

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

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

HOUSING AUTHORITY OF THE BOROUGH OF HIGHLANDS

**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: Housing Authority of the Borough of Highlands

PHA Number: NJ041

PHA Fiscal Year Beginning: (mm/yyyy) 07/2001

PHA Plan Contact Information:

Name: Madeline Cook

Phone: (732)872-2022

TDD:

Email (if available): hilandsh@bellatlantic.net

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)

Community Room at Jennie Parker Manor

PHA Programs Administered:

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

**Annual PHA Plan
Fiscal Year 2001**

[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 type="checkbox"/> Attachment <u>G</u> : Comments of Resident Advisory Board or Boards & Explanation of PHA Response (must be attached if not included in PHA Plan text)		
<input checked="" type="checkbox"/> Other (List below, providing each attachment name)		
Attachment <u>H</u> : Progress Report		

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.

The implementation of a revised Pet Policy, community service now to be included in the Lease and the procedure to secure a Resident Commissioner has commenced.

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? \$183,284.

C.

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:
1b. Development (project) number:
2. Activity type: Demolition <input type="checkbox"/> Disposition <input type="checkbox"/>
3. Application status (select one) Approved <input type="checkbox"/> Submitted, pending approval <input type="checkbox"/> Planned application <input type="checkbox"/>
4. Date application approved, submitted, or planned for submission: <u>(DD/MM/YY)</u>
5. Number of units affected:
6. Coverage of action (select one) <input type="checkbox"/> Part of the development <input type="checkbox"/> Total development
7. Relocation resources (select all that apply) <input type="checkbox"/> Section 8 for units <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: b. Actual or projected start date of relocation activities: c. Projected end date of activity:

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? \$ 28,643.

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 D

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 **G**
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 end of the RAB Comments in Attachment **G**
 - Other: (list below)

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

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.

Substantial deviation shall include the following:

- Changes in major capital improvements.
- Changes in rent policies.
- Changes in tenant selection policies.
- Changes in the Dwelling Lease.

A. Substantial Deviation from the 5-year Plan:

None

B. Significant Amendment or Modification to the Annual Plan:

Pet Policy and Community Service

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
N/A	State/Local Government Certification of Consistency with the Consolidated Plan (not required for this update)	5 Year and Annual Plans
X	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
N/A	Any policy governing occupancy of Police Officers in Public Housing <input type="checkbox"/> check here if included in the public housing A&O Policy	Annual Plan: Eligibility, Selection, and Admissions Policies
N/A	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
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
N/A	Section 8 rent determination (payment standard) policies <input type="checkbox"/> check here if included in Section 8 Administrative Plan	Annual Plan: Rent Determination

List of Supporting Documents Available for Review		
Applicable & On Display	Supporting Document	Related Plan Component
N/A	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 PHMAP	Annual Plan: Management and Operations
N/A	Follow-up Plan to Results of the PHAS Resident Satisfaction Survey (if necessary)	Annual Plan: Operations and Maintenance and Community Service & Self-Sufficiency
N/A	Results of latest Section 8 Management Assessment System (SEMAP)	Annual Plan: Management and Operations
N/A	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 type="checkbox"/> check here if included in the public housing A & O Policy	Annual Plan: Grievance Procedures
N/A	Section 8 informal review and hearing procedures <input type="checkbox"/> check here if included in Section 8 Administrative Plan	Annual Plan: Grievance Procedures
X	The HUD-approved Capital Fund/Comprehensive Grant Program Annual Statement (HUD 52837) for 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
N/A	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
N/A	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
N/A	Approved or submitted applications for demolition and/or disposition of public housing	Annual Plan: Demolition and Disposition
N/A	Approved or submitted applications for designation of public housing (Designated Housing Plans)	Annual Plan: Designation of Public Housing
N/A	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
N/A	Approved or submitted public housing homeownership programs/plans	Annual Plan: Homeownership

