

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

Small PHA Plan Update
Annual Plan for Fiscal Year: **2001**

**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: Menard County Housing Authority

PHA Number: IL28

PHA Fiscal Year Beginning: (mm/yyyy) 6/01/2001

PHA Plan Contact Information:

Name: Anne R. Smith

Phone: 217-632-7723

TDD: 800-526-0844 (Illinois Relay Center)

Email (if available): mcha@springnet1.com

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

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
- Main administrative office of the local, county or 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)

PHA Programs Administered:

- Public Housing and Section 8 Section 8 Only Public Housing Only

Annual PHA Plan

Fiscal Year 20

[24 CFR Part 903.7]

i. Table of Contents

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

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<input checked="" type="checkbox"/> Other (List below, providing each attachment name)	
Pet Policy il28f01	
Community Service Requirement il28g01	

ii. Executive Summary

[24 CFR Part 903.7 9 (r)]

At PHA option, provide a brief overview of the information in the Annual Plan

1. Summary of Policy or Program Changes for the Upcoming Year

In this section, briefly describe changes in policies or programs discussed in last year's PHA Plan that are not covered in other sections of this Update.

Revise work item priorities for the FY2000 Capital Fund Program by rescheduling replacement of interior doors in IL28-03 (\$140,000) to FY2006 and programming the following work items for FY2000:

- Upgrade and automate HVAC controls in IL28-03 \$46,400
- Repair IL28-03 Boiler Room floor \$2,000
- Perform boiler repairs in IL28-03 \$1,600
- Repair sidewalks in IL28-02, 04, 08 and 09 \$90,000

Revise the implementation timetable for the FY2000 Capital Fund Program so that funds are obligated by 9/31/2002 and spent by 9/31/2003.

2. Capital Improvement Needs

[24 CFR Part 903.7 9 (g)]

Exemptions: Section 8 only PHAs are not required to complete this component.

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

B. What is the amount of the PHA's estimated or actual (if known) Capital Fund Program grant for the upcoming year? \$ ____\$389,697_____

C. Yes No Does the PHA plan to participate in the Capital Fund Program in the upcoming year? If yes, complete the rest of Component 7. If no, skip to next component.

D. Capital Fund Program Grant Submissions

(1) Capital Fund Program 5-Year Action Plan

The Capital Fund Program 5-Year Action Plan is provided as Attachment C

(2) Capital Fund Program Annual Statement

The Capital Fund Program Annual Statement is provided as Attachment B

3. Demolition and Disposition

[24 CFR Part 903.7 9 (h)]

Applicability: 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 next component ; if “yes”, complete one activity description for each development.)

2. Activity Description

Demolition/Disposition Activity Description (Not including Activities Associated with HOPE VI or Conversion Activities)
1a. Development name: N/A 1b. Development (project) number: IL28-01
2. Activity type: Demolition <input checked="" type="checkbox"/> Disposition <input 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: <u>(During 2001)</u>
5. Number of units affected: 40 6. Coverage of action (select one) <input type="checkbox"/> Part of the development <input checked="" type="checkbox"/> Total development
7. Relocation resources (select all that apply) <input checked="" type="checkbox"/> Section 8 for up to 40 units depending upon occupancy rate at time of demo <input type="checkbox"/> Public housing for units <input type="checkbox"/> Preference for admission to other public housing or section 8 <input type="checkbox"/> Other housing for units (describe below)
8. Timeline for activity: a. Actual or projected start date of activity: October, 2000 b. Actual or projected start date of relocation activities: After HUD approves the Section 18 Demolition Plan which should be ready during the first Quarter of 2001. c. Projected end date of activity: Demolition and replacement will be accomplished over a five year period using tax credits, HOME funds and bonds.

4. Voucher Homeownership Program

[24 CFR Part 903.7 9 (k)]

- A. 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 next component; if “yes”, describe each program using the table below (copy and complete questions for each program identified.)

B. Capacity of the PHA to Administer a Section 8 Homeownership Program

The PHA has demonstrated its capacity to administer the program by (select all that apply):

- Establishing a minimum homeowner downpayment requirement of at least 3 percent and requiring that at least 1 percent of the downpayment comes from the family’s resources
- Requiring that financing for purchase of a home under its section 8 homeownership will be provided, insured or guaranteed by the state or Federal government; comply with secondary mortgage market underwriting requirements; or comply with generally accepted private sector underwriting standards
- Demonstrating that it has or will acquire other relevant experience (list PHA experience, or any other organization to be involved and its experience, below):

5. Safety and Crime Prevention: PHDEP Plan

[24 CFR Part 903.7 (m)]

Exemptions Section 8 Only PHAs may skip to the next component PHAs eligible for PHDEP funds must provide a PHDEP Plan meeting specified requirements prior to receipt of PHDEP funds.

