

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

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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: Housing Authority of the City of Green Bay**

**PHA Number: W1074**

**PHA Fiscal Year Beginning: 07/01/01**

### PHA Plan Contact Information:

Name: Keith A. Pamperin

Phone: 920 448 3414

TDD:

Email (if available): keithpa@ci.green-bay.wi.us

### 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 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 checked="" type="checkbox"/> Attachment B: Capital Fund Program Annual Statement	
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<input checked="" type="checkbox"/> Attachment D: Public Housing Drug Elimination Program (PHDEP) Plan	
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<input checked="" type="checkbox"/> Attachment G: Comments of Resident Advisory Board or Boards & Explanation of PHA Response (must be attached if not included in PHA Plan text)	
<input type="checkbox"/> Other (List below, providing each attachment name)	

**ii. Executive Summary**

The Green Bay Housing Authority expects to continue to administer its 154 Unit Mason Manor Retirement Community and fifty units of large family scattered site Public Housing and serve approximately 187 house holds with Section 8 Rental Assistance. The Authority has developed a Capital Improvement Plan to make necessary improvements to the existing units. The Authority became eligible and received PHDEP funds in fall of 2000 for FY 1999 and 2000, and April of 2001 for FY 2001. The Authority has contracted with Integrated Community Services Inc. (ICS) to administer the PHDEP Program. ICS is in the process of completing resident surveys and a Needs Assessment. The major program changes to the Housing Authorities 2001 Agency plan are the inclusion of the PHDEP Program and the removal of the Section 8 homebuyers Program. The Green Bay Housing Authority is considering the consolidation of the Green Bay Section 8 Program and FSS program with the Brown County Housing Authorities much larger program. We believe this will result in program administration efficiencies. As such the Green Bay Housing Authority would not be able to administer a Section 8 Homebuyer Program.

ADD SUMMARY

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

The major program changes to the Housing Authorities 2001 Agency plan are the inclusion of the PHDEP Program and the removal of the Section 8 homebuyers Program. The Green Bay Housing Authority is considering the consolidation of the Green Bay Section 8 Program and FSS program with the Brown County Housing Authorities much larger program. We believe this will result in program administration efficiencies. As such the Green Bay Housing Authority would not administer a Section 8 Homebuyer Program.

**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? Actual \$ 314,981.

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 C**

**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

<b>Demolition/Disposition Activity Description (Not including Activities Associated with HOPE VI or Conversion Activities)</b>
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? Actual \$ 50,121.00

- 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**  
The Executive Summary of the Public Housing Drug Elimination plan (PHDEP) is included in this agency Plan under **PHEDP Section 1, 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 Resident Advisory Board Comments and PHA Response**

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)

**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: City of Green Bay, WI.

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)

The Housing Authority of the City of Green Bay strives to effectively serve very low and moderate income families and Senior citizens in Low Income Public Housing Programs and the Section 8 Rental Assistance Program , and Section 8 FSS Program. The Authority continues to meet the special affordable housing needs by providing rental assistance through its housing voucher program. Th Housing Authority collaborates with the Brown County Housing Authority, The City of Green Bay, Planning Commission, Redevelopment Authority and Neighborhoods Division, and a large number of non profit and private agencies in the planning and development of community programs and efforts to monitor and meet the housing needs of The City of Green Bay

## **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:**

**This Annual Agency plan Includes PHDEP and deletes Section 8 Homeownership**

#### **B. Significant Amendment or Modification to the Annual Plan:**

**This Annual Agency Plan Includes PHDEP and deletes Section 8 Homeownership**

**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.

<b>List of Supporting Documents Available for Review</b>		
<b>Applicable &amp; On Display</b>	<b>Supporting Document</b>	<b>Related Plan Component</b>
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
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
NA	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
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
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

<b>List of Supporting Documents Available for Review</b>		
<b>Applicable &amp; On Display</b>	<b>Supporting Document</b>	<b>Related Plan Component</b>
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
X	Any required policies governing any Section 8 special housing types <input checked="" 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
NA	Most recent CIAP Budget/Progress Report (HUD 52825) for any active CIAP grants	Annual Plan: Capital Needs
NA	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
NA	Approved or submitted applications for demolition and/or disposition of public housing	Annual Plan: Demolition and Disposition
NA	Approved or submitted applications for designation of public housing (Designated Housing Plans)	Annual Plan: Designation of Public Housing
NA	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

