

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

PHA Plans

5 Year Plan for Fiscal Years 2000 - 2004

Annual Plan for Fiscal Year 2000

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

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

**PHA Plan
Agency Identification**

PHA Name: Rock Island Housing Authority

PHA Number: IL 018

PHA Fiscal Year Beginning: (mm/yyyy) 10/2001

Public Access to Information

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

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

Display Locations For PHA Plans and Supporting Documents

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

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

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

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

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

A. Mission

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

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

The **Mission of the Rock Island Housing Authority** is to:
Provide Affordable, Quality Housing Opportunities for Low/Moderate Income Population and Encourage Housing Self-Sufficiency.

B. Goals

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

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

- PHA Goal: Expand the supply of assisted housing
Objectives:
- Apply for additional rental vouchers:
 - Reduce public housing vacancies:
 - Leverage private or other public funds to create additional housing opportunities:
 - Acquire or build units or developments
 - Other (list below)
- PHA Goal: Improve the quality of assisted housing
Objectives:
- Improve public housing management: (PHAS score)

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

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

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

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

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

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

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

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

Other PHA Goals and Objectives: (list below)

Goals and Objectives

Rock Island Housing Authority

- Safe, well maintained housing units
- Effective organization with measured performance
- Solid, credible financial condition
- Full occupancy of units
- Positive image: within community, within Quad Cities

Annual Goals

Top Priority

- Multi year financial plan
- Agency Plan: development and adoption
- Residential involvement: evaluation and action
- Marketing/image program
- Performance measures for organization
- Employee/management evaluation and action plan

High Priority

- Warehouse: evaluation and direction
- Occupancy: evaluation and short term action plan
- Revenue generation: short term plan

Annual PHA Plan
PHA Fiscal Year 2000

[24 CFR Part 903.7]

i. Annual Plan Type:

Select which type of Annual Plan the PHA will submit.

Standard Plan

Streamlined Plan:

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

Troubled Agency Plan

ii. Executive Summary of the Annual PHA Plan

[24 CFR Part 903.7 9 (r)]

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

The purpose of the Agency Plan is to empower and equip the PHA to exercise optimum flexibility in meeting local housing needs within the community while meeting its own needs. The Agency Plan contains a FY-2002-FY-2006 Five-Year Plan that includes the Authority's mission and long range goals and objectives. The FY-2001 Annual Plan addresses the Authority's immediate operations, current policies, program participants, programs and services, and the PHA's strategy for handling operational concerns, resident concerns and needs, and programs and services for the upcoming fiscal year. The Agency Plan outlines the PHA's efforts in meeting the needs of the low and very-low income population in its community and effectively serves as a management, operational and accountability tool for the PHA.

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

This Agency Plan contains a FY-2002 - FY-2006 Five-Year Plan (mission, goals and objectives) and a FY2002 Annual Plan. Each section in the Agency Plan is preceded by a title page. An Annual Plan and/or update of the Agency Plan will be submitted to HUD at least 75 days before the start of the succeeding fiscal year.

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.

Table of Contents

	<u>Page #</u>
Annual Plan	<u>Page #</u>
i. Executive Summary	1
ii. Table of Contents	2
1. Housing Needs	3
2. Financial Resources	4
3. Policies on Eligibility, Selection and Admissions	5
4. Rent Determination Policies	6
5. Operations and Management Policies	7
6. Grievance Procedures	8
7. Capital Improvement Needs	9
8. Demolition and Disposition	10
9. Designation of Housing	11
10. Conversions of Public Housing	12
11. Homeownership	13
12. Community Service Programs	14
13. Crime and Safety	15
14. Pets Ownership	16
15. Civil Rights Certifications (included with PHA Plan Certifications)	17
16. Annual Audit	18
17. Asset Management Plan	19
18. Statement and Certifications	20

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 2001 Capital Fund Program Annual Statement
- Most recent board-approved operating budget (Required Attachment for PHAs that are troubled or at risk of being designated troubled ONLY)

Optional Attachments:

- PHA Management Organizational Chart
- FY 2000 Capital Fund Program 5 Year Action Plan
- Public Housing Drug Elimination Program (PHDEP) Plan (IL018b01)

- Comments of Resident Advisory Board or Boards (must be attached if not included in PHA Plan text)
- Other (List below, providing each attachment name)

Supporting Documents Available for Review

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

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

List of Supporting Documents Available for Review

Applicable & On Display	Supporting Document	Applicable Plan Component
		Policies
X	Public Housing Deconcentration and Income Mixing Documentation: 1. PHA board certifications of compliance with deconcentration requirements (section 16(a) of the US Housing Act of 1937, as implemented in the 2/18/99 <i>Quality Housing and Work Responsibility Act Initial Guidance; Notice</i> and any further HUD guidance) and 2. Documentation of the required deconcentration and income mixing analysis	Annual Plan: Eligibility, Selection, and Admissions Policies
X	Public housing rent determination policies, including the methodology for setting public housing flat rents <input checked="" type="checkbox"/> check here if included in the public housing A & O Policy	Annual Plan: Rent Determination
X	Schedule of flat rents offered at each public housing development <input checked="" type="checkbox"/> check here if included in the public housing A & O Policy	Annual Plan: Rent Determination
X	Section 8 rent determination (payment standard) policies <input checked="" type="checkbox"/> check here if included in Section 8 Administrative Plan	Annual Plan: Rent Determination
X	Public housing management and maintenance policy documents, including policies for the prevention or eradication of pest infestation (including cockroach infestation)	Annual Plan: Operations and Maintenance
X	Public housing grievance procedures <input checked="" type="checkbox"/> check here if included in the public housing A & O Policy	Annual Plan: Grievance Procedures
X	Section 8 informal review and hearing procedures <input checked="" type="checkbox"/> check here if included in Section 8 Administrative Plan	Annual Plan: Grievance Procedures
X	The HUD-approved Capital Fund/Comprehensive Grant Program Annual Statement (HUD 52837) for the active grant year	Annual Plan: Capital Needs
	Most recent CIAP Budget/Progress Report (HUD 52825) for any active CIAP grant	Annual Plan: Capital Needs
X	Most recent, approved 5 Year Action Plan for the Capital Fund/Comprehensive Grant Program, if not included as an attachment (provided at PHA option)	Annual Plan: Capital Needs
	Approved HOPE VI applications or, if more recent, approved or submitted HOPE VI Revitalization Plans or any other approved proposal for development of public housing	Annual Plan: Capital Needs

List of Supporting Documents Available for Review		
Applicable & On Display	Supporting Document	Applicable Plan Component
	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
X	Policies governing any Section 8 Homeownership program <input checked="" type="checkbox"/> check here if included in the Section 8 Administrative Plan	Annual Plan: Homeownership
	Any cooperative agreement between the PHA and the TANF agency	Annual Plan: Community Service & Self-Sufficiency
	FSS Action Plan/s for public housing and/or Section 8	Annual Plan: Community Service & Self-Sufficiency
	Most recent self-sufficiency (ED/SS, TOP or ROSS or other resident services grant) grant program reports	Annual Plan: Community Service & Self-Sufficiency
X	The most recent Public Housing Drug Elimination Program (PHEDEP) semi-annual performance report for any open grant and most recently submitted PHDEP application (PHDEP Plan)	Annual Plan: Safety and Crime Prevention
X	The most recent fiscal year audit of the PHA conducted under section 5(h)(2) of the U.S. Housing Act of 1937 (42 U. S.C. 1437c(h)), the results of that audit and the PHA's response to any findings	Annual Plan: Annual Audit
	Troubled PHAs: MOA/Recovery Plan	Troubled PHAs
	Other supporting documents (optional) (list individually; use as many lines as necessary)	(specify as needed)

1. Statement of Housing Needs

[24 CFR Part 903.7 9 (a)]

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

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

being “severe impact.” Use N/A to indicate that no information is available upon which the PHA can make this assessment.

Housing Needs of Families in the Jurisdiction by Family Type							
Family Type	Overall	Afford- ability	Supply	Qualit y	Access -ibility	Size	Loca- tion
Income <= 30% of AMI	2102	5	4	5	N/A	N/A	N/A
Income >30% but <=50% of AMI	1060	5	4	4	N/A	N/A	N/A
Income >50% but <80% of AMI	1186	2	N/A	2	N/A	N/A	N/A
Elderly	3498	4	N/A	N/A	N/A	N/A	N/A
Families with Disabilities	N/A	5	4	N/A	5	N/A	N/A
Black	N/A	5	N/A	N/A	N/A	N/A	N/A
Hispanic	N/A	5	N/A	N/A	N/A	N/A	N/A

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

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

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

State the housing needs of the families on the PHA’s waiting list/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
--

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	369		178
Extremely low income <=30% AMI	333	90.24%	
Very low income (>30% but <=50% AMI)	27	7.32%	
Low income (>50% but <80% AMI)	9	2.44%	
Families with children	286	77.51%	
Elderly families	4	1.08%	
Families with Disabilities	46	12.47%	
Black	217	58.81%	
White	118	31.98%	
Hispanic	26	7.05%	
Other	8	2.16%	
Characteristics by Bedroom Size (Public Housing Only)			
1BR	85	43.15%	57.94%
2 BR	58	29.44%	23.02%
3 BR	48	24.36%	15.08%
4 BR	6	3.05%	3.96%
5 BR	0		
5+ BR	0		

Housing Needs of Families on the Waiting List

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

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

Select all that apply

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

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

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

Select all that apply

- Exceed HUD federal targeting requirements for families at or below 30% of AMI in public housing
- Exceed HUD federal targeting requirements for families at or below 30% of AMI in tenant-based section 8 assistance
- Employ admissions preferences aimed at families with economic hardships
- Adopt rent policies to support and encourage work
- Other: (list below)

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)
Affirmatively market to local non-profit agencies that assist elderly families.

Need: Specific Family Types: Families with Disabilities

Strategy 1: Target available assistance to Families with Disabilities:

Select all that apply

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

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

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

Select if applicable

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

Strategy 2: Conduct activities to affirmatively further fair housing

Select all that apply

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

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

(2) Reasons for Selecting Strategies

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

- Funding constraints
- Staffing constraints
- Limited availability of sites for assisted housing
- Extent to which particular housing needs are met by other organizations in the community

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

2. Statement of Financial Resources

[24 CFR Part 903.7 9 (b)]

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

Financial Resources: Planned Sources and Uses		
Sources	Planned \$	Planned Uses
1. Federal Grants (FY 2000 grants)		
a) Public Housing Operating Fund	\$1,350,000.00	
b) Public Housing Capital Fund	\$1,202,643.00	
c) HOPE VI Revitalization		
d) HOPE VI Demolition		
e) Annual Contributions for Section 8 Tenant-Based Assistance	\$ 725,000.00	
f) Public Housing Drug Elimination Program (including any Technical Assistance funds)	\$ 126,073.00	
g) Resident Opportunity and Self-Sufficiency Grants		
h) Community Development Block Grant		
i) HOME		
Other Federal Grants (list below)		
2. Prior Year Federal Grants (unobligated funds only) (list below)		
FY 1999 CGD 709	\$ 327,753.00	
FY 1999 PHDEP	\$ 17,024.00	

Financial Resources: Planned Sources and Uses		
Sources	Planned \$	Planned Uses
3. Public Housing Dwelling Rental Income	\$ 870,000.00	
4. Other income (list below)		
4. Non-federal sources (list below)		
Total resources	\$4,618,493.00	

3. PHA Policies Governing Eligibility, Selection, and Admissions

[24 CFR Part 903.7 9 (c)]

A. Public Housing

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

(1) Eligibility

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

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

Verification of eligibility is done at the time of application taking

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

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

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

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

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

(2) Waiting List Organization

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

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

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

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

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

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

2. Yes No: Are any or all of the PHA's site-based waiting lists new for the upcoming year (that is, they are not part of a previously-HUD-approved site based waiting list plan)?
If yes, how many lists?

3. Yes No: May families be on more than one list simultaneously?
If yes, how many lists?

4. Where can interested persons obtain more information about and sign up to be on the site-based waiting lists (select all that apply)?

- PHA main administrative office
 All PHA development management offices
 Management offices at developments with site-based waiting lists
 At the development to which they would like to apply
 Other (list below)

(3) Assignment

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

- One
 Two
 Three or More

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

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

(4) Admissions Preferences

a. Income targeting:

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

b. Transfer policies:

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

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

c. Preferences

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

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

Former Federal preferences:

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

Other preferences: (select below)

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

Near Elderly Preference

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)
- 1 Victims of domestic violence
- Substandard housing
- Homelessness
- High rent burden

Other preferences (select all that apply)

- Working families and those unable to work because of age or disability
- Veterans and veterans' families
- Residents who live and/or work in 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)

Near Elderly Preference

4. Relationship of preferences to income targeting requirements:

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

(5) Occupancy

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

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

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

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

(6) Deconcentration and Income Mixing

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

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

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

- Adoption of site-based waiting lists
If selected, list targeted developments below:
- Employing waiting list "skipping" to achieve deconcentration of poverty or income mixing goals at targeted developments
If selected, list targeted developments below:
- Employing new admission preferences at targeted developments
If selected, list targeted developments below:
- 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)

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

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

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

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

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

- Criminal or drug-related activity

- Other (describe below)
Name and address of previous landlords when request for that information is submitted in writing.

(2) Waiting List Organization

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

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

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

- PHA main administrative office
 Other (list below)

(3) Search Time

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

If yes, state circumstances below:

Applicant Unable to locate suitable housing within the initial 60-day period.

(4) Admissions Preferences

- a. Income targeting

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

- b. Preferences

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

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

Former Federal preferences

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

Other preferences (select all that apply)

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

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

1 Date and Time

Former Federal preferences

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

Other preferences (select all that apply)

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

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

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

- Date and time of application
- Drawing (lottery) or other random choice technique

5. If the PHA plans to employ preferences for “residents who live and/or work in the jurisdiction” (select one)

- This preference has previously been reviewed and approved by HUD
- The PHA requests approval for this preference through this PHA Plan

6. Relationship of preferences to income targeting requirements: (select one)

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

(5) Special Purpose Section 8 Assistance Programs

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

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

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

- Through published notices
- Other (list below)

4. PHA Rent Determination Policies

[24 CFR Part 903.7 9 (d)]

A. Public Housing

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

(1) Income Based Rent Policies

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

a. Use of discretionary policies: (select one)

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

---or---

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

b. Minimum Rent

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

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

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

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

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

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

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

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

- For the earned income of a previously unemployed household member
 For increases in earned income
 Fixed amount (other than general rent-setting policy)
If yes, state amount/s and circumstances below:
 Fixed percentage (other than general rent-setting policy)
If yes, state percentage/s and circumstances below:

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

e. Ceiling rents

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

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

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

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

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

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

f. Rent re-determinations:

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

- Never
- At family option
- Any time the family experiences an income increase

- Any time a family experiences an income increase above a threshold amount or percentage: (if selected, specify threshold) \$39.00
- Other (list below)

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

(2) Flat Rents

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

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

B. Section 8 Tenant-Based Assistance

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

(1) Payment Standards

Describe the voucher payment standards and policies.

