

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

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# PHA Plans

5-Year Plan for Fiscal Years 2002 - 2006

Annual Plan for Fiscal Year 2002

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

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

## PHA Plan Agency Identification

**PHA Name:** Fort Pierce Housing Authority

**PHA Number:** FL041

**PHA Fiscal Year Beginning: (mm/yyyy)** 07/2002

### Public Access to Information

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

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

### Display Locations For PHA Plans and Supporting Documents

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

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

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

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

**5-YEAR PLAN**  
**PHA FISCAL YEARS 2002 - 2006**  
[24 CFR Part 903.5]

**A. Mission**

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

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

**To provide quality housing to eligible people in a professional, fiscally prudent manner and be a positive force in our community by working with others to assist these families with appropriate supportive services.**

**B. Goals**

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

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

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

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

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

- PHA Goal: Provide an improved living environment
- Objectives:
- Implement measures to deconcentrate poverty by bringing higher income public housing households into lower income developments:
  - Implement measures to promote income mixing in public housing by assuring access for lower income families into higher income developments:
  - Implement public housing security improvements:
  - Designate developments or buildings for particular resident groups (elderly, persons with disabilities)
  - Other: (list below)  
Study and determine feasibility of converting one elderly development into an Assisted Living Facility for low- income people. This has been a Housing goal for some time.

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

- PHA Goal: Promote self-sufficiency and asset development of assisted households
- Objectives:
- Increase the number and percentage of employed persons in assisted families:
  - Provide or attract supportive services to improve assistance recipients' employability:
  - Provide or attract supportive services to increase independence for the elderly or families with disabilities.

Other: (list below)

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

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

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

**Annual PHA Plan**  
**PHA Fiscal Year 2002**

[24 CFR Part 903.7]

**i. Annual Plan Type:**

Select which type of Annual Plan the PHA will submit.

**Standard Plan**

**Streamlined Plan:**

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

**Troubled Agency Plan**

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

[24 CFR Part 903.7 9 (r)]

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

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

The authority's residents, community leaders and organizations, and State and local authorities communicated with the Authority during the development of the Agency Plan to ensure that the needs of the residents and community were addressed in the Agency Plan. The Agency Plan is consistent with the Consolidated Plan for St. Lucie County.

### **iii. Annual Plan Table of Contents**

[24 CFR Part 903.7 9 (r)]

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

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#### **Attachments**

Indicate which attachments are provided by selecting all that apply. Provide the attachment's name (A, B, etc.) in the space to the left of the name of the attachment. Note: If the attachment is provided as a **SEPARATE** file submission from the PHA Plans file, provide the file name in parentheses in the space to the right of the title.

#### **Required Attachments:**

- Admissions Policy for Deconcentration
- FY 2002 Capital Fund Program Annual Statement (**f1041a01**)
- FY 2002 Capital Fund Five Year Action Plan (**f1041b01**)
- FY 1999, 2000, 2001 Capital Fund Program P & E Reports (**f1041c01, f1041d01, f1041e01**)
- Most recent board-approved operating budget (Required Attachment for PHAs that are troubled or at risk of being designated troubled ONLY)

- Statement of Progress – Goals and Objectives
- Resident Advisory Board Members, Resident Commissioner
- Resident Customer Service Survey – Follow-Up Plan

Optional Attachments:

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

**Supporting Documents Available for Review**

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

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

<b>List of Supporting Documents Available for Review</b>		
<b>Applicable &amp; On Display</b>	<b>Supporting Document</b>	<b>Applicable Plan Component</b>
	Assignment Plan [TSAP]	Policies
X	Section 8 Administrative Plan	Annual Plan: Eligibility, Selection, and Admissions Policies
X	Public Housing Deconcentration and Income Mixing Documentation: 1. PHA board certifications of compliance with deconcentration requirements (section 16(a) of the US Housing Act of 1937, as implemented in the 2/18/99 <i>Quality Housing and Work Responsibility Act Initial Guidance; Notice</i> and any further HUD guidance) and 2. Documentation of the required deconcentration and income mixing analysis	Annual Plan: Eligibility, Selection, and Admissions Policies
X	Public housing rent determination policies, including the methodology for setting public housing flat rents <input checked="" type="checkbox"/> check here if included in the public housing A & O Policy	Annual Plan: Rent Determination
X	Schedule of flat rents offered at each public housing development <input checked="" type="checkbox"/> check here if included in the public housing A & O Policy	Annual Plan: Rent Determination
X	Section 8 rent determination (payment standard) policies <input checked="" type="checkbox"/> check here if included in Section 8 Administrative Plan	Annual Plan: Rent Determination
X	Public housing management and maintenance policy documents, including policies for the prevention or eradication of pest infestation (including cockroach infestation)	Annual Plan: Operations and Maintenance
X	Public housing grievance procedures <input checked="" type="checkbox"/> check here if included in the public housing A & O Policy	Annual Plan: Grievance Procedures
X	Section 8 informal review and hearing procedures <input checked="" type="checkbox"/> check here if included in Section 8 Administrative Plan	Annual Plan: Grievance Procedures
X	The HUD-approved Capital Fund Program Annual	Annual Plan: Capital

<b>List of Supporting Documents Available for Review</b>		
<b>Applicable &amp; On Display</b>	<b>Supporting Document</b>	<b>Applicable Plan Component</b>
	Statement (HUD 52837) for the active grant year	Needs
NA	Most recent CIAP Budget/Progress Report (HUD 52825) for any active CIAP grant	Annual Plan: Capital Needs
X	Most recent, approved 5 Year Action Plan for the Capital Fund/Comprehensive Grant Program, if not included as an attachment (provided at PHA option)	Annual Plan: Capital Needs
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
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	Annual Plan: Conversion of Public Housing
NA	Approved or submitted public housing homeownership programs/plans	Annual Plan: Homeownership
	Policies governing any Section 8 Homeownership program <input type="checkbox"/> check here if included in the Section 8 Administrative Plan	Annual Plan: Homeownership
	Any cooperative agreement between the PHA and the TANF agency	Annual Plan: Community Service & Self-Sufficiency
X	FSS Action Plan/s for public housing and/or Section 8	Annual Plan: Community Service & Self-Sufficiency
	Most recent self-sufficiency (ED/SS, TOP or ROSS or other resident services grant) grant program reports	Annual Plan: Community Service & Self-Sufficiency
X	The most recent Public Housing Drug Elimination Program (PHEDEP) semi-annual performance report for any open grant and most recently submitted PHDEP application (PHDEP Plan)	Annual Plan: Safety and Crime Prevention
X	The most recent fiscal year audit of the PHA conducted under section 5(h)(2) of the U.S. Housing	Annual Plan: Annual Audit

<b>List of Supporting Documents Available for Review</b>		
<b>Applicable &amp; On Display</b>	<b>Supporting Document</b>	<b>Applicable Plan Component</b>
	Act of 1937 (42 U. S.C. 1437c(h)), the results of that audit and the PHA's response to any findings	
NA	Troubled PHAs: MOA/Recovery Plan	Troubled PHAs
	Other supporting documents (optional) (list individually; use as many lines as necessary)	(specify as needed)

**1. Statement of Housing Needs**

[24 CFR Part 903.7 9 (a)]

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

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

<b>Housing Needs of Families in the Jurisdiction by Family Type</b>							
Family Type	Overall	Afford-ability	Supply	Quality	Access-ibility	2. Size	Location
Income <= 30% of AMI	559	3	4	3	3	3	3
Income >30% but <=50% of AMI	871	3	4	3	3	3	3
Income >50% but <80% of AMI	1852	3	4	3	3	3	3
Elderly	NA	3	4	3	3	3	3
Families with Disabilities	NA	3	4	3	3	3	3
Race/Ethnicity	NA	3	4	3	3	3	3
Race/Ethnicity	NA	3	4	3	3	3	3
Race/Ethnicity	NA	3	4	3	3	3	3

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

- Consolidated Plan of the Jurisdiction/s  
Indicate year: 2001
- U.S. Census data: the Comprehensive Housing Affordability Strategy ("CHAS") dataset
- American Housing Survey data  
Indicate year:
- Other housing market study  
Indicate year:
- Other sources: (list and indicate year of information)

**PHA local survey of jurisdiction/State of Florida Consolidated Plan and City of Fort Pierce Consolidated Plan and previous 5-year information obtained by consultant in FY 2000.**

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

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

<b>Housing Needs of Families on the Waiting List</b>			
Waiting list type: (select one)			
<input checked="" type="checkbox"/> Section 8 tenant based			
<input type="checkbox"/> Public Housing			
<input type="checkbox"/> Combined Section 8 and Public Housing			
<input type="checkbox"/> public Housing Site-Based or sub-jurisdictional waiting list (optional)			
If used, identify which development/subjurisdiction:			
	# of families	% of total families	Annual Turnover
Waiting list total	574		120
Extremely low income <=30% AMI	269	47	
Very low income (>30% but <=50% AMI)	305	53	
Low income (>50% but <80% AMI)	0	0	
Families with children	491	86	
Elderly families	53	9	
Families w/Disabilities	30	6	
Race/ethnicity W	67	12	
Race/ethnicity B	471	82	
Race/ethnicity A	1	0	
Race/ethnicity Hispanic	35	6	
Characteristics by BR Size (PH Only)	NA – Section 8		
1BR			
2 BR			
3 BR			
4 BR			
5 BR			
Is the waiting list closed (select one)? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes for section 8 If yes:			
How long has it been closed (# of months)? 7 months			
Does the PHA expect to reopen the list in the PHA Plan year? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
Does the PHA permit specific categories of families onto the waiting list, even if generally closed? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			

<b>Housing Needs of Families on the Waiting List</b>			
Waiting list type: (select one)			
<input type="checkbox"/> Section 8 tenant based			
<input checked="" type="checkbox"/> Public Housing			
<input type="checkbox"/> Combined Section 8 and Public Housing			
<input type="checkbox"/> public Housing Site-Based or sub-jurisdictional waiting list (optional)			
If used, identify which development/subjurisdiction:			
	# of families	% of total families	Annual Turnover
Waiting list total	412		156
Extremely low income <=30% AMI	370	89.81%	
Very low income (>30% but <=50% AMI)	38	9.22%	
Low income (>50% but <80% AMI)	4	.97%	
Families with children	307	74.51%	
Elderly families	26	6.31%	
Families with Disabilities	146	35.44%	
Race/ethnicity W	91	22.09%	
Race/ethnicity B	287	69.66%	
Race/ethnicity H	31	7.52%	
Race/ethnicity A	1	.24%	
Unknown	2	.48%	
Characteristics by BR Size (PH Only)			
0BR	60	14.6%	20
1BR	35	8.5%	10
2 BR	212	51.5%	74
3 BR	92	22.3%	46
4 BR	12	2.9%	5
5 BR	1	.2%	1
Is the waiting list closed (select one)? <b>No</b>			
Hw long has it been closed (# of months? NA			
Does the PHA expect to reopen the list in the PHA Plan year? No			
Does the PHA permit specific categories of families onto the waiting list, even if generally closed? X No __ Yes			