<b>List of Supporting Documents Available for Review</b>		
<b>Applicable &amp; On Display</b>	<b>Supporting Document</b>	<b>Related Plan Component</b>
NA	Approved or submitted public housing homeownership programs/plans	Annual Plan: Homeownership
NA	Policies governing any Section 8 Homeownership program (section _____ of the Section 8 Administrative Plan)	Annual Plan: Homeownership
NA	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
X	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
X	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 (PHDEP) semi-annual performance report	Annual Plan: Safety and Crime Prevention
NA	PHDEP-related documentation: <ul style="list-style-type: none"> <li>· Baseline law enforcement services for public housing developments assisted under the PHDEP plan;</li> <li>· 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);</li> <li>· Partnership agreements (indicating specific leveraged support) with agencies/organizations providing funding, services or other in-kind resources for PHDEP-funded activities;</li> <li>· Coordination with other law enforcement efforts;</li> <li>· Written agreement(s) with local law enforcement agencies (receiving any PHDEP funds); and</li> <li>· 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.</li> </ul>	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
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
NA	Troubled PHAs: MOA/Recovery Plan	Troubled PHAs
	Other supporting documents (optional) (list individually; use as many lines as necessary)	(specify as needed)

<b>Annual Statement/Performance and Evaluation Report</b> <b>Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary</b>						
<b>PHA Name:</b> Green Bay Housing Authority WI074		<b>Grant Type and Number</b> Capital Fund Program: CIAP 0170829009 Capital Fund Program Replacement Housing Factor Grant No:			<b>Federal FY of Grant:</b> 2000	
<input checked="" type="checkbox"/> <b>Original Annual Statement</b>						
<input type="checkbox"/> <b>Performance and Evaluation Report for Period Ending:</b>						
<input type="checkbox"/> <b>Reserve for Disasters/ Emergencies</b>						
<input type="checkbox"/> <b>Revised Annual Statement (revision no: )</b>						
<input type="checkbox"/> <b>Final Performance and Evaluation Report</b>						
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost		
		Original	Revised	Obligated	Expended	
1	Total non-CFP Funds					
2	1406 Operations					
3	1408 Management Improvements					
4	1410 Administration	\$ 16,250	\$ 16,250	\$ 0	\$ 0	
5	1411 Audit					
6	1415 liquidated Damages					
7	1430 Fees and Costs					
8	1440 Site Acquisition					
9	1450 Site Improvement	\$ 32,000	\$ 42,010	\$ 15,353	\$ 11,503	
10	1460 Dwelling Structures	\$ 217,286	\$ 215,690	\$ 156,819	\$ 133,467	
11	1465.1 Dwelling Equipment—Nonexpendable	\$ 24,400	\$ 17,172	\$ 14,649	\$ 12,512	
12	1470 Nondwelling Structures	\$ 5,000	\$ 12,070	\$ 11,970	\$ 11,970	
13	1475 Nondwelling Equipment	\$ 9,400	\$ 23,094	\$ 15,280	\$ 12,299	
14	1485 Demolition					
15	1490 Replacement Reserve					
16	1492 Moving to Work Demonstration					
17	1495.1 Relocation Costs					
18	1498 Mod Used for Development					
19	1502 Contingency					
20	Amount of Annual Grant: (sum of lines 2-19)	\$ 304,336	\$ 326,286	\$ 214,071	\$ 181,751	
21	Amount of line 20 Related to LBP Activities	\$ 15,900	\$ 15,900	\$ 0	\$ 0	
22	Amount of line 20 Related to Section 504 Compliance	\$ 38,036	\$ 45,250	\$ 0	\$ 0	
23	Amount of line 20 Related to Security	\$ 14,000	\$ 20,222	\$ 7,065	\$ 7,065	