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

B. What is the amount of the PHA’s estimated or actual (if known) PHDEP grant for the upcoming year? \$ _____

C. Yes No Does the PHA plan to participate in the PHDEP in the upcoming year? If yes, answer question D. If no, skip to next component.

D. Yes No: The PHDEP Plan is attached at Attachment _____

6. Other Information

[24 CFR Part 903.7 9 (r)]

A. Resident Advisory Board (RAB) Recommendations and PHA Response

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 Attached at Attachment (File name)

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

The PHA changed portions of the PHA Plan in response to comments
A list of these changes is included

Yes No: below or

Yes No: at the end of the RAB Comments in Attachment _____.

- Considered comments, but determined that no changes to the PHA Plan were necessary. An explanation of the PHA's consideration is included at the at the end of the RAB Comments in Attachment ____.
- Other: (list below) The Authority developed the Draft FY2001 Plan in close concert with the RAB therefore their comments were considered and incorporated in every step of the process. Throughout the year the Authority meets monthly with the RAB to discuss current and upcoming FY Plans, policies, procedures and Authority activities.

B. 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) State Of Illinois
2. The PHA has taken the following steps to ensure consistency of this PHA Plan with the Consolidated Plan for the jurisdiction: (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 specific initiatives contained in the Consolidated Plan. (list such initiatives below)
 - Other: (list below)
 - Preserve existing housing stock
 - Expand affordable homeownership opportunities
 -
3. PHA Requests for support from the Consolidated Plan Agency

Yes No: Does the PHA request financial or other support from the State or local government agency in order to meet the needs of its public housing residents or inventory? If yes, please list the 5 most important requests below:

The Authority will be preparing tax credit, HOME and other funding applications during the first and second quarter of 2001.
4. The Consolidated Plan of the jurisdiction supports the PHA Plan with the following actions and commitments: (describe below)

By providing Technical Assistance with various housing programs and funding opportunities.

C. Criteria for Substantial Deviation and Significant Amendments

1. Amendment and Deviation Definitions

24 CFR Part 903.7(r)

PHAs are required to define and adopt their own standards of substantial deviation from the 5-year Plan and Significant Amendment to the Annual Plan. The definition of significant amendment is important because it defines when the PHA will subject a change to the policies or activities described in the Annual Plan to full public hearing and HUD review before implementation.

A. Substantial Deviation from the 5-year Plan:

GOALS

- Additions or deletions of Strategic Goals

B. Significant Amendment or Modification to the Annual Plan:

PROGRAMS

- Any change with regard to demolition or disposition, designation of housing, homeownership programs or conversion activities

CAPITAL BUDGET

- Additions of non-emergency work items (items not included in the current Annual Statement of Five Year Action Plan) or change in use of replacement reserve funds

POLICIES

- Changes to rent or admissions policies or organization of the waiting list

An exception to the above definition will be made for any of the above that are adopted to reflect changes in HUD regulatory requirements since such changes are not considered significant amendments by HUD.

Attachment A
Supporting Documents Available for Review

PHAs are to 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	Related 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 (not required for this update)	5 Year and Annual Plans
	Fair Housing Documentation Supporting Fair Housing Certifications: 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	Housing Needs Statement of the Consolidated Plan for the jurisdiction/s in which the PHA is located 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/ACOP), which includes the Tenant Selection and Assignment Plan [TSAP]	Annual Plan: Eligibility, Selection, and Admissions Policies
X	Any policy governing occupancy of Police Officers in Public Housing <input checked="" type="checkbox"/> check here if included in the public housing A&O Policy	Annual Plan: Eligibility, Selection, and Admissions Policies
X	Section 8 Administrative Plan	Annual Plan: Eligibility, Selection, and Admissions Policies
X	Public housing rent determination policies, including the method 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

