family, and can clearly demonstrate that they have made every effort to secure a suitable unit prior to expiration of the 60-day term of voucher. Family has not refused a suitable unit without good cause. And there is a reasonable possibility that the extension of the voucher will result in an approval lease and the execution of Housing Assistance Payments Contract. BCHA will allow a maximum of 1 30 day extension.

### **(4) Admissions Preferences**

a. Income targeting

Yes X 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 X No: Has the PHA established preferences for admission to section 8 tenant-based assistance? (other than date and time of application) (if no, skip to subcomponent **(5) Special purpose section 8 assistance programs**)
2. Which of the following admission preferences does the PHA plan to employ in the coming year? (select all that apply from either former Federal preferences or other preferences)

Former Federal preferences

Involuntary Displacement (Disaster, Government Action, Action of Housing

Owner, Inaccessibility, Property Disposition)  
Victims of domestic violence  
Substandard housing  
Homelessness  
High rent burden (rent is > 50 percent of income)

Other preferences (select all that apply)

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

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

Date and Time

Former Federal preferences

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

Other preferences (select all that apply)

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

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

4. Among applicants on the waiting list with equal preference status, how are applicants selected? (select one)
  - Date and time of application
  - Drawing (lottery) or other random choice technique
  
5. If the PHA plans to employ preferences for “residents who live and/or work in the jurisdiction” (select one)
  - This preference has previously been reviewed and approved by HUD
  - The PHA requests approval for this preference through this PHA Plan
  
6. Relationship of preferences to income targeting requirements: (select one)
  - The PHA applies preferences within income tiers
  - Not applicable: the pool of applicant families ensures that the PHA will meet income targeting requirements

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

- a. In which documents or other reference materials are the policies governing eligibility, selection, and admissions to any special-purpose section 8 program administered by the PHA contained? (select all that apply)
  - The Section 8 Administrative Plan
  - Briefing sessions and written materials
  - Other (list below)
  
- b. bbHow 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)]

##### **ND030f01**

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

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

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

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

a. Use of discretionary policies: (select one)

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

---or---

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

b. Minimum Rent

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

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

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

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

Attachment nd030eo1

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

1. Yes  No: Does the PHA plan to charge rents at a fixed amount or percentage less than 30% of adjusted income?
2. If yes to above, list the amounts or percentages charged and the circumstances under which these will be used below:

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

For the earned income of a previously unemployed household member

For increases in earned income

Fixed amount (other than general rent-setting policy)

If yes, state amount/s and circumstances below:

Fixed percentage (other than general rent-setting policy)

If yes, state percentage/s and circumstances below:

For household heads

For other family members

For transportation expenses

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

Other (describe below)

- e. Ceiling rents

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

- X 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
- X 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)

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

f. Rent re-determinations:

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

- Never
- X At family option
- X Any time the family experiences an income increase
- Any time a family experiences an income increase above a threshold amount or percentage: (if selected, specify threshold)\_\_\_\_\_
- X Other (list below)
- Tenant request a rent review due to a decrease in income, job loss,

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

**(2) Flat Rents**

1.                   bbIn 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
  - X     Survey of similar unassisted units in the neighborhood
  - X     Other (list/describe below)  
          95<sup>th</sup> percentile

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

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

**(1) Payment Standards**

Describe the voucher payment standards and policies.

- a. What is the PHA’s payment standard? (select the category that best describes your standard)
- X     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
  - X     Reflects market or submarket
  - Other (list below)
- c. If the payment standard is higher than FMR, why has the PHA chosen this level? (select all that apply)
- FMRs are not adequate to ensure success among assisted families in the PHA’s

segment of the FMR area  
Reflects market or submarket  
To increase housing options for families  
Other (list below)

d. How often are payment standards reevaluated for adequacy? (select one)  
X Annually  
Other (list below)

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

## **(2) Minimum Rent**

a. What amount best reflects the PHA's minimum rent? (select one)  
\$0  
X \$1-\$25  
\$26-\$50

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

attachment nd030e01

## **5. Operations and Management**

[24 CFR Part 903.7 9 (e)]

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

### **A. PHA Management Structure**

Describe the PHA's management structure and organization.

(select one)

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

is attached.

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

**B. HUD Programs Under PHA Management**

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

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

**Other Federal Programs(list individually)**

**C. Management and Maintenance Policies**

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

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

**(2) Section 8 Management: (list below)**

• **6. bbPHA Grievance Procedures**  
**[24 CFR Part 903.7 9 (f)]**

**Exemptions from component 6: High performing PHAs are not required to complete component 6. Section 8-Only PHAs are exempt from sub-component 6A.**

- **A. 6. bbPublic Housing**
- 1. **Yes X No: Has the PHA established any written grievance procedures in addition to federal requirements found at 24 CFR Part 966, Subpart B, for residents of public housing?**

**If yes, list additions to federal requirements below:**

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

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

- 1. **Yes X No: Has the PHA established informal review procedures for applicants to the Section 8 tenant-based assistance program and informal hearing procedures for families assisted by the Section 8 tenant-based assistance program in addition to federal requirements found at 24 CFR 982?**

**If yes, list additions to federal requirements below:**

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

## **7. Capital Improvement Needs**

**[24 CFR Part 903.7 9 (g)]**

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

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

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

In order to assure the long-term physical and social viability of the low-income public housing owned and operated by BCHA. The BCHA has planned to do the following capital improvement projects over the next twelve months.