### C. Strategy for Addressing Needs

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

#### **(1) Strategies**

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

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

Select all that apply

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

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

Select all that apply

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

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

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

Select all that apply

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

**Need: Specific Family Types: Families at or below 50% of median**

**Strategy 1: Target available assistance to families at or below 50% of AMI**

Select all that apply

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

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

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

Select all that apply

- Seek designation of public housing for the elderly
- Apply for special-purpose vouchers targeted to the elderly, should they become available
- Other: (list below)  
**Apply for ALF medicaid vouchers and convert elderly building into Assisted Living Facility.**

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

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

Select all that apply

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

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

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

Select if applicable

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

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

Select all that apply

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

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

**(2) Reasons for Selecting Strategies**

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

- Funding constraints
- Staffing constraints
- Limited availability of sites for assisted housing
- Extent to which particular housing needs are met by other organizations in the community
- Evidence of housing needs as demonstrated in the Consolidated Plan and other information available to the PHA
- Influence of the housing market on PHA programs
- Community priorities regarding housing assistance
- Results of consultation with local or state government
- Results of consultation with residents and the Resident Advisory Board
- Results of consultation with advocacy groups
- Other: (list below)

## **Statement of Financial Resources**

[24 CFR Part 903.79 (b)]

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

<b>Financial Resources: Planned Sources and Uses</b>		
<b>Sources</b>	<b>Planned \$</b>	<b>Planned Uses</b>
<b>1. Federal Grants (FY 2002 grants)</b>		
a) Public Housing Operating Fund	\$1,919,084.00	
b) Public Housing Capital Fund	\$1,715,938.00	
c) HOPE VI Revitalization	0	
d) HOPE VI Demolition	0	
e) Annual Contributions for Section 8 Tenant-Based Assistance	\$4,598,550.00	
f) PHDEProgram (including any Technical Assistance funds)	-0-	
g) ROSS Grants	-0-	
h) CDBG	-0-	
i) HOME	-0-	
Other Federal Grants (list below)	-0-	
<b>2. Prior Year Federal Grants (unobligated funds only) (list below)</b>		
PHDEP	\$203,187.00	Security
ROSS	\$37,283.00	Resident Empowerment
<b>3. Public Housing Dwelling Rental Income</b>	\$1,322,979.00	PH Operations
<b>4. Other income (list below)</b>	\$116,792.00	PH Operations
<b>4. Non-federal sources (list below)</b>		
<b>Total resources Based on 2002 Projections</b>	<b>\$9,913,813.00</b>	



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

[24 CFR Part 903.7 9 (c)]

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

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

#### **(1) Eligibility**

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

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

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

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

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

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

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

#### **(2)Waiting List Organization**

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

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

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

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

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

1. How many site-based waiting lists will the PHA operate in the coming year?
2.  Yes  No: Are any or all of the PHA's site-based waiting lists new for the upcoming year (that is, they are not part of a previously-HUD-approved site based waiting list plan)?  
If yes, how many lists?
3.  Yes  No: May families be on more than one list simultaneously  
If yes, how many lists?
4. Where can interested persons obtain more information about and sign up to be on the site-based waiting lists (select all that apply)?
  - PHA main administrative office
  - All PHA development management offices
  - Management offices at developments with site-based waiting lists
  - At the development to which they would like to apply
  - Other (list below)

**(3) Assignment**

- a. How many vacant unit choices are applicants ordinarily given before they fall to the bottom of or are removed from the waiting list? (select one)
  - One
  - Two
  - Three or More
- b.  Yes  No: Is this policy consistent across all waiting list types?
- c. If answer to b is no, list variations for any other than the primary public housing waiting list/s for the PHA:

**(4) Admissions Preferences**

- a. Income targeting:
  - Yes  No: Does the PHA plan to exceed the federal targeting requirements by targeting more than 40% of all new admissions to public housing to families at or below 30% of median area income?
- b. Transfer policies:  
In what circumstances will transfers take precedence over new admissions? (list below)
  - Emergencies
  - Overhoused
  - Underhoused
  - Medical justification

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

c. Preferences

1.  Yes  No: Has the PHA established preferences for admission to public housing (other than date and time of application)? (If “no” is selected, skip to subsection **(5) Occupancy**)
2. Which of the following admission preferences does the PHA plan to employ in the coming year? (select all that apply from either former Federal preferences or other preferences)

Former Federal preferences:

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

Other preferences: (select below)

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

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

2 Date and Time

Former Federal preferences:

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

- 5 Homelessness  
High rent burden

Other preferences (select all that apply)

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

4. Relationship of preferences to income targeting requirements:

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

**(5) Occupancy**

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

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

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

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

**(6) Deconcentration and Income Mixing**

a.  Yes  No: Does the PHA have any general occupancy (family) public housing developments covered by the deconcentration rule? If no, this section is complete. If yes, continue to the next question.

b.  Yes  No: Do any of these covered developments have average incomes above or below 85% to 115% of the average incomes of all such developments? If no, this section is complete.



If yes, list these developments as follows:

<b>Deconcentration Policy for Covered Developments</b>			
Development Name:	Number of Units	Explanation (if any) [see step 4 at §903.2(c)(1)(iv)]	Deconcentration policy (if no explanation)[see step 5 at §903.2(c)(1)(v)]
NA			

## B. Section 8

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

### (1) Eligibility

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

**(2) Waiting List Organization**

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

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

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

- PHA main administrative office
- Other (list below)

**(3) Search Time**

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

**If yes, state circumstances below: Upon receipt of written request for an extension by the family.**

**(4) Admissions Preferences**

a. Income targeting

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

b. Preferences

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

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

Former Federal preferences

- Involuntary Displacement (Disaster, Government Action, Action of Housing Owner, Inaccessibility, Property Disposition)
- Victims of domestic violence

- Substandard housing
- Homelessness
- High rent burden (rent is > 50 percent of income)
- Other preferences (select all that apply)
- Working families and those unable to work because of age or disability
- Veterans and veterans' families
- Residents who live and/or work in your jurisdiction
- Those enrolled currently in educational, training, or upward mobility programs
- Households that contribute to meeting income goals (broad range of incomes)
- Households that contribute to meeting income requirements (targeting)
- Those previously enrolled in educational, training, or upward mobility programs
- Victims of reprisals or hate crimes
- Other preference(s) (list below)

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

1      Date and Time

Former Federal preferences

Involuntary Displacement (Disaster, Government Action, Action of Housing Owner, Inaccessibility, Property Disposition)

1      Victims of domestic violence

1      Substandard housing  
 Homelessness  
 High rent burden

Other preferences (select all that apply)

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

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

- Date and time of application

Drawing (lottery) or other random choice technique

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

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

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

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

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

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

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

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

- Through published notices  
 Other (list below)

#### **4. PHA Rent Determination Policies**

[24 CFR Part 903.7 9 (d)]

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

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

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

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

a. Use of discretionary policies: (select one)

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

---or---

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

b. Minimum Rent

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

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

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

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

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

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

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

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

- For the earned income of a previously unemployed household member  
 For increases in earned income  
 Fixed amount (other than general rent-setting policy)  
If yes, state amount/s and circumstances below:  
 Fixed percentage (other than general rent-setting policy)  
If yes, state percentage/s and circumstances below:  
 For household heads  
 For other family members  
 For transportation expenses  
 For the non-reimbursed medical expenses of non-disabled or non-elderly families  
 Other (describe below)

e. Ceiling rents

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

- Yes for all developments  
 Yes but only for some developments

No

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

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

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

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

f. Rent re-determinations:

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

- Never
- At family option
- Any time the family experiences an income increase
- Any time a family experiences an income increase above a threshold amount or percentage: (if selected, specify threshold)\_\_\_\_\_
- Other (list below)

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

**(2) Flat Rents**

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

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

## B. Section 8 Tenant-Based Assistance

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

### (1) Payment Standards

Describe the voucher payment standards and policies.

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

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

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

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

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

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

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

- Annually
- Other (list below)

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

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

**(2) Minimum Rent**

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

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

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

**5. Operations and Management**

[24 CFR Part 903.7 9 (e)]

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

**A. PHA Management Structure**

Describe the PHA’s management structure and organization.

(select one)

- An organization chart showing the PHA’s management structure and organization is attached to the PHA Plan: Document Name: fl041f02**
- A brief description of the management structure and organization of the PHA follows:

**B. HUD Programs Under PHA Management**

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

<b>Program Name</b>	<b>Units or Families Served at Year Beginning</b>	<b>Expected Turnover</b>
Public Housing	827	156
Section 8 Vouchers	709	120
Section 8 Certificates	0	N/A
Section 8 Mod Rehab	0	N/A
Special Purpose Section 8 Certificates/Vouchers (list individually)	0	N/A
PHDEP	827	156
Other Federal Programs(list individually)	N/A	N/A

### C. Management and Maintenance Policies

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

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

- A. Admissions & Occupancy Policy
- B. Blood Born Disease Policy
- C. Capitalization Policy
- D. Check Signing Policy
- E. Disposition Policy
- F. Drug Free Work Place Policy
- G. Equal Housing Opportunity Policy
- H. Ethics Policy
- I. Facilities Use Policy
- J. Fund Transfer Policy
- K. Hazardous Materials Policy
- L. Investment Policy
- M. Natural Disaster Response Guidelines
- N. Personnel Policy
- O. Procurement Policy

(2) Section 8 Management: (list below)

- 1. Administrative Plan

### 6. PHA Grievance Procedures

[24 CFR Part 903.7 9 (f)]

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

#### A. Public Housing

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

If yes, list additions to federal requirements below:

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

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

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

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

If yes, list additions to federal requirements below:

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

## **7. Capital Improvement Needs**

[24 CFR Part 903.7 9 (g)]

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

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

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

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

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

Select one:

- The Capital Fund Program Annual Statement is provided as an attachment to the PHA Plan at Attachment (state name) fl041a01

-or-

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

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

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

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

b. If yes to question a, select one:

The Capital Fund Program 5-Year Action Plan is provided as an attachment to the PHA Plan at Attachment (fl041b01)

-or-

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

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

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

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

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

1. Development name:

2. Development (project) number:

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

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

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

If yes, list development name/s below:

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

If yes, list developments or activities below:

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

If yes, list developments or activities below:

**8. Demolition and Disposition**

[24 CFR Part 903.7 9 (h)]

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

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

2. Activity Description

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

<b>Demolition/Disposition Activity Description</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: (DD/MM/YY)
5. Number of units affected: 6. Coverage of action (select one) <input type="checkbox"/> Part of the development <input type="checkbox"/> Total development
7. Timeline for activity: a. Actual or projected start date of activity: b. Projected end date of activity:

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

[24 CFR Part 903.7 9 (i)]

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

1.  Yes  No: Has the PHA designated or applied for approval to designate or does the PHA plan to apply to designate any public housing for occupancy

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

**2. Activity Description**

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

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

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

[24 CFR Part 903.7 9 (j)]

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

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

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

2. Activity Description

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

<b>Conversion of Public Housing Activity Description</b>	
1a. Development name:	
1b. Development (project) number:	
2. What is the status of the required assessment?	
<input type="checkbox"/> Assessment underway <input type="checkbox"/> Assessment results submitted to HUD <input type="checkbox"/> Assessment results approved by HUD (if marked, proceed to next question) <input type="checkbox"/> Other (explain below)	
3. <input type="checkbox"/> Yes <input type="checkbox"/> No: Is a Conversion Plan required? (If yes, go to block 4; if no, go to block 5.)	
4. Status of Conversion Plan (select the statement that best describes the current status)	
<input type="checkbox"/> Conversion Plan in development <input type="checkbox"/> Conversion Plan submitted to HUD on: (DD/MM/YYYY) <input type="checkbox"/> Conversion Plan approved by HUD on: (DD/MM/YYYY) <input type="checkbox"/> Activities pursuant to HUD-approved Conversion Plan underway	
5. Description of how requirements of Section 202 are being satisfied by means other than conversion (select one)	
<input type="checkbox"/> Units addressed in a pending or approved demolition application (date submitted or approved: ) <input type="checkbox"/> Units addressed in a pending or approved HOPE VI demolition application (date submitted or approved: ) <input type="checkbox"/> Units addressed in a pending or approved HOPE VI Revitalization Plan (date submitted or approved: ) <input type="checkbox"/> Requirements no longer applicable: vacancy rates are less than 10 percent <input type="checkbox"/> Requirements no longer applicable: site now has less than 300 units <input type="checkbox"/> Other: (describe below)	

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

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

## Initial Voluntary Conversion Assessment

- a. How many of the PHA's developments are subject to the Required Initial Assessments? Five
- b. How many of the PHA's developments are not subject to the Required Initial Assessments based on exemptions (e.g., elderly and/or disabled developments not general occupancy developments)? **Two developments are high-rise buildings for the elderly/disabled as originally constructed.**
- c. How many Assessments were conducted for the PHA's covered developments?  
Five
- d. Identify PHA developments that may be appropriate for conversion based on the Required Initial Assessments. **None at this time, however, we do understand that this is a non-binding assessment and the Housing Authority is pursuing the development of a complete asset management plan at this time and will report on any progress in the next agency plan submittal.**

## 11. Homeownership Programs Administered by the PHA

[24 CFR Part 903.7 9 (k)]

### A. Public Housing

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

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

### 2. Activity Description

- Yes  No: Has the PHA provided all required activity description information for this component in the **optional** Public Housing Asset Management

Table? (If “yes”, skip to component 12. If “No”, complete the Activity Description table below.)

<b>Public Housing Homeownership Activity Description</b> <b>(Complete one for each development affected)</b>	
1a. Development name:	
1b. Development (project) number:	
2. Federal Program authority:	<input type="checkbox"/> HOPE I <input type="checkbox"/> 5(h) <input type="checkbox"/> Turnkey III <input type="checkbox"/> Section 32 of the USHA of 1937 (effective 10/1/99)
3. Application status: (select one)	<input type="checkbox"/> Approved; included in the PHA’s Homeownership Plan/Program <input type="checkbox"/> Submitted, pending approval <input type="checkbox"/> Planned application
4. Date Homeownership Plan/Program approved, submitted, or planned for submission: (DD/MM/YYYY)	
5. Number of units affected:	
6. Coverage of action: (select one)	<input type="checkbox"/> Part of the development <input type="checkbox"/> Total development

## B. Section 8 Tenant Based Assistance

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

### 1. Program Description:

#### a. Size of Program

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

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

- 25 or fewer participants
- 26 - 50 participants
- 51 to 100 participants
- more than 100 participants

b. PHA-established eligibility criteria

- Yes  No: Will the PHA's program have eligibility criteria for participation in its Section 8 Homeownership Option program in addition to HUD criteria?  
If yes, list criteria below:

**12. PHA Community Service and Self-sufficiency Programs**

[24 CFR Part 903.7 9 (l)]

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

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

1. Cooperative agreements:

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

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

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

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

**B. Services and programs offered to residents and participants**

**(1) General**

a. Self-Sufficiency Policies

Which, if any of the following discretionary policies will the PHA employ to enhance the economic and social self-sufficiency of assisted families in the following areas? (select all that apply)

- Public housing rent determination policies
- Public housing admissions policies
- Section 8 admissions policies

- Preference in admission to section 8 for certain public housing families
  - Preferences for families working or engaging in training or education programs for non-housing programs operated or coordinated by the PHA
  - Preference/eligibility for public housing homeownership option participation
  - Preference/eligibility for section 8 homeownership option participation
  - Other policies (list below)
- b. Economic and Social self-sufficiency programs

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

<b>Services and Programs</b>				
Program Name & Description (including location, if appropriate)	Estimated Size	Allocation Method (waiting list/random selection/specific criteria/other)	Access (development office / PHA main office / other provider name)	Eligibility (public housing or section 8 participants or both)
<i>FSS</i>	25	<i>Section 8 Participants</i>	<i>Main Office</i>	<i>Section 8 Participant</i>

**(2) Family Self Sufficiency program/s**

a. Participation Description

<b>Family Self Sufficiency (FSS) Participation</b>		
Program	Required Number of Participants (start of FY 2000 Estimate)	Actual Number of Participants (As of: DD/MM/YY)
Public Housing	0	0
Section 8	25	21

b.  Yes  No: If the PHA is not maintaining the minimum program size required by HUD, does the most recent FSS Action Plan address the steps the PHA plans to take to achieve at least the minimum program size? If no, list steps the PHA will take below:

**C. Welfare Benefit Reductions**

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

- Adopting appropriate changes to the PHA's public housing rent determination policies and train staff to carry out those policies
- Informing residents of new policy on admission and reexamination
- Actively notifying residents of new policy at times in addition to admission and reexamination.
- Establishing or pursuing a cooperative agreement with all appropriate TANF agencies regarding the exchange of information and coordination of services
- Establishing a protocol for exchange of information with all appropriate TANF agencies
- Other: (list below)

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

**The Community Service Policy was included with the 2001 PHA Plan submittal. The 2002 HUD appropriations bill prohibits the use of FFY 2002 funds to enforce the community service requirement and therefore, this requirement has been suspended.**

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

[24 CFR Part 903.7 9 (m)]

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

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

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

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

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

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

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

Garden Terrace and Annex

Eldorado Terrace

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

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

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

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

**Garden Terrace & Garden Terrace Annex**

**Eldorado Terrace**

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

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

- Police involvement in development, implementation, and/or ongoing evaluation of drug-elimination plan
- Police provide crime data to housing authority staff for analysis and action

- Police have established a physical presence on housing authority property (e.g., community policing office, officer in residence)
- Police regularly testify in and otherwise support eviction cases
- Police regularly meet with the PHA management and residents
- Agreement between PHA and local law enforcement agency for provision of above-baseline law enforcement services
- Other activities (list below)

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

**Garden Terrace & Garden Terrace Annex**

**Eldorado Terrace**

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

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

**PHDEP funds are no longer available.**

- Yes  No: Is the PHA eligible to participate in the PHDEP in the fiscal year covered by this PHA Plan?
- Yes  No: Has the PHA included the PHDEP Plan for FY 2000 in this PHA Plan?
- Yes  No: This PHDEP Plan is an Attachment. (Attachment Filename: \_\_\_)

**14. RESERVED FOR PET POLICY**

[24 CFR Part 903.7 9 (n)]

**Pet Policy submitted with 2001 agency plan and is included in this document in the attachments section that follows.**

**15. Civil Rights Certifications**

[24 CFR Part 903.7 9 (o)]

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

**16. Fiscal Audit**

[24 CFR Part 903.7 9 (p)]

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

2.  Yes  No: Was the most recent fiscal audit submitted to HUD?
3.  Yes  No: Were there any findings as the result of that audit?
4.  Yes  No: If there were any findings, do any remain unresolved?  
If yes, how many unresolved findings remain?\_\_\_\_\_
5.  Yes  No: Have responses to any unresolved findings been submitted to HUD?  
If not, when are they due (state below)?

## **17. PHA Asset Management**

[24 CFR Part 903.79 (q)]

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

1.  Yes  No: Is the PHA engaging in any activities that will contribute to the long-term asset management of its public housing stock, including how the Agency will plan for long-term operating, capital investment, rehabilitation, modernization, disposition, and other needs that have **not** been addressed elsewhere in this PHA Plan?
  
2. What types of asset management activities will the PHA undertake? (select all that apply)  
 Not applicable  
 Private management  
 Development-based accounting  
 Comprehensive stock assessment  
 Other: (list below)
  
3.  Yes  No: Has the PHA included descriptions of asset management activities in the **optional** Public Housing Asset Management Table?

## **18. Other Information**

[24 CFR Part 903.79 (r)]

### **A. Resident Advisory Board Recommendations**

1.  Yes  No: Did the PHA receive any comments on the PHA Plan from the Resident Advisory Board/s?
  
2. If yes, the comments are: (if comments were received, the PHA **MUST** select one)  
 Attached at Attachment (File name)  
 Provided below:
  
3. In what manner did the PHA address those comments? (select all that apply)  
 Considered comments, but determined that no changes to the PHA Plan were necessary.  
 The PHA changed portions of the PHA Plan in response to comments  
List changes below:  
  
 Other: (list below)

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

1.  Yes  No: Does the PHA meet the exemption criteria provided section 2(b)(2) of the U.S. Housing Act of 1937? (If no, continue to question 2; if yes, skip to sub-component C.)