List of Supporting Documents Available for Review

Applicable & On Display	Supporting Document	Related Plan Component
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	Results of latest binding Public Housing Assessment System (PHAS) Assessment	Annual Plan: Management and Operations
X	Follow-up Plan to Results of the PHAS Resident Satisfaction Survey (if necessary)	Annual Plan: Operations and Maintenance and Community Service & Self-Sufficiency
X	Results of latest Section 8 Management Assessment System (SEMAP)	Annual Plan: Management and Operations
	Any required policies governing any Section 8 special housing types <input type="checkbox"/> check here if included in Section 8 Administrative Plan	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 any active grant year	Annual Plan: Capital Needs
X	Most recent CIAP Budget/Progress Report (HUD 52825) for any active CIAP grants	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
X	Self-evaluation, Needs Assessment and Transition Plan required by regulations implementing §504 of the Rehabilitation Act and the Americans with Disabilities Act. See, PIH 99-52 (HA).	Annual Plan: Capital Needs
	Approved or submitted applications for demolition and/or disposition of public housing	Annual Plan: Demolition and Disposition
	Approved or submitted applications for designation of public housing (Designated Housing Plans)	Annual Plan: Designation of Public Housing

List of Supporting Documents Available for Review

Applicable & On Display	Supporting Document	Related Plan Component
	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, Section 22 of the US Housing Act of 1937, or Section 33 of the US Housing Act of 1937	Annual Plan: Conversion of Public Housing
	Approved or submitted public housing homeownership programs/plans	Annual Plan: Homeownership
	Policies governing any Section 8 Homeownership program (section _____ of the Section 8 Administrative Plan)	Annual Plan: Homeownership
X	Cooperation agreement between the PHA and the TANF agency and between the PHA and local employment and training service agencies	Annual Plan: Community Service & Self-Sufficiency
	FSS Action Plan/s for public housing and/or Section 8	Annual Plan: Community Service & Self-Sufficiency
X	Section 3 documentation required by 24 CFR Part 135, Subpart E	Annual Plan: Community Service & Self-Sufficiency
	Most recent self-sufficiency (ED/SS, TOP or ROSS or other resident services grant) grant program reports	Annual Plan: Community Service & Self-Sufficiency
	The most recent Public Housing Drug Elimination Program (PHDEP) semi-annual performance report	Annual Plan: Safety and Crime Prevention
	PHDEP-related documentation: <ul style="list-style-type: none"> · Baseline law enforcement services for public housing developments assisted under the PHDEP plan; · Consortium agreement/s between the PHAs participating in the consortium and a copy of the payment agreement between the consortium and HUD (applicable only to PHAs participating in a consortium as specified under 24 CFR 761.15); · Partnership agreements (indicating specific leveraged support) with agencies/organizations providing funding, services or other in-kind resources for PHDEP-funded activities; · Coordination with other law enforcement efforts; · Written agreement(s) with local law enforcement agencies (receiving any PHDEP funds); and · All crime statistics and other relevant data (including Part I and specified Part II crimes) that establish need for the public housing sites assisted under the PHDEP Plan. 	Annual Plan: Safety and Crime Prevention
X	Policy on Ownership of Pets in Public Housing Family Developments (as required by regulation at 24 CFR Part 960, Subpart G) <input checked="" type="checkbox"/> check here if included in the public housing A & O Policy	Pet Policy

List of Supporting Documents Available for Review

Applicable & On Display	Supporting Document	Related Plan Component
X	The results of 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)

Attachment B

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary						
PHA Name: Menard county Housing Authority		Grant Type and Number Capital Fund Program: Capital Fund Program Replacement Housing Factor Grant No:			Federal FY of Grant: 2001	
<input checked="" type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) <input type="checkbox"/> Performance and Evaluation Report for Period Ending: <input type="checkbox"/> Final Performance and Evaluation Report						
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost		
24	Amount of line 20 Related to Energy Conservation Measures	60000				

Attachment B

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part II: Supporting Pages								
PHA Name: Menard County Housing Authority		Grant Type and Number Capital Fund Program #: Capital Fund Program Replacement Housing Factor #:			Federal FY of Grant: 2001			
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work
				Original	Revised	Funds Obligated	Funds Expended	
HA-Wide	Resident Services Coordinator	1406		36000				
	Maintenance Service Contracts	1406		6000				
	Upgrade computer software and training	1408		6000				
	Affordable housing Technical Assistance	1408		15000				
	Staff training	1408		8000				
	Commissioner training	1408		4000				
	Modernization Coordinator (Partial)	1410		20475				
	A/E Fees	1430		8272				
IL28-04	Modernize Community Center	1470		50800				
IL28-07	Replace windows	1460		50000				
	Install vinyl siding	1460		14000				
	Modernize Community Center	1470		50200				
IL28-08	New ranges and refrigerators	1465.1		22500				
	Modernize Community Center	1470		45450				