Remodel on 3- bedroom house – Project N0. ND030\_ estimated cost \$10,000- completion date- Sept.2000

Interior painting-West Bay Homes- ND030-estimated cost-\$5,000- completion date-Sept.200

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

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

Select one:

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

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

Agencies are encouraged to include a 5-Year Action Plan covering capital work items. This statement can be completed by using the 5 Year Action Plan table provided in the table library at the end of the PHA Plan template **OR BY COMPLETING AND ATTACHING A PROPERLY UPDATED HUD-52834.**

A. X YES NO: IS THE PHA PROVIDING AN OPTIONAL 5-YEAR ACTION PLAN FOR THE CAPITAL FUND? (IF NO, SKIP TO SUB-COMPONENT 7B)

B. IF YES TO QUESTION A, SELECT ONE:

THE CAPITAL FUND PROGRAM 5-YEAR ACTION PLAN IS PROVIDED AS AN ATTACHMENT TO THE PHA PLAN AT ATTACHMENT (STATE NAME ND030B01 CAPITAL FUND

-OR-

X 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)

**OPTIONAL TABLE FOR 5-YEAR ACTION PLAN FOR CAPITAL FUND (COMPONENT 7)**

COMPLETE ONE TABLE FOR EACH DEVELOPMENT IN WHICH WORK IS PLANNED IN THE NEXT 5 PHA FISCAL YEARS. COMPLETE A TABLE FOR ANY PHA-WIDE PHYSICAL OR MANAGEMENT IMPROVEMENTS PLANNED IN THE NEXT 5 PHA FISCAL YEAR. COPY THIS TABLE AS MANY TIMES AS NECESSARY. NOTE: PHAS NEED NOT INCLUDE INFORMATION FROM YEAR ONE OF THE 5-YEAR CYCLE, BECAUSE THIS INFORMATION IS INCLUDED IN THE CAPITAL FUND PROGRAM ANNUAL STATEMENT.

**OPTIONAL 5-YEAR ACTION PLAN TABLES**

**DEVELOPMENT NUMBER DEVELOPMENT NAME  
(OR INDICATE PHA WIDE) NUMBER VACANT UNITS % VACANCIES  
IN DEVELOPMENT**

**ND030**

**BENSON COUNTY HOUSING AUTHORITY 8 45%**

**DESCRIPTION OF NEEDED PHYSICAL IMPROVEMENTS OR MANAGEMENT IMPROVEMENTS ESTIMATED COST PLANNED START DATE  
(HA FISCAL YEAR)**

**REMODEL ONE-THREE BEDROOM UNIT**

**REMODEL 2 APARTMENTS INTO ONE APARTMENT**

**CARPET HALLWAYS/COMMUNITY ROOM**

**PURCHASE 12 STOVES, 12 REFRIGERATORS, AND 12 RANGEHOODS OVER THE NEXT 5 YEARS.**

**REMODEL 1-2 BEDROOM HOUSE**

**CENTRAL AIR UNITS IN FIVE HOUSES WITH NEW FURANCES**

**10,000.00**

**34,000.00**

**13,500.00**

**12,358.50**

9,900.00  
 15,000.0\0 5/1/01  
 05/1/01  
 05/1/03  
 01/1/00  
 Q  
 05/01/04  
 12/33/04  
**TOTAL ESTIMATED COST OVER NEXT 5 YEARS 109,758.50**

**B. HOPE VI AND PUBLIC HOUSING DEVELOPMENT AND REPLACEMENT ACTIVITIES (NON-CAPITAL FUND)**

APPLICABILITY OF SUB-COMPONENT 7B: ALL PHAS ADMINISTERING PUBLIC HOUSING. IDENTIFY ANY APPROVED HOPE VI AND/OR PUBLIC HOUSING DEVELOPMENT OR REPLACEMENT ACTIVITIES NOT DESCRIBED IN THE CAPITAL FUND PROGRAM ANNUAL STATEMENT.

YES X NO: A) HAS THE PHA RECEIVED A HOPE VI REVITALIZATION GRANT? (IF NO, SKIP TO QUESTION C; IF YES, PROVIDE RESPONSES TO QUESTION B FOR EACH GRANT, COPYING AND COMPLETING AS MANY TIMES AS NECESSARY)

b) Status of HOPE VI revitalization grant (complete one set of questions for each grant)

1. Development name:
2. Development (project) number:
3. Status of grant: (select the statement that best describes the current status)

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

Yes X No: c) Does the PHA plan to apply for a HOPE VI Revitalization grant in the Plan year?  
 If yes, list development name/s below:

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

### • **8. Demolition and Disposition**

[24 CFR Part 903.7 9 (h)]

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

1. Yes X No: Does the PHA plan to conduct any demolition or disposition activities (pursuant to section 18 of the U.S. Housing Act of 1937 (42 U.S.C. 1437p)) in the plan Fiscal Year? (If “No”, skip to component 9; if “yes”, complete one activity description for each development.)