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

- At or above 90% but below 100% of FMR
- 100% of FMR
- Above 100% but at or below 110% of FMR
- Above 110% of FMR (if HUD approved; describe circumstances below)

b. If the payment standard is lower than FMR, why has the PHA selected this standard? (select all that apply)

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

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

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

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

- Annually
- Other (list below)

e. What factors will the PHA consider in its assessment of the adequacy of its payment standard? (select all that apply)

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

(2) Minimum Rent

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

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

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

5. Operations and Management

[24 CFR Part 903.7 9 (e)]

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

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:

The Rock Island Housing Authority operates a total of 550 public housing units in six (6) developments located in Rock Island County. The Rock Island Housing Authority provides approximately 1,050 very-low and moderate-income residents of Rock Island (650 for Public Housing and 400 for Section 8).

Development	1 BR	2 BR	3 BR	4 BR	5 BR	Total
Manor Homes	6	54	36	6	0	102
Lincoln Homes	8	23	10	4	0	45
Sunset Heights	112	29	0	0	0	141
Valley Homes	0	9	24	22	2	57
Spencer Towers	199	0	0	0	0	199
Scattered Site Homes	0	0	6	0	0	6
Totals	325	115	76	32	2	550

The Rock Island Housing Authority is a standard performer according to its most PHMAP submission. The Rock Island Housing Authority strives to provide quality housing for low-income families, help residents increase their opportunities for self-sufficiency and achieve economic independence.

B. HUD Programs Under PHA Management

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

Program Name	Units or Families Served at Year Beginning	Expected Turnover
Public Housing	550	145
Section 8 Vouchers	167	33
Section 8 Certificates		
Section 8 Mod Rehab		
Special Purpose Section 8 Certificates/Vouchers (list individually)		
Public Housing Drug Elimination Program (PHDEP)	550	145
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)

Personnel Policy
Procurement Policy
Capitalization Policy
Disposition Policy
Cash Management and Investment Policy
Insurance Policy
Safety Policy
Transfer between Funds Policy
Petty Cash Policy
Maintenance Handbook

- (2) Section 8 Management: (list below)
Administrative Plan

6. PHA Grievance Procedures

[24 CFR Part 903.7 9 (f)]

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

A. Public Housing

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

If yes, list additions to federal requirements below:

2. Which PHA office should residents or applicants to public housing contact to initiate the PHA grievance process? (select all that apply)

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

B. Section 8 Tenant-Based Assistance

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

If yes, list additions to federal requirements below:

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

- PHA main administrative office
 Other (list below)

7. Capital Improvement Needs

[24 CFR Part 903.7 9 (g)]

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

A. Capital Fund Activities

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

(1) Capital Fund Program Annual Statement

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

Select one:

- The Capital Fund Program Annual Statement is provided as an attachment to the PHA Plan at Attachment (ILO18a-i01)



ii018a02



ii018b02



ii018c02



ii018d02



ii018e02



ii018f02



ii018g02



ii018h02



ii018i02

-or-

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

(2) Optional 5-Year Action Plan

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

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

b. If yes to question a, select one:

The Capital Fund Program 5-Year Action Plan is provided as an attachment to the PHA Plan at Attachment (il018a-i02)

-or-

The Capital Fund Program 5-Year Action Plan is provided below: (if selected, copy the CFP optional 5 Year Action Plan from the Table Library and insert here)

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

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

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

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

1. Development name:

2. Development (project) number:

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

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

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

If yes, list development name/s below:

Yes No: d) Will the PHA be engaging in any mixed-finance development activities for public housing in the Plan year?

If yes, list developments or activities below:

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

If yes, list developments or activities below:

8. Demolition and Disposition

[24 CFR Part 903.7 9 (h)]

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

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

It is the intention of the Rock Island Housing Authority to make application to HUD for disposition of the 6 Scattered Site houses referred to as IL.18-7 in Fiscal Year beginning 10/1/2001.

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: Scattered Sites 1b. Development (project) number: IL018007
2. Activity type: Demolition <input type="checkbox"/> Disposition <input checked="" type="checkbox"/>
3. Application status (select one) Approved <input type="checkbox"/> Submitted, pending approval <input type="checkbox"/> Planned application <input checked="" type="checkbox"/>
4. Date application approved, submitted, or planned for submission: (01/10/2001)
5. Number of units affected: 6 6. Coverage of action (select one) <input type="checkbox"/> Part of the development <input checked="" type="checkbox"/> Total development
7. Timeline for activity: a. Actual or projected start date of activity: 10/2001 b. Projected end date of activity: 09/2002

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

[24 CFR Part 903.7 9 (i)]

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

2. Activity Description

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

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

10. Conversion of Public Housing to Tenant-Based Assistance

[24 CFR Part 903.7 9 (j)]

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

1. Yes No: Have any of 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?	<input type="checkbox"/> Assessment underway <input type="checkbox"/> Assessment results submitted to HUD <input type="checkbox"/> Assessment results approved by HUD (if marked, proceed to next question) <input type="checkbox"/> Other (explain below)
3. <input type="checkbox"/> Yes <input type="checkbox"/> No: Is a Conversion Plan required? (If yes, go to block 4; if no, go to block 5.)	
4. Status of Conversion Plan (select the statement that best describes the current status)	<input type="checkbox"/> Conversion Plan in development <input type="checkbox"/> Conversion Plan submitted to HUD on: (DD/MM/YYYY) <input type="checkbox"/> Conversion Plan approved by HUD on: (DD/MM/YYYY) <input type="checkbox"/> 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)	<input type="checkbox"/> Units addressed in a pending or approved demolition application (date submitted or approved: _____) <input type="checkbox"/> Units addressed in a pending or approved HOPE VI demolition application (date submitted or approved: _____) <input type="checkbox"/> Units addressed in a pending or approved HOPE VI Revitalization Plan (date submitted or approved: _____) <input type="checkbox"/> Requirements no longer applicable: vacancy rates are less than 10 percent <input type="checkbox"/> Requirements no longer applicable: site now has less than 300 units

<input type="checkbox"/> Other: (describe below)
--

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

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

11. Homeownership Programs Administered by the PHA

[24 CFR Part 903.7 9 (k)]

A. Public Housing

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

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

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

Public Housing Homeownership Activity Description (Complete one for each development affected)	
1a. Development name:	
1b. Development (project) number:	
2. Federal Program authority:	<input type="checkbox"/> HOPE I <input type="checkbox"/> 5(h) <input type="checkbox"/> Turnkey III <input type="checkbox"/> Section 32 of the USHA of 1937 (effective 10/1/99)
3. Application status: (select one)	<input type="checkbox"/> Approved; included in the PHA’s Homeownership Plan/Program <input type="checkbox"/> Submitted, pending approval

<input type="checkbox"/> Planned application
4. Date Homeownership Plan/Program approved, submitted, or planned for submission: (DD/MM/YYYY)
5. Number of units affected:
6. Coverage of action: (select one)
<input type="checkbox"/> Part of the development
<input type="checkbox"/> Total development

B. Section 8 Tenant Based Assistance

1. Yes 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:

- The family does not owe money to the PHA
- The family has not committed any serious or repeated violations of a PHA-assisted lease within the past 5-years.

12. PHA Community Service and Self-sufficiency Programs

[24 CFR Part 903.7 9 (1)]

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)

b. Economic and Social self-sufficiency programs

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

Services and Programs				
Program Name & Description (including location, if appropriate)	Estimated Size	Allocation Method (waiting list/random selection/specific criteria/other)	Access (development office / PHA main office / other: provider name)	Eligibility (public housing or Section 8 participants or both)
Cooperative Extension Services		Random		Public Housing
Computer Learning Centers		Random	Labs in 2 Family Developments	Public Housing
Commodity Disbursements & Food Pantry		Random		Public Housing
After School Programs		Random		Public Housing
Resident Councils		Random		Public Housing
Resident Employment & Training Programs				

(2) Family Self Sufficiency program/s

a. Participation Description

Family Self Sufficiency (FSS) Participation		
Program	Required Number of Participants (start of FY 000 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



11018j02

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 use to determine the need for PHA actions to improve safety of residents (select all that apply).

- Safety and security survey of residents

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

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

All 5 developments are affected.

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

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

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

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

All 5 developments are affected.

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)

Community policing officer meets with the Director of Housing on a regular basis.

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

All 5 developments are affected.

D. Additional information as required by PHDEP/PHDEP Plan

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

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

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

Yes No: This PHDEP Plan is an Attachment. (Attachment Filename: ____)



ii018k02

14. RESERVED FOR PET POLICY

[24 CFR Part 903.7 9 (n)]



ii018i02

15. Civil Rights Certifications

[24 CFR Part 903.7 9 (o)]

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

16. Fiscal Audit

[24 CFR Part 903.7 9 (p)]

1. Yes No: Is the PHA required to have an audit conducted under section 5(h)(2) of the U.S. Housing Act of 1937 (42 U.S.C. 1437c(h))?
(If no, skip to component 17.)

2. Yes No: Was the most recent fiscal audit submitted to HUD?

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

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

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

17. PHA Asset Management

[24 CFR Part 903.7 9 (q)]

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

1. Yes No: Is the PHA engaging in any activities that will contribute to the long-term asset management of its public housing stock, including how the Agency will plan for long-term operating, capital investment, rehabilitation, modernization, disposition, and other needs that have **not** been addressed elsewhere in this PHA Plan?

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

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

18. Other Information

[24 CFR Part 903.7 9 (r)]

A. Resident Advisory Board Recommendations

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

2. If yes, the comments are: (if comments were received, the PHA **MUST** select one)
 Attached at Attachment (File name)
 Provided below:
Sent to local HUD office in Chicago to our HUD Representative

3. In what manner did the PHA address those comments? (select all that apply)
 Considered comments, but determined that no changes to the PHA Plan were necessary.
 The PHA changed portions of the PHA Plan in response to comments
List changes below:
Attachment of file "Recommended Changes" are highlighted in red.



Other: (list below)

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

1. Yes No: Does the PHA meet the exemption criteria provided section 2(b)(2) of the U.S. Housing Act of 1937? (If no, continue to question 2; if yes, skip to sub-component C.)
2. Yes No: Was the resident who serves on the PHA Board elected by the residents? (If yes, continue to question 3; if no, skip to sub-component C.)

3. Description of Resident Election Process

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

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

b. Eligible candidates: (select one)

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

c. Eligible voters: (select all that apply)

- All adult recipients of PHA assistance (public housing and section 8 tenant-based assistance)
- Representatives of all PHA resident and assisted family organizations
- Other (list)

City of Rock Island Mayor selected resident to the PHA board.

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

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

The City of Rock Island developed a five year strategic plan (1998 - 2003) that includes the following four top priorities:

1. Homeowners
2. Renters
3. Homeless Persons
4. Non-Homeless Persons with Special Needs

To address the four priorities, the City of Rock Island will work to accomplish the following things:

- Increase the supply of standard, affordable housing through the acquisition or rehabilitation for existing housing units and, if appropriate, construct new housing units;
- Promote homeownership opportunities;
- Provide rental assistance to alleviate rental cost burden, including severe cost burden experienced by lower income families and individuals;
- Reduce lead based paint hazards;
- Implement programs or special incentives to achieve lower overall housing costs by reducing energy costs;
- Strive to meet the housing needs of large families, elderly persons and persons with disabilities;
- Provide for increased housing choice and opportunity both within and outside of areas of minority and low-income concentrations;
- Address the unmet supportive housing needs of persons other than the homeless with special needs;
- Address the needs of homeless individuals and homeless families with children, and prevent low-income individuals and families with children from becoming homeless.

The City has established high priority for most of the housing problems with affect renter families with extremely low incomes. Included in the high priority need level is cost burden and substandard housing issues facing small related families; cost burden and substandard housing

issues facing large related families; and cost burden and substandard housing issues facing elderly renters.

Other: (list below)

RIHA's Plan To Address Housing Needs

The RIHA's intent is to work with the City of Rock Island and other government and non-profit organizations in the area to provide a comprehensive solution to the housing problems of low-income Rock Island residents. The RIHA is already well suited to providing low-income rental housing, in the form of public housing; and Section 8 tenant based rental assistance. This will continue to be extremely useful in helping to reduce the cost burden and other housing problems facing extremely low-income renter families, particularly female headed families, elderly households and disabled individuals.

Over the five-year period in which this Agency Plan is effect, the RIHA will investigate other alternatives to providing high quality housing assistance to families in need. Because affordability, the substandard nature of the older housing stock, and the high vacancy rates of the older housing stock are three key issues identified in the Consolidated Plan, the RIHA will investigate and spearhead, where possible, partnerships designed to create new assisted housing units for low-income households.

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

D. Other Information Required by HUD

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

Attachments

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

A.

Rock Island Housing Authority Deconcentration Analysis and Strategy

The following chart lists the five RIHA developments by type and census tract. As can be seen, all of the census tracts in which the developments are located have median household incomes that are considered to be low or moderate income, and each census tract has a high concentration of low-income households.

As can be seen in the chart, the two elderly developments are located in census tracts that have the highest concentrations of low-income households. While they have the highest income levels of all five sites, Sunset and Spencer incomes fall within the middle of the income levels of their census tracts.

Lincoln Homes has families with higher incomes than Manor or Valley Homes, although, their incomes are lower than the median household income in their census tracts. The two family developments that have lower average incomes, however, are also located in census tracts that have higher median incomes. Lincoln Homes, which has the highest average family income is located in the census tract with the lowest median household income.

Census Tract	RIHA Development	Development Type	Median Household Income in Census Tract	% Low Income Households In Tract	Average Income Development
237	Manor (102)	Family	\$18,000- 24,599	60.5%	\$5,694
234	Lincoln (45)	Family	\$0 .17,999	69.5%	\$6,422
233	Valley (57)	Family	\$18,000- 24,599	68.8%	\$5,636
244	Sunset (141)	Mixed Pop.	\$0 .17,999	72.4%	\$6,882
226	Spencer (199)	Elderly	\$0 .17,999	83.9%	\$8.458

The deconcentration strategy consists of three elements. First, highly visible physical improvements to Lincoln Homes will make it more attractive to all families, including families with above average incomes. A three-year program of improvements to the site and building exteriors will help to develop Lincoln Homes as a unique family-oriented property. More attractive rooflines, siding, and exterior doors will also improve the appearance of the property. A white, almost picket-like fence is also proposed which will enhance security and change the “look” of the property. Making the property more attractive is critical to attracting families with a wider variety of income levels to the development. Phase one of this plan has been completed.

Other amenities will be added over the next three years including washer/dryer hookups in every apartment, assigned parking (possible with additional parking available on the site), security cameras, and 24 hour videotape surveillance of property entrances, parking areas, and playgrounds. Also scheduled kitchen and bathroom improvements at all Housing Authority properties will begin at Lincoln Homes within three years so that, relative to the other family housing sites, Lincoln Homes will hold a distinct, though relatively short term, advantage in its amenities.

As you will note in our Five-Year Plan the exterior of Manor Homes will be completed this year.

Second, the Housing Authority will manage the waiting list by factoring household income into the site referral decisions after admission, while continuing to respect a family’s decision to live at either of the other Housing Authority properties. The Housing Authority’s current admissions policy allows approved applicants to refuse one offers of housing before being placed at the bottom of the waiting list.