Attachment B

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part II: Supporting Pages								
PHA Name: Menard County Housing Authority		Grant Type and Number Capital Fund Program #: Capital Fund Program Replacement Housing Factor #:			Federal FY of Grant: 2001			
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work
				Original	Revised	Funds Obligated	Funds Expended	
IL28-09	New ranges and refrigerators	1465.1		45000				
HA-Wide	Upgrade computer hardware	1475		8000				

Attachment B

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part III: Implementation Schedule							
PHA Name: Menard County Housing Authority		Grant Type and Number Capital Fund Program #: Capital Fund Program Replacement Housing Factor #:				Federal FY of Grant: 2001	
Development Number Name/HA-Wide Activities	All Fund Obligated (Quart Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates
	Original	Revised	Actual	Original	Revised	Actual	
HA-Wide	6/31/2003			6/31/2004			
IL28-04	6/31/2003			6/31/2004			
IL28-07	6/31/2003			6/31/2004			
IL28-08	6/31/2003			6/31/2004			
IL28-09	6/31/2003			6/31/2004			

Attachment C

Capital Fund Program 5-Year Action Plan

Complete one table for each development in which work is planned in the next 5 PHA fiscal years. Complete a table for any PHA-wide physical or management improvements planned in the next 5 PHA fiscal year. Copy this table as many times as necessary. Note: PHAs need not include information from Year One of the 5-Year cycle, because this information is included in the Capital Fund Program Annual Statement.

CFP 5-Year Action Plan		
<input checked="" type="checkbox"/> Original statement <input type="checkbox"/> Revised statement		
Development Number	Development Name (or indicate PHA wide)	
IL28-05		
Description of Needed Physical Improvements or Management Improvements	Estimated Cost	Planned Start Date (HA Fiscal Year)
<ul style="list-style-type: none"> • Renovate interior of all 10 dwelling units 	252000	2003
Total estimated cost over next 5 years	252000	

Attachment C

CFP 5-Year Action Plan		
<input checked="" type="checkbox"/> Original statement <input type="checkbox"/> Revised statement		
Development Number	Development Name (or indicate PHA wide)	
IL28-06		
Description of Needed Physical Improvements or Management Improvements	Estimated Cost	Planned Start Date (HA Fiscal Year)
<ul style="list-style-type: none"> • Renovate interior of all 10 dwelling units 	285000	2002
Total estimated cost over next 5 years	285000	

Attachment C

CFP 5-Year Action Plan		
<input checked="" type="checkbox"/> Original statement <input type="checkbox"/> Revised statement		
Development Number	Development Name (or indicate PHA wide)	
IL28-07		
Description of Needed Physical Improvements or Management Improvements	Estimated Cost	Planned Start Date (HA Fiscal Year)
<ul style="list-style-type: none"> • Renovate interior of 10 dwelling units including replacing wiring • Renovate interior of 9 dwelling units including replacing wiring 	<p>293000</p> <p>263700</p>	<p>2004</p> <p>2005</p>
Total estimated cost over next 5 years	556700	

Attachment C

CFP 5-Year Action Plan		
<input checked="" type="checkbox"/> Original statement <input type="checkbox"/> Revised statement		
Development Number	Development Name (or indicate PHA wide)	
	HA-Wide	
Description of Needed Physical Improvements or Management Improvements	Estimated Cost	Planned Start Date (HA Fiscal Year)
<ul style="list-style-type: none"> • 1406 Resident Services Coordinator <ul style="list-style-type: none"> • FY2002 • FY2003 • FY2004 • FY2005 • 1408 Computer software upgrades <ul style="list-style-type: none"> • FY2002 • FY2003 • FY2004 • FY2005 • 1408 Affordable housing Technical Assistance • 1408 Commissioner and staff training including travel <ul style="list-style-type: none"> • FY2002 • FY2003 • FY2004 • FY2005 • 1408 Maintenance vehicles, tools and equipment <ul style="list-style-type: none"> • FY2004 • FY2005 • 1410 Modernization Coordinator (partial salary) <ul style="list-style-type: none"> • FY2002 • FY2003 • FY2004 • FY2005 • 1430 A/E Fees <ul style="list-style-type: none"> • FY2002 • FT2003 • FY2004 • FY2005 • 1475 Computer hardware <ul style="list-style-type: none"> • FY2002 • FY2003 • FY2004 • FY2005 	36000 36000 36000 36000 6000 6000 6000 6000 10000 12000 12000 12000 12000 42800 29110 21498 22573 23702 24887 11199 10324 10995 10000 8000 8000 8000 8000	2002 2003 2004 2005 2002 2003 2004 2005 2002 2002 2003 2004 2005 2004 2005 2002 2003 2004 2005 2002 2003 2004 2005
Total estimated cost over next 5 years	465088	