<b>Annual Statement/Performance and Evaluation Report</b> <b>Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary</b>					
<b>PHA Name:</b>  Green Bay Housing Authority WI074	<b>Grant Type and Number</b> Capital Fund Program: CIAP 0170829009 Capital Fund Program Replacement Housing Factor Grant No:			<b>Federal FY of Grant:</b>  2000	
<input checked="" type="checkbox"/> <b>Original Annual Statement</b>					
<input type="checkbox"/> <b>Performance and Evaluation Report for Period Ending:</b>					
<input type="checkbox"/> <b>Reserve for Disasters/ Emergencies</b>					
<input type="checkbox"/> <b>Revised Annual Statement (revision no: )</b>					
<input type="checkbox"/> <b>Final Performance and Evaluation Report</b>					
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
24	Amount of line 20 Related to Energy Conservation Measures				



<b>Annual Statement/Performance and Evaluation Report</b> <b>Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)</b> <b>Part II: Supporting Pages</b>								
PHA Name:		<b>Grant Type and Number</b> Capital Fund Program #: Capital Fund Program Replacement Housing Factor #:			Federal FY of Grant:			
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	

<b>Annual Statement/Performance and Evaluation Report</b> <b>Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)</b> <b>Part III: Implementation Schedule</b>							
PHA Name:		<b>Grant Type and Number</b> Capital Fund Program #: Capital Fund Program Replacement Housing Factor #:			Federal FY of Grant:		
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	



### 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.

Development Number/Name HA-Wide Activities	General Description of Major Work Categories	Development Account Number	Complete *	Total Estimated Cost	Est. Carryover Planned Start Date HA Fiscal Year 2001
WI-74-1	Asbestos Removal	4610	*	\$3,850	\$8,621
	Carpeting	1460		12,397	
	Ceramic Flooring	1460	*	6,102	
	Upgrade Computer Equipment	1475		2,000	
	Entry Doors	1460	*	4,556	
	Epoxy Flooring	1460	*	9,844	
	Ramp Deck and Parapet Sealant	4610	*	5,400	
	Replacement Furniture	1475.030/4610	*	6,174	
	Roof Replacement	1460	*	71,105	
	Seasonal Decorations/Banners			5,000	
	Sweeper Attachment	1475.020		3,000	
	Vacuum Cleaner	1475.020		800	
	Seal & Stripe Parking Lot	4610	*	6,570	
	Coin Changer	1475.030	*	1,219	
	Washer/Dryer Replacement & Warranty	1475.030	*	7,528	
	Fax Machine	1475.010	*	359	
	Landscaping & Maintenance	1450/4430	*	10,660	
	Telephone Entry System	1460	*	6,222	
	Utility Truck	1475.020		368	
	Platform Truck	1475.020		546	
Sweeper	4420		100		
WI-74-2	Appliances	1465	*	\$12,172	8,500
	Basement – Tuckpointing & Lead Paint Abatement	4610		8,500	
	Blinds	4610		2,400	
	Cabinets and Countertops	1460		2,600	
	Fencing	1450		14,000	
	Flooring (Includes Tread on Stairs)	1460		43,714	
	Lead Based Paint Testing	4610		5,000	
	Porch Deck and Rail	1460		45,250	
	Roofing	1460	*	11,500	
	Snowblower	1475.020		1,100	
	Administration	4190		16,250	

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

Development Number/Name HA-Wide Activities	All Funds Obligated (Quarter Ending Date)	All Funds Expended (Quarter Ending Date)
WI39-PO74-911-99	3-31-00	3-31-00
Wi39-PO74-501-00	8-30-01	8-30-02
WI39-PO74-501-01	5-30-02	5-30-03

### Optional Table for 5-Year Action Plan for Capital Fund (Component 7) - Attachment C

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.