2.  Yes  No: Was the resident who serves on the PHA Board elected by the residents? (If yes, continue to question 3; if no, skip to sub-component C.)

3. Description of Resident Election Process

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

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

b. Eligible candidates: (select one)

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

c. Eligible voters: (select all that apply)

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

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

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

1. Consolidated Plan jurisdiction: **(City of Fort Pierce)**

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

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

Other: (list below)

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

#### **D. Other Information Required by HUD**

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

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**

The Fort Pierce Housing Authority defines a substantial deviation from the Five-Year Plan as a change to the mission statement or the goals and objectives that would cause a change in the service provided to PH residents or to Section 8 Program participants including a significant change in the Authority's financial situation. We did not experience a substantial deviation from the 5-year plan nor do we anticipate a substantial deviation during this fiscal year.

#### **Significant Amendment or Modification**

The following actions are considered to be Significant Amendments or Modifications:

1. Changes to rent or admissions policies or organization of the waiting list that require board approval; and
2. Any change with regard to homeownership programs.

**An exception to this definition will be made for any of the above that are adopted to reflect changes in HUD regulatory requirements; neither HUD nor the housing authority will consider such changes significant amendments.**

## **Attachments**

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

STATEMENT OF PROGRESS – GOALS AND OBJECTIVES

RESIDENT CUSTOMER SERVICE SURVEY FOLLOW-UP PLAN

RESIDENT ADVISORY BOARD MEMBERS

RESIDENT COMMISSIONER ON THE HA BOARD

**DECONCENTRATION PLAN**

**PET POLICY**

## STATEMENT OF PROGRESS GOALS AND OBJECTIVES

### Goal Number One

**The Fort Pierce Housing Authority (FPHA) will strive to increase the availability of decent, safe, and affordable housing.**

As an ongoing process, the FPHA has applied for and will to strive to expand the supply of assisted housing by applying for additional rental vouchers. In addition, the FPHA has reduced public housing vacancies and turnaround time. FPHA continues to seek opportunities to acquire and/or develop other affordable housing to serve the low income residents in the jurisdiction.

### Goal Number Two

**The FPHA will strive to improve community quality of life and economic viability.**

As an ongoing process, the FPHA will implement measures to promote income mixing in public housing by assuring access for lower income families into higher income developments as ongoing analyses require. In addition, the FPHA has established a local preference for working families to attempt to provide stability in the community. FPHA is also studying the feasibility of converting one elderly development to an assisted living facility.

### Goal Number Three

**The FPHA will promote self-sufficiency and asset development of families and individuals.**

The Executive Director and the staff work with local agencies to provide or attract supportive services to improve employability, and provide services for persons with disabilities. This is an ongoing process. Staff attends meetings in the community to network with service providers.

### Goal Number Four

**The FPHA shall strive to ensure Equal Opportunity in Housing for all Americans.**

The FPHA has undertaken affirmative measures to ensure access to assisted housing and to provide a suitable living environment for all families regardless of race, color, religion, national origin, sex, familial status, and disability. FPHA has reviewed its policies and procedures to ensure there are no discriminatory practices. Staff receives training in Fair Housing on an annual basis and offers assistance to applicants and residents who believe they may be victims of discrimination.

### **Resident Customer Service Survey Follow-Up Plan**

The Fort Pierce Housing Authority (FPHA) is required to develop an action plan for any of the five areas included in the survey that fall below 75 percent. As a result, the FPHA must respond in the following areas: communication and neighborhood appearance. This follow-up plan addresses all required factors of the most recent survey.

1. **Communication**: The FPHA holds resident meetings so that feedback can be addressed in a prompt manor. With these meetings, the Authority hopes to establish a better line of communication and increase resident satisfaction. FPHA will also establish initial and ongoing customer service training program for all staff.
2. **Neighborhood Appearance**: The FPHA staff, in consultation with the Resident Advisory Board and neighborhood representatives, will promote neighborhood improvement plans for each development, thereby establishing the role of residents in achieving maximum neighborhood appeal. The Executive Director and the FPHA staff will develop methods of enforcing neighborhood standards; marketing strategies and a marketing plan for future success. The Executive Director and/or designee, will identify potential state and local funding and/or grants. This will include possible allocation of current capital funds and /or other sources of funding for site improvements to increase curb appeal.

**RESIDENT ADVISORY BOARD MEMBERS**

Dorothy Knight – President  
Betty Mae Williams, Vice President  
Dawn Bryan-Hogan – Secretary  
Kenya Richardson, Treasurer

**RESIDENT COMMISSIONER**

Theresa Carter  
Resolution Number 01-18  
Term: February 5, 2001 – February 2, 2005.  
Appointing Official: Mayor Edward Enns, City of Fort Pierce, Florida

## Deconcentration Policy

### INTRODUCTION

The Quality Housing and Work Responsibility Act of 1998 (QHWRA) requires that the Fort Pierce Housing Authority adopt policies and procedures governing the deconcentration of poverty and income mixing as required by section 10(a)(3)(B) of the 1937 Housing Act. It is the Fort Pierce Housing Authority's (FPHA) policy to provide for deconcentration of poverty and encourage income mixing.

The goal of this policy is to lessen the concentration of poverty and to create mixed-income communities within the FPHA's public housing developments. This will be accomplished through admissions practices designed to bring in higher income residents to lower income developments and lower income residents into higher income developments. Toward this end, FPHA will skip families on the waiting list to reach other families with a lower or higher income. We will accomplish this in a uniform and non-discriminating manner.

The Deconcentration Policy is intended to work in conjunction with the FPHA's annual income targeting requirements. The QHWRA requires that 40 percent of all new admissions to public housing developments during a fiscal year must be residents whose household income, at the time of admission, is equal to or lower than 30 percent of the Area Median Income. This "income targeting" requirement is separate from the Deconcentration Policy, which is comparative in nature. The FPHA will affirmatively market housing to all eligible income groups. Lower income residents will not be steered toward lower income developments and higher income people will not be steered toward higher income developments.

### II. DEFINITIONS

The following definitions are provided in order to clearly define the affected developments and families under this Deconcentration Policy. **A final rule was published at 24 CFR 903 on August 6, 2002, amending the definition of "Established Income Range" and that change is reflected in this revised policy.**

***Covered Developments:*** Public housing developments that are of general occupancy or family public housing developments that are not exempt from the deconcentration requirement.

***Exempt Developments:*** Public housing developments that are operated by housing authorities with fewer than 100 units; public housing developments that house only elderly persons or persons with disabilities, or both; public housing developments operated by housing authorities that operate only one general occupancy development; public housing developments approved for demolition or conversion to tenant-based assistance; and public housing developments that include units operated in accordance with a HUD-approved mixed-finance plan using HOPE VI or public housing funds awarded before the effective date of the Deconcentration Final Rule.

*PHA-Wide Established Income Range:*

The **average annual household income** of all residents of all covered developments is the PHA-Wide Established Income Range (EIR).

*Development Average Household Income:*

The average annual household income of all residents of a specific covered development.

*Developments Outside the PHA-Wide Established Income Range:*

A development where the Average Household Income is between 85 percent and 115 percent of the PHA-Wide EIR is considered to be within the PHA-Wide EIR. If the average household income in a development is less than 85% of the EIR or greater than 115% of the EIR, the development is considered to be outside the PHA-Wide EIR with the following exception:

1. A covered development with an average household income exceeding 115% of the PHA-Wide EIR shall not be considered outside the PHA-Wide EIR if the upper limit that exceeds 115% of EIR is less than 30 per cent of area median income. (24 CFR 5.603(b)).

### III. ANALYSIS

In order to achieve and maintain deconcentration, the FPHA will comply with the following:

1. Determine the PHA-Wide Established Income Range for all covered developments at least annually.
2. Determine the average household income for each covered development.
3. **Determine whether each covered development falls below, within, or above the established income range, except that the upper limit shall never be less than 30 per cent of the median area income limit.**
4. Determine, for those developments having average incomes outside the established income range, if there are factors to explain and/or justify the income profile as being consistent with and furthering two sets of goals: the goals of deconcentration and income mixing as specified by the statute; and the local goals and strategies contained in the FPHA Annual Plan.
5. Where the income profile for a covered development is not explained and/or justified in the FPHA Annual Plan a specific policy to provide for deconcentration and income mixing in applicable covered developments.

Analysis will be completed at least annually, but may be accomplished more frequently to determine the effectiveness of various initiatives employed to achieve deconcentration.

### IV. ACTION PLAN

If a covered development has been identified as falling above or below the established income range, the FPHA will define and communicate specific procedures to be employed with the goal of achieving deconcentration. It is the goal of the FPHA to generally increase the level of income for residents of public housing, create more stratified developments, and obtain agency self sufficiency, therefore; the Deconcentration Policy shall not be employed to be counterproductive to that goal. In addition, the policy will, under no circumstances, be employed through steering or in any way reducing the choice in residence of the individual family.

In order to deconcentrate a development, the FPHA will contact the first family on the waiting list who has the highest priority for this type of unit or development and whose income category would help to meet the deconcentration goal and/or the income-targeting goal. To the greatest extent possible, the FPHA will provide incentives to encourage families with incomes below the established income range to accept units in developments with incomes above the established income range or to encourage families with incomes above the established income range to accept units in developments with incomes below the established income range.

The FPHA may offer one or more incentives to encourage applicant families whose income classification would help to meet the deconcentration goals of a particular development. Various incentives may be used at different times, or under different conditions, but will always be provided in a consistent and nondiscriminatory manner. These may include but are not limited to:

- a) Rent Incentives to select particular developments.
- b) Payment Plans for deposits.
- c) Flexibility in move-in dates.

A family has the sole discretion whether to accept an offer of a unit made under the FPHA's deconcentration policy. FPHA shall not take any adverse action toward any eligible family for choosing not to accept an offer of a unit under the deconcentration policy.

## **PET POLICY**

The Quality Housing and Work Responsibility Act of 1998 allows residents of public housing to own one or more common household pets, subject to reasonable rules established by the Fort Pierce Housing Authority. This chapter explains the Housing Authority's policies on the keeping of pets and any criteria or standards pertaining to the policy. The rules adopted are reasonably related to the legitimate interest of this PHA to provide a decent, safe and sanitary living environment for all tenants, to protecting the physical condition of the property, and the financial interest of the PPHA.