Required Attachment _D_: Resident Member on the PHA Governing Board

1. Yes No: Does the PHA governing board include at least one member who is directly assisted by the PHA this year? (if no, skip to #2)

A. Name of resident member(s) on the governing board: George Cummings

B. How was the resident board member selected: (select one)?

Elected

Appointed By the Menard County Board Of commissioners

C. The term of appointment is (include the date term expires): Five years and expires May, 2005

2. A. If the PHA governing board does not have at least one member who is directly assisted by the PHA, why not?

the PHA is located in a State that requires the members of a governing board to be salaried and serve on a full time basis

the PHA has less than 300 public housing units, has provided reasonable notice to the resident advisory board of the opportunity to serve on the governing board, and has not been notified by any resident of their interest to participate in the Board.

Other (explain):

B. Date of next term expiration of a governing board member: May, 2001

C. Name and title of appointing official(s) for governing board (indicate appointing official for the next position):

Robert Anderson, County Commission Chairman

Required Attachment ___E___: Membership of the Resident Advisory Board or Boards

List members of the Resident Advisory Board or Boards: (If the list would be unreasonably long, list organizations represented or otherwise provide a description sufficient to identify how members are chosen.)

- Cindi Bottoms-Briggs
- Pamela Chasteen
- George Cummings
- Gladys Dennis
- Debra Moscardelli
- Jennifer hall
- Nancy Johnson
- Glenda Magee
- John Ramsey
- Ralph Gregory

Attachment F

PET POLICY

Per the requirements of 24 CFR Part 5.35 and 24 CFR Part 960, “a resident of a dwelling unit in public housing may own one (1) or more common household pets or have one (1) or more common household pets present in the dwelling unit of such resident, subject to the reasonable requirements of the public housing agency, if the resident maintains each pet responsibly and in accordance with applicable state and local public health, animal control and animal anticruelty laws and regulations and with the following policies”.

1.0 Application for Pet Permit

Prior to housing any pet on the premises, the resident shall apply to MCHA for a pet permit which shall be accompanied by the following:

- 1.1 A current license issued by the appropriate authority, if applicable; and
- 1.2 Evidence that the pet has been spayed or neutered, as applicable; and
- 1.3 Evidence that the pet has received current rabies and distemper inoculations or boosters, as applicable, and
- 1.4 Evidence of payment of a [\\$200 refundable pet deposit for each dog, cat or ferret](#). Pet deposits are not required for birds, fish aquariums, hamsters, guinea pigs and gerbils. This pet deposit must be paid in addition to MCHA’s standard security deposit.
- 1.5 Residents must identify an alternate custodian for pets in the event of resident illness or other absence from the dwelling unit. The identification of an alternate custodian must occur prior to the Authority issuing a pet registration permit. Custodians must state in writing to MCHA that they are willing to be the pet care giver. MCHA must have the custodian’s home address and phone number

2.0 All residents with pets permitted to be kept under this policy shall comply with the following rules:

- 2.1 Permitted pets are domesticated dogs, cats, ferrets, birds and fish aquariums, hamsters, guinea pigs and gerbils. All other animals are specifically excluded.
- 2.2 Birds, hamsters, guinea pigs, and gerbils are considered caged animals and must be kept in a cage.