Because of the Housing Authority’s chronic, but improving, vacancy rate, a policy that restricts applicants choice is not the preferred method of achieving deconcentration, even if it means a slower deconcentration pace. Occupying vacant units remains the Housing Authority’s first priority.

This deconcentration strategy should result in a leveling of incomes between sites while improving the quality of life for families in all RIHA properties. The RIHA will monitor the income levels at the sites at least annually to ensure that no concentration of poverty exists.

**Management Needs Assessment U.S. Department of Housing
and Urban Development**
Comprehensive Grant Program (CGP) Office of Public and Indian Housing

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

HA Name Original
Housing Authority of the City of Rock Island, Illinois Revision

General Description of Management/Operations Needs	Urgency of Need (1-5)	Preliminary Estimated HA-Wide Cost
<u>Account 1408</u>		
<u>FFY 2001</u>		
Staff Training	1	\$10,000
Resident Training	1	\$5,000
Satellite Training System	2	\$30,000
<u>FFY 2002</u>		
Staff Training	1	\$10,000
Resident Training	1	\$5,000
Marketing	1	\$11,046
CPU software upgrade	3	\$40,000
<u>FFY 2003</u>		
Staff Training	1	\$10,000
Resident Training	1	\$5,000
Marketing	3	\$10,000
<u>FFY 2004</u>		
Staff Training	1	\$20,000
Resident Training	1	\$5,000
Satellite Training System	2	\$5,221
<u>FFY 2005</u>		
Staff Training	2	\$20,000
Resident Training	2	\$5,000
Marketing	1	\$10,000
Security	1	\$15,000
CPU software upgrade/training	3	\$10,000
Studies/Plans	3	\$13,000
<u>Account 1475</u>		
<u>FFY 2001</u>		
None	3	\$0
<u>FFY 2002</u>		
Maintenance Equipment	2	\$35,000
Computer Hardware	4	\$50,000
<u>FFY 2003</u>		
Maintenance Equipment	2	\$30,000
Computer Hardware	5	\$50,000
New Radio System	2	\$22,652
<u>FFY 2004</u>		
None	5	\$0
<u>FFY 2005</u>		
Office Equipment/Furniture	4	\$50,000
Total Preliminary Estimated HA-Wide Cost		\$476,919
Date Assessment Prepared		07/13/2001

Source(s) of Information

Consultation with Authority staff, HUD, local government and residents.

Annual Statement / Performance and Evaluation Report
 Comprehensive Grant Program (CGP) Part III: Implementation Schedule

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

OMB Approval No. 2577
 (exp 7/31/98)

Development Number/Name HA-Wide Activities	All Funds Obligated (Quarter Ending Date)			All Funds Expended (Quarter Ending Date)			Reason for Revised Target Dates - 2
	Original	Revised - 1	Actual - 2	Original	Revised - 1	Actual - 2	
IL.18-2 Rock Island Manor	09/30/2003			09/30/2004			
IL.18-3 Lincoln Homes	09/30/2003			09/30/2004			
IL.18-4 Sunset Heights	09/30/2003			09/30/2004			
IL.18-5 Valley Homes	09/30/2003			09/30/2004			
IL.18-6 Spencer Towers	09/30/2003			09/30/2004			
IL.18-7 Scattered Sites	09/30/2003			09/30/2004			
IL.18-9 Warehouse	09/30/2002			09/30/2004			
Management Improvement	09/30/2002			09/30/2004			

Signature of Executive Director & Date

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

Capital Funds Program 502

FFY 2001 RHF

Annual Statements/Performance and Evaluation Report
Capital Funds Program

Part I: Summary

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

OMB Approval No. 2577-0157 (exp. 07/31)
APPENDIX 6-1

HA Name: Housing Authority of the City of Rock Island, Illinois	Comprehensive Grant Number: IL06R018502-01	FFY of Grant Approval: 2001
---	--	---------------------------------------

[xx] Original Annual Statement [] Reserve for Disasters/Emergencies [] Revised Annual Statement/Revision Number__ [] Performance and Evaluation Report for Program Year End
[] Final Performance and Evaluation Report

Line No	Summary by Development Account	Total Estimated Cost		Obligated	Total Actual Cost/2 Expended
		ORIGINAL	REVISED		
1	Total Non-CGP Funds	0			
2	1406 Operations (May not exceed 10% of line 19)	0			
3	1408 Management Improvements	0			
4	1410 Administration	0			
5	1411 Audit	0			
6	1415 Liquidated Damages	0			
7	1430 Fees and Costs	0			
8	1440 Site Acquisition	0			
9	1450 Site Improvement	0			
10	1460 Dwelling Structures	0			
11	1465.1 Dwelling Equipment-Nonexpendable	0			
12	1470 Nondwelling Structures	0			
13	1475 Nondwelling Equipment	0			
14	1485 Demolition	0			
15	1490 Replacement Reserve	153,353			
16	1492 Moving to Work Demonstration	0			
17	1495.1 Relocation Costs	0			
18	1498 Mod Used for Development	0			
19	1502 Contingency (May not exceed 8% of line 19)	0			
20	Amount of Annual Grant (Sum of Lines 2-19)	\$153,353			
21	Amount of line 20 Related to LBP Activities	0			
22	Amount of line 20 Related to Section 504 Compliance	0			
23	Amount of line 20 to Security	0			
24	Amount of line 20 Related to Energy Conservation Measur	0			

Signature of Executive Director & Date:

Susan Anderson, Executive Director

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

**Annual Statement/Performance and Evaluation Report
Comprehensive Grant Program (CGP) Part II: Supporting Pages**

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

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

Development Number/Name HA-Wide Activities	General Description of Major Work Categories	Development Account Number	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
IL.18-2 Manor Homes								
	Total for IL.18-2, Rock Island Manor			0				
	Sub-total account 1450			0				
	Sub-total account 1460			0				
	Total for IL.18-2, Rock Island Manor			0				

Signature of Executive Director & Date:

Susan Anderson

Signature of Public Housing Director/Office of Native American Programs Administrator & Date:
X

1 To be completed for the Performance and Evaluation Report of a Revised Annual Statement
2 To be completed for the Performance and Evaluation Report

**Annual Statement/Performance and Evaluation Report
Comprehensive Grant Program (CGP) Part II: Supporting Pages**

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

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

Development Number/Name HA-Wide Activities	General Description of Major Work Categories	Development Account Number	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
IL.18-3 Lincoln Homes								
	Total for IL.18-3, Lincoln Homes			0				
	Sub-total account 1460			0				
	Total for IL.18-3, Lincoln Homes			0				
Signature of Executive Director & Date: X Susan Anderson				Signature of Public Housing Director/Office of Native American Programs Administrator & Date: X				

1 To be completed for the Performance and Evaluation Report of a Revised Annual Statement

2 To be completed for the Performance and Evaluation Report

**Annual Statement/Performance and Evaluation Report
Comprehensive Grant Program (CGP) Part II: Supporting Pages**

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
OMB Approval No.2577-0157(exp. 7/31/98)

Development Number/Name HA-Wide Activities	General Description of Major Work Categories	Development Account Number	Quantity	Total Estimated Cos		Total Actual Cost		Status of Proposed Work
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
IL.18-4 Sunset Heights								
	Total for IL.18-4 Sunset Heights			0				
	Sub-total account 1460			0				
	Total for IL.18-4, Sunset Heights			0				

Signature of Executive Director & Date:

X Susan Anderson

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

**Annual Statement/Performance and Evaluation Report
Comprehensive Grant Program (CGP) Part II: Supporting Pages**

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

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

Development Number/Name HA-Wide Activities	General Description of Major Work Categories	Development Account Number	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
IL.18-5 Valley Homes								
	Total for IL.18-5, Valley Homes			0				
	Sub-total account 1460			0				
	Total for IL.18-5, Valley Homes			0				

Signature of Executive Director & Date:

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

X Susan Anderson

X

1 To be completed for the Performance and Evaluation Report of a Revised Annual Statement

2 To be completed for the Performance and Evaluation Report

**Annual Statement/Performance and Evaluation Report
Comprehensive Grant Program (CGP) Part II: Supporting Pages**

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

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

Development Number/Name HA-Wide Activities	General Description of Major Work Categories	Development Account Number	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
IL.18-6 Spencer Towers								
	Total for IL.18-6, Spencer Towers			0				
	Sub-total account 1450			0				
	Sub-total account 1460			0				
	Total for IL.18-6, Spencer Towers			0				
IL.18-7 Scattered Sites								
	Total for IL.18-7, Scattered Sites			0				

Signature of Executive Director & Date:
X

Susan Anderson

Signature of Public Housing Director/Office of Native American Programs Administrator & Date:
X

1 To be completed for the Performance and Evaluation Report of a Revised Annual Statement
2 To be completed for the Performance and Evaluation Report

**Annual Statement/Performance and Evaluation Report
Comprehensive Grant Program (CGP) Part II: Supporting Pages**

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

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

Development Number/Name HA-Wide Activities	General Description of Major Work Categories	Development Account Number	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
2001	PHA-WIDE MANAGEMENT IMPR. (MAXIMUM OF 20% OF CGP TOTAL)							
	Total for 1408 Management Improvements			0				
	PHA-WIDE EQUIPMENT							
	Total for 1475, Maintenance Equipment			0				

Signature of Executive Director & Date:
X

Susan Anderson

Signature of Public Housing Director/Office of Native American Programs Administrator & Date:
X

1 To be completed for the Performance and Evaluation Report of a Revised Annual Statement
2 To be completed for the Performance and Evaluation Report

form HUD-52837 (10/96)
ref Handbook 74853

Page 6 of 7

**Annual Statement/Performance and Evaluation Report
Comprehensive Grant Program (CGP) Part II: Supporting Pages**

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

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

Development Number/Name HA-Wide Activities	General Description of Major Work Categories	Development Account Number	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
2001	PHA-WIDE ADMINISTRATION (MAXIMUM OF 10% OF CGP TOTAL)							
	Total for 1410, Administration Costs			0				
	OPERATIONS	1406						
	PHA-WIDE ARCHITECT/ENG. FEES	1430						
	CONTINGENCY	1508						
	WAREHOUSE PURCHASE/RENOVAT	1470						
	REPLACEMENT RESERVE	1490		153,353				
	GRANT TOTAL			153,353				
Signature of Executive Director & Date: X Susan Anderson				Signature of Public Housing Director/Office of Native American Programs Administrator & Date: X				

1 To be completed for the Performance and Evaluation Report of a Revised Annual Statement

2 To be completed for the Performance and Evaluation Report

Annual Statement / Performance and Evaluation Report
 Comprehensive Grant Program (CGP) **Part III: Implementation Schedule**

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

OMB Approval No. 2577
 (exp 7/31/98)

Development Number/Name HA-Wide Activities	All Funds Obligated (Quarter Ending Date)			All Funds Expended (Quarter Ending Date)			Reason for Revised Target Dates - 2
	Original	Revised - 1	Actual - 2	Original	Revised - 1	Actual - 2	
IL.18-2 Rock Island Manor	09/30/2003			09/30/2004			
IL.18-3 Lincoln Homes	09/30/2003			09/30/2004			
IL.18-4 Sunset Heights	09/30/2003			09/30/2004			
IL.18-5 Valley Homes	09/30/2003			09/30/2004			
IL.18-6 Spencer Towers	09/30/2003			09/30/2004			
IL.18-7 Scattered Sites	09/30/2003			09/30/2004			
IL.18-9 Warehouse	09/30/2003			09/30/2004			
Management Improvement	09/30/2003			09/30/2004			

Signature of Executive Director & Date

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

Annual Statement / Performance and Evaluation Report
 Comprehensive Grant Program (CGP) **Part III: Implementation Schedule**

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

OMB Approval No. 2577
 (exp 7/31/98)

Development Number/Name HA-Wide Activities	All Funds Obligated (Quarter Ending Date)			All Funds Expended (Quarter Ending Date)			Reason for Revised Target Dates - 2
	Original	Revised - 1	Actual - 2	Original	Revised - 1	Actual - 2	
IL.18-2 Rock Island Manor	09/30/2003			09/30/2004			
IL.18-3 Lincoln Homes	09/30/2003			09/30/2004			
IL.18-4 Sunset Heights	09/30/2003			09/30/2004			
IL.18-5 Valley Homes	09/30/2003			09/30/2004			
IL.18-6 Spencer Towers	09/30/2003			09/30/2004			
IL.18-7 Scattered Sites	09/30/2003			09/30/2004			
IL.18-9 Warehouse	09/30/2003			09/30/2004			
Management Improvement	09/30/2003			09/30/2004			

Signature of Executive Director & Date

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

CGP 502 BUDGET

FFY 2001

Annual Statements/Performance and Evaluation Report
Comprehensive Grant Program (CGP) **Part I: Summary**

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

OMB Approval No. 2577-0157 (exp. 07/31/98)
APPENDIX 6-1

HA Name: **Housing Authority of the City of Rock Island, Illinois** Comprehensive Grant Number: **IL06P018502-01** FFY of Grant Approval: **2001**

Original Annual Statement Reserve for Disasters/Emergencies Revised Annual Statement/Revision Number__ Performance and Evaluation Report for Program Year Ending _____
 Final Performance and Evaluation Report

Line No	Summary by Development Account	Total Estimated Cost		Total Actual Cost/2	
		ORIGINAL	REVISED	Obligated	Expended
1	Total Non-CGP Funds				
2	1406 Operations (May not exceed 10% of line 19)	246,000			
3	1408 Management Improvements	45,000			
4	1410 Administration	112,148			
5	1411 Audit	0			
6	1415 Liquidated Damages	0			
7	1430 Fees and Costs	30,000			
8	1440 Site Acquisition	0			
9	1450 Site Improvement	39,000			
10	1460 Dwelling Structures	592,948			
11	1465.1 Dwelling Equipment-Nonexpendable	0			
12	1470 Nondwelling Structures	165,000			
13	1475 Nondwelling Equipment	0			
14	1485 Demolition	0			
15	1490 Replacement Reserve	0			
16	1492 Moving to Work Demonstration	0			
17	1495.1 Relocation Costs	0			
18	1498 Mod Used for Development	0			
19	1502 Contingency (May not exceed 8% of line 19)	0			
20	Amount of Annual Grant (Sum of Lines 2-19)	\$1,230,096			
21	Amount of line 20 Related to LBP Activities	0			
22	Amount of line 20 Related to Section 504 Compliance	0			
23	Amount of line 20 to Security	0			
24	Amount of line 20 Related to Energy Conservation Measur	0			

Signature of Executive Director & Date:

Susan Anderson, Executive Director

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

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

2 To be completed for the Performance and Evaluation Report

**Annual Statement/Performance and Evaluation Report
Comprehensive Grant Program (CGP) Part II: Supporting Pages**

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

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

Development Number/Name HA-Wide Activities	General Description of Major Work Categories	Development Account Number	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
IL.18-2 Manor Homes	General Ste Improv/landscape	1450	L/S	5,000				
	Exterior building improvements	1460	3 bldgs.	278,146				
	Remodel Kitchens	1460	L/S	30,000				
	Remodel Bathrooms	1460	L/S	70,000				
	Total for IL.18-2, Rock Island Manor			383,146				
	Sub-total account 1450			5,000				
	Sub-total account 1460			378,146				
Total for IL.18-2, Rock Island Manor			383,146					