The purpose of this chapter is to establish the policy and procedures for ownership of pets in the units and to ensure that no applicant or resident is discriminated against regarding admission or continued occupancy because of ownership of pets. This policy does not apply to animals that are used to assist persons with disabilities. Assistive animals are allowed with no restrictions other than those imposed to maintain their units and associated facilities in a decent, safe, and sanitary manner to refrain from disturbing their neighbors. It also establishes reasonable rules governing the keeping of common household pets.

### **ANIMALS THAT ASSIST PERSONS WITH DISABILITIES**

Some pet rules may not apply to animals that assist persons with disabilities. To be excluded from the pet policy, the resident/pet owner must certify:

1. That there is a person with a disability in the household;
2. That the animal has been trained to assist with the specified disability

### **MANAGEMENT APPROVAL OF PETS**

All pets must be seen in advance by the FPHA management. The pet owner must submit and enter into a Pet Agreement with the FPHA.

#### **Registration of Pets**

Pets must be registered with the FPHA before they are brought onto the premises. Registration includes certificate signed by a licensed veterinarian or state/local authority that the pet has received all shots required by state or local law, and that the pet has no communicable diseases and is pest-free.

Registration must be renewed and will be coordinated with the annual date and proof of license and inoculation will be submitted at time of recertification to the manager. Dogs and cats must be spayed or neutered. Dogs and cats must have collars with the name and address of the owner. A picture of the pet and owner must be provided at the time of registration.

Approval for the keeping of a pet shall not be extended pending the completion of these requirements.

### **Refusal to Register Pets**

The PHA may not refuse to register a pet based on the determination that the pet owner is financial unable to care for the pet. If the PHA refuses to register a pet, a written notification will be sent to the pet owner stating the reason for denial and shall be served in accordance with Housing and Urban Development (HUD) Notice requirements.

The FPHA will refuse to register a pet if:

The pet is not a common household per as defined in this policy.

Keeping the pet would violate any House Pet Rules.

The pet owner fails to provide complete pet registration information, or fails to update the registration, annually.

The FPHA reasonably determines that the pet owner is unable to keep the pet in compliance with the pet rules and other lease obligations. The pet's temperament and behavior may be considered as a factor in determining the pet owner's ability to comply with provisions of the lease.

The notice of refusal may be combined with a notice of a pet violation.

A resident who cares for another resident's pet must notify the FPHA and agree to abide by all of the pet rules in writing.

### **STANDARDS FOR PETS**

If an approved pet gives birth to a litter, the resident must remove all pets from the premises except two.

Pets must be on a leash whenever walking the pet outside the unit.

No chains can be used to tie pets up to the outside or inside of the unit

Pets must be kept inside the unit when owner is away from the unit.

Pet rates will not be applied to animals that are medically needed per medical doctor.

### **Persons With Disabilities**

To be excluded from the pet policy, the resident/pet owner must certify:

That there is a person with a disability in the household;

That the animal has been trained to assist with the specified disability; and

That the animal actually assists the person with the disability.

### **Types of Pets Allowed**

No types of pets other than the following may be kept by a resident:

Tenants are not permitted to have more than one type of pet

1. Dogs

Maximum number: 2

Maximum adult weight 35 pounds

Must be housebroken

Must be spayed or neutered

Must have all required inoculations

Must be licensed as specified now or in the future by State law and local ordinance.

2. Cats

Maximum number: 2

Must be declawed

Must be spayed or neutered

Must have all required inoculations

Must be trained to use a litter box or other waste receptacle

Must be licensed as specified now or in the future by state law or local ordinance

3. Birds

Maximum number: 2

Must be enclosed in a cage at all times

4. Fish

Maximum aquarium size: 20 gallons

Must be maintained on an approved industry stand

5. Rodents (Rabbit, guinea pig, hamster, or gerbil ONLY)

Maximum number: 2

Must be enclosed in an acceptable industry exile at all times

Must have any or all inoculations as specified now or in the future by state law or local ordinance.

6. Turtles

Maximum number: 2

Must be enclosed in an acceptable industry cage or container at all times

## **PETS TEMPORARILY ON THE PREMISES**

Pets that are not owned by a tenant will not be allowed.

Residents are prohibited from feeding or harboring stray animals.

This rule excludes visiting pet programs sponsored by a humane society or other nonprofit organization and approved by the FPHA.

State or local laws governing pets temporarily in dwelling accommodations shall prevail.

## **DESIGNATION OF PET/NO-PET AREAS**

The following areas are designated no-pet areas:

Police Sub-Station (2304 Ave I)

Boys & Girls Club Building (3100 Ave G)

Parkland Community Building (1211 Ave Q)

Resource Center (1011 23<sup>rd</sup> Street)

wee wuns Day Care (503 South 32<sup>nd</sup> Street, 505 – A&B, South 32<sup>nd</sup> Street)

ALL ADMINISTRATIVE OFFICES OF THE FPHA (i.e. Section 8, Maintenance  
Occupancy Site Offices)

## **ADDITIONAL FEES AND DEPOSITS FOR PETS**

The resident/pet owner shall be required to pay a refundable deposit for the purpose of defraying all reasonable costs directly attributable to the presence of a dog or cat.

An initial payment of \$300 for the first pet and \$150 for any additional pets.

And/or

Monthly payments in an amount no less than \$50 until the specified deposit has been approved.

The PHA reserves the right to change or increase the required deposit by amendment to these rules.

The PHA will refund the Pet Deposit to the tenant, less any damage caused by the pet to the dwelling unit, upon removal of the pet or the owner from the unit.

The PHA will return the Pet Deposit to the former tenant or to the person designated by the former tenant in the event of the former tenant's incapacitation or death.

The PHA will provide the tenant or designee identified above with a written list of all charges against the pet deposit. If the tenant disagrees with the amount charged to the pet deposit, the PHA will provide a meeting to discuss the charges.

All reasonable expenses incurred by the PHA as a result of damages directly attributable to the presence of the pet in the project will be the responsibility of the resident, including:

The cost of repairs to the resident's dwelling unit;

Fumigation of the dwelling unit;

Common areas of the project.

Pet Deposits are not a part of rent payable by the resident.

### **ALTERATIONS TO UNIT**

Resident/pet owners shall not alter their patio, premises, or common areas to create an enclosure for any animal. Installation of pet doors is prohibited.

### **PET WASTE REMOVAL CHARGE**

A separate pet waste removal charge of \$10 per occurrence will be assessed against the resident for violations of the Pet Policy. Pet deposit charges of \$300.00 shall not be part of rents payable by the resident. Pet Waste Removal charges are payable as part of the Authority's monthly tenant billing cycle. All reasonable expenses incurred by the PHA as a

result of damages directly attributable to the presence of the pet, will be the responsibility of the resident, including:

The cost of repairs and replacements to the dwelling unit.  
Fumigation of the dwelling unit.

If the tenant is in occupancy when such costs occur, the tenant shall be billed for such costs as a current charge. If such expenses occur as the result of a move-out inspection, they will be deducted from the pet deposit. The resident will be billed for any amount, which exceeds the pet deposit. The pet deposit will be refunded when the resident moves out or no longer has a pet on the premises, whichever occurs first. The expense of flea de-infestations shall be the responsibility of the resident.

### **PET AREA RESTRICTIONS**

Pets must be maintained within the resident's unit. When outside of the unit (within the building or on the grounds) dogs and cats must be kept on a leash or carried and under the control of the resident or other responsible individual at all times.

Pets are not permitted in common areas including lobbies, community rooms and laundry areas except for those common areas which are entrances to and exits from the building. No area is designated for pets to release their waste; residents/pet owners must clean up after their pets and are responsible for pet waste.

### **NOISE**

Pet owners must agree to control the noise of pets so that such noise does not constitute a nuisance to other residents or interrupt the peaceful enjoyment of their housing unit or premises. This includes, but is not limited to loud or continuous barking, howling, whining, biting, scratching, chirping, or other such activities.

### **CLEANLINESS REQUIREMENTS**

Litter Box Requirements: All animal waste or the litter from the litter box shall be picked up immediately by the pet owner, disposed of in sealed plastic trash bags, and placed in a trash bin.

Litter shall not be disposed of by being flushed through a toilet. Litter boxes shall be stored inside the resident's dwelling unit.

Removal of Waste from Other Locations: The resident/Pet Owner shall be responsible for the removal of waste from the exercise area by placing it in a sealed plastic bag and disposing of it in an outside trash bin or other container provided by the FPHA.

Any unit occupied by a dog, cat or rodent will be fumigated at the time the unit is vacated.

The resident/pet owner shall take adequate precautions to eliminate any pet odors within or around the unit and to maintain the unit in a sanitary condition at all times.

## **PET CARE**

No pet (excluding fish) shall be left unattended in any apartment for a period in excess of 24 hours.

All residents/pet owners shall be responsible for adequate care, nutrition, exercise, and medical attention for his/her pet.

Residents/pet owners must recognize that other residents may have chemical sensitivities or allergies related to pets, or may be easily frightened or disoriented by animals. Pet owners must agree to exercise courtesy with respect to other residents.

## **RESPONSIBLE PARTIES**

The resident/pet owner will be required to designate two responsible parties for the care of the pet if the health or safety of the pet is threatened by the death or incapacity of the pet owner, or by other factors that render the pet owner unable to care for the pet.

## **INSPECTIONS**

The PHA may, after reasonable notice to the tenant during reasonable hours, enter and inspect the premises, in addition to other inspections allowed.

The PHA may enter and inspect the unit only if a written complaint is received alleging that the conduct or condition of the pet in the unit constitutes a nuisance or threat to the health or safety of the other occupants or other persons in the community under applicable state or local law.

Resident/Pet Owners must have pets locked up when FPHA personnel enters the unit.

Pet sign must be posted on the front exterior door stating type of animal in the unit. Signs must also be posted on the tile room where the pet is located inside the unit.

## **PET RULE VIOLATION NOTICE**

If a determination is made on objective facts supported by written statements, that a resident/pet owner has violated the Pet Rule Policy, written notice will be served.

The Notice will contain a brief statement of the factual basis for the determination and the pet rule(s), which were violated. The notice will also state:

That the resident/pet owner has 10 days from the effective date of the service of the notice to correct the violation or make written request for a meeting to discuss the violation.