<b>Optional 5-Year Action Plan Tables</b>				
<b>Development Number</b>	<b>Development Name (or indicate PHA wide)</b>	<b>Number Vacant Units</b>	<b>% Vacancies in Development</b>	
WI074-001	Mason Manor	2	1.5%	
<b>Description of Needed Physical Improvements or Management Improvements</b>			<b>Estimated Cost</b>	<b>Planned Start Date (HA Fiscal Year)</b>
Update Fire Alarm System, Install All New Smoke Detectors			\$60,000	2001
Truck			\$30,000	
Draperies for Public Areas			\$15,000	
Carpet Replacement in Public Areas			\$15,000	
Replacement Furniture – Lobbies			\$10,000	
Coating Walls of Exterior Ramp Area			\$30,000	
Treadmill			\$ 4,000	
Architectural & Engineering Fees - Community Room Addition			\$30,000	
Community Room Addition (To Include Storage Room)			\$300,000	2002
Outdoor Improvements (Yard, Parking Lot, Etc.)			\$ 10,000	
<b>Total estimated cost over next 5 years</b>				

<b>Optional 5-Year Action Plan Tables</b>				
<b>Development Number</b>	<b>Development Name (or indicate PHA wide)</b>	<b>Number Vacant Units</b>	<b>% Vacancies in Development</b>	
WI074-001	Mason Manor	2	1.5%	
<b>Description of Needed Physical Improvements or Management Improvements</b>			<b>Estimated Cost</b>	<b>Planned Start Date (HA Fiscal Year)</b>
Carpet Replacement in Public Areas			\$ 20,000	2003
Lawnmower With Attachments			\$ 20,000	
Replacement of Carpeting – 15 Apartments			\$ 7,500	
Landscaping Around Community Room After Remodeling			\$ 2,500	
Furniture for Community Room After Remodeling			\$ 10,000	
Replace Roof on Community Room and Front			\$ 18,000	2004
Snowblower Replacement			\$ 4,000	
Carpet Replacement in Public Areas			\$ 11,000	
Replacement Furniture – Lobbies			\$ 10,000	
Deck on Exterior Ramp Resurfaced			\$ 25,000	
<b>Total estimated cost over next 5 years</b>			<b>\$632,000</b>	

<b>Optional 5-Year Action Plan Tables</b>				
<b>Development Number</b>	<b>Development Name (or indicate PHA wide)</b>	<b>Number Vacant Units</b>	<b>% Vacancies in Development</b>	
WI074-002	Scattered Sites	2	1.0%	
<b>Description of Needed Physical Improvements or Management Improvements</b>			<b>Estimated Cost</b>	<b>Planned Start Date (HA Fiscal Year)</b>
Appliances			\$ 2,000	2001
Cabinets & Countertops			2,500	
Flooring – Vinyl			135,000	
Flooring – Hardwood			12,000	
Paint			16,000	
Porch Deck & Rail			23,550	
Powerwasher			3,000	
Roof			10,000	
Siding			20,000	
Storm Sewer Administration			50,000 30,450	
<b>Total estimated cost over next 5 years</b>				

<b>Optional 5-Year Action Plan Tables</b>				
<b>Development Number</b>	<b>Development Name (or indicate PHA wide)</b>	<b>Number Vacant Units</b>	<b>% Vacancies in Development</b>	
WI074-002	Scattered Sites	2	1.0%	
<b>Description of Needed Physical Improvements or Management Improvements</b>			<b>Estimated Cost</b>	<b>Planned Start Date (HA Fiscal Year)</b>
Flooring Hardwood			\$ 16,000	2002
Paint			7,000	
Basement			10,000	2003
Drain Tile			10,000	
Flooring – Hardwood			9,500	2004
Paint			7,500	
Cabinets			6,000	2004
Flooring – Hardwood			5,000	
Paint			1,500	
Miscellaneous			6,000	
<b>Total estimated cost over next 5 years</b>			<b>\$383,000</b>	

## PHA 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: \$ 44,868**

**B. Eligibility type (Indicate with an "x")**      N1 \_\_\_\_\_ N2 \_\_\_\_\_ R \_\_\_\_\_

**C. FFY in which funding is requested**      1999

### **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 City of Green Bay Housing Authority (GBHA) proposes to use the Public Housing Drug Elimination Grant funds to increase security and provide drug prevention activities. Specifically the GBHA plans to conduct a needs assessment for residents by conducting a resident survey and meeting with the Resident Advisory Committees. The GBHA expects to then implement some changes to security systems and lighting at Mason Manor Retirement Community. For residents in the family scattered site units, the GBHA would like to provide opportunities for substance abuse counseling and education for prevention and referral to appropriate resources in the community. The GBHA goal is to provide a safer environment for residents to live and raise their families.