Signature of Executive Director & Date:

Susan Anderson

Signature of Public Housing Director/Office of Native American Programs Administrator & Date:
X

1 To be completed for the Performance and Evaluation Report of a Revised Annual Statement
2 To be completed for the Performance and Evaluation Report

**Annual Statement/Performance and Evaluation Report
Comprehensive Grant Program (CGP) Part II: Supporting Pages**

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

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

Development Number/Name HA-Wide Activities	General Description of Major Work Categories	Development Account Number	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
IL.18-3 Lincoln Homes	Landscaping	1450	L/S	15,000				
	Repair Kitchens	1460	45	40,000				
	Repair Bathrooms	1460	45	10,000				
	Total for IL.18-3, Lincoln Homes			65,000				
	Sub-total account 1450			15,000				
	Sub-total account 1460			50,000				
	Total for IL.18-3, Lincoln Homes			65,000				
Signature of Executive Director & Date: X Susan Anderson				Signature of Public Housing Director/Office of Native American Programs Administrator & Date: X				

1 To be completed for the Performance and Evaluation Report of a Revised Annual Statement

form HUD-52837 (10/96)

2 To be completed for the Performance and Evaluation Report

ref Handbook 74853

**Annual Statement/Performance and Evaluation Report
Comprehensive Grant Program (CGP) Part II: Supporting Pages**

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
OMB Approval No.2577-0157(exp. 7/31/98)

Development Number/Name HA-Wide Activities	General Description of Major Work Categories	Development Account Number	Quantity	Total Estimated Cos		Total Actual Cost		Status of Proposed Work
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
IL.18-4 Sunset Heights	Sand and Paint all exterior railings/fixtures	1450	L/S	4,000				
	Repair Building roof/canopy roof	1460	L/S	60,000				
	Replace Domestic Hot Water Heaters	1460	L/S	14,802				
	Total for IL.18-4 Sunset Heights			78,802				
	Sub-total account 1460			74,802				
	Sub-total account 1450			4,000				
	Total for IL.18-4, Sunset Heights			78,802				

Signature of Executive Director & Date:

X Susan Anderson

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

1 To be completed for the Performance and Evaluation Report of a Revised Annual Statement
2 To be completed for the Performance and Evaluation Report

**Annual Statement/Performance and Evaluation Report
Comprehensive Grant Program (CGP) Part II: Supporting Pages**

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

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

Development Number/Name HA-Wide Activities	General Description of Major Work Categories	Development Account Number	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
IL.18-5 Valley Homes	Repair drywall and paint all unit interiors	1460	L/S	5,000				
	Repair bathrooms/ fixture replacement	1460	L/S	5,000				
	Repair Kitchens	1460	L/S	5,000				
	Security Equipment Upgrade	1460	L/S	10,000				
	Total for IL.18-5, Valley Homes			25,000				
	Sub-total account 1460 Total for IL.18-5, Valley Homes			25,000 25,000				

Signature of Executive Director & Date:

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

X Susan Anderson

X

1 To be completed for the Performance and Evaluation Report of a Revised Annual Statement

form HUD-52837 (10/96)

2 To be completed for the Performance and Evaluation Report

**Annual Statement/Performance and Evaluation Report
Comprehensive Grant Program (CGP) Part II: Supporting Pages**

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

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

Development Number/Name HA-Wide Activities	General Description of Major Work Categories	Development Account Number	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
IL.18-6 Spencer Towers	Outdoor Screen Area	1450	L/S	15,000				
	Replace Roof, Cant, Flashing	1460	L/S	80,000				
	Total for IL.18-6, Spencer Towers			95,000				
	Sub-total account 1450			15,000				
	Sub-total account 1460			80,000				
	Total for IL.18-6, Spencer Towers			95,000				
IL.18-7 Scattered Sites	605 10th Street	1460	1	8,387				
	812 45th Street	1460	1	8,387				
	1016 23rd Avenue	1460	1	8,387				
	1216 12th Avenue	1460	1	8,387				
	1511 9th Street	1460	1	8,387				
	1919 10th Avenue	1460	1	8,388				
	Total for IL.18-7, Scattered Sites			50,323				

Signature of Executive Director & Date:
X

Susan Anderson

Signature of Public Housing Director/Office of Native American Programs Administrator & Date:
X

1 To be completed for the Performance and Evaluation Report of a Revised Annual Statement
2 To be completed for the Performance and Evaluation Report

**Annual Statement/Performance and Evaluation Report
Comprehensive Grant Program (CGP) Part II: Supporting Pages**

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

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

Development Number/Name HA-Wide Activities	General Description of Major Work Categories	Development Account Number	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
2001	PHA-WIDE MANAGEMENT IMPR. (MAXIMUM OF 20% OF CGP TOTAL)							
	Staff Training	1408		10,000				
	Resident Training	1408		5,000				
	Satellite Training System	1408		30,000				
	Total for 1408 Management Improvements			45,000				
	PHA-WIDE EQUIPMENT							
	Computer Hardware	1475		0				
Maintenance Equipment	1475		0					
Total for 1475, Maintenance Equipment			0					

Signature of Executive Director & Date:
X

Susan Anderson

Signature of Public Housing Director/Office of Native American Programs Administrator & Date:
X

1 To be completed for the Performance and Evaluation Report of a Revised Annual Statement

form HUD-52837 (10/96)

2 To be completed for the Performance and Evaluation Report

ref Handbook 74853

**Annual Statement/Performance and Evaluation Report
Comprehensive Grant Program (CGP) Part II: Supporting Pages**

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

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

Development Number/Name HA-Wide Activities	General Description of Major Work Categories	Development Account Number	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
2001	PHA-WIDE ADMINISTRATION (MAXIMUM OF 10% OF CGP TOTAL)							
	Modernization salaries/wages	1410		87,318				
	Modernization employee benefits	1410		21,830				
	Modernization publications	1410		1,000				
	Modernization advertising	1410		1,000				
	Modernization legal fees	1410		1,000				
	Total for 1410, Administration Costs			112,148				
	OPERATIONS	1406		130,000				
	PHA-WIDE ARCHITECT/ENG. FEES	1430		50,000				
	CONTINGENCY	1508		106,476				
	WAREHOUSE PURCHASE/RENOVATI	1470		165,000				
	GRANT TOTAL			1,305,895				

Signature of Executive Director & Date:
X

Susan Anderson

Signature of Public Housing Director/Office of Native American Programs Administrator & Date:
X

1 To be completed for the Performance and Evaluation Report of a Revised Annual Statement

2 To be completed for the Performance and Evaluation Report

Name HOUSING AUTHORITY OF THE CITY OF ROCK ISLAND, IL		() Original (X) Revision No. <u>4</u>	
Development Number IL06P018002		Development Name ROCK ISLAND MANOR	
		DOFA Date or Construction Date 1952	
Development Type:	Occupancy Type:	Structure Type:	Number of Buildings:
Rental (x)	Family (x)	Detached	15
Turnkey III Vacant ()	Elderly ()	Semi/Detached ()	
Turnkey III-Occupied ()	Mixed ()	Row (x)	
Mutual Help ()		Walk-Up ()	
Section 3		Elevator ()	
Bond Financed ()			
		Number of Vacant Units 5	
		4.9%	
		Current Bedroom Distributions:	
		Total Current Units	
		102	
		0 <u>1</u> 6 2 54	
		3 36 4 6 5 _____	
		5+ _____	

General Description of Needed Physical Improvement	Urgency of Need	Estimated Costs
<u>1450 Site Improvements</u>		
Resurface parking lot and install fence	2	5,000
General site improvements / landscaping	1	72,033
Sidewalk replacement/mudjacking	3	203,875
Complete backyard concept	3	25,000
Playground upgrade	3	18,000
<u>1460 Dwelling Structures</u>		
Exterior Modifications	1	1,222,776
Install CO2 detectors	3	10,000
Common Hallway Repair/Remodel	3	29,986
Furnace replacement	2	42,126
Install Closet doors	2	127,500
Pilot rear access	3	5,000
Complete rear stair access (backyard)	3	30,000
Security cameras	3	33,000
Storm Door Replacement/Repair	3	53,550
Remodel kitchens	3	204,000
Remodel bathrooms	3	204,000
Renovations	1	20,000
<u>1465.1 Dwelling Equipment</u>		
Install Central Heat/Air Conditioning	4	153,000
<u>1470 Non-Dwelling Structures</u>		
<u>1475 Non-Dwelling Equipment</u>		

Total Preliminary Estimated Hard Cost for Needed Physical Improvements	2,458,846
Per Unit Hard Cost	24,106
Physical Improvements will Result in Structural/System Soundness at a Reasonable Cost	Yes (x) No ()
Development Has Long-Term Physical and Social Viability	Yes (x) No ()
Date Assessment Prepared	07/13/2001
Source(s) of information:	Consultation with Authority staff, HUD, local government and residents.

Physical Needs Assessment
Comprehensive Grant Program

**U.S. Department of Housing
and Urban Development**

OMB Approval No. 2566-0157(Exp. 7/31/98)

Name HOUSING AUTHORITY OF THE CITY OF ROCK ISLAND, IL		<input type="checkbox"/> Original <input checked="" type="checkbox"/> Revision No. <u>4</u>		
Development Number IL06P018003		Development Name LINCOLN HOMES	DOFA Date or Construction Date 1952	
Development Type:	Occupancy Type:	Structure Type:	Number of Buildings:	
Rental <input checked="" type="checkbox"/>	Family <input checked="" type="checkbox"/>	Detached	1	
Turnkey III Vacant <input type="checkbox"/>	Elderly <input type="checkbox"/>	Semi/Detached <input type="checkbox"/>		2.2%
Turnkey III-Occupied <input type="checkbox"/>	Mixed <input type="checkbox"/>	Row <input checked="" type="checkbox"/>	Current Bedroom Distributions:	
Mutual Help <input type="checkbox"/>		Walk-Up <input type="checkbox"/>	0 _____ 1 8 2 23	Total Current Units 45
Section 3		Elevator <input type="checkbox"/>	3 10 4 4 5 _____	
Bond Financed <input type="checkbox"/>			5+ _____	

General Description of Needed Physical Improvement	Urgency of Need	Estimated Costs
<u>1450 Site Improvements</u>		
Provide garbage enclosures	2	8,500
Park Improvements	3	30,000
Sidewalk replacement	3	80,000
Perimeter security fencing	3	190,000
Backyard concept (fenced play area)	3	25,000
Landscaping	3	15,000
Drainage/grading Improvement	3	30,000
<u>1460 Dwelling Structures</u>		
Install CO2 /smoke detectors	2	5,000
Exterior Modifications	2	525,000
Roof replacement	3	94,635
Security Cameras	3	33,000
Remodel bathrooms	3	90,000
Remodel kitchens	3	157,500
Replace rusting furnace stacks	3	9,000
Replace Furnaces	3	27,000
Common Areas/ Remodel	3	12,000
Renovations	3	20,000

Total Preliminary Estimated Hard Cost for Needed Physical Improvements	1,351,635
Per Unit Hard Cost	30,036
Physical Improvements will Result in Structural/System Soundness at a Reasonable Cost	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Development Has Long-Term Physical and Social Viability	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Date Assessment Prepared	07/13/2001
Source(s) of information: Consultation with Authority staff, HUD, local government and residents.	

Physical Needs Assessment
Comprehensive Grant Program

**U.S. Department of Housing
and Urban Development**

OMB Approval No. 2566-0157(Exp. 7/31/98)

Name HOUSING AUTHORITY OF THE CITY OF ROCK ISLAND, IL		<input type="checkbox"/> Original <input checked="" type="checkbox"/> Revision No. <u>3</u>	
Development Number IL06P018004		Development Name SUNSET HEIGHTS	DOFA Date or Construction Date 1968
Development Type:	Occupancy Type:	Structure Type:	Number of Buildings:
Rental <input checked="" type="checkbox"/>	Family <input type="checkbox"/>	Detached	1
Turnkey III Vacant <input type="checkbox"/>	Elderly <input checked="" type="checkbox"/>	Semi/Detached <input type="checkbox"/>	36
Turnkey III-Occupied <input type="checkbox"/>	Mixed <input type="checkbox"/>	Row <input type="checkbox"/>	25.5%
Mutual Help <input type="checkbox"/>		Walk-Up <input type="checkbox"/>	Current Bedroom Distributions:
Section 3		Elevator <input checked="" type="checkbox"/>	0 <u>1</u> 1 <u>111</u> 2 <u>29</u>
Bond Financed <input type="checkbox"/>		5+	3 _____ 4 _____ 5 _____
Total Current Units		141	
General Description of Needed Physical Improvement		Urgency of Need	Estimated Costs
<u>1450 Site Improvement</u>			
General site improvements/landscaping/signage		2	41,820
Sand and paint all exterior railings		2	8,000
<u>1460 Dwelling Structures</u>			
Upgrade heat distribution system		1	64,000
Waterproof/paint exterior of building		3	100,000
Replace galvanized domestic water risers		3	224,960
Remodel kitchens		3	150,024
Remodel bathrooms		3	70,500
Encapsulate asbestos floor tile		3	141,000
Replace domestic hot water heater		3	50,000
Install emergency call system/handicap		3	141,000
Window Coverings		3	25,000
Enhance air handling system		3	9,000
Enhance security system		3	8,000
Remodel roof/patio area front		3	65,000
A/C openings		3	8,000
Replace entry doors and accessibility system		3	15,000
Hallway Remodel		3	50,000
<u>1465.1 Dwelling Equipment</u>			
Air Conditioning Units		2	63,450
<u>1470 Nondwelling Structures</u>			
Refurbish window seating areas (floors 2-11)		3	15,000
Total Preliminary Estimated Hard Cost for Needed Physical Improvements		1,249,754	
Per Unit Hard Cost		8,864	
Physical Improvements will Result in Structural/System Soundness at a Reasonable Cost		Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	
Development Has Long-Term Physical and Social Viability		Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	
Date Assessment Prepared		07/13/2001	
Source(s) of information: Consultation with Authority staff, HUD, local government and residents.			