That the resident/pet owner is entitled to be accompanied by another person of his or her other choice at the meeting; and

That the resident/pet owner's failure to correct the violation, request a meeting or appear at a requested meeting may result in initiation of procedures to terminate the pet owner's tenancy.

If the pet owner requests a meeting within the 10-day period, the meeting will be scheduled no later than five calendar days before the effective date of service of the notice, unless the pet owner agrees to a later date in writing.

### **NOTICE FOR PET REMOVAL**

If the resident/pet owner and the PHA are unable to resolve the violation at the meeting or the pet owner fails to correct the violation in the time period allotted by the PHA, the PHA may serve notice to remove the pet.

The Notice shall contain:

A brief statement of the factual basis for the PHA's determination of the Pet Rule that has been violated;

The requirement that the resident/pet owner must remove the pet within 5 days of the notice; and

A statement that failure to remove the pet may result in the initiation of termination of tenancy procedures.

### **TERMINATION OF TENANCY**

The PHA may initiate procedures for termination of tenancy based on a pet rule violation if the pet owner has failed to remove the pet or committed a pet rule violation within the time period specified; and the pet rule violation is sufficient to begin procedures to terminate tenancy under the terms of the lease.

### **PET REMOVAL**

If the death or incapacity of the pet owner threatens the health or safety of the pet, or if other factors occur that render the owner unable to care for the pet, the situation will be reported to the Responsible Party designated by the resident/pet owner, including pets who are poorly cared for or have been left unattended for over 24 hours.

If the responsible party is unwilling or unable to care for the pet, or if the PHA after reasonable efforts cannot contact the responsible party, the PHA may contact the appropriate state or local agency and request the removal of the pet. If the pet is removed as a result of any aggressive act on the part of the pet, the pet will not be allowed back on the premises.

### **EMERGENCIES**

The PHA will take all necessary steps to ensure that pets which become vicious, display symptoms of severe illness, or demonstrate behavior that constitutes an immediate threat to the health or safety of others, are referred to the appropriate state or local entity authorized to remove such animals. If it is necessary for the HA to place the pet in a shelter facility, the cost will be the responsibility of the tenant/pet owner.



**Capital Fund Program Five – Year Action Plan**

**Part I: Summary**

**PHA Name:** Housing Authority of The City of Fort Pierce  **Original 5 – Year Plan**  
 **Revision No:**

Development Number Name/HA-Wide	Year I	Work Statement for Year 2 FFY Grant: 2002 PHA FY: 2003	Work Statement for Year 3 FFY Grant: 2003 PHA FY: 2004	Work Statement for Year 4 FFY Grant: 2004 PHA FY: 2005	Work Statement for Year 5 FFY Grant: 2005 PHA FY: 2006
	Annual Statement				
FL41- 2 GardenTerrace		848,130.00			
FL41-10 So. 27 St. Circle			415,156.00		
FL41- 3 Lawnwood Terrace			250,654.00		
FL41- 6 Lawnwood Terrace Annex			90,000.00		
FL41- 1 Wildwood Terrace			92,320.00		
FL41- 4 Garden Terrace Annex				848,130.00	
FL41- 1 Wildwood Terrace					848,130.00
Total CFP Funds (Est.)		848,130.00	848,130.00	848,130.00	848,130.00
Total Replacement Housing Funds		52,206.00			
Total Replacement Housing Funds			52,206.00		
Total Replacement Housing Funds				52,206.00	
Total Replacement Housing Funds					52,206.00

Signature of Executive Director: (MM / DD / YY) Signature of Public Housing Director / Office of Native American Programs Administrator: (MM / DD / YY)

**Capital Fund Program Five – Year Action Plan**

**Part I: Supporting Pages – Work Activities**

Activities for Year 1	Activities for Year: <u>  2  </u> . FFY Grant: <u>  2002  </u> . PHA FY : <u>  2003  </u> .	Activities for Year: <u>  3  </u> . FFY Grant: <u>  2003  </u> . PHA FY : <u>  2004  </u> .
	FL41- 2 GARDEN TERRACE ( 40 UNITS )	FL41- 10 So. 27 St. Circle (52 Units)
	Modernization of Development \$ 848,130.	Bldg. Interior \$ 415,156.
	Bldg. Envelope	FL41- 3 Lawnwood Terrace (70 Units)
	Bldg. Interior	Bldg. Interior \$ 250,654.
	Electrical	FL41- 6 Lawnwood Terrace Annex (14 Units)
	Mechanical	Bldg. Interior \$ 90,000.
		FL41- 1 Wildwood Terrace (10 Units)
		Bldg. Interior \$ 92,320.
Activities for Year 1	Activities for Year: <u>  4  </u> . FFY Grant: <u>  2004  </u> . PHA FY : <u>  2005  </u> .	Activities for Year: <u>  5  </u> . FFY Grant: <u>  2005  </u> . PHA FY : <u>  2006  </u> .
	FL41- 4 Garden Terrace Annex ( 60 Units )	FL41- 1 Wildwood Terrace ( 60 Units )
	Modernization of Development \$ 848,130.	Modernization of Development \$ 848,130.
	Bldg. Envelope	Bldg. Envelope
	Bldg. Interior	Bldg. Interior
	Electrical	Electrical
	Mechanical	Mechanical
Signature of Executive Director:	(MM / DD / YY)	Signature of Public Housing Director / Office of Native American Programs Administrator: (MM / DD / YY)

**Annual Statement / Performance and Evaluation Report**

**Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP / CFPRHF) Part 1: Summary**

<b>PHA Name:</b> Housing Authority of The City of Fort Pierce	<b>Grant Type and Number</b> Capital Fund Program Grant No: <b>FL14PO4150102</b> Replacement Housing Factor Grant No:	<b>FEDERAL FY of Grant:</b> <b>2002</b>
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<input checked="" type="checkbox"/> <b>Original Annual Statement</b>	<input type="checkbox"/> <b>Reserve for Disasters / Emergencies</b>	<input type="checkbox"/> <b>Revised Annual Statement (revision no: )</b>
<input type="checkbox"/> <b>Performance and Evaluation Report for Period Ending:</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	<b>166,373.00</b>			
3	1408 Management Improvements Soft Costs	<b>178,704.00</b>			
	Management Improvements Hard Costs				
4	1410 Administration	<b>166,373.00</b>			
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	<b>95,000.00</b>			
8	1440 Site Acquisition				
9	1450 Site Improvements	<b>120,000.00</b>			
10	1460 Dwelling Structures	<b>692,282.00</b>			
11	1465.1 Dwelling Equipment-Nonexpendable	<b>60,000.00</b>			
12	1470 Non dwelling Structures	<b>35,000.00</b>			
13	1475 Non dwelling Equipment	<b>25,000.</b>			
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs	<b>60,000.00</b>			
18	1499 Development Activities				
19	1502 Contingencies	<b>65,000.00</b>			
XX	Amount of Annual Grant: (sum of lines...)	<b>1,663,732.00</b>			
	Amount of line XX Related to LBP Activities				
	Amount of line XX Related to Section 504 compliance				
	Amount of line XX Related to Security-Soft Costs				
	Amount of line XX Related to Security-Hard Costs				
	Amount of line XX Related to Energy Conservation Measures	<b>235,000.00</b>			
	Collateralization Expenses or Debt Service				

Signature of Executive Director: _____ (MM / DD / YY):	Signature of Public Housing Director / Office of Native American Programs Administrator: _____ (MM / DD / YY)
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**Annual Statement / Performance and Evaluation Report**  
**Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP / CFPRHF)**  
**Part II: Supporting Pages**

<b>PHA Name:</b> Housing Authority of The City of Fort Pierce	<b>Grant Type and Name:</b> Capital Fund Program Grant No: FL14PO4150102 Replacement Housing Factor Grant No:	<b>Federal FY Grant:</b> <b>2002</b>
------------------------------------------------------------------	---------------------------------------------------------------------------------------------------------------------	-----------------------------------------

Development Number Name/HA-Wide Activities	General Description of Major Work Activities	Dev. Acct. No.	Quantity	Total Estimated Cost		Total Actual Cost		Status Of Work
				Original	Revised	Obligated	Revised	
HA Wide	Operations	1406	All	166,373.00				
	Management Improvements	1408						
	1. General Management Improvements			48,000.00				
	2. Skills training for Staff & Commissioners			23,000.00				
	3. Technical assist for Resident Council			30,000.00				
	4. Resident Education & Training			20,000.00				
	5. Resident Economic Development & Resident owned business			30,000.00				
	6. HTVN Programming			6,000.00				
	7. Rental of space for Resident Council & Purchase of Equipment			8,000.00				
	8. Economic Development, <u>Revolving Loan Fund</u>			<u>13,704.00</u>				
	<b>Sub Total</b>			<b>178,704.00</b>				
	Administration	1410		166,373.00				
	Fees & Costs	1430		95,000.00				
	Site Improvements	1450		120,000.00				





**Annual Statement / Performance and Evaluation Report**

**Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP / CFPRHF) Part 1: Summary**

<b>PHA Name:</b> Housing Authority of The City of Fort Pierce	<b>Grant Type and Number</b> Capital Fund Program Grant No: Replacement Housing Factor Grant No: FL 14R04150102	<b>FEDERAL FY of Grant:</b> <b>2002</b>
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<input type="checkbox"/> <b>Original Annual Statement</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>
<input type="checkbox"/> <b>Performance and Evaluation Report for Period Ending:</b>			