List of Supporting Documents Available for Review		
Applicable & On Display	Supporting Document	Related Plan Component
N/A	Policies governing any Section 8 Homeownership program (section _____ of the Section 8 Administrative Plan)	Annual Plan: Homeownership
N/A	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
N/A	FSS Action Plan/s for public housing and/or Section 8	Annual Plan: Community Service & Self-Sufficiency
N/A	Section 3 documentation required by 24 CFR Part 135, Subpart E	Annual Plan: Community Service & Self-Sufficiency
N/A	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	Annual Plan: Safety and Crime Prevention
N/A	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 type="checkbox"/> check here if included in the public housing A & O Policy	Pet Policy
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
N/A	Troubled PHAs: MOA/Recovery Plan	Troubled PHAs
	Other supporting documents (optional) (list individually; use as many lines as necessary)	(specify as needed)

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I: Summary					
PHA Name: HIGHLANDS HOUSING AUTHORITY		Grant Type and Number NJ39P04150201 Capital Fund Program Grant No: 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 C cost	
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds	-0-			
2	1406 Operations	-0-			
3	1408 Management Improvements	-0-			
4	1410 Administration	\$ 10,000			
5	1411 Audit	-0-			
6	1415 Liquidated Damages	-0-			
7	1430 Fees and Costs	\$ 13,000			
8	1440 Site Acquisition	-0-			
9	1450 Site Improvement	\$138,836			
10	1460 Dwelling Structures	\$ 25,000			
11	1465.1 Dwelling Equipment—Nonexpendable	-0-			
12	1470 Nondwelling Structures	-0-			
13	1475 Nondwelling Equipment	-0-			
14	1485 Demolition	-0-			
15	1490 Replacement Reserve	-0-			
16	1492 Moving to Work Demonstration	-0-			
17	1495.1 Relocation Costs	-0-			
18	1499 Development Activities	-0-			
19	1501 Collateralization or Debt Service	-0-			
20	1502 Contingency	-0-			
21	Amount of Annual Grant: (sum of lines 2 – 20)	\$ 186,836			
22	Amount of line 21 Related to LBP Activities	-0-			

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I: Summary					
PHA Name: HIGHLANDS HOUSING AUTHORITY		Grant Type and Number NJ39P04150201 Capital Fund Program Grant No: 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	
		Original	Revised	Obligated	Expended
23	Amount of line 21 Related to Section 504 compliance	-0-			
24	Amount of line 21 Related to Security – Soft Costs	-0-			
25	Amount of Line 21 Related to Security – Hard Costs	-0-			
26	Amount of line 21 Related to Energy Conservation Measures	-0-			

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part II: Supporting Pages								
PHA Name: HIGHLANDS HOUSING AUTHORITY			Grant Type and Number Capital Fund Program Grant No: NJ39P04150201 Replacement Housing Factor Grant No:			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 Work
				Original	Revised	Funds Obligated	Funds Expended	
1. NJ 41-1 Jennie Parker Manor	1. Complete Site Improvement	1450	--	\$ 138,836				
2. NJ 41-2 Ptak Towers	1. Upgrade Domestic Hot Water	1460	--	\$ 25,000				
3. HA-Wide	1. Administration	1410	--	\$ 10,000				
	2. A/E Fees for all work Items Requiring A/E Services & Consultant Fees in connection with Administration of all Capital Fund Programs	1430	--	\$ 13,000				
	<u>GRAND TOTAL</u>			\$ 186,836				

Annual Statement/Performance and Evaluation Report
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)
Part III: Implementation Schedule

PHA Name:HIGHLANDS HOUSING		Grant Type and Number Capital Fund Program No: NJ39P04150201 Replacement Housing Factor No:				Federal FY of Grant: 2001	
Development Number Name/HA-Wide Activities	All Fund Obligated (Quarter Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates
	Original	Revised	Actual	Original	Revised	Actual	
1. NJ 41-1, Jennie Parker Manor	9/30/03			9/30/04			
2. NJ 41-2 Ptak Towers	9/30/03			9/30/04			