#### 2. Activity Description

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

#### **Demolition/Disposition Activity Description**

1a. Development name:

1b. Development (project) number:

2. Activity type: Demolition

Disposition

3. Application status (select one)

Approved

Submitted, pending approval

Planned application

4. Date application approved, submitted, or planned for submission: (DD/MM/YY)

5. Number of units affected:

6. Coverage of action (select one)

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

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

**[24 CFR Part 903.7 9 (i)]**

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

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

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

**Designation of Public Housing Activity Description**

- 1a. Development name:
- 1b. Development (project) number:
- 2. Designation type:
  - Occupancy by only the elderly
  - Occupancy by families with disabilities
  - Occupancy by only elderly families and families with disabilities
- 3. Application status (select one)

Approved; included in the PHA's Designation Plan  
Submitted, pending approval

Planned application

4. Date this designation approved, submitted, or planned for submission: (DD/MM/YY)

5. If approved, will this designation constitute a (select one)

New Designation Plan

Revision of a previously-approved Designation Plan?

• 6. tab Number of units affected:

7. Coverage of action (select one)

Part of the development

Total development

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

**[24 CFR Part 903.7 9 (j)]**

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

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

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

2. Activity Description

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

**Conversion of Public Housing Activity Description**

1a. Development name:

1b. 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: (DD/MM/YYYY)

Conversion Plan approved by HUD on: (DD/MM/YYYY)

Activities pursuant to HUD-approved Conversion Plan underway

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

Units addressed in a pending or approved demolition application (date submitted or approved: )

Units addressed in a pending or approved HOPE VI demolition application (date submitted or approved: )

Units addressed in a pending or approved HOPE VI Revitalization Plan (date submitted or approved: )

Requirements no longer applicable: vacancy rates are less than 10 percent

Requirements no longer applicable: site now has less than 300 units

Other: (describe below)

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

Benson County Housing Authority is not required to complete this section of the Agency Plan

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

Benson County Housing Authority is not required to complete this section of the Agency Plan

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

The Benson County Housing Authority does not operate a Homeownership Program. However, once HUD issues the final regulations covering the new section 32 and Section 8(y) we then might be interested in the program.

**A. Public Housing**

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

2. Activity Description

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

**Public Housing Homeownership Activity Description**

(Complete one for each development affected)

1a. Development name:

1b. Development (project) number:

2. Federal Program authority:

HOPE I

5(h)

Turnkey III

Section 32 of the USHA of 1937 (effective 10/1/99)

3. Application status: (select one)

Approved; included in the PHA’s Homeownership Plan/Program

Submitted, pending approval

Planned application

4. Date Homeownership Plan/Program approved, submitted, or planned for submission:

(DD/MM/YYYY)

• 5. Number of units affected:

6. Coverage of action: (select one)

Part of the development

Total development

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

1. Yes X No: Does the PHA plan to administer a Section 8 Homeownership program pursuant to Section 8(y) of the U.S.H.A. of 1937, as implemented by 24 CFR part 982 ? (If “No”, skip to component 12; if “yes”, describe each program using the table below (copy and complete questions for each program identified), unless the PHA is eligible to complete a streamlined submission due to high performer status. **High performing PHAs** may skip to component 12.)

2. Program Description:

a. Size of Program

Yes No: Will the PHA limit the number of families participating in the section 8 homeownership option?

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

25 or fewer participants

26 - 50 participants

51 to 100 participants

more than 100 participants

b. PHA-established eligibility criteria

Yes No: Will the PHA’s program have eligibility criteria for participation in its Section 8 Homeownership Option program in addition to HUD criteria?

If yes, list criteria below:

### **• 12. PHA Community Service and Self-sufficiency**

#### **Programs**

**[24 CFR Part 903.7 9 (I)]**

**Exemptions from Component 12: High performing and small PHAs are not required to complete this component. Section 8-Only PHAs are not required to complete sub-component C.**

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

**1. Cooperative agreements:**

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

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

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

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

**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)**



**a. Participation Description**

**Family Self Sufficiency (FSS) Participation**

**Program Required Number of Participants**

**(start of FY 2000 Estimate) Actual Number of Participants**

**(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**

**1. The PHA is complying with the statutory requirements of section 12(d) of the U.S. Housing Act of 1937 (relating to the treatment of income changes resulting from welfare program requirements) by: (select all that apply)**

**Adopting appropriate changes to the PHA's public housing rent determination policies and train staff to carry out those policies**

**Informing residents of new policy on admission and reexamination**

**Actively notifying residents of new policy at times in addition to admission and reexamination.**

**Establishing or pursuing a cooperative agreement with all appropriate TANF agencies regarding the exchange of information and coordination of services**

**Establishing a protocol for exchange of information with all appropriate TANF agencies**

**Other: (list below)**

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

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

**[24 CFR Part 903.7 9 (m)]**

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

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

##### **1. Describe the need for measures to ensure the safety of public housing residents (select all that apply)**

- High incidence of violent and/or drug-related crime in some or all of the PHA's developments**
- High incidence of violent and/or drug-related crime in the areas surrounding or adjacent to the PHA's developments**
- Residents fearful for their safety and/or the safety of their children**
- Observed lower-level crime, vandalism and/or graffiti**
- People on waiting list unwilling to move into one or more developments due to perceived and/or actual levels of violent and/or drug-related crime**
- Other (describe below)**