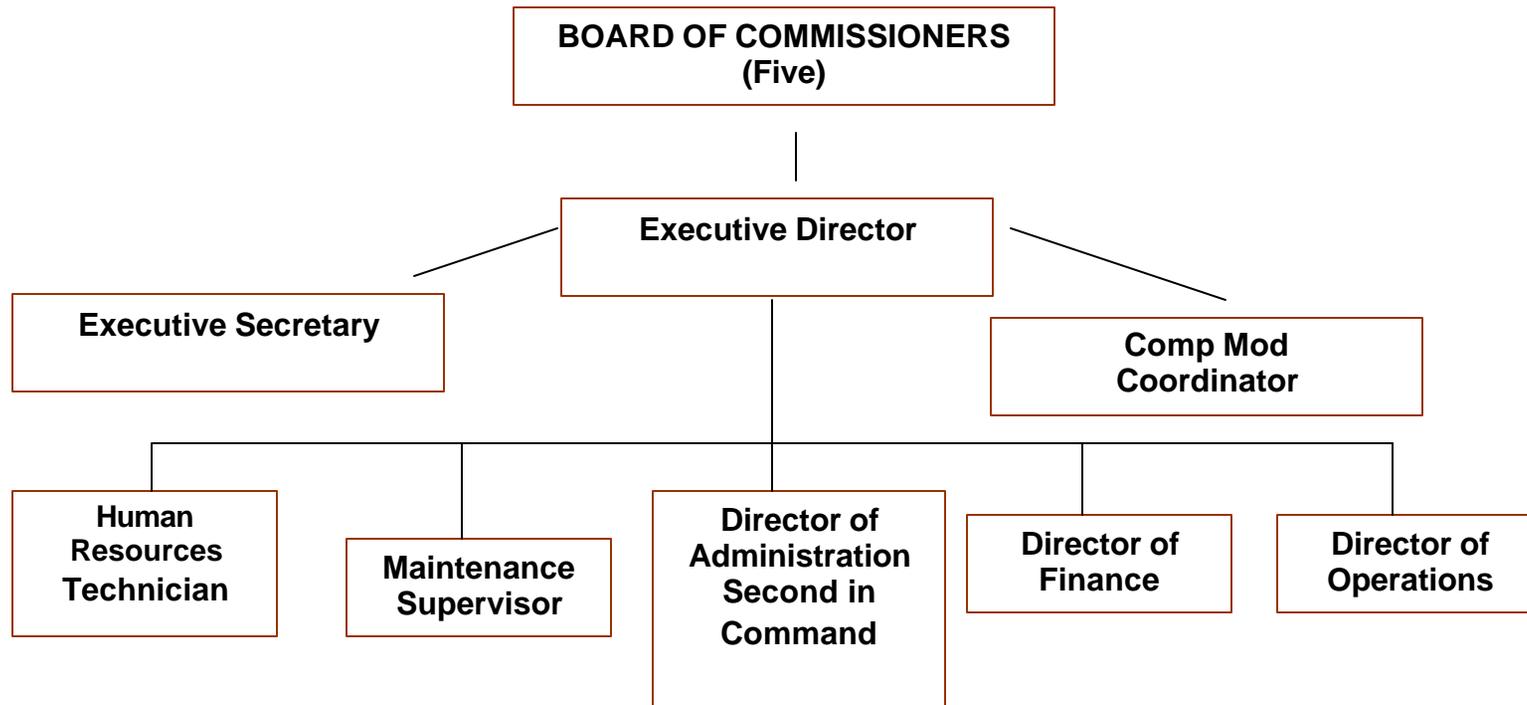
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total non – CFP Funds				
2	1406 Operations				
3	1408 Management Improvements Soft Costs				
	Management Improvements Hard Costs				
4	1410 Administration				
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs				
8	1440 Site Acquisition				
9	1450 Site Improvements				
10	1460 Dwelling Structures				
11	1465.1 Dwelling Equipment-Nonexpendable				
12	1470 Non dwelling Structures				
13	1475 Non dwelling Equipment				
14	1485 Demolition				
15	1490 Replacement Reserve	<b>52,206.00</b>			
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1499 Development Activities				
19	1502 Contingencies				
XX	Amount of Annual Grant: (sum of lines...)	<b>52,206.00</b>			
	Amount of line XX Related to LBP Activities				
	Amount of line XX Related to Section 504 compliance				
	Amount of line XX Related to Security-Soft Costs				
	Amount of line XX Related to Security-Hard Costs				
	Amount of line XX Related to Energy Conservation Measures				
	Collateralization Expenses or Debt Service				

Signature of Executive Director: _____ (MM / DD / YY):	Signature of Public Housing Director / Office of Native American Programs Administrator: _____ (MM / DD / YY)
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# HOUSING AUTHORITY OF THE CITY OF FORT PIERCE