Capital Fund Program Five-Year Action Plan

Part I: Summary

PHA Name HIGHLANDS HOUSING AUTHORITY		<input checked="" type="checkbox"/> Original 5-Year Plan <input type="checkbox"/> Revision No:			
Development Number/Name/ HA-Wide	Year 1	Work Statement for Year 2 FFY Grant: 2002 PHA FY: 2002	Work Statement for Year 3 FFY Grant: 2003 PHA FY: 2003	Work Statement for Year 4 FFY Grant: 2004 PHA FY: 2004	Work Statement for Year 5 FFY Grant: 2005 PHA FY: 2005
	Annual Statement				
1. NJ 41-1 Jennie Parker Manor		\$ 138,836	\$ 163,836	\$ 78,836	\$ 103,836
2. NJ 41-2 Ptak Towers		35,000	---	85,000	60,000
3. Administration		10,000	10,000	10,000	10,000
4. Fees & Costs		13,000	13,000	13,000	13,000
CFP Funds Listed for 5-year planning		\$ 186,836	\$ 186,836	\$ 186,836	\$ 186,836
Replacement Housing Factor Funds					

Capital Fund Program Five-Year Action Plan

Part II: Supporting Pages—Work Activities

Activities for Year 1	Activities for Year: <u>2</u> FFY Grant: 2002 PHA FY: 2002			Activities for Year: 3 FFY Grant: 2003 PHA FY: 2003		
	Development Name/Number	Major Work Categories	Estimated Cost	Development Name/Number	Major Work Categories	Estimated Cost
See	1. NJ 41-1	1. Complete Site	\$ 68,836	1. NJ 41-1	1. Kitchen Upgrades	\$ 163,836
Annual Statement	Jennie Parker Manor	Improvements		Jennie Parker Manor		
		2. Install Entrance Doors & Storm Doors	\$ 60,000			
				2. Administration	--	\$ 10,000
	2. NJ 41-2	1. Caulk Air Conditioner Sleeves	\$ 35,000	3. Fees & Costs	--	\$ 13,000
	3. Administration	--	\$ 10,000			
	4. Fees & Costs	--	\$ 13,000			
Total CFP Estimated Cost			\$ 186,836			\$ 186,836

Capital Fund Program Five-Year Action Plan

Part II: Supporting Pages—Work Activities

Activities for Year : <u>4</u> FFY Grant: 2004 PHA FY: 2004			Activities for Year: <u>5</u> FFY Grant: 2005 PHA FY: 2005		
Development Name/Number	Major Work Categories	Estimated Cost	Development Name/Number	Major Work Categories	Estimated Cost
1. NJ 41-1 Jennie Parker Manor	1. Upgrade Fire Alarm System	\$ 78,836	1. NJ 41-1 Jennie Parker Manor	1. Floor Repair/ Replacement	\$ 103,836
2. NJ 41-2 Ptak Towers	1. Site Improvements 2. Elevator Upgrade	\$ 35,000 \$ 50,000	2. NJ 41-2	1. Upgrade Community 2. Upgrade Windows (Partial)	\$ 20,000 \$ 40,000
3. Administration	--	\$ 10,000	3. Administration	--	\$ 10,000
4. Fees & Costs	--	\$ 13,000	4. Fees & Costs	--	\$ 13,000
Total CFP Estimated Cost		\$ 186,836			\$ 186,836