##### **2. What information or data did the PHA used to determine the need for PHA actions to improve safety of residents (select all that apply).**

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

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

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

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

Contracting with outside and/or resident organizations for the provision of crime- and/or drug-prevention activities

Crime Prevention Through Environmental Design

Activities targeted to at-risk youth, adults, or seniors

Volunteer Resident Patrol/Block Watchers Program

Other (describe below)

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

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

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

Police involvement in development, implementation, and/or ongoing evaluation of drug-elimination plan

Police provide crime data to housing authority staff for analysis and action

Police have established a physical presence on housing authority property (e.g., community policing office, officer in residence)

Police regularly testify in and otherwise support eviction cases

Police regularly meet with the PHA management and residents

Agreement between PHA and local law enforcement agency for provision of above-baseline law enforcement services

Other activities (list below)

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

**D. Additional information as required by PHDEP/PHDEP Plan**

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

Yes X No: Is the PHA eligible to participate in the PHDEP in the fiscal year covered by this PHA Plan?

Yes X No: Has the PHA included the PHDEP Plan for FY 2000 in this PHA Plan?

Yes X No: This PHDEP Plan is an Attachment. (Attachment Filename: \_\_\_\_\_)

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

**[24 CFR Part 903.7 9 (n)]ND030g01 Pet Policy Attachment ND030g01**

#### **15. Civil Rights Certifications**

**[24 CFR Part 903.7 9 (o)] a**

**ATTACHEMENT ND030h01**

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

#### **16. Fiscal Audit**

**[24 CFR Part 903.7 9 (p)]**

**1. Yes X 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. X Yes No: Was the most recent fiscal audit submitted to HUD?**

**3. Yes X No: Were there any findings as the result of that audit?**

**4. Yes No: If there were any findings, do any remain unresolved?**  
**If yes, how many unresolved findings remain?**

**5. Yes No: Have responses to any unresolved findings been submitted to HUD?**  
**If not, when are they due (state below)?**

#### **17. PHA Asset Management**

**[24 CFR Part 903.7 9 (q)]**

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

**1. Yes No: Is the PHA engaging in any activities that will contribute to the long-**

term asset management of its public housing stock , including how the Agency will plan for long-term operating, capital investment, rehabilitation, modernization, disposition, and other needs that have not been addressed elsewhere in this PHA Plan?

- 2. 0 12. 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. X 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)

X Attached at Attachment (File name) ND030c01  
Provided below:

3. In what manner did the PHA address those comments? (select all that apply)

X 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) only two residents showed up and both refused to accept any duties of being on the board. 8/13/99

b. Eligible candidates: (select one)

Any recipient of PHA assistance

Any head of household receiving PHA assistance

Any adult recipient of PHA assistance

Any adult member of a resident or assisted family organization

Other (list)

c. Eligible voters: (select all that apply)

All adult recipients of PHA assistance (public housing and section 8 tenant-based assistance)

Representatives of all PHA resident and assisted family organizations

Other (list)

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

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

1. Consolidated Plan jurisdiction: (provide name here)

1999 Region 3 State of ND

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

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

Other: (list below)

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

**D. Other Information Required by HUD**

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

**Attachments**

**ND030B01-Capital Fund**

**Annual Statement**

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

| Development Account Number      | General Description of Major Work Categories | Development Number/Name<br>HA-Wide Activities | Total<br>Estimated |
|---------------------------------|--|---|--------------------|
| Cost                            |  |   |                    |
| ND030 Interior painting 1460    | 5,000.00                                     |   |                    |
| ND030 Remodel one-three bedroom | 1460   | 10,000.00                                     |                    |
|                                 |  | ND030   |                    |

Purchase 5, stoves, 5 refrigerators, 5 range hoods, microwave  
5,500.00

1460

### ND030c01 (RESIDENT ADVISORY MEETING)

*The Benson County Housing Authority met September 7, 1999 for the Resident Advisory Board. Letters were mailed out to all PHA' residents and Certificate and Voucher holders.*

Dimo Christianson and Ruby Burgess were the only two out of the PHA that signed up to participate. Discussion of annual plan and five- year plan.

Dimo Christianson indicated that carpet replacing should be considered for the first year of modernization. Dimo also indicated that the houses should be sold and money from the sale should go back into the apartments. Change the apartments into 2 bedroom apartments. Dimo indicated that the apartments are too small and people in the community have indicated to her that no one wants to live at West Bay because of lack of space. Dimo is on the senior club and solicits West Bay Homes.

Ruby Burgess requested the halls to be painted. Ruby indicated that the hallways, bathrooms, and community room has not been painted since she moved in and that was in 1972.

Executive Director went over Pet policy, parking policy, Tenant chargeable items. Then the Executive Director went over rent collection, eligibility requirements in the Admission and Occupancy Plan. Discussion on Rent- Concerns of rent increases

Tenants were concerned about the approval of pets. Discussion on what the PHA will allow and not allowed.

Discussion on the Housing needs for the county. Both residents indicated that two bedroom is a need in our community.

Both residents indicated that the community center in the Minnewaukan area should be handicapped accessible.

Both residents indicated that the vacancy problem would be eliminated if we could rent to over income person(s).