Name HOUSING AUTHORITY OF THE CITY OF ROCK ISLAND, IL		<input type="checkbox"/> Original <input checked="" type="checkbox"/> Revision No. <u>4</u>	
Development Number IL06P018005		Development Name VALLEY HOMES	
		DOFA Date or Construction Date 1970	
Development Type:	Occupancy Type:	Structure Type:	Number of Buildings:
Rental (x)	Family (x)	Detached	3
Turnkey III Vacant ()	Elderly ()	Semi/Detached ()	
Turnkey III-Occupied ()	Mixed ()	Row (x)	
Mutual Help ()		Walk-Up ()	
Section 3		Elevator ()	
Bond Financed ()		5+	
			Number of Vacant Units 9 15.8%
			Total Current Units 57
			Current Bedroom Distributions: 0 <u>1</u> 1 <u>2</u> 2 <u>9</u> 3 <u>25</u> 4 <u>21</u> 5 <u>2</u>

General Description of Needed Physical Improvement	Urgency of Need	Estimated Costs
<u>1450 Site Improvement</u>		
General site repairs/landscaping/signage	2	114,000
Concrete repair/sidewalk Blacktop	2	100,000
Playground upgrade	3	35,000
<u>1460 Dwelling Structures</u>		
Repair rusty fire escapes	2	5,000
Repair drywall and paint all unit interiors	3	64,980
New roofs, gutters, downspouts	3	143,013
Zone valves/cabinets for zone valves	3	57,000
Storm screen doors	3	19,950
Remodel kitchens	3	104,880
Remodel bathrooms/fixture replacement	3	45,600
Replace missing screens/windows	3	17,898
Install hot water heaters and insulate	3	24,395
Security equipment upgrade	3	25,000
Replace second floor windows	1	103,981
Foundation Improvement	3	
<u>1470 Non-Dwelling Structures</u>		
Construct Family Investment Center	3	260,000

Total Preliminary Estimated Hard Cost for Needed Physical Improvements	1,120,697
Per Unit Hard Cost	19,661
Physical Improvements will Result in Structural/System Soundness at a Reasonable Cost	Yes (x) No ()
Development Has Long-Term Physical and Social Viability	Yes (x) No ()
Date Assessment Prepared	07/13/2001
Source(s) of information:	Consultation with Authority staff, HUD, local government and residents.

Name HOUSING AUTHORITY OF THE CITY OF ROCK ISLAND, IL		<input type="checkbox"/> Original <input checked="" type="checkbox"/> Revision No. <u>4</u>	
Development Number IL06P018006		Development Name SPENCER TOWERS	DOFA Date or Construction Date 1974
Development Type:	Occupancy Type:	Structure Type:	Number of Buildings:
Rental <input checked="" type="checkbox"/>	Family <input type="checkbox"/>	Detached	1
Turnkey III Vacant <input type="checkbox"/>	Elderly <input checked="" type="checkbox"/>	Semi/Detached <input type="checkbox"/>	33
Turnkey III-Occupied <input type="checkbox"/>	Mixed <input type="checkbox"/>	Row <input type="checkbox"/>	16.6%
Mutual Help <input type="checkbox"/>		Walk-Up <input type="checkbox"/>	Current Bedroom Distributions:
Section 3		Elevator <input checked="" type="checkbox"/>	0 _____ 1 199 2 _____
Bond Financed <input type="checkbox"/>			3 _____ 4 _____ 5 _____
			5+ _____
		Total Current Units	199

General Description of Needed Physical Improvement	Urgency of Need	Estimated Costs
<u>1450 Site Improvements</u>		
Landscape/Beautification	1	5,000
Outdoor screen area	3	15,000
Exterior Lighting	3	10,000
<u>1460 Dwelling Structures</u>		
New windows with A/C sleeves	2	350,000
Replace East exit fire doors, frames	2	30,000
Remodel kitchens	3	260,093
Remodel bathrooms	3	218,900
Replace roof, cant, flashing	3	80,000
Concrete repair East exterior fire exits	3	15,000
Security Equipment Upgrade	3	10,000
Community Room Kitchen Cabinets	3	10,000
Hallway Remodel	1	72,896
Rooftop Repair	2	10,000
Renovations	2	1,000
Carpets for Units	1	10,000
Window Coverings	3	75,000
<u>1465 Dwelling Equipment</u>		
Air Conditioners	2	8,000
Appliances	3	50,000

Total Preliminary Estimated Hard Cost for Needed Physical Improvements		1,230,889
Per Unit Hard Cost		6,185
Physical Improvements will Result in Structural/System Soundness at a Reasonable Cost		Yes <input type="checkbox"/> No <input type="checkbox"/>
Development Has Long-Term Physical and Social Viability		Yes <input type="checkbox"/> No <input type="checkbox"/>
Date Assessment Prepared		07/13/2001
Source(s) of information: Consultation with Authority staff, HUD, local government and residents.		

Physical Needs Assessment
Comprehensive Grant Program

**U.S. Department of Housing
and Urban Development**

OMB Approval No. 2566-0157(Exp. 7/31/98)

Name HOUSING AUTHORITY OF THE CITY OF ROCK ISLAND, IL		<input type="checkbox"/> Original <input checked="" type="checkbox"/> Revision No. <u>4</u>	
Development Number IL06P018007		Development Name SCATTERED SITES	DOFA Date or Construction Date 1942
Development Type:	Occupancy Type:	Structure Type:	Number of Buildings:
Rental <input checked="" type="checkbox"/>	Family <input checked="" type="checkbox"/>	Detached	6
Turnkey III Vacant <input type="checkbox"/>	Elderly <input type="checkbox"/>	Semi/Detached <input checked="" type="checkbox"/>	
Turnkey III-Occupied <input type="checkbox"/>	Mixed <input type="checkbox"/>	Row <input type="checkbox"/>	
Mutual Help <input type="checkbox"/>		Walk-Up <input type="checkbox"/>	
Section 3		Elevator <input type="checkbox"/>	
Bond Financed <input type="checkbox"/>		5+	
		Number of Vacant Units	5
		Current Bedroom Distributions:	83.3%
		Total Current Units	6

General Description of Needed Physical Improvement	Urgency of Need	Estimated Costs
<u>1460 Dwelling Structures</u>		
812 - 45th Street	2	0.00
1511 - 9th Street	2	0.00
1919 - 10th Avenue	2	0.00
605 - 10th Avenue	2	0.00
1016 - 23rd Street	2	0.00
1216 - 12th Avenue	2	0.00

Total Preliminary Estimated Hard Cost for Needed Physical Improvements	0.00
Per Unit Hard Cost	0.00
Physical Improvements will Result in Structural/System Soundness at a Reasonable Cost	Yes (<input checked="" type="checkbox"/>) No (<input type="checkbox"/>)
Development Has Long-Term Physical and Social Viability	Yes (<input checked="" type="checkbox"/>) No (<input type="checkbox"/>)
Date Assessment Prepared	07/13/2001
Source(s) of information: Consultation with Authority staff, HUD, local government and residents.	

Physical Needs Assessment
Comprehensive Grant Program

**U.S. Department of Housing
and Urban Development**

OMB Approval No. 2566-0157(Exp. 7/31/98)

Name HOUSING AUTHORITY OF THE CITY OF ROCK ISLAND, IL	<input type="checkbox"/> Original <input checked="" type="checkbox"/> Revision No. <u>4</u>
---	--

Development Number		Development Name		DOFA Date or Construction Date	
Development Type:	Occupancy Type:	Structure Type:	Number of Buildings:	Number of Vacant Units	
Rental <input type="checkbox"/>	Family <input type="checkbox"/>	Detached			
Turnkey III <input type="checkbox"/>	Elderly <input type="checkbox"/>	Semi/Deta <input type="checkbox"/>			
Turnkey III- <input type="checkbox"/>	Mixed <input type="checkbox"/>	Row <input type="checkbox"/>	Current Bedroom Distributions:	Total Current Units	
Mutual Help <input type="checkbox"/>		Walk-Up <input type="checkbox"/>	0 _____ 1 _____ 2 _____		
Section 3 <input type="checkbox"/>		Elevator <input type="checkbox"/>	3 _____ 4 _____ 5 _____		
Bond Fina <input type="checkbox"/>			5+ _____		

General Description of Needed Physical Improvement	Urgency of Need	Estimated Costs
<p><u>1470 Warehouse Purchase/Renovation</u> Warehouse Purchase and Renovation</p>	1	900,000

Total Preliminary Estimated Hard Cost for Needed Physical Improvements	900,000
Per Unit Hard Cost	
Physical Improvements will Result in Structural/System Soundness at a Reasonable Cost	Yes (<input checked="" type="checkbox"/>) No (<input type="checkbox"/>)
Development Has Long-Term Physical and Social Viability	Yes (<input checked="" type="checkbox"/>) No (<input type="checkbox"/>)
Date Assessment Prepared	07/13/2001
Source(s) of information: Consultation with Authority staff, HUD, local government and residents.	

ROCK ISLAND HOUSING AUTHORITY

COMMUNITY SERVICE REQUIREMENT

Statement of Approach and Coordination with TANF Agency

Policy Statement

It is the policy of the Rock Island Housing Authority to enhance and promote economic and social self-sufficiency.

Deconcentration: The RIHA will follow its Deconcentration Plan guidelines when it houses its public housing applicants. For further details on how this will be accomplished, see the Operation and Management portion of this Agency Plan.

Income Targeting: The RIHA will attempt to achieve the income targeting goals as established by the QHWRA.

Cooperation Agreements for Economic Self-Sufficiency: The RIHA will enter into cooperation agreements where possible and practicable with state, local, and other agencies providing assistance to covered families under welfare or public assistance programs. The purpose of the agreements will be to facilitate the sharing of information regarding rents, income, assistance, or other information that may assist RIHA or welfare or public assistance agencies in carrying out its functions. The RIHA may also seek to include in cooperation agreements with welfare or public assistance agencies provisions to provide for economic self-sufficiency services for residents and participants.

Services and Programs Offered to Residents and Participants

Family Self-Sufficiency (FSS): The RIHA does not offer an FSS program, although it is the policy of this Authority to encourage and reward employment and economic self-sufficiency. The RIHA provides the following as incentives for employment and economic self sufficiency.

- a. **Flat Rents:** Flat rents went into effect in September of 1999.
- b. **Phase-In Rent:** When a family member becomes employed after being unemployed for at least one year, or through a job training program, or who is or was assisted under TANF within 6 months and whose earned income increases, rent shall not increase for 12 months after commencing work.

Economic and Social SelfSufficiency Programs: The RIHA coordinates, promotes and provides programs and services to enhance the economic and social self-sufficiency of its residents. The following programs are provided:

*Rock Island Housing Authority
Community Service Requirement
10/2001*

ROCK ISLAND HOUSING AUTHORITY

Rock Island Housing Authority
Services and Programs

P	H	A	E
r	s	l	c
c	t	l	c
g	i	c	e
r	r	c	s
a	a	a	s
r	t	t	i
e	i	(l
N	c	o	D
a	n	e	t
r	S	v	y
e	i	N	e
z	e	l	(
d	e	t	o
I	h	p	u
e	d	e	b
s	c	n	F
r	v	,	s
i	a	,	g
F	i	N	,
t	t	a	S
i	i	i	8
c	n	n	,
r	g	C	o
(l	f	r
i	i	f	
r	s	i	b
c	t	c	o
l	,	e	t
u	,	h	
d	r)	
i	a	C	
r	n	t	
g	d	h	
l	o	e	
c	n	r	
c	,)	
a	s		
t	p		
i	e		
c	c		
r	i		
	f		

ROCK ISLAND HOUSING AUTHORITY

i f a P P r c P r i a t e)	i c c r i t e r i a , e t c .)		
C c c P e r a t i v e E x t e r s i c r S e r v i c e s	F	F	F
C c r	F a n	F l a n	F

ROCK ISLAND HOUSING AUTHORITY

P u t t e r I e a r n i n g C e n t e r s	d o c u m e n t s t h e 2 F a m i l y E v e l o p m e n t s
C o n f i d e n t i t y I n s t r u c t i o n s	F

ROCK ISLAND HOUSING AUTHORITY

t & F c c c F a r t r y			
A f t e r S c H c c l F r c g r a r s	F		
R e s i d e r t C c u r c	F		

ROCK ISLAND HOUSING AUTHORITY

i				
l				
s				
R				
e				
s				
i				
c				
e				
r				
t				
E				
r				
F				
l				
c				
y				
r				
e				
r				
t				
d				
T				
r				
a				
i				
r				
i				
r				
s				
-				
F				
r				
c				
s				
r				
a				
r				
s				

Welfare Benefit Reductions

Families that receive benefits for welfare or public assistance from a state or other public agency under a program for which the federal, state or local law relating to the program requires, that as a condition of eligibility for assistance under the program, the family must participate in an economic self-sufficiency program.

Decreases in Income for Failure to Comply

ROCK ISLAND HOUSING AUTHORITY

For families whose welfare or public assistance benefits are reduced because of failure of any family member to comply with the conditions under the assistance program requiring participation in an economic self-sufficiency program or imposing a work activities requirement, the amount required to be paid by the family as a monthly contribution toward rent shall not be decreased.

Fraud

For families whose welfare/public assistance benefits are reduced because of an act of fraud by a member of the family under the law or program, the amount required to be paid by the family as a monthly contribution toward rent shall not be decreased, during the period of reduction, as a result of any decrease in income of the family to the extent that the decrease was the result of benefit reduction due to fraud.

*Rock Island Housing Authority
Community Service Requirement*

ROCK ISLAND HOUSING AUTHORITY

The amount required to be paid as a monthly contribution toward rent by a family whose welfare or public assistance benefits are reduced as a result of the expiration of a lifetime time limit for a family, and not as a result of failure to comply with program requirements, shall be decreased, during the period of reduction, as a result of any decrease in income of the family, to the extent that the decrease was the result of benefit reduction due to expiration of a lifetime time limit.

Notice

The Housing Authority shall obtain written notification from the relevant welfare or public assistance agency specifying that the family's benefits have been reduced and cause for reduction prior to redetermination of monthly contribution toward rent.

Grievance

Any family affected by a Decrease in Income or Fraud above shall have the right to review the determination through the grievance procedure.

RIJIA Compliance

The Rock Island Housing Authority 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:

- Adopting appropriate changes to the RIHA's public housing rent determination policies and training staff to carry out those policies.
- > Informing residents of new policy on admission and reexamination.
- > Establishing a protocol for exchange of information with all appropriate TANF agencies.

Community Service and Work Requirement

At the time that federal regulations direct housing authorities to implement their Community Service and Work Requirement Program, the RIHA will move to develop such a program initiative. In general terms, the requirements will state that as a condition of continued occupancy, each adult resident of the Housing Authority shall:

- a. Contribute eight hours per month of community service (not including political activities) within the community in which that adult resides; or
- b. Participate in an economic self-sufficiency program for eight hours per month. Exemptions

Exemptions shall be made for any individual who:

- a. Is 62 years of age or older;
- b. Is a blind or disabled individual defined under section 216(i)(1) or 1614 of the Social Security Act (42 USC 416(i)(1); 1382c) and who is unable to comply with this section, or is a primary caretaker of such individual;

Rock Island Housing Authority
Community Service Requirement

Reduction Based on Time Limit for Assistance

- c. Is engaged in a work activity (as such term is defined in section 407(d) of the Social Security Act (42 USC 607(d), as in effect on and after July 1, 1997);
- d. Meets the requirements for being exempted from having to engage in a work activity under the state program funded under part A of title IV of the Social Security Act (42 USC 601 et seq.) or under any other welfare program of the state in which the public housing agency is located, including a state-administered welfare-to-work program;
- e. Is in a family receiving assistance under a state program funded under part A of title IV of the Social Security Act (42 USC 601 et seq.) or under any other welfare program of the state in which public housing agency is located, including a state administered welfare-to-work program, and has not been found by the state or other administering entity to be in noncompliance with such program; or
- f Is a full-time student (high school, vocational or college).

Annual Determinations

For each public housing resident, RIHA shall, 30 days before the expiration of each lease term of the resident, review and determine the compliance of the resident with the requirements of this policy. Such determinations shall be made in accordance with the principles of due process and on a nondiscriminatory basis.