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I: Summary					
PHA Name: HIGHLANDS HOUSING AUTHORITY		Grant Type and Number NJ39P04191499 Capital Fund Program Grant No: Replacement Housing Factor Grant No:			Federal FY of Grant: 1999
Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) X Performance and Evaluation Report for Period Ending: 12/31/00 <input type="checkbox"/> Final Performance and Evaluation Report					
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost Cost	
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds	-0-	-0-	-0-	-0-
2	1406 Operations	-0-	-0-	-0-	-0-
3	1408 Management Improvements	-0-	-0-	-0-	-0-
4	1410 Administration	\$ 10,000	\$ 10,000	\$ 10,000	-0-
5	1411 Audit	-0-	-0-	-0-	-0-
6	1415 Liquidated Damages	-0-	-0-	-0-	-0-
7	1430 Fees and Costs	\$ 13,000	\$ 14,000	\$ 14,000	\$ 6,673
8	1440 Site Acquisition	-0-	-0-	-0-	-0-
9	1450 Site Improvement	-0-	-0-	-0-	-0-
10	1460 Dwelling Structures	\$163,089	\$162,089	\$162,089	\$ 62,151
11	1465.1 Dwelling Equipment—Nonexpendable	-0-	-0-	-0-	-0-
12	1470 Nondwelling Structures	-0-	-0-	-0-	-0-
13	1475 Nondwelling Equipment	-0-	-0-	-0-	-0-
14	1485 Demolition	-0-	-0-	-0-	-0-
15	1490 Replacement Reserve	-0-	-0-	-0-	-0-
16	1492 Moving to Work Demonstration	-0-	-0-	-0-	-0-
17	1495.1 Relocation Costs	-0-	-0-	-0-	-0-
18	1499 Development Activities	-0-	-0-	-0-	-0-
19	1501 Collateralization or Debt Service	-0-	-0-	-0-	-0-
20	1502 Contingency	-0-	-0-	-0-	-0-
21	Amount of Annual Grant: (sum of lines 2 – 20)	\$186,089	\$186,089	\$186,089	\$ 68,824
22	Amount of line 21 Related to LBP Activities	-0-	-0-	-0-	-0-

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I: Summary					
PHA Name: HIGHLANDS HOUSING AUTHORITY		Grant Type and Number NJ39P04191499 Capital Fund Program Grant No: Replacement Housing Factor Grant No:			Federal FY of Grant: 1999
Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) X Performance and Evaluation Report for Period Ending: 12/31/00 <input type="checkbox"/> Final Performance and Evaluation Report					
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost Cost	
		Original	Revised	Obligated	Expended
23	Amount of line 21 Related to Section 504 compliance	-0-	-0-	-0-	-0-
24	Amount of line 21 Related to Security – Soft Costs	-0-	-0-	-0-	-0-
25	Amount of Line 21 Related to Security – Hard Costs	-0-	-0-	-0-	-0-
26	Amount of line 21 Related to Energy Conservation Measures	\$ 70,589	\$ 73,800	\$ 73,800	\$ 53,966

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part II: Supporting Pages								
PHA Name: HIGHLANDS HOUSING AUTHORITY			Grant Type and Number Capital Fund Program Grant No: NJ39P04191499 Replacement Housing Factor Grant No:			Federal FY of Grant: 1999		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
1. NJ 41-1	1. Upgrade Intercom System	1460	--	\$ 5,000	\$ 1,990	\$ 1,990	\$ 1,990	
Jennie Parker Manor	2. Paint Hallways in C Bldg.	1460	--	\$ 3,500	\$ 1,200	\$ 1,200	\$ 1,200	
	3. Replace Windows	1460	--	\$ 70,589	\$ 73,800	\$ 73,800	\$ 53,966	
			--					
2. NJ 41-2	1. New Roof & Roof Fans	1460	--	\$ 75,000	\$ 80,104	\$ 80,104	-0-	
Ptak Towers	2. Complete Cleaning of ventilation system	1460	--	\$ 9,000	\$ 4,995	\$ 4,995	\$ 4,995	
3. HA-WIDE	1. Pay part of the Executive Director's Salary to oversee all aspects of the Capital fund program.	1410	--	\$ 10,000	\$ 10,000	\$ 10,000	-0-	
	2. Hire A/e firm to provide A/E services for all work items requiring sealed bid Process	1430	--	\$13,000	\$ 14,000	\$ 14,000	-0-	
	<u>GRAND TOTAL</u>			\$ 186,089	\$186,089	\$186,089	\$ 62,151	