Both residents at this time will not accept any position on the Housing Authority Board.

Resident Kelly Armentrout called and indicated she would be interested in purchasing the 3- bedroom unit. Discussed Housing needs for our community and Kelly indicated 2 bedroom units are in high demand for our town.

#### ND030d01(NEEDS ASSESSMENT)

The Quality Housing and Work Responsibility Act of 1998 requires housing authorities to set forth in our Annual Plan a Needs Assessment of the Housing needs of our jurisdiction and our waiting list. We then are required to state how we intend to address those needs.

Housing Authority of Benson County has determined the housing needs in Benson County based on the State of North Dakota Consolidated Plan and the most recent census data (1990). The BCHA also consulted the Public Housing and Section 8 waiting list and past rental experience to determine the following needs:

- 1. . Continue need of funds to provide rental assistance for low-income families.
- 2. . Increase affordable housing with two or more bedrooms.
- 3. . Handicapped accessible units.

Currently Benson County Housing Authority has determined that the housing needs for low-income and very-low income families (including elderly families and families with disabilities on the Housing Authority's waiting list

is as follows:

**Non-elderly Families**

|                         | 1br | 2br                  | 3br |
|-------------------------|-----|----------------------|-----|
| Extremely low<br>Race   | 0   | 1<br>White           | 0   |
| Low-income<br>Race      | 0   | 1<br>Native American | 0   |
| Moderate income<br>Race | 0   | 1<br>White           | 0   |

**Elderly Families**

|                    |   |            |   |
|--------------------|---|------------|---|
| Extremely low      | 0 | 0          | 0 |
| Low-income<br>Race | 0 | 1<br>White | 0 |
| Moderate income    | 0 | 0          | 0 |

The waiting list site is based at West Bay Homes, 201 Main Street W, Minnewaukan, ND. The BCHA waiting list has two separated lists one for Section 8 and one for public housing.

Benson County Housing Authority's will improve the marketing outreach for the Public Housing and Section 8 program. We will take extra steps to inform the public on our services.

**ND030e01(Housing Authority of the Benson County)**

**Minimum Rent Hardship Exemption Request Guidelines for Tenants**

Any resident Head of Household that is paying a minimum rent, which is \$25.00, may make a written request for a hardship exemption (**Note: This hardship exemption only applies to residents that are paying a minimum rent and does not apply to any other resident household**). The **written** request must be submitted to the Office prior to the rent becoming delinquent, which is prior to close of business the [10<sup>th</sup> of each month. The written request must

contain one of the following situations to be considered eligible for a hardship exemption, which includes:

1. The family has lost eligibility for, or is awaiting an eligibility determination from a federal, state, or local assistance program, including a family that includes a member who is an alien lawfully admitted for permanent residence under the immigration and nationalization act who would be entitled to public benefits but for Title IV of the Personal Responsibility and Work Opportunity Reconciliation Act of 1996.
2. The family would be evicted as a result of the implementation of the minimum rent. This exemption is only applicable for the initial implementation of a minimum rent or increase in the existing minimum rent. The effective date of the initial implementation of the minimum rent for the Housing Authority was adopted on 9-25-97 and the minimum rent was established at \$25.00. Therefore, this exemption will only apply if the HA increases the minimum rent.
3. The income of the family has decreased because of changed circumstance, including loss of employment.
4. A death in the family has occurred which affects the family circumstances.
5. If section 1 through 4 as listed above do not apply to a family paying a minimum rent, the Head of Household can cite any other circumstance that they believe created a financial hardship and describe that circumstance, in writing, and request that a hardship exemption be granted because of other circumstances. The HA will consider all "other circumstances" requests for hardship exemptions as presented, in writing, by the Head of Household and make a decision to grant or deny the other circumstances request for a hardship exemption on a case by case basis.

All of the above must be proven by the Tenant by providing verifiable information in writing to the HA prior to the rent becoming delinquent and before the lease is terminated by the HA.

**Note:**

**If you request a minimum rent hardship exemption and your request is approved your new rent amount will be based on the decision reached and a new dwelling lease will have to be executed. Calculating rent based on the TTP is required by federal regulation and is the method used to calculate rent for all public housing residents that are not paying a minimum rent or ceiling rent, as appropriate.**

Head of Household

Date

## Housing Authority of the Benson County

### Minimum Rent Hardship Exemption Approval/Denial Guidelines

Each Head of Household that is paying or starts paying a minimum rent must be given the “Minimum Rent Hardship Exemption Request Guidelines for Tenants” and this document must be signed by the resident Head of Household and Housing Manager. The document must be explained to the resident, prior to signing. The original is to be retained in the resident file and a copy given to the resident.

If a Head of Household submits a written request for a hardship exemption from paying a monthly minimum rent, which is \$25.00, and the request complies with sections 1 through 4 of the “Minimum Rent Hardship Exemption Request Guidelines for Tenants” the request shall be approved.