Noncompliance

If the RIHA determines that the resident, subject to the requirements of this policy, has not complied shall notify the resident in writing of such noncompliance. The written notification shall state that the determination of noncompliance is subject to the administrative Grievance Procedure and that failure by the resident to enter into an agreement, before the expiration of the lease term, to cure any noncompliance by participating in an economic self-sufficiency program for, or contributing to community service, as many additional hours as the resident needs to comply in the aggregate with such requirement over the 12-month term of the lease, may be cause for lease termination.

The RIFIA shall not renew or extend any lease, or provide any new lease, for a dwelling unit for any household that includes an adult member who has been determined to be in noncompliance with the requirements of this policy and has failed to attempt to cure the noncompliance.

Location of the Community Service or Family Self-Sufficiency Program

The RIHA may provide a community service or an economic self sufficiency program to meet the requirements of this policy, however, RIHA shall not substitute participation in community service or an economic self-sufficiency program for work performed by an employee of RLI-LA or supplant a job at any location at which community work requirements are fulfilled.

Administration

The RIHA may contract out the administration of the Community Service and Work Requirement

Reduction Based on Time Limit for Assistance

program to a qualified agency as needed.

*Rock Island Housing Authority
Community Service
Requirement*

Public Housing Drug Elimination Program Plan

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

Annual PHDEP Plan Table of Contents:

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

Section 1: General Information/History

A. Amount of PHDEP Grant \$135,130

B. Eligibility type (Indicate with an "x") N1 _____ N2 _____ R X

C. FFY in which funding is requested 2001

D. Executive Summary of Annual PHDEP Plan

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

The Housing Authority of the City of Rock Island proposes to continue and expand their current PHDEP strategy. The program includes a variety of programs and activities designed to eradicate drugs from public housing. Programs include: Community Policing, physical improvements to enhance security, Volunteer Tenant Patrols and Drug Prevention Programs targeted at youth, teens and adults.

E. Target Areas

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

PHDEP Target Areas (Name of development(s) or site)	Total # of Units within the PHDEP Target Area(s)	Total Population to be Served within the PHDEP Target Area(s)
Manor Homes	102	282
Lincoln Homes	45	114
Sunset Heights	141	173
Valley Homes	57	137
Spencer Towers	199	161

F. Duration of Program

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

6 Months _____ 12 Months _____ 18 Months _____ 24 Months X
Other _____

G. PHDEP Program History

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

Fiscal Year of Funding	PHDEP Funding Received	Grant #	Fund Balance as of Date of this Submission	Grant Extensions or Waivers	Anticipated Completion Date
FY 1995	\$198,130	IL06DEP0180195	\$0.00	(GE)	
FY 1996	\$250,000	IL06DEP0180196	\$0.00	(GE)	
FY 1997	N/A	N/A	N/A	N/A	N/A
FY1998	N/A	N/A	N/A	N/A	N/A
FY 1999	\$120,967	IL06DEP0180199	\$21,090.5		12/31/0
FY 2000	\$126,073	IL06DEP0180100	7		1
			\$116,153.		12/31/0
			63		2

Section 2: PHDEP Plan Goals and Budget

A. PHDEP Plan Summary

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

B. PHDEP Budget Summary

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

FY _____ PHDEP Budget Summary	
Budget Line Item	Total Funding
9110 - Reimbursement of Law Enforcement	\$60,000
9120 - Security Personnel	
9130 - Employment of	

Investigators	
9140 - Voluntary Tenant Patrol	\$ 3,000
9150 - Physical Improvements	\$36,000
9160 - Drug Prevention	\$36,130
9170 - Drug Intervention	
9180 - Drug Treatment	
9190 - Other Program Costs	
TOTAL PHDEP FUNDING	\$135,130

C. PHDEP Plan Goals and Activities

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

9110 - Reimbursement of Law Enforcement					Total PHDEP Funding: \$60,000		
Goal(s)	Reduce the presence of drugs and violence in the public housing developments.						
Objectives	Hire a full-time Police Officer for a one year period to aid in reducing drugs and drug related activity.						
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHDEP Funding	Other Funding (Amount/Source)	Performance Indicators
1. Police Officer			1/1/02	12/31/02	\$60,000		
2.							
3.							

9140 - Voluntary Tenant Patrol					Total PHDEP Funding: \$3,000		
Goal(s)	Increase resident awareness of drugs and violence and aid in its education.						
Objectives	Supply tenant patrol with new uniforms.						
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHDEP Funding	Other Funding (Amount/Source)	Performance Indicators
1. Equipment		All Developments	1/1/02	12/31/02	\$3,000		
2.							
3.							

9150 - Physical Improvements					Total PHDEP Funding: \$36,000		
Goal(s)	Increase resident safety and overall security of all developments.						
Objectives	Use lighting, cameras and						
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHDEP Funding	Other Funding (Amount /Source)	Performance Indicators
1.Cameras			1/1/02	12/31/02	15,000		
2.Fencing			1/1/02	12/31/02	16,000		
3.Lighting			1/1/02	12/31/02	5,000		

9160 - Drug Prevention					Total PHDEP Funding: \$		
Goal(s)	Reduce the number of youth, teens and adults who may otherwise chose drug use as an alternative.						
Objectives	Provide drug prevention activities for youth teen and adults to raise the level of awareness to problems which exist in the community.						
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHDEP Funding	Other Funding (Amount /Source)	Performance Indicators
1.Activities-Programs			1/1/02	12/31/02	\$36,130		
2.							
3.							

Section 3: Expenditure/Obligation Milestones

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

Budget Line Item #	25% Expenditure of Total Grant Funds By Activity #	Total PHDEP Funding Expended (sum of the activities)	50% Obligation of Total Grant Funds by Activity #	Total PHDEP Funding Obligated (sum of the activities)
<i>e.g Budget Line Item # 9120</i>	<i>Activities 1, 3</i>		<i>Activity 2</i>	
9110			Activity 1	\$60,000
9120				
9130				
9140			Activity 1	\$3,000
9150				
9160			Activity 1	\$36,130
9170				
9180				
9190				
TOTAL		\$		\$135,130

Section 4: Certifications

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

ROCK ISLAND HOUSING AUTHORITY
PET POLICY

INTRODUCTION

The purpose of the policy is to ensure that pet ownership will not be injurious to persons or property, or violate the rights of all tenants to clean, quiet, and safe surroundings. This policy explains the RIHA's policies on keeping pets and any criteria or standards pertaining to the policy. The rules adopted are reasonably related to the legitimate interest of this PHA to provide a decent, safe and sanitary living environment for all tenants, to protecting and preserving the physical condition of the property, and the financial interest of the PHA.

A. ENABLING REGULATIONS

“Section 526 of the Quality Housing And Work Responsibility Act of 1998 (QHWRA) provides that residents of public housing may own 1 or more common household pets. This is subject to the reasonable requirements of the PHA. The resident must maintain each pet responsibly and in accordance with applicable State and local public health, animal control, and animal anti-cruelty laws and regulations and with the policies established in the agency plan for the PHA. To this end, the Rock Island Housing Authority has adopted ‘reasonable’ pet requirements...”

These “Reasonable Pet Requirements” incorporate the various state and local laws governing pets that include inoculating, licensing, and restraint, and provide sufficient flexibility to protect the rights and privileges of other residents who chose not to own pets.

In the event of an emergency or building evacuation it is the responsibility of the pet owner to remove the animal.

B. TYPE OF DWELLING UNITS PERMITTING PETS

All residents of RIHA are eligible for pets according to the “Pet Policy.”

C. TYPE OF PETS AND NUMBER PER UNIT

A common household pet is defined as being a cat, dog, goldfish or tropical fish, canary, parakeet, cockateel, lovebird, hamster, gerbil, guinea pig or rabbit. Examples of animals that are not considered common household for purposes of this policy include: Reptiles, amphibians, insects, mice, rats or other animals not listed above. No dangerous or intimidating pets, i.e., pit-bull dogs, rottweilers, or doberman pinchers, will be permitted.

The following number of pets to a unit will be permitted: two cats, one dog, one fish bowl or tank, one cage with no more than two birds, two hamsters, two guinea pigs, one gerbil, one rabbit.

ROCK ISLAND HOUSING AUTHORITY
PET POLICY

D. REGULATION REQUIREMENTS PRIOR TO ADMISSION (EXHIBIT I)

All pets must be registered with Management before permission is granted. Registration must show type of pet, recent picture, name, age, license number, and current inoculation information, name and address of the pet's veterinarian, plus a signed responsibility card showing the names of three (3) persons to call to come get the pet in the event of the tenant's illness or death.

Residents will be refused pet registration if management determines the tenant is unable to fulfill their past or future obligations as a pet owner, unable to adhere to the terms of the lease, or house pet rules, the animal does not meet the definition of common household pet, or the temperament of the animal is considered dangerous.

A pet at time of submission of "Pet Permit Application" in the amount of \$50.00 will accompany the application. This amount will be applied on the \$150.00 pet deposit if the pet application is approved. The pet deposit is to be used to cover cost of damages or fumigation as the result of pet ownership. The pet deposit will be refunded minus any applicable charges within thirty- (30) days after resident vacates the unit or the pet is permanently removed from the unit.

In the event the pet owner is incapacitated or no longer available to care for the pet, the person designated on the registration form must remove the pet. In absence of the designated person's availability, management will place the pet with the Rock Island County Humane Society.

E. PET RESPONSIBILITY CARD (EXHIBIT I)

Prior to pet admission, the owner must fill in and sign a written responsibility form showing name, address and phone number of three (3) local persons who will come and get the pet in the event of a tenant's illness, vacation, or death. The responsibility form must be renewed each year by June 30th. Persons so named will be responsible in the order of their names on the responsibility card.

F. PET DAMAGE DEPOSIT

A "Pet Damage Deposit" will be required for dogs and cats only, however, all pet owners must comply with registration rules for all other pets. The "Pet Damage Deposit" is to be used 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 dwelling unit. The amount of the "Pet Damage Deposit" will be \$150.00 for hi-rises and family developments. Tenant will pay \$50.00 at the time of application and remaining balance at time of application approval. If this creates a financial hardship, the remaining balance may be paid in full by six (6) months. Upon vacancy or pet has been permanently removed the Pet Damage Deposit will be refunded minus repairs or damage or necessary fumigation incurred by the pet.

ROCK ISLAND HOUSING AUTHORITY
PET POLICY

Residents liability for damages caused by his/her pet is not limited to the amount of the pet deposit and the resident will be required to reimburse the project for the amount for the real cost of any and all damages caused by his/ her pet where they exceed the amount of the pet deposit.

All units occupied by a dog or cat will be fumigated upon being vacated, the cost of which will be born by the security deposit. Infestation of a unit by fleas carried by his/her pet shall be the responsibility of the pet owner.

H. DOG OWNER REQUIREMENTS

Any dog must be no less than six (6) weeks old

Dogs must be spayed or neutered by six- (6) months of age and proof must be furnished to the Housing Manger.

Each dog must be licensed by proper Authority and proof of license renewal must be furnished by the tenant each year by June 30th to his or her Housing Manager.

The dog must wear a collar at all times showing license and owner's name and address.

Each year by June 30th, the tenant must show proof that the dog has had the proper Parvo shots and distemper and rabies shots, the proof must be signed by a veterinarian.

A dog cannot be over 20 inches tall at the top of the shoulder, or weigh over 30 pounds when it is considered full-grown. or

A dog must be on a leash at all times when outside owners apartment unless it is in an approved locked pet carrier. The leash must be no longer than six (6) feet long. Any city, county or state rules governing the leashing of animals shall also apply.

Dogs cannot be exercised on Rock Island Housing Authority property between 9:00 a.m. and 4:30 p.m.

The pet owner must have a utensil such as a "Pooper Scooper" to use to remove any waste from his pet as soon as it is deposited on Rock Island Housing Authority property. The waste must then be placed in a plastic bag, sealed tightly, and disposed of as trash.

IMPORTANT: Only one pet is allowed in an elevator at a time. If one pet is in the car when it stops at a floor, the pet owner must wait for a car without a pet.

No dog may stay alone in an apartment for more than 12 hours. It is the responsibility of the tenant if they have to leave suddenly and be away for more than 12 hours to take the pet elsewhere until they return. If a pet is found alone, see Pet Removal policy.

ROCK ISLAND HOUSING AUTHORITY
PET POLICY

Pet owner must designate an alternative residence for the pet before management approves pet.

Pet owners are responsible for immediate removal of the feces of their pet and shall be charged in instances where damages occur to the Housing Authority property due to pet or removal of pet feces by staff.

Pet owners shall be charged \$10.00 for their first offense of not removing the feces of their pet, the second time the pet owner shall have a written warning placed in their tenant file and must meet with their Housing Manager, and the third time the pet owner will permanently remove the pet from the unit. Failure to comply can result in termination of their lease.

Pet owners are not to allow their pet to urinate on bushes.

Clean-up of common areas required because of attributable pet nuisance shall be billed to and paid by the resident pet owner within thirty (30) days of incident.

Pet owners will be responsible for all costs incurred if their pet inflicts bodily injuries to a person.

Pet Owners will be responsible for all costs incurred if their pet damages property belonging to RIHA or another tenant.

I CAT OWNER REQUIREMENTS

Cats may be not less than six (6) weeks old

All cats must be litter trained before admission.

Proof that the cat has been declawed front claws (only) and spayed or neutered by six (6) months and proof must be shown to the Housing Manager.

The cat must wear a collar at all times showing owner's name and address plus a flea collar.

Proof must be shown before admission and each year by June 30th that the cat has had the proper FVR-CP and rabies and distemper shots. This proof must be signed by a veterinarian.

Cat must be on a leash at all times when outside of the owner's apartment unless is in an approved locked pet carrier. The least must be no longer than six (6) feet. Any city, county, or state rule governing the leashing of animals shall apply.

Tenant must use a Rock Island Housing Authority approved type litter box, which is kept clean daily. Litter must be put in a sealed plastic bag and disposed of daily.

No cat can be over eight (8) inches tall at the shoulders and weigh over 15 pounds.

ROCK ISLAND HOUSING AUTHORITY
PET POLICY

Cats may be exercised on the Rock Island Housing Authority property.

No cat may stay alone in an apartment overnight for more than 24 hours. It is the responsibility of the tenant if they have to leave suddenly and be away overnight to take the pet elsewhere until they return. If a pet is found alone, see Pet Removal policy

The pet owner must have a utensil such as a "Pooper Scooper" to use to remove any waste from his pet as soon as it is deposited on Rock Island Housing Authority property. The waste must then be placed in a plastic bag, sealed tightly, and disposed of as trash.

The flea collar must be changed every three- (3) months.

All animal waste or litter from cat litter boxes shall be picked up immediately by the pet owner and disposed of in a sealed plastic bag and placed in trash bins. Cat litter shall be changed at least twice a week.

Cat litter shall not be disposed of by flushing down toilets. Charges for unclogging toilets or clean-up of common area required because of attributable pet nuisance shall be billed to and paid by the resident pet owner within thirty (30) days of incident.