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part III: Implementation Schedule							
PHA Name:HIGHLANDS HOUSING		Grant Type and Number Capital Fund Program No: NJ39P04191499 Replacement Housing Factor No:				Federal FY of Grant: 1999	
Development Number Name/HA-Wide Activities	All Fund Obligated (Quarter Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates
	Original	Revised	Actual	Original	Revised	Actual	
1. NJ 41-1, Jennie Parker Manor	3/31/01		9/30/00	9/30/02			
2. NJ 41-2 Ptak Towers	3/31/01		9/30/00	9/30/02			

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I: Summary					
PHA Name: HIGHLANDS HOUSING AUTHORITY		Grant Type and Number NJ39P04150100 Capital Fund Program Grant No: Replacement Housing Factor Grant No:			Federal FY of Grant: 2000
<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 C Cost	
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds	-0-		-0-	-0-
2	1406 Operations	-0-		-0-	-0-
3	1408 Management Improvements	-0-		-0-	-0-
4	1410 Administration	\$ 10,000		\$ 10,000	-0-
5	1411 Audit	-0-		-0-	-0-
6	1415 Liquidated Damages	-0-		-0-	-0-
7	1430 Fees and Costs	\$ 11,000		-0-	-0-
8	1440 Site Acquisition	-0-		-0-	-0-
9	1450 Site Improvement	\$115,284		-0-	-0-
10	1460 Dwelling Structures	\$ 47,000		\$ 42,000	-0-
11	1465.1 Dwelling Equipment—Nonexpendable	-0-		-0-	-0-
12	1470 Nondwelling Structures	-0-		-0-	-0-
13	1475 Nondwelling Equipment	-0-		-0-	-0-
14	1485 Demolition	-0-		-0-	-0-
15	1490 Replacement Reserve	-0-		-0-	-0-
16	1492 Moving to Work Demonstration	-0-		-0-	-0-
17	1495.1 Relocation Costs	-0-		-0-	-0-
18	1499 Development Activities	-0-		-0-	-0-
19	1501 Collateralization or Debt Service	-0-		-0-	-0-
20	1502 Contingency	-0-		-0-	-0-
21	Amount of Annual Grant: (sum of lines 2 – 20)	\$ 183,284		\$ 52,000	-0-

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I: Summary					
PHA Name: HIGHLANDS HOUSING AUTHORITY		Grant Type and Number NJ39P04150100 Capital Fund Program Grant No: Replacement Housing Factor Grant No:			Federal FY of Grant: 2000
<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 C Cost	
		Original	Revised	Obligated	Expended
22	Amount of line 21 Related to LBP Activities	-0-		-0-	-0-
23	Amount of line 21 Related to Section 504 compliance	-0-		-0-	-0-
24	Amount of line 21 Related to Security – Soft Costs	-0-		-0-	-0-
25	Amount of Line 21 Related to Security – Hard Costs	-0-		-0-	-0-
26	Amount of line 21 Related to Energy Conservation Measures	-0-		-0-	-0-

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part II: Supporting Pages								
PHA Name: HIGHLANDS HOUSING AUTHORITY			Grant Type and Number Capital Fund Program Grant No: NJ39P04150100 Replacement Housing Factor Grant No:			Federal FY of Grant: 2000		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
1. NJ 41-1 Jennie Parker Manor	1. Site Improvement	1450		\$ 115,284		-0-	-0-	
2. NJ 41-2 Ptak Towers	1. Complete hallway upgrade 2. Upgrade emergency lighting	1460 1460		\$ 42,000 \$ 5,000		\$ 42,000 -0-	-0- -0-	
3. HA-Wide	1. Pay Part of Executive Director's Salary to oversee all aspects of Capital Fund Program	1410		\$ 10,000		\$ 10,000	-0-	
	2. Hire A/E firm to provide A/E services Administration of all Capital Fund Programs	1430		\$ 11,000		-0-	-0-	
	<u>GRAND TOTAL</u>			\$ 183,284		\$52,000	-0-	