If the request for a hardship exemption is based on other circumstances as noted in section 5 of the “Minimum Rent Hardship Exemption Request Guidelines for Tenants”, the request must be forwarded to the [*Executive Director, Board of Commissioners, Committee, Hearing Committee*] for approval or denial. The [*Executive Director, Board of Commissioners, Committee, Hearing Committee*] will make a decision to approve or deny the request based on the merits and circumstances of each individual request. Also, the [*Executive Director, Board of Commissioners, Committee, Hearing Committee*] will establish a file for all “other circumstances” request for hardship exemptions to ensure that all decisions made concerning “other circumstances” are consistent. The names of the residents will be stricken from the file to ensure privacy of the Tenant.

All requests for hardship exemptions must be received prior to the rent becoming delinquent, which is before close of business on the 10<sup>th</sup> of each month. Also, it is the responsibility of the Head of Household to provide documentation that supports the hardship request and the information must be verifiable and provided prior to the rent becoming delinquent. However, an extension can be granted until the [20<sup>th</sup>] of the month if the Head of Household requests extra time to obtain the information to document their request, which may be necessary in some circumstances.

If the Head of Household request a hardship exemption timely, late penalties will not be charged. If a request is approved and/or denied the resident will be notified in writing of the decision. The decision must be issued within 10 calendar days of receipt of the request and/or within 10 calendar days of receiving the documentation necessary to support the hardship exemption request. The resident must be notified in the letter that if there is a change in circumstances that relieves the hardship, those circumstances must be reported to the Central Office within ten (10) calendar days of the changed circumstances as required by the Section 4 of the dwelling lease. Failure to report changes will result in termination of dwelling lease.

# Housing Authority of the Benson County

## Minimum Rent Hardship Exemption Approval/Denial Guidelines *Continued*

Also, if a resident requests a hardship exemption (**prior to the rent being delinquent, which is the 10<sup>th</sup>** under this section, and the Housing Authority reasonably determines the hardship to be of a temporary nature, exemption shall not be granted during a 90-day period beginning upon the making of the request for the exemption. A resident may not be evicted during the 90-day period for non-payment of rent. In such a case, if the resident thereafter demonstrates that the financial hardship is of a long term basis, the HA shall retroactively exempt the resident from the applicability of the minimum rent requirement for such ninety day period and reduce the account receivable as appropriate. This Paragraph does not prohibit the HA from taking eviction action for other violations of the lease.

During the exemption period, the rent will be reduced to the appropriated tenant payment, which represents the regulatory amount of rent calculated for all public housing residents.

The following language must be used in the letters of (1) acceptance, (2) temporary determination and (3) denial of a request for a hardship exemption:

### **Acceptance Letter:**

The purpose of this letter is to inform you that your request for a minimum rent hardship exemption is approved. During the exemption period your rent will be \_\_\_\_\_, which represents your total tenant payment (TTP). Calculating rent based on the TTP is required by federal regulation and is the method used to calculate rent for all public housing residents that are not paying a minimum rent or ceiling rent, as appropriate. Also, you will be responsible for paying for any applicable "other charges" which may be incurred during the exemption period. Some examples of "other charges", would be excess utilities and/or maintenance charges.

The action requires that a new dwelling lease be executed; therefore, an appointment for the signing of a new dwelling lease has been scheduled for \_\_\_\_\_.

As required by Section 4 of the dwelling lease you are reminded that you must report any changes in family income or family composition within ten (10) days of the changed circumstances as required by Section 4 of the dwelling lease. Failure to report such changes will result in termination of your dwelling lease.

If you have any questions concerning this letter or need to reschedule your appointment to sign

the new dwelling lease, please contact the Housing Manager at 473-5671.

## **Housing Authority of the Benson**

### **Minimum Rent Hardship Exemption Approval/Denial Guidelines *Continued***

#### **Temporary Denial Letter:**

The purpose of this letter is to inform you that your request for a minimum rent hardship exemption is denied because it has been determined that your situation is of a temporary nature. From the date of this letter, an exemption shall not be granted for a 90-day period; however, you will not be evicted during this period for non-payment of rent. Please note that the decision not to evict for non-payment of rent does not prevent the Housing Authority from filing an eviction action of any other lease violation. You must comply will all other provisions of your dwelling lease.

During the 90-day period your rent and, if applicable, other charges are due and payable on the *[first]*, of each month; however, you will not be charged any late fees during this 90-day period, which ends on \_\_\_\_\_[date]\_\_\_\_\_. Also, at any time during this 90-day period you can demonstrate that the financial hardship is of a long term basis and not temporary, the Housing Authority shall retroactively exempt the applicable minimum rent and your account adjusted to the appropriate amount of rent due based on calculating your total tenant payment from the date of your original request to be approved for a minimum rent hardship exemption.

In accordance with the Housing Authorities grievance procedure, you may request an **informal** settlement within five (5) business days from the date of the mailing of this adverse action if you do not agree with the decision. The request for an informal settlement can be made at this office orally or in writing.

If you have any questions concerning this letter, please contact the Housing Manager at 473-5671.

#### **Denial Letter:**

The purpose of this letter is to deny your request for a hardship exemption from paying minimum rent. Your request did not meet the requirements for granting a hardship exemption from paying a minimum rent as outlined in the "Minimum Rent Hardship Exemption Request Guidelines for Tenants", which you signed on \_\_\_\_\_.