Clean-up of common area required because of attributable pet nuisance shall be billed to and paid by the resident pet owner within thirty (30) days of incident.

Pet owners will be responsible for all cost incurred if their pet inflicts bodily injuries.

Pet Owners will be responsible for all cost incurred if their pet damages property belonging to RIHA or another tenant.

J. BIRD OWNER REQUIREMENTS

No monthly maintenance fee unless a problem exists.

No more than (2) birds to a unit will be permitted, canaries, parakeets, cockateels or lovebirds only. **No parrots.**

The cage must be no larger than five- (5) feet high and four- (4) feet wide.

Cages must be cleaned and debris disposed of in a plastic bag to be put in the trash immediately.

Birds must be healthy and free of disease at all times.

Birds that do not have their wing clipped must be in a cage when inside of the resident's apartment or entering or leaving the building.

ROCK ISLAND HOUSING AUTHORITY
PET POLICY

Birds must be in a cage when entering or leaving the building.

Birds are not permitted to be left alone in an apartment over 24 hours unless arrangements for daily care has been made by the owner.

Clean-up of common areas required because of attributable pet nuisance shall be billed to and paid by the resident pet owner within thirty (30) days of incident.

Pet owners will be responsible for all costs incurred if their pet inflicts bodily injuries.

Pet Owners will be responsible for all costs incurred if their pet damages property belonging to RIHA or another tenant.

K. FISH OWNER REQUIREMENTS

Monthly maintenance charge of \$2.00 for fish tanks over 10 gallons to be paid with the rent by the fifth (5th) of each month in a facility where the tenant does not pay for electricity. No charge for fish tanks under 10 gallons.

One (1) fish tank only permitted to a unit and must not be bigger than twenty (20) gallon size, or one (1) large gold fish bowl no more than one gallon size.

Fish may not be alone in the unit over one (1) week unless the owner has made arrangements for daily care.

Pet owner must be aware when cleaning of filling fish tanks that water damage done to tenant's apartment or apartments under him will be billed to the pet owner and any charges must be paid within 30 days of the incident.

Clean-up of common area required because of attributable aquarium nuisance shall be billed to and paid by the resident pet owner within thirty (30) days of incident.

Pet Owners will be responsible for all cost incurred if their aquarium damages property belonging to RIHA or another tenant.

L. GENERAL POLICY FOR AUTHORIZED PETS

Pets must go directly from their floor to the elevator and down to first floor to the outside and back the same way.

Only one pet is allowed in elevator at a time. If one pet is in the car when it stops at a floor, the pet owner must wait for a car without a pet.

ROCK ISLAND HOUSING AUTHORITY
PET POLICY

Pets are not permitted on floors other than first floor or their own apartment floor.

Pets are never permitted in the public rooms, i.e.: office, community room, laundry room, lounge, or smoking room.

Pets are not permitted in hallways except for proceeding directly to the elevator or apartment when entering or exiting.

Any pet suffering illness must have an appointment within two (2) days to a veterinarian for diagnosis and treatment. The Rock Island Housing Authority must, upon demand, be shown a statement from the veterinarian indicating the diagnosis. Any pet suspected of suffering symptoms of rabies or any other disease considered to be a threat to health must be immediately removed from the premises until signed evidence from a veterinarian can be produced to indicate that the animal is not so afflicted.

Resident pet owners agree to control the noise of his/her pet such that it does not constitute a nuisance to other tenants. Failure to so control pet noise may result in the removal of the pet from the premises.

PUBLIC HOUSING AUTHORITY SHALL TAKE ALL NECESSARY ACTIONS UNDER THE LAW TO REMOVE ANY PET THAT CAUSES BODILY INJURY TO ANY TENANT, GUEST, VISITOR, OR STAFF MEMBER.

All resident pet owners shall provide adequate care, nutrition, exercise, and medical attention for his/her pet. Pets which appear to be poorly cared for or which are left unattended for longer than the required designated time as specified under the described pet requirements for that pet will be reported to the Humane Society and will be removed from the premises at the pet owner's expense.

In the event of a tenant's sudden illness the resident pet owner agrees that management shall have discretion with respect to the provision of care to the pet consistent with policy guidelines and at the expense of the resident pet owner unless written instruction with respect to such area are provided in advance by the resident to the project office and all care shall be at the resident's expense.

Unwillingness on the part of named caretakers of a pet to assume custody of the pet shall relieve management of any requirement to adhere to any written instruction with respect to the care or disposal of a pet and shall be considered as authorization to management to exercise discretion in such regard consistent with policy guidelines.

Resident pet owners acknowledge that other residents may have chemical sensitivities or allergies related to pets or be easily frightened by such animals. The resident, therefore, agrees to exercise common sense and common courtesy with respect to such other resident's right to peaceful and quiet enjoyment of the premises.

ROCK ISLAND HOUSING AUTHORITY
PET POLICY

Tenants shall not alter the interior of their unit, patio, or balcony to create enclosure for an animal or bird.

Tenants shall not tie pets outside of the dwelling unit.

Dog houses are not allowed on Housing Authority property.

No visitor or guest will be allowed to bring pets on the premises at anytime. Residents will not be allowed to Pet Sit or House a Pet without fully complying with this policy.

Tenants shall not feed stray or unregistered animals. This shall constitute having pet without permission of the Authority.

M. PET REMOVAL

Management may move to require the removal of a pet from the premises on a temporary or permanent basis for the following causes:

- a. Creation of a nuisance after proper notification consistent with these Pet Rules. Notice shall be within a forty-eight (48) hour period.
- b. Excessive pet noise or odor with proper notification.
- c. Unruly or dangerous behavior.
- d. Excessive damage to the resident's apartment unit.
- e. Repeated problems with vermin flea infestation.
- f. Failure of the tenant to provide for adequate care of his/her pet.
- g. Leaving a pet unattended for more than the designated time as described under the Pet Owner requirements.
- h. Failure of the tenant to provide adequate appropriate care.
- i. Tenant serious illness and/or death.
- j. Failure to observe any other rule contained in this section and not here listed upon proper notification.

ROCK ISLAND HOUSING AUTHORITY
PET POLICY

Phone #: _____

Color Photograph Attached: _____

Date application received: _____ By: _____

Policy explained to tenant by: _____

Apartment inspected for housekeeping: _____ Yes _____ No

Approved by: _____

Rejected by: _____

Reason(s): _____

.

Date Permit Issued: _____ Permit Number: _____

ROCK ISLAND HOUSING AUTHORITY
PET POLICY

PET PERMIT NO. _____

1. Parties and dwelling unit:

Parties of this unit are the ROCK ISLAND HOUSING AUTHORITY, referred to as the management /landlord, and _____ referred to as the tenant. The Landlord leases to the tenant unit number _____ located at _____

2. Length of Time (Term):

The term of this permit shall begin on _____ and end as per the Pet Policy.

3. Pet Security Deposit:

The tenant has deposited \$ _____ with the landlord. The landlord will hold the pet security deposit for the period the tenant occupies the unit. After the tenant has moved from the unit or the pet has been permanently removed, the landlord will determine whether the tenant is eligible for a refund of any or all of the pet security deposit, and make such within (30) days.

4. The tenant agrees to file a copy of any Municipal registration or license with the landlord, and to keep same current.

5. The tenant agrees to keep the pet properly inoculated for rabies and distemper, and to file proof that such inoculations or vaccinations are current.

ROCK ISLAND HOUSING AUTHORITY
PET POLICY

PET PERMIT NO._____

6. The tenant agrees to assume all personal financial responsibility for damages to any personal or project property caused by the pet, and assumes personal responsibility for personal injury to an party, caused by the pet.
7. The tenant hereby certifies and agrees to the general terms and conditions of the management of this pet by the tenant, and understands and acknowledges that the Pet Permit can be revoked for failure to follow and abide by the Pet Policy.
8. The tenant agrees to make the apartment available for inspection, during normal working hours, upon thirty- (30) minutes notice.
9. The tenant agrees to have a pet use outside relief area, if pet is dog or cat, or cats may use approved kitty litter container in apartment. Tenant further agrees to pay for the cost of any clean up as the result of "accidents" by the pet.
10. The tenant agrees to dispose of pet waste and kitty litter by placing in double plastic bags and putting bag in trash receptacle – daily.
11. The tenant agrees and understands that the Pet Policy is a part of the lease and this permit.
12. The tenant agrees to file a "Pet Emergency Card Plan" with the Landlord and agrees to hold the landlord and employees harmless of any liability in connection with the Pet Emergency Card Plan.

AS A CONDITION OF THE APPLICATION FOR A PET PERMIT ON _____,
I _____, UNDERSTAND AND AGREE TO THE TERMS AND
CONDITIONS OF THE PET POLICY.

Landlord

Date

Tenant

Date

ROCK ISLAND HOUSING AUTHORITY
PET POLICY

INTRODUCTION

The purpose of the policy is to ensure that pet ownership will not be injurious to persons or property, or violate the rights of all tenants to clean, quiet, and safe surroundings. This policy explains the RIHA's policies on keeping pets and any criteria or standards pertaining to the policy. The rules adopted are reasonably related to the legitimate interest of this PHA to provide a decent, safe and sanitary living environment for all tenants, to protecting and preserving the physical condition of the property, and the financial interest of the PHA.

A. ENABLING REGULATIONS

“Section 526 of the Quality Housing And Work Responsibility Act of 1998 (QHWRA) provides that residents of public housing may own 1 or more common household pets. This is subject to the reasonable requirements of the PHA. The resident must maintain each pet responsibly and in accordance with applicable State and local public health, animal control, and animal anti-cruelty laws and regulations and with the policies established in the agency plan for the PHA. To this end, the Rock Island Housing Authority has adopted ‘reasonable’ pet requirements...”

These “Reasonable Pet Requirements” incorporate the various state and local laws governing pets that include inoculating, licensing, and restraint, and provide sufficient flexibility to protect the rights and privileges of other residents who chose not to own pets.

In the event of an emergency or building evacuation it is the responsibility of the pet owner to remove the animal.

B. TYPE OF DWELLING UNITS PERMITTING PETS

All residents of RIHA are eligible for pets according to the “Pet Policy.”

C. TYPE OF PETS AND NUMBER PER UNIT

A common household pet is defined as being a cat, dog, goldfish or tropical fish, canary, parakeet, cockateel, lovebird, hamster, gerbil, guinea pig or rabbit. Examples of animals that are not considered common household for purposes of this policy include: Reptiles, amphibians, insects, mice, rats or other animals not listed above. No dangerous or intimidating pets, i.e., pit-bull dogs, rottweilers, or doberman pinchers, will be permitted.

~~One type of pet to a unit will be permitted~~ The following number of pets to a unit will be permitted: ~~one~~ two cats, one dog, one fish bowl or tank, one cage with no more than two birds, two hamsters, two guinea pigs, one gerbil, one rabbit

ROCK ISLAND HOUSING AUTHORITY
PET POLICY

D. REGULATION REQUIREMENTS PRIOR TO ADMISSION (EXHIBIT I)

All pets must be registered with Management before permission is granted. Registration must show type of pet, recent picture, name, age, license number, and current inoculation information, name and address of the pet's veterinarian, plus a signed responsibility card showing the names of three (3) persons to call to come get the pet in the event of the tenant's illness or death.

Residents will be refused pet registration if management determines the tenant is unable to fulfill their past or future obligations as a pet owner unable to adhere to the terms of the lease, or house pet rules, the animal does not meet the definition of common household pet, or the temperament of the animal is considered dangerous.

A pet at time of submission of "Pet Permit Application" in the amount of \$50.00 will accompany the application. This amount will be applied on the \$150.00 pet deposit if the pet application is approved. ~~Also, a monthly fee of \$5.00 for the hi-rises and \$10.00 for the family developments will be assessed each pet owner to cover the costs associated with the implementation of the pet policy.~~ The pet deposit is to be used to cover cost of damages or fumigation as the result of pet ownership. The pet deposit will be refunded minus any applicable charges within thirty- (30) days after resident vacates the unit or the pet is permanently removed from the unit.

In the event the pet owner is incapacitated or no longer available to care for the pet, the person designated on the registration from must remove the pet. In absence of the designated person's availability, management will place the pet with the Rock Island County Humane Society.

E. PET RESPONSIBILITY CARD (EXHIBIT I)

Prior to pet admission, the owner must fill in and sign a written responsibility form showing name, address and phone number of three (3) local persons who will come and get the pet in the event of a tenant's illness, vacation, or death. The responsibility form must be renewed each year by June 30th. Persons so named will be responsible in the order of their names on the responsibility card.

F. PET DAMAGE DEPOSIT

A "Pet Damage Deposit" will be required for dogs and cats only, however, all pet owners must comply with registration rules for all other pets. The "Pet Damage Deposit" is to be used 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 dwelling unit. The amount of the "Pet Damage Deposit" will be \$150.00 for hi-rises and ~~\$350.00 for~~ family developments. Tenant will pay \$50.00 at the time of application and remaining balance at time of application approval. If this creates a financial hardship, the remaining balance may be paid in ~~\$50.00 monthly installments until paid in full~~ by six (6) months. Upon vacancy or pet has been permanently removed the Pet Damage Deposit will be refunded minus repairs or damage or

ROCK ISLAND HOUSING AUTHORITY
PET POLICY

necessary fumigation incurred by the pet.

Residents liability for damages caused by his/her pet is not limited to the amount of the pet deposit and the resident will be required to reimburse the project for the amount for the real cost of any and all damages caused by his/ her pet where they exceed the amount of the pet deposit.

All units occupied by a dog or cat will be fumigated upon being vacated, the cost of which will be born by the security deposit. Infestation of a unit by fleas carried by his/her pet shall be the responsibility of the pet owner.

HUD has informed us we cannot require Liability Insurance

~~G. INSURANCE COVERAGE -- REQUIRED TENANT COVERAGE~~

~~Each pet owner will be required to show proof of Liability Insurance no less than \$10,000 to cover property damage or personal injury caused by their pet. A copy of the policy will be required for the Rock Island Housing Authority's files. Once each year proof of renewal must also be given to our office by June 30th.~~

H. DOG OWNER REQUIREMENTS

~~Monthly maintenance charge of \$5.00 for tenants residing in hi-rises and \$10.00 for tenants residing in family developments to be paid with the rent by the first (1st) of each month.~~

Any dog must be no less than six (6) ~~months~~ weeks old

~~Proof that the dog is already neutered or spayed must be furnished.~~

Dog must be spayed or neutered by six (6) months of age and proof must be furnished to the Housing Manger.

Each dog must be licensed by proper Authority and proof of license renewal must be furnished by the tenant each year by June 30th to his or her Housing Manager.

The dog must wear a collar at all times showing license and owner's name and address ~~plus a flea collar.~~

Each year by June 30th, the tenant must show proof that the dog has had the proper Parvo shots and distemper and rabies shots, the proof must be signed by a veterinarian.

A dog cannot be over 20 30 inches tall at the top of the shoulder, or weigh over 30-(40) (50) pounds when it is considered full-grown. (or The policy does not require restrictions on dogs.)

ROCK ISLAND HOUSING AUTHORITY
PET POLICY

A dog must be on a leash at all times when outside owners apartment unless it is in an approved locked pet carrier. The leash must be no longer than six (6) feet long. Any city, county or state rules governing the leashing of animals shall also apply.