### **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)
Mason Manor Retirement Community WI7401	154	Approx. 160
Scattered Site Family Housing WI7402	50	Approx. 205

**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 1999	\$44,868	WI39DEP0740199	\$44,868	---	9-27-00	9-27-02
FY 2000	\$46,762	WI39DEP0740100	\$46,762		9-27-00	9-27-02
FY 2001	\$50,121	WI39DEP0740101	\$50,121		5-30-01	5-30-03
FY						

**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 GBHA has contracted with Integrated Community Services, Inc., its management agent for the family scattered site units, to administer this grant. ICS, along with the GBHA staff and commissioners, and Resident Advisory Board have worked together to develop goals for the program.

**GOALS:** Prevent Crimes, Gang Activity and Illegal Drug Activity in and around public housing sites;  
 Provide additional social services to residents and their families; and  
 To deter substance abuse by public housing residents.

ICS has conducted the HUD required survey in March of 2001. The survey will be re-administered in a year. This survey along with discussions with residents and the Resident Advisory Boards will be used to determine effectiveness and to monitor and evaluate the program.

**B. PHDEP Budget Summary**

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

<b>FFY 1999 PHDEP Budget Summary</b>	
<b>Original statement</b>	
<b>Revised statement dated:</b>	
<b>Budget Line Item</b>	<b>Total Funding</b>
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	\$ 26,000
9160 - Drug Prevention	\$ 14,000
9170 - Drug Intervention	
9180 - Drug Treatment	
9190 - Other Program Costs	\$ 4,868
<b>TOTAL PHDEP FUNDING</b>	<b>\$ 44,868</b>

**C. PHDEP Plan Goals and Activities**

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

<b>9110 – Reimbursement of Law Enforcement - N/A</b>						<b>Total PHDEP Funding: \$</b>	
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.							

<b>9115 - Special Initiative – N/A</b>						<b>Total PHDEP Funding: \$</b>	
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.							

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

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

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

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

<b>9150 - Physical Improvements \$26,000</b>					<b>Total PHDEP Funding: \$ 44,868</b>		
Goal(s): Prevent Crimes in and around GBHA sites							
Objectives: Make physical enhancements that will increase security							
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHDEP Funding	Other Funding (Amount /Source)	Performance Indicators
1. Security Camera/Cable TV connection			9-00	9-02	\$ 8,000	--	Ability for residents to better control access to building from their apartment
2. Outdoor Lighting			9-00	9-02	\$ 3,000	--	Deter crime near homes that are not in well-lit areas (ex. Garages, back doors)
3. Additional Fencing			9-00	9-02	\$ 15,000	--	Cut off access through resident's yards to deter loitering, vandalism, and break-ins

<b>9160 - Drug Prevention \$14,000</b>					<b>Total PHDEP Funding: \$ 44,868</b>		
Goal(s): To deter substance abuse by public housing residents							
Objectives: To better educate residents, especially children, about the dangers of substance abuse							
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHDEP Funding	Other Funding (Amount /Source)	Performance Indicators
1. Provide at least 3 educational programs	15		9-00	9-02	\$ 10,000	--	Attendance by residents at programs
2. Information/referral service	10		9-00	9-02	\$ 4,000	--	Use of service
3.							

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

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

<b>9190 - Other Program Costs 44,868</b>					<b>Total PHDEP Funds: \$ 44,868</b>		
Goal(s): Provide additional social services to residents and their families							
Objectives: Successfully administer the funds							
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHDEP Funding	Other Funding (Amount /Source)	Performance Indicators
1. Hire contractor to administer funds & conduct surveys and needs assessment			9-00	9-02	\$4,868	- -	Completion of grant as prescribed by HUD regulations and successful implantation of above mentioned programs.
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:

Jane Trask

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

Elected

Appointed

C. The term of appointment is five years appointed 4-30-00 expires 4-30-05

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: 4/30/02

C. Name and title of appointing official(s) for governing board (indicate appointing official for the next position): **Mayor and Common Council of the City of Green Bay Mayor Paul Jadin**