Attachment F

- 2.3 The weight of the dog or cat may not exceed thirty (30) pounds (adult size) and the height of the dog or cat may not exceed eighteen inches at the shoulder (adult size).
- 2.4 A maximum of one caged animal (or aquarium) plus one other pet will be permitted not to exceed a total of two pets. Note this specifically excludes owning two dogs, two cats, two ferrets or combinations of a dog and cat, a dog and a ferret, or a cat and a ferret.
- 2.5 Dogs and cats must be licensed yearly and residents must show proof of annual rabies and distemper booster inoculations required by state or local law.
- 2.6 Vicious and/or intimidating dogs will not be allowed, including, but not limited to such breeds as Dobermans, German Shepherds, Chows, Pit Bulls, Rockweilers, etc.
- 2.7 All dogs, cats and ferrets must be spayed or neutered, as applicable and ferrets must be descented.
- 2.8 Dogs, cats and ferrets shall remain inside the resident's unit. No animal shall be permitted to be loose in hallways, lobby areas, laundromats, community rooms, yards or other common areas of the facility.
- 2.9 When taken outside the unit, dogs, cats and ferrets must be kept on a leash, controlled by an adult.
- 2.10 Birds, hamsters, guinea pigs and gerbils must be confined to a cage at all times. Fish must be confined to an aquarium not to exceed 30 gallons in size.
- 2.11 Residents shall not permit their pet to disturb, interfere, or diminish the peaceful enjoyment of other residents. The terms, "disturb, interfere or diminish" shall include but not be limited to barking, howling, chirping, biting, scratching and other like activities.
- 2.12 Residents must provide litter boxes for cat and ferret waste, which must be kept in the dwelling unit. Residents shall not permit refuse from litter boxes to accumulate nor to become unsightly or unsanitary.
- 2.13 Residents are solely responsible for cleaning up pet droppings, if any, outside the unit and on facility grounds. Droppings must be disposed of by being placed in a sack and then placed in a refuse container outside the building.
- 2.14 Residents shall take adequate precautions and measures necessary to eliminate pet odors within or around the unit and shall maintain the unit in a sanitary condition at all times.

Attachment F

- 2.15 If pets are left unattended for a period of twenty-four (24) hours or more, MCHA may enter the dwelling unit, remove the pet and transfer it to the proper authorities, subject to the provision of state law and pertinent local ordinances. MCHA accepts no responsibility for the animal under such circumstances.
 - 2.16 Residents shall not alter their unit, patio or grounds area in order to create an enclosure for any pet.
 - 2.17 Residents are responsible for all damages caused by their pets, including the cost of cleaning of carpets and/or fumigation of units.
 - 2.18 Residents are prohibited from feeding or harboring stray animals. The feeding of any stray animals shall constitute having a pet without written permission of MCHA.
 - 2.19 Should any pet housed in an Authority facility give birth to a litter, the resident shall move from the premises all of said poets except one within fortyfive (45) days.
 - 2.20 Visitors are not allowed to bring pets and the residents shall not engage in “pet sitting.”
 - 2.21 No animals shall be tied up on the outside or left unattended. No dog houses, animal runs, etc., will be permitted.
 - 2.22 These rules may be amended from time to time, as necessary, by MCHA and such amendments shall be binding on the residents upon notice thereof.
- 3.0 Residents who violate these rules are subject to:
- 3.1 Being required to get rid of the pet within 14 days of written notice by MCHA; and/or
 - 3.2 Eviction.
- 4.0 The privilege of maintaining a pet in a facility owned and/or operated by MCHA shall be subject to the rules set forth above. This privilege may be revoked at any time, subject to MCHA’s Hearing Procedures, if the animal should become destructive, create a nuisance, represent a threat to the safety, health and security of other residents, or create a problem in the area of cleanliness and sanitation.

Attachment F

- 5.0 A breach of any of the foregoing rules constitutes a breach of the resident's lease and can result in not only in the revocation of the privilege of keeping a pet, but may result in any of the sanctions set forth in the resident's lease for breach thereof, including forfeiture of further leasehold rights and termination of the lease. Further, the resident is subject to the Animal Control Act, Section 351 et. seq. of Chapter 8 of the Illinois Revised Statutes. The election of a remedy by MCHA for a resident's breach of the foregoing rules is not exclusive and MCHA may thereafter pursue any of the various remedies set forth in the lease as MCHA may, in its discretion, decide.
- 6.0 Residents will be given sixty (60) days from the date MCHA adopts this policy to fully comply with the policy. However, the Executive Director may grant a thirty (30) day time extension for unusual cases provided residents request such an extension in writing. Requests for time extensions must include 1) a request for a time extension up to 30 days; 2) reasons for requesting the extension.