**DEPARTMENT OF OPERATIONS**

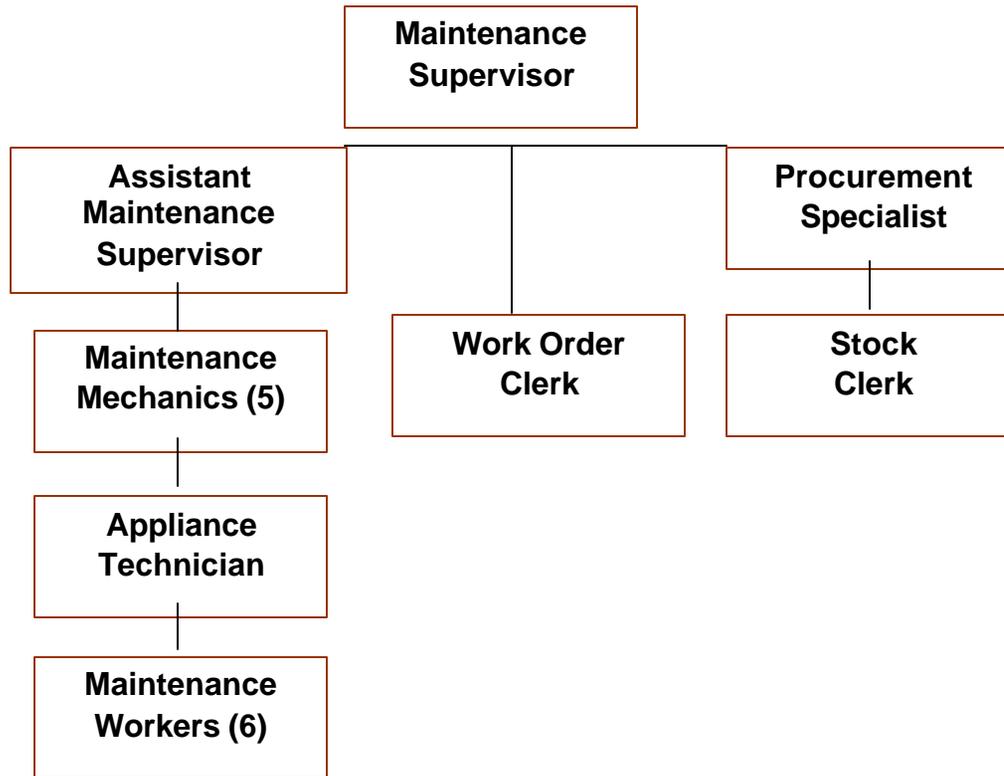
**Director of  
Operations**

**Tenant Integrity  
Investigator**

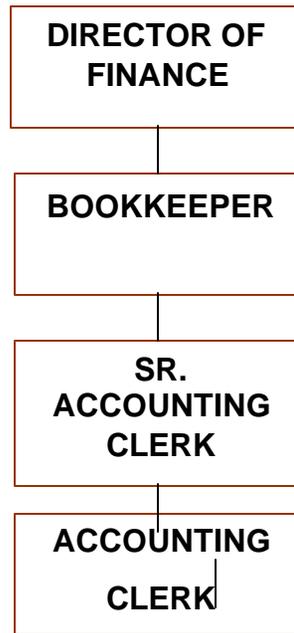
**Resident  
Outreach  
Officer**



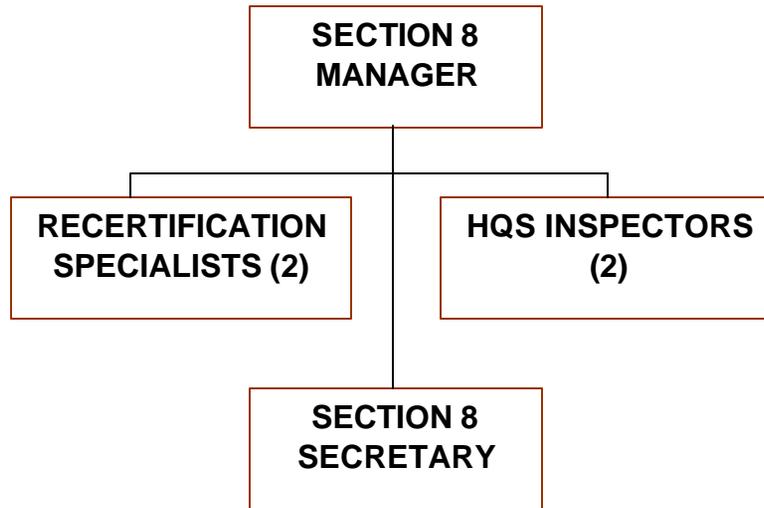
**MAINTENANCE DEPARTMENT  
ORGANIZATION CHART**



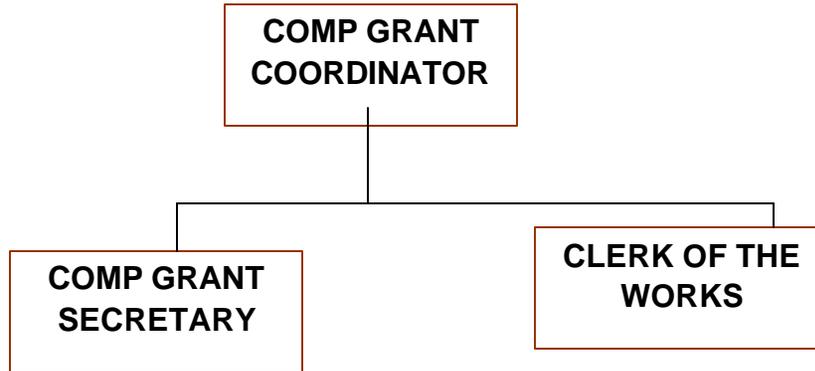
## FINANCE AND ACCOUNTING DEPARTMENT



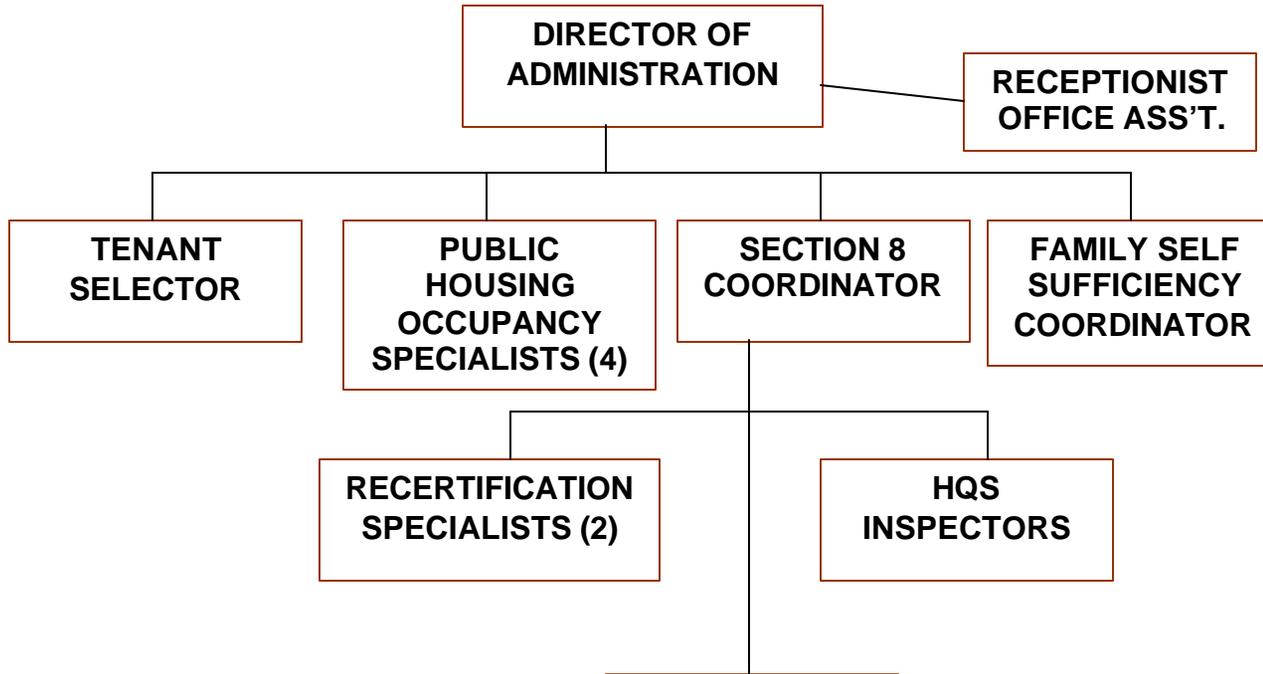
## SECTION 8 DEPARTMENT



**COMPREHENSIVE GRANT PROGRAM DEPARTMENT**



**PUBLIC HOUSING DEPARTMENT**



**Annual Statement / Performance and Evaluation Report**

**Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP / CFPRHF) Part 1: Summary**

<b>PHA Name:</b> Housing Authority of The City of Fort Pierce	<b>Grant Type and Number</b> Capital Fund Program Grant No: <b>FL14P0415100</b> Replacement Housing Factor Grant No:	<b>FEDERAL FY of Grant:</b> <b>2000</b>
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Original Annual Statement     
  Reserve for Disasters / Emergencies     
  Revised Annual Statement ( revision no:      )  
 Performance and Evaluation Report for Period Ending:    12/31/01     
  Final Performance and Evaluation Report

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total non – CFP Funds				
2	1406 Operations	163,228.00		163,228.00	163,228.00
3	1408 Management Improvements Soft Costs	178,704.00			
	Management Improvements Hard Costs				
4	1410 Administration	163,228.00			
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	75,000.00			
8	1440 Site Acquisition				
9	1450 Site Improvements	64,700.00			
10	1460 Dwelling Structures	822,974.00			
11	1465.1 Dwelling Equipment-Nonexpendable	15,000.00			
12	1470 Non dwelling Structures	28,400.00			
13	1475 Non dwelling Equipment	11,052.00			
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs	45,000.00			
18	1499 Development Activities				
19	1502 Contingencies	65,000.00			
XX	Amount of Annual Grant: (sum of lines...)	1,632,286.00		163,228.00	163,228.00
	Amount of line XX Related to LBP Activities				
	Amount of line XX Related to Section 504 compliance				
	Amount of line XX Related to Security-Soft Costs				
	Amount of line XX Related to Security-Hard Costs	147,500.00			
	Amount of line XX Related to Energy Conservation Measures	98,300.00			
	Collateralization Expenses or Debt Service				

Signature of Executive Director: _____ (MM / DD / YY):	Signature of Public Housing Director / Office of Native American Programs Administrator: _____ (MM / DD / YY)
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**Annual Statement / Performance and Evaluation Report**

**Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP / CFPRHF) Part 1: Summary**

<b>PHA Name:</b> Housing Authority of The City of Fort Pierce	<b>Grant Type and Number</b> Capital Fund Program Grant No: Replacement Housing Factor Grant No: FL14R04150100	<b>FEDERAL FY of Grant:</b> 2000
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Original Annual Statement     
  Reserve for Disasters / Emergencies     
  Revised Annual Statement ( revision no:      )  
 Performance and Evaluation Report for Period Ending:     
  Final Performance and Evaluation Report

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 Soft Costs				
	Management Improvements Hard Costs				
4	1410 Administration				
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs				
8	1440 Site Acquisition				
9	1450 Site Improvements				
10	1460 Dwelling Structures				
11	1465.1 Dwelling Equipment-Nonexpendable				
12	1470 Non dwelling Structures				
13	1475 Non dwelling Equipment				
14	1485 Demolition				
15	1490 Replacement Reserve		45,878.00		
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1499 Development Activities				
19	1502 Contingencies				
XX	Amount of Annual Grant: (sum of lines...)		45,878.00	0.00	0.00
	Amount of line XX Related to LBP Activities				
	Amount of line XX Related to Section 504 compliance				
	Amount of line XX Related to Security-Soft Costs				
	Amount of line XX Related to Security-Hard Costs				
	Amount of line XX Related to Energy Conservation Measures				
	Collateralization Expenses or Debt Service				

Signature of Executive Director: _____ (MM / DD / YY):	Signature of Public Housing Director / Office of Native American Programs Administrator: _____ (MM / DD / YY)
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**Annual Statement / Performance and Evaluation Report**

**Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP / CFPRHF) Part 1: Summary**

<b>PHA Name:</b> Housing Authority of The City of Fort Pierce	<b>Grant Type and Number</b> Capital Fund Program Grant No: FL29PO41708 Replacement Housing Factor Grant No:	<b>FEDERAL FY of Grant:</b> 1999
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Original Annual Statement     
  Reserve for Disasters / Emergencies     
  Revised Annual Statement ( revision no:      )  
 Performance and Evaluation Report for Period Ending: 12.31.01     
  Final Performance and Evaluation Report

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 Soft Costs	<b>178,704.00</b>		<b>178,704.00</b>	<b>2,482.99</b>
	Management Improvements Hard Costs				
4	1410 Administration	<b>194,605.00</b>		<b>194,605.00</b>	<b>44,259.97</b>
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	<b>136,224.00</b>		<b>136,224.00</b>	<b>9,965.39</b>
8	1440 Site Acquisition				
9	1450 Site Improvements	<b>64,700.00</b>		<b>64,700.00</b>	<b>.00</b>
10	1460 Dwelling Structures	<b>1,171,142.00</b>		<b>1,171,142.00</b>	<b>1,836.40</b>
11	1465.1 Dwelling Equipment-Nonexpendable	<b>25,000.00</b>		<b>25,000.00</b>	<b>.00</b>
12	1470 Non dwelling Structures	<b>15,000.00</b>		<b>15,000.00</b>	<b>.00</b>
13	1475 Non dwelling Equipment	<b>14,452.00</b>		<b>14,452.00</b>	<b>.00</b>
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs	<b>45,000.00</b>		<b>45,000.00</b>	<b>.00</b>
18	1499 Development Activities				
19	1502 Contingencies	<b>101,232.00</b>		<b>101,232.00</b>	<b>.00</b>
XX	Amount of Annual Grant: (sum of lines...)	<b>1,946,059.00</b>		<b>1,946,059.00</b>	<b>58,544.75</b>
	Amount of line XX Related to LBP Activities				
	Amount of line XX Related to Section 504 compliance				
	Amount of line XX Related to Security-Soft Costs				
	Amount of line XX Related to Security-Hard Costs	<b>118,400.00</b>		<b>118,400.00</b>	<b>.00</b>
	Amount of line XX Related to Energy Conservation Measures	<b>289,400.00</b>		<b>289,400.00</b>	<b>.00</b>
	Collateralization Expenses or Debt Service				

Signature of Executive Director: _____ (MM / DD / YY):	Signature of Public Housing Director / Office of Native American Programs Administrator: _____ (MM / DD / YY)
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**Annual Statement / Performance and Evaluation Report**  
**Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP / CFPRHF)**  
**Part II: Supporting Pages**

<b>PHA Name:</b> Housing Authority of The City of Fort Pierce		<b>Grant Type and Name:</b> Capital Fund Program Grant No: <b>FL14P041708</b> Replacement Housing Factor Grant No:				<b>Federal FY Grant: 1999</b>		
Development Number Name/HA-Wide Activities	General Description of Major Work Activities	Dev. Acct. No.	Quantity	Total Estimated Cost		Total Actual Cost		Status Of Work
				Original	Revised	Obligated	Expanded	
HA Wide	Operations	1406						
	Management Improvements	1408						
	1 General management Improvements			48,000.00				
	2 Skills training for Staff & Commissioners			23,000.00		2,482.99	2,482.99	
	3 Technical assist for Resident Council			30,000.00				
	4 Resident Education & Training			20,000.00				
	5 Resident Economic Development & Resident owned business			30,000.00				
	6 HTVN Programming		ALL	6,000.00				
	7 Rental of space for Resident Council & Purchase of Equipment			8,000.00				
	8 Economic Development Revolving Loan Fund			13,704.00				
	<b>Sub Total</b>			<b>178,704.00</b>				
	Administration	1410		194,605.00		44,259.97	44,259.97	
	Fees & Costs	1430		136,224.00		9,965.39	9,965.39	
	Site Improvements	1450		64,700.00		.00	.00	
	Dwelling Equip – non Exp	1465.1		25,000.00				
	Non Dwelling Structures	1470		15,000.00				





**Annual Statement / Performance and Evaluation Report**

**Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP / CFPRHF) Part 1: Summary**

<b>PHA Name:</b> Housing Authority of The City of Fort Pierce	<b>Grant Type and Number</b> Capital Fund Program Grant No: FL14P04150101 Replacement Housing Factor Grant No:	<b>FEDERAL FY of Grant:</b> 2001
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<input checked="" type="checkbox"/> <b>Original Annual Statement</b>	<input type="checkbox"/> <b>Reserve for Disasters / Emergencies</b>	<input type="checkbox"/> <b>Revised Annual Statement (revision no:     )</b