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part III: Implementation Schedule							
PHA Name:HIGHLANDS HOUSING		Grant Type and Number Capital Fund Program No: NJ39P04150100 Replacement Housing Factor No:				Federal FY of Grant: 2000	
Development Number Name/HA-Wide Activities	All Fund Obligated (Quarter Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates
	Original	Revised	Actual	Original	Revised	Actual	
1. NJ 41-1, Jennie Parker Manor	3/31/02			3/31/03			
2. NJ 41-2 Ptak Towers	3/31/02			3/31/03			

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.

Section 1: General Information/History

A. Amount of PHDEP Grant \$ 30,711

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 PHDEP Program started at this Authority four years ago and has met with great success. The major initiatives were to bring activities to the family development with interest for both the youth and adults of that community. The activities such as homework hours, various program presentations on how to prevent drug use, social functions, computer access and a relationship with the local police seems to have achieved this goal .

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. Unit count information should be consistent with that available in PIC.

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)
Jennie Parker Manor	30	115

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).

12 Months _____ 18 Months _____ 24 Months x

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. The Fund Balances should reflect the balance as of Date of Submission of the PHDEP Plan. The Grant Term End Date should include any HUD-approved extensions or waivers. 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	Grant Start Date	Grant Term End Date
FY 1995	N/A					
FY 1996	N/A					
FY 1997	N/A					
FY1998	N/A					
FY 1999	\$27,493	NJ39DEP0410199	\$27,493	N/A	12/99	12/01
FY 2000	\$28,653	NJ39DEP0410100	\$28,653	N/A	12/01	12/03
FY 2001	\$30,711	NJ39DEP0410101	\$30,711	N/A	12/04	12/05

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.

The strategy of the PHDEP Program for FY2000 is to continue reach out for more participants in the program and keep those already working with program. The Authority has contracted with the local high school and drug alliance to run this program. In addition, the Authority also works with the Boy Scouts and local police. Regular reports are presented to the Authority by the school and the counselor at the site keeps the Authority informed of activities and events. She also informs the Authority as to the amount of participation by the residents. Some events do, of course, attract more participation than others. The after school homework hour will start again with the new school season and both the children benefit from it and the parents appreciate the help.

B. PHDEP Budget Summary

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

FFY <u>2001</u> PHDEP Budget Summary	
Original statement	
Revised statement dated:	
Budget Line Item	Total Funding
9110 – Reimbursement of Law Enforcement	
9115 - Special Initiative	
9116 - Gun Buyback TA Match	
9120 - Security Personnel	
9130 - Employment of Investigators	
9140 - Voluntary Tenant Patrol	
9150 - Physical Improvements	
9160 - Drug Prevention	28,711
9170 - Drug Intervention	2,000
9180 - Drug Treatment	
9190 - Other Program Costs	
TOTAL PHDEP FUNDING	30,711

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: \$		
Goal(s)							
Objectives							
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHEDE P Funding	Other Funding (Amount/ Source)	Performance Indicators
1.							
2.							
3.							

9115 - Special Initiative					Total PHDEP Funding: \$		
Goal(s)							
Objectives							
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	Other Funding (Amount/ Source)	Performance Indicators
1.							
2.							
3.							

9116 - Gun Buyback TA Match					Total PHDEP Funding: \$		
Goal(s)							
Objectives							
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHDEP Funding	Other Funding (Amount /Source)	Performance Indicators
1.							
2.							
3.							