_____		Resident's
Signature	Date	
_____		_Staff
Member's Signature	Date	

Attachment G

COMMUNITY SERVICE REQUIREMENT POLICY FOR MENARD COUNTY HOUSING AUTHORITY

SERVICE REQUIREMENT

Except for any family member who is an exempt individual, each adult resident of public housing must:

- 1) Contribute 8 hours per month of community service (does not include political activities); or
- 2) Participate in an economic self-sufficiency program for 8 hours per month; or
- 3) Perform 8 hours per month of combined community service and economic self sufficiency.

COVERED RESIDENTS

All public housing residents between the ages of 18 and 62 years of age who are not exempt.

EXEMPT RESIDENTS

Any public housing resident who is:

- 1) 62 years or older;
- 2) Blind or disabled and who certifies that because of this disability she or he is unable to comply with the requirement of the policy;
- 3) Primary caretaker of a person who is 62 years or older or who is blind or disabled;
- 4) Engaged in work activities;
- 5) Engaged in a work activity under the state program funded under Part A of Title IV of the Social Security Act, or under any other welfare program of the state, including a state administered welfare-to-work program;
- 6) Member of a family receiving assistance, benefits or services under a state program funded under Part A of Title IV of the Social Security Act, or under any other welfare program of the state, including a state administered welfare-to-work program and has not been found by the state to be in noncompliance with such a program;

Attachment G

VIOLATION OF SERVICE REQUIREMENT

Violation of the service requirement is grounds for nonrenewal of the twelve (12) months lease agreement, but not for termination of tenancy during the course of the twelve (12) months lease term.

COMMUNITY SERVICE

The performance of volunteer work or duties that are a public benefit, and that serve to improve the quality of life, enhance resident self-sufficiency, or increase resident self-responsibility in the community. Community service is not employment and may not include political activities.

QUALIFIED COMMUNITY SERVICE ORGANIZATIONS AND ACTIVITIES

As a convenience to covered residents, the Housing Authority will develop, post on the Authority's bulletin boards and provide to covered residents a list of qualified organizations (and activities) that have agreed to work with residents in helping them satisfy their community service requirement. Residents are not limited to the published list and are encouraged to identify other organizations and activities. To ensure compliance with this community service policy, residents should seek the Housing Authority's approval prior to volunteering for organizations or performing activities not included on the published list. It is the Housing Authority's policy to provide great latitude in approving community service organizations and activities.

DETERMINING RESIDENT STATUS

Per the Housing Authority's approved Admission and Continued Occupancy Policy (ACOP):

- The status of all applicant family members will be determined and families notified during the application process.
- During annual (or every three years for residents paying flat rents) recertifications, the status of each family member will be reviewed and determined.
- Between recertifications, residents are required to notify the Housing Authority within ten (10) days when there is a change in employment, income, family composition or welfare-to-work training or employment activities. The Housing Authority will use this information to determine changes, if any, in family member status.
- Members will be informed verbally and in writing of their community service requirement.

Attachment G

ASSURING RESIDENT COMPLIANCE

The Housing Authority shall review and verify family compliance with service requirements annually at least thirty (30) days before the end of the twelve (12) month lease term. The Housing Authority will retain reasonable documentation of service requirement performance or exemption in resident family files.

If the Housing Authority determines that a covered family member has not complied with their service requirement, the Housing Authority will notify the family of this determination, describe the noncompliance and state the Authority will not renew the lease at the end of the twelve (12) month lease term unless:

- The family enters into an agreement with the Authority that the noncompliant family member will cure such noncompliance within the twelve (12) month term of the new lease while also satisfying the on-going service requirement.
- Or the family provides written assurance satisfactory to the Authority that the noncompliant family member no longer resides in the unit.

Families may request a grievance hearing on the Housing Authority's determination in accordance with the Authority's approved Grievance Procedure.

SIGNED CERTIFICATIONS

The Housing Authority management staff will provide signed certifications of any community service activities administered by the Authority. In a similar manner, organizations other than the Authority, who administer qualifying activities must provide signed certifications.

The Housing Authority will provide covered residents with three part, prepaid post card size certification forms which the residents will present to the organization administering the qualifying activities for certification approval and signatures. The person(s) approved for signing the certifications will tear the three part, prepaid mailer form apart, give one copy to the resident, keep one copy, and drop the prepaid (and preaddressed) part in the mail back to the Authority. The Authority will file the returned cards in each covered resident's file.