## **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.)

**Resident Advisory Safety Council Members-Volunteers interested are appointed –Membership on the Resident Advisory Safety Council is a good cross section of all residents All residents are automatically members of our Resident Council**

Barb Davis  
Delores Marohl  
Nellie Elendt  
Rita Huven  
Janice Fonder  
Joyce Haworth  
Jane Trask  
Doris Homontowski  
Vonnie Pagel

## **Attachment G : Resident Comments and PHA Response**

*A Resident Advisory Safety Council meeting was held on Tuesday, March 13, 2001 at 1:00 P.M. of the Mason Manor Resident Safety Advisory Council. At that meeting, the Annual Agency Plan was thoroughly explained stating that the Housing Authority is mandated to prepare an Annual Agency Plan which will outline the Housing Authority's overall plan for operations into the future, including financial plans, meeting community housing needs, capital improvements, and operational policies. The purpose of the plan is to map out how the Green Bay Housing Authority will operate and function in the future.*

**A Public Hearing was also held on Thursday, April 12, 2001 at 9:00 A.M. The Agency Plan was distributed. The following comments were received from residents:**

**Barbara Davis stated she thinks this is a great plan.**

**Janice Fonder stated things seem to be going well and all the needs of the building are being taken care of. Everything is updated accordingly. Cannot find anything negative. Lots of positive things going on and the staff is doing a great job of maintenance of the building.**

**Jane Trask stated if and when the community room is enlarged, storage space for residents should be a priority.**

**Delores Marohl stated she thinks all the recommendations in the plan for this year are fine. She thinks they will improve so many things.**

**Vonnie Pagel stated she finds Mason Manor very safe. The staff keeps everything clean and neat. She is pleased with the plans for the improvements and she hopes to live at Mason Manor for a long time.**

**Rita Huven stated she thinks Mason Manor is being kept up very well, making it a nice place to live. The improvements being made are great. She stated she has a few reservations of the need for a new or larger community room. She feels it meets the needs now but if it could include storage space for the tenants then it would be a good improvement.**

**Nellie Elendt stated after reading the plan it sounds like great projects to take place over the next five years. She felt the improvements so far have been great. Landscaping, the parking lot, the new laundry room, a coin changing machine, vending machine, and garbage room and stairway improvements. She would just like to say thank you. The handicap opener to the community room is a great improvement. The next five years, everyone living here can't help but be excited seeing all the improvements happen. I really enjoy my apartment.**

**PHA Response; All comments received were favorable and supportive of the Housing Authority Capital Improvement Plan, Administrative Policies and resident opportunity to have input and participation. No changes are deemed necessary.**





Green Bay Housing Authority  
Contract Register

Project: Mason Manor

Contract for: CIAP 911

Contract Amount #####

Description	Date	Reference No.	MM Asbestos Remo	MM Carpeting	MM Ceramic Floorin	MM Computer Upgr	MM Entry Doors	MM Epoxy Floorin	MM Seal Ramp Dr
			1450	1460	1460	1475	1460	1460	1470
original est cost			0.00	#####	8,300.00	4,500.00	5,000.00	5,000.00	#####
revised est cost			0.00	#####	13,693.98	#####	0.00	7,070.00	#####
revised budget cost			0.00	#####	21,993.98	#####	5,000.00	#####	#####
total obligated cost			0.00	#####	15,279.98	#####	2,476.80	#####	#####
total expended cost			0.00	#####	12,298.98	#####	0.00	#####	#####

Green Bay Housing Authority  
Contract Register

Project: Scattered Sites

Contract for: CIAP 911

Contract Amoi #####

Description	Date	Reference No.	SS Admin	SS Appliances	SS Blinds	SS Basement-Tuckpointing & lead paint abate	SS Fencing	SS Flooring
			1410	1465	1460	1450	1450	1460
			1410	1450	1460	1465	1475	
original est cost			#####	#####	#####	19,400.00	1,100.00	#####
revised est cost			0.00	0.00	#####	(7,228.00)	0.00	6,950.00
revised budget cost			#####	#####	#####	12,172.00	1,100.00	#####
total obligated cost			0.00	843.00	#####	12,172.00	0.00	#####
total expended cost			0.00	843.00	#####	12,512.00	0.00	#####