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

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

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

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

9160 - Drug Prevention					Total PHDEP Funding: \$28,711		
Goal(s)							
Objectives							
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHDEP Funding	Other Funding (Amount /Source)	Performance Indicators
1. Drug Education	50	115	12/01	12/03	6,711		Number served
2. Positive Alternative	50	115	12/01	12/03	22,000		Number served
3.							

9170 - Drug Intervention					Total PHDEP Funding: \$2,000		
Goal(s)							
Objectives							
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHDEP Funding	Other Funding (Amount /Source)	Performance Indicators
1. Referrals	10	12	12/01	12/03	2,000		Number served
2.							
3.							

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

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

Required Attachment E: 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:

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

- Elected
- Appointed

C. The term of appointment is (include the date term expires):

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): **There was a tenant Commissioner but he passed away in August, 1999. A successor was selected and submitted to the DCA for approval. The PHA received approval of the selection in August, 2000. This appointment was renewed January 2001.**

B. Date of next term expiration of a governing board member: **November 2001 – Two expiring terms.**

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

**Mayor
Borough Council**

Required Attachment F: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.)

Mr. Michael Sutkowski, Ptak Towers, 215 Shore Drive, Apt. 519 Highlands, NJ 07732

Mrs. Evelyn Clunie, Ptak Towers, 215 Shore Drive, Apt. 506, Highlands, NJ 07732

Mrs. Barbara Bevacqua, Ptak Towers, 215 Shore Drive, Apt. 202, Highlands, NJ 07732

Mrs. Crystal LaRocca, 125 Waterwitch Ave., Apt. C-10, Highlands, NJ 07732

Attachment G:Comments of Resident Advisory Board and Explanation of PHA response

Jennie Parker Manor

The pet policy should be restrictive.

Tenants who currently have pets do not take proper care of them.

The tub surround needs repair or replacement.

Tenants need to take care of the landing in front of their apartment.

Ptak Towers

Carpet in apartments is 15 years old and needs to be replaced.

Windows need repair or replacement.

Trash is not collected frequently enough.

Larger recycling bins are needed on each floor.

Attachment H:Progress Report

The Highlands Housing Authority has committed itself to provide its tenants with improvements they have requested.

At the family development, known as Jennie Parker Manor, a building that had sustained water damage from leakage, has been waterproofed. Boiler room improvements such as new underground piping, boiler repairs and new valves have made the heating system more efficient and equitable.

Several apartments had new concrete patios installed and the tenants have been helping to keep the landscaping clean and decorated for the seasons. At the tenants, request outside security cameras have been installed as a safety feature and a deterrent for vandalism. Another safety and security improvement has been installed by way of a new entrance intercom system. The old system had wearing wires and the signal for communicating from the entrance to the apartment was becoming inaudible.

All of the windows have been replaced with thermopane, double hung windows with self storing screens. The new windows have eliminated the need for child guards because the new windows have a pullout lock that allows the window to open to a safe height for air circulation.

The senior citizen building has also had its share of improvements. New stoves have been installed. The window hardware has been replaced to allow for easier window operation. There is still work to be done on the windows such as glass replacement to correct a fogging problem.

All of the common areas have been painted, wallpapered, furnished and new carpeting installed. A new roof has just been completed and all 32 roof fans have been replaced. In addition, the ventilation system was cleaned for first time that the building was occupied in 1986.

Management improvements have included a new truck to replace the 1986 vehicle that was purchased when the senior citizen building opened, computer system upgrades in both hardware and software and a new radio communication system which was prompted by the FCC for the Housing Authority to go to a single radio band.

In 1999, the Housing Authority became part of the grant system for Capital Improvements which is good especially for planning purposes. Although over the years, since 1996, we have received a fair share of CIAP funding through the competitive process.

The staff is small but very proficient. The office staff and maintenance staff are excellent in computer skills. The maintenance men are experts in the hardware portion also which saves the Authority a great deal of money when hardware upgrades are necessary. I have been at this Housing Authority for six years and I have had only 2 staff member changes, both of the changes were very positive.