In accordance with the Housing Authorities grievance procedure, you may request an **informal** settlement within five (5) business days for the date of the mailing of this adverse action if you do not agree with the decision. The request for an informal settlement can be made at this office orally or in writing. If you grieve this decision your dwelling lease will not be terminated during the time period of the grievance procedure. Also, you will not be charged late fees during the grievance period.

If you have any questions concerning this letter, please contact the Housing Manager at 473-5671.

### ND030f01 Statement of PHA's of Rent Determination

The Benson County Housing Authority has included with its Annual Plan the following policies:

#### WEST BAY HOMES Effective 4/1/99 – Rent

|                      |  |
|----------------------|--|
| 1 bedroom Apartments | 30% of income or flat Rent of \$150.00 |
| 2 bedroom House      | 30% of income or flat Rent of \$279.00 |
| 3 bedroom House      | 30% of income or flat Rent of \$249.00 |

This determination was based on the 95<sup>th</sup> Percentile rent and was sent to HUD for final approval 4/1/99. 8

MINIMUM RENT for PHA & Section 8 is \$25.00SECTION 8

Rent for vouchers will be based on the appropriate standards within 90-110% of the Fair Market Rent for all bedroom sizes. The Fair Market Rent is published at least annually and payment standards will be changed accordingly.

**ND030g01**

**Addendum to Lease**  
**Pet Policy**

|               |                  |        |
|---------------|------------------|--------|
| Tenant's Name | Type of Pet      |        |
| Address       | Age              |        |
| Telephone     | Weight           | Height |
| VET           | Vaccination Date |        |

The purpose of Benson County Housing Authority Pet Policy is to insure that those Tenants who desire pets are responsible pet owners, and that those Tenants who do not desire pets are not inconvenienced by pets on the premises. It also intended to assure that pets on premises are properly cared for. Further goals of this policy are to assure a decent, safe, sanitary living environment for existing and prospective tenants, and to protect and preserve the physical condition of the premises and the financial interest of the Benson County Housing Authority in the premises.

The following RULES are established to govern the keeping of pets in dwelling units owned and operated by the Benson County Housing Authority (BCHA).

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

**OWNING A PET WITHIN BENSON COUNTY HOUSING AUTHORITY'S PROPERTIES IS A PRIVILEGE THAT MUST NOT BE ABUSED.**

- 1) Maximum number of one pet, one birdcage or one aquarium is allowed.
- 2) Permitted pets are one dog; one cat; one bowl or tank of fish; two caged birds (parakeets or canaries only); or one small caged animal (i.e. rabbit or guinea pig or hamster or gerbil).  
Any exceptions are subject to the judgement of the Executive Director.

- 3) Dogs and cats must weigh no more than twenty pound (20) pounds. The management will have the right to check weight of all pets when introduced in the unit and during their stay. Aquariums may be no larger than 20 gallons.
- 4) Dogs and Cats are to be licensed yearly with the proper authorities, Tenants must show proof yearly at tenants recertification of distemper and rabies boosters.
- 5) All dogs and Cats are to be spayed/neutered. If such animals are not spayed/neutered and have offspring, the Tenant is in violation of this rule. The tenant may refuse to have a pet properly neutered and the pet becomes disruptive (howling, odors, spraying, etc.) this becomes a violation of this policy.
- 6) Housing Authority strongly recommends cats front claws removed (de-clawed).
- 7) No pet may be kept in violation of humane or health laws.
- 8) All adult dogs must be housebroken.
- 9) Dogs and cats shall remain inside a Tenant's unit unless they are carried by owner or on a leash no longer than 6 feet. Pets shall use the common areas only when entering or existing. They may not roam at will.
- 10) Cats are to use litter boxes kept in Tenant's premises. Only commercial cat litter is allowed. Tenant is not allowed to let waste accumulate. Waste must be contained within plastic bags or similar wrappings before being disposed of in the proper receptacles in a sanitary manner in garbage room. **LITTER MUST NOT BE FLUSHED DOWN TOILETS, SINKS OR TUBS.**
- 10) Tenants are responsible for promptly cleaning up droppings, if any, outside the unit, and properly disposing of said droppings. This is including parking lot areas & sidewalks. A separate waste removal of \$5.00 per occurrence will be imposed on pet owners that fail to remove droppings in accordance with the prescribed rules in this policy.
- 11) Tenants shall take adequate precautions to eliminate any pet odors within in or around the unit as maintain unit in a sanitary condition at all times.
- 12) Tenants shall not permit any disturbance by their pet, which would interfere with the peaceful enjoyment of accommodations by other Tenants, weather by loudness, biting, scratching, chirping, or other such activities.
- 13) Pets shall be appropriately and effectively restrained under the control of responsible owner while outside the dwelling unit.
- 14) Periodic inspections will be done on an as needed basis.
- 15) If the pets are left unattended for 24 hours or more the Housing Authority

may enter to remove the pet and transfer it to the proper authorities. The Housing Authority accepts no responsibility for the pet under such circumstances.