~~Dogs may not be exercised on Rock Island Housing Authority property.~~

Dogs cannot be exercised on Rock Island Housing Authority property between 9:00 a.m. and 4:30 p.m.

The pet owner must have a utensil such as a "Pooper Scooper" to use to remove any waste from his pet as soon as it is deposited on Rock Island Housing Authority property. The waste must then be placed in a plastic bag, sealed tightly, and disposed of as trash.

IMPORTANT: Only one pet is allowed in an elevator at a time. If one pet is in the car when it stops at a floor, the pet owner must wait for a car without a pet.

No dog may stay alone in an apartment overnight for more than 24 hours. It is the responsibility of the tenant if they have to leave suddenly and be away overnight for more than 24 hours to take the pet elsewhere until they return. If a pet is found alone, see Pet Removal policy.

Pet owner must designate an alternative residence for the pet before management approves pet.

~~The flea collar must be changed every three (3) months.~~

Pet owners are responsible for immediate removal of the feces of their pet and shall be charged in instances where damages occur to the Housing Authority property due to pet or removal of pet feces by staff.

1. Pet owners shall be charged \$10.00 each time for not removing the feces of their pet after the third offensive the Health Department will be notified
- or
2. Pet owners shall be charged \$10.00 for their first offensive of not removing the feces of their pet, the second time the pet owner shall have a written warning placed in their tenant file and must meet with their Housing Manager and the third time the pet owner will permanently remove the pet from the unit. Failure to comply can result in termination of their lease.

Pet owners are not to allow their pet to urinate on bushes.

Clean-up of common area required because of attributable pet nuisance shall be billed to and paid by the resident pet owner within thirty (30) days of incident.

ROCK ISLAND HOUSING AUTHORITY
PET POLICY

Pet owners will be responsible for all cost incurred if their pet inflicts bodily injuries person.

Pet Owners will be responsible for all cost incurred if their pet damages property belonging to RIHA or another tenant.

I. CAT OWNER REQUIREMENTS

~~Monthly maintenance charge of \$5.00 for hi-rises and \$10.00 for family developments is to be paid with the rent by the (1st) of each month.~~

Cats may be not less than six (6) ~~months~~ weeks old.

All cats must be litter trained before admission.

The cat must be declawed (front claws only) by five months old and spayed or neutered by six (6) months proof. must be shown ~~before admissions~~ to the Housing Manager

The cat must wear a collar at all times showing owner's name and address plus a flea collar.

Proof must be shown before admission and each year by June 30th that the cat has had the proper FVR-CP and rabies and distemper shots. This proof must be signed by a veterinarian.

Cat must be on a leash at all times when outside of the owner's apartment unless is in an approved locked pet carrier. The least must be no longer than six (6) feet. Any city, county, or state rule governing the leashing of animals shall apply.

Tenant must use a Rock Island Housing Authority approved type litter box, which is kept clean daily. Litter must be put in a sealed plastic bag and disposed of daily.

No cat can be over eight (8) inches tall at the shoulders and weigh over 15 pounds.

Cats may ~~not~~ be exercised on the Rock Island Housing Authority property.

No cat may stay alone in an apartment overnight for more than 72 hours. It is the responsibility of the tenant if they have to leave suddenly and be away overnight to take the pet elsewhere until they return. If a pet is found alone, see Pet Removal policy.

ROCK ISLAND HOUSING AUTHORITY
PET POLICY

The pet owner must have a utensil such as a "Pooper Scooper" to use to remove any waste from his pet as soon as it is deposited on Rock Island Housing Authority property. The waste must then be placed in a plastic bag, sealed tightly, and disposed of as trash.

The flea collar must be changed every three- (3) months.

All animal waste or litter from cat litter boxes shall be picked up immediately by the pet owner and disposed of in a sealed plastic bag and placed in trash bins. Cat litter shall be changed at least twice a week.

Cat litter shall not be disposed of by flushing down toilets. Charges for unclogging toilets or clean-up of common area required because of attributable pet nuisance shall be billed to and paid by the resident pet owner within thirty (30) days of incident.

Clean-up of common area required because of attributable pet nuisance shall be billed to and paid by the resident pet owner within thirty (30) days of incident.

Pet owners will be responsible for all cost incurred if their pet inflicts bodily injuries person.

Pet Owners will be responsible for all cost incurred if their pet damages property belonging to RIHA or another tenant.

J. BIRD OWNER REQUIREMENTS

No monthly maintenance fee unless a problem exists.

No more than (2) birds to a unit will be permitted, canaries, parakeets, cockateels or lovebirds only. **No parrots.**

The cage must be no larger than ~~three (3)~~ five (5) feet high and ~~two (2)~~ four (4) feet wide.

Cages must be cleaned and debris disposed of in a plastic bag to be put in the trash immediately.

Birds must be healthy and free of disease at all times.

Birds that do not have their wing clipped must be in a cage when inside of the resident's apartment. **Birds must be in a cage when entering or leaving the building.**

Birds are not permitted to be left alone in an apartment over ~~two (2)~~ five (5) days unless an arrangement for daily care has been made by the owner.

ROCK ISLAND HOUSING AUTHORITY
PET POLICY

Clean-up of common area required because of attributable pet nuisance shall be billed to and paid by the resident pet owner within thirty (30) days of incident.

Pet owners will be responsible for all cost incurred if their pet inflicts bodily injuries person.

Pet Owners will be responsible for all cost incurred if their pet damages property belonging to RIHA or another tenant.

K. FISH OWNER REQUIREMENTS

Monthly maintenance charge of \$2.00 for fish tanks over 10 gallons ~~electric heat and pump use for fish tank~~ to be paid with the rent by the fifth (5th) of each month in a facility where the tenant does not pay for electricity. No charge for a fish bowl not over three (3) quarts.

One (1) fish tank only permitted to a unit and must not be bigger than ~~ten (10)~~ twenty (20) gallon size, or one (1) large gold fish bowl no more than one gallon size.

Fish may not be alone in the unit over one (1) week unless the owner has made arrangements for daily care.

Pet owner must be aware when cleaning of filling fish tanks that water damage done to tenant's apartment or apartments under him will be billed to the pet owner and any charges must be paid within 30 days of the incident.

Clean-up of common area required because of attributable aquarium nuisance shall be billed to and paid by the resident pet owner within thirty (30) days of incident.

Pet Owners will be responsible for all cost incurred if their aquarium damages property belonging to RIHA or another tenant.

L. GENERAL POLICY FOR AUTHORIZED PETS

Pets must go directly from their floor to the elevator and down to first floor to the outside and back the same way.

Only one pet is allowed in elevator at a time. If one pet is in the car when it stops at a floor, the pet owner must wait for a car without a pet.

Pets are not permitted on other floors other than first floor or their own apartment floor.

ROCK ISLAND HOUSING AUTHORITY
PET POLICY

Pets are never permitted in the public rooms, i.e.: office, community room, laundry room, lounge, or smoking room.

Pet are not permitted in hallways except for proceeding directly to the elevator or apartment when entering or exiting.

Any pet suffering illness must have an appointment ~~be taken~~ within two (2) days with a veterinarian for diagnosis and treatment. The Rock Island Housing Authority must, upon demand, be shown a statement from the veterinarian indicating the diagnosis. Any pet suspected of suffering symptoms of rabies or any other disease considered to be a threat to health must be immediately removed from the premises until signed evidence from a veterinarian can be produced to indicate that the animal is not so afflicted.

Resident pet owners agree to control the noise of his/her pet such that it does not constitute a nuisance to other tenants. Failure to so control pet noise may result in the removal of the pet from the premises.

PUBLIC HOUSING AUTHORITY SHALL TAKE ALL NECESSARY ACTIONS UNDER THE LAW TO REMOVE ANY PET THAT CAUSES BODILY INJURY TO ANY TENANT, GUEST, VISITOR, OR STAFF MEMBER.

All resident pet owners shall provide adequate care, nutrition, exercise, and medical attention for his/her pet. Pets which appear to be poorly cared for or which are left unattended for longer than ~~the required designated time as specified under the describe pet requirements for that pet 12 hours~~ will be reported to the Humane Society and will be removed from the premises at the pet owner's expense.

In the event of a tenant's sudden illness the resident pet owner agrees that management shall have discretion with respect to the provision of care to the pet consistent with policy guidelines and at the expense of the resident pet owner unless written instruction with respect to such area are provided in advance by the resident to the project office and all care shall be at the resident's expense.

Unwillingness on the part of named caretakers of a pet to assume custody of the pet shall relieve management of any requirement to adhere to any written instruction. With respect to the care or disposal of a pet and shall be considered as authorization to management to exercise discretion in such regard consistent with policy guidelines.

Resident pet owners acknowledge that other residents may have chemical sensitivities or allergies related to pets or easily frightened by such animals. The resident, therefore, agrees to exercise common sense and common courtesy with respect to such other resident's right to peaceful and quiet enjoyment of the premises.

ROCK ISLAND HOUSING AUTHORITY
PET POLICY

Tenants shall not alter the interior of their unit, patio, or balcony to create enclosure for an animal or bird.

Tenants shall not tie pets outside of the dwelling unit.

Dog houses are not allowed on Housing Authority property.

No visitor or guest will be allowed to bring pets on the premises at anytime. Residents will not be allowed to Pet Sit or House a Pet without fully complying with this policy.

Tenants shall not feed stray or unregistered animals. This shall constitute having pet without permission of the Authority.

M. PET REMOVAL

Management may move to require the removal of a pet from the premises on a temporary or permanent basis for the following causes:

- a. Creation of a nuisance after proper notification consistent with these Pet Rules. Notice shall be within a forty-eight (48) hour period.
- b. Excessive pet noise or odor with proper notification.
- c. Unruly or dangerous behavior.
- d. Excessive damage to the resident's apartment unit.
- e. Repeated problems with vermin flea infestation.
- f. Failure of the tenant to provide for adequate care of his/her pet.
- g. Leaving a pet unattended for more than the designated time as described under the Pet Owner requirements 12 hours.
- h. Failure of the tenant to provide adequate appropriate care.
- i. Tenant serious illness and/or death.
- j. Failure to observe any other rule contained in this section and not here listed upon proper notification.

ROCK ISLAND HOUSING AUTHORITY
PET POLICY

EXHIBIT I

PET PERMIT APPLICATION

Tenant
Name: _____

Tenant
Address: _____

Type of permit requested: _____ DOG _____ CAT _____ BIRD
_____ FISH

Pet Security Deposit: DOG _____

AMOUNT DATE PAID

CAT _____
AMOUNT DATE PAID

Description: Animal's name: _____
Breed _____

Weight: _____
Height: _____

Annual Shots
(date) _____

Male/Date Neutered: _____ License
Number: _____

Female/Date Spayed: _____ License
Number: _____

Emergency Contact:

(1) Name: _____
Relationship: _____

Address: _____

Phone #: _____

ROCK ISLAND HOUSING AUTHORITY
PET POLICY

(2) Name: _____
Relationship: _____

Address: _____

Phone #: _____

(3) Name: _____
Relationship: _____

Address: _____

Phone #: _____

Color Photograph Attached: _____

Insurance Coverage: Agent: _____

Address: _____

Policy Number: _____

Date application received: _____
By: _____

Policy explained to tenant
by: _____

Apartment inspected for housekeeping: _____ Yes _____ No

Approved by: _____

Rejected by: _____

ROCK ISLAND HOUSING AUTHORITY
PET POLICY

Reason(s) : _____

_____.

Date Permit Issued: _____ Permit
Number: _____

ROCK ISLAND HOUSING AUTHORITY
PET POLICY

PET PERMIT NO. _____

1. Parties and dwelling unit:

Parties of this unit are the HOUSING AUTHORITY
OF _____, referred to as the management
/landlord and _____ referred to as the
tenant. The Landlord leases to the tenant unit number
_____ located at _____

2. Length of Time (Term):

The term of this permit shall begin on
_____ and end as per the Pet Policy.

3. Pet Service Fee: (will be removed if there is no monthly fee)

The tenant agrees to pay \$_____ each month as a pet
service fee, to be used in accordance with the Interim Pet
Policy. This amount is due on the first day of each month.

4. Pet Security Deposit:

The tenant has deposited \$_____ with the landlord.
The landlord will hold the pet security deposit for the
period the tenant occupies the unit. After the tenant has
moved from the unit or the pet has been permanently removed,
the landlord will determine whether the tenant is eligible
for a refund of any or all of the pet security deposit, and
make such within (30) days.

5. The tenant agree to obtain personal liability insurance damage coverage prior to issuance of the pet permit, and to keep insurance current so long as the pet resides in the unit.

6. The tenant agrees to file a copy of any Municipal registration or license with the landlord, and to keep same current.

ROCK ISLAND HOUSING AUTHORITY
PET POLICY

7. The tenant agrees to keep the pet properly inoculated for rabies and distemper, and to file proof that such inoculations or vaccinations are current.

ROCK ISLAND HOUSING AUTHORITY
PET POLICY

VII. Terms and Conditions

The following terms and conditions of occupancy are made a part of the Lease.

1. Use and Occupancy of Dwelling: Tenant shall have the right to exclusive use and occupancy of the dwelling unit for Tenant and other household members listed on the lease. With the prior written consent of the Housing Authority, members of the household may engage in legal profit making activities in the dwelling unit incidental to the residential use. [966.4 (d) (1) & (2)]

This provision permits accommodation of Tenant's guests or visitors for a period not exceeding fourteen (14) days. ~~Tenant must register all guests or visitors that will be residing in the unit for more than three (3) consecutive days with the Housing Manager.~~ Tenant must inform their Housing Manager and sign in all guests or visitors that will be residing in the unit for more than three (3) consecutive nights. Permission may be granted, upon written request to the Manager, for an extension of this provision. [966.4 (d) (1)]

32. ~~For the purpose of this dwelling Lease, the term "guest" means a person "(a) who is in the leased unit with the consent of a household member, (b) who is not listed on the Lease as authorized member; and (c) who has not remained in the unit for more than three (3) consecutive days (unless permission for an extended visit beyond the fourteen-day limit and for specified time certain has been previously authorized by the Housing Authority). Any person who is not a guest or tenant but who is staying or residing in the unit on a regular basis is an unauthorized border and will subject the tenant to possible termination of the tenancy.~~ For the purpose of this Lease "the term unauthorized border" means a person (a) who is not on the lease, (b) tenant has not informed their Housing Manger about this person and (c) is in a leased unit with the consent of the tenant or household member for more than three (3) consecutive nights. An unauthorized border is defined as an adult 18 years of age or older.

Any persons exceeding three (3) overnight visits or has a pattern of frequent regular overnight visits and the tenant or household member has not signed in with their Housing Manager, will subject the Tenant to termination of his or her tenancy.

Prior to the expiration of the fourteen-day period or an extended period granted by the Housing Authority, the tenant may apply with the Housing Authority to have the guest become a permanent member of the household and have their name added to the Lease according to the Admission and Occupancy Policy. The addition of another permanent member to the household may change the amount of rent due from the tenant if the tenant has previously selected an income-based rent option.

Draft three
7/9/01