- 16) Tenants shall not alter their unit, or unit area to create any enclosure for an animal.
- 17) The Tenant is responsible for arranging disposal of any dead pet. The remains of the pet must be removed from BCHA property.
- 18) Tenants are responsible for all damages caused by pet to the unit or any property owned by BCHA in excess of the security deposit whether the damages are within the apartment or outside on the grounds including any part of the building. This includes furniture and shrubbery, walls, windows, rugs, etc.
- 19) Tenants are prohibited from feeding stray animals. The feeding of stray animals shall constitute having a pet without permission of the Housing Authority.
- 20) Guests may not bring their pets onto Benson County Housing Authority property at any time.
- 21) Tenants shall pay a damage deposit for their pet as follow. \$200.00 for cat or dog, \$50.00 for any other allowed pet. Subsequent monthly payments of \$10.00 shall be paid until the amount of the deposit is reached. This deposit is in addition to any other financial obligations generally imposed on tenants by terms of their leases. The BCHA will use the pet deposit only to pay reasonable expenses directly attributable to the presence of the pet in the project, including (but not limited to) the cost of repairs and replacements to, and fumigation of, the tenant's apartment/house. The Housing Authority will refund any unused portion of the pet deposit to the tenant within 30 days.
- 22) The pet owner must pay the full fees of professional rug shampooing, deodorizing and/or defeating of the apartment.
- 23) If a pet jumps on growls at, or bites a Tenant or visitor, the pet may be removed immediately at the discretion of the Executive Director.
- 24) Pets need love, proper food, fresh water, professional health care and good grooming. Dogs require walking as needed.
- 25) Tenants who violate these rules are subject to;
  - a. Being requested to get rid of the pet within 30 days of notice by Housing Authority; and /or
  - b. Eviction

In case of emergency or illness, the following person will remove my pet from my apartment/house and will be responsible for its care:

Name & Relationship \_\_\_\_\_

Responsible Persons Signature \_\_\_\_\_

I have read and understand the above regulations regarding pets and agree to conform to same.

\_\_\_\_\_  
Tenant's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Witness Signature

\_\_\_\_\_  
Date

Resolution 75 Adopted 11/14/85

Revised 8/1/99

## **ND030h01 (CIVIL RIGHTS CERTIFICATION)**

The Benson County Housing Authority does hereby agree and certify that it will carry out this agency plan in compliance with all applicable civil rights requirements and will affirmatively further fair housing. In particular, we will comply with title VI of the Civil Rights Act of 1964, the Fair Housing Act, Section 502 of the Rehabilitation Act of 1973, and title II of the American with Disabilities Act of 1990.

Melissa Buckmier Executive Director 11/7/99

## **ND030 I01 (DEMOLITION AND DISPOSITION)**

The city of Minnewaukan is being threatened by the rise of Devils Lake. The National Flood Insurance Program have created the Area of Special Consideration (ASC) includes shoreline and future shoreline between the lake levels of 1447 mean feet above sea level and 1460 msl. West Bay Homes and the five Family units are all under the elevation of 1460. Property owners within the ASC are allowed to make a claim on an insured structure prior to its inundation and use the salvage amount to move their units. If the water continues to rise the Benson County Housing Authority board of directors have discussed the future of only the family units to be moved or sold.

If the lake continues to rise and threatens the city of Minnewaukan and West Bay Homes cannot fully operate. PHA will then look into disposition or demolition of West Bay Homes. At this time HUD is fully aware of the situation and understand that BCHA might have to propose demolish, dispose, or relocate one or more units. BCHA will then submit application to do so.

# PHA Plan Table Library

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

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

Capital Fund Grant Number ND06P030001 FFY of Grant Approval: (10/99)

X Original Annual Statement

| Line No. | Summary by Development Account                            | Total Estimated Cost |
|----------|---|----------------------|
| 1        | Total Non-CGP Funds                                       |                      |
| 2        | 1406 Operations   |                      |
| 3        | 1408 Management Improvements                              |                      |
| 4        | 1410 Administration                                       |                      |
| 5        | 1411 Audit  |                      |
| 6        | 1415 Liquidated Damages                                   |                      |
| 7        | 1430 Fees and Costs                                       |                      |
| 8        | 1440 Site Acquisition                                     |                      |
| 9        | 1450 Site Improvement                                     |                      |
| 10       | 1460 Dwelling Structures                                  | 37,594               |
| 11       | 1465.1 Dwelling Equipment-Nonexpendable                   |                      |
| 12       | 1470 Nondwelling Structures                               |                      |
| 13       | 1475 Nondwelling Equipment                                |                      |
| 14       | 1485 Demolition   |                      |
| 15       | 1490 Replacement Reserve                                  |                      |
| 16       | 1492 Moving to Work Demonstration                         |                      |
| 17       | 1495.1 Relocation Costs                                   |                      |
| 18       | 1498 Mod Used for Development                             |                      |
| 19       | 1502 Contingency  |                      |
| 20       | <b>Amount of Annual Grant (Sum of lines 2-19)</b>         | <b>37,594</b>        |
| 21       | Amount of line 20 Related to LBP Activities               |                      |
| 22       | Amount of line 20 Related to Section 504 Compliance       |                      |
| 23       | Amount of line 20 Related to Security                     |                      |
| 24       | Amount of line 20 Related to Energy Conservation Measures |                      |





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

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

All Funds Expended  
(Quarter Ending Date)



## **Optional Public Housing Asset Management Table**

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

### **Public Housing Asset Management**

#### **Development Identification Activity Description**

Name,

Number, and

Location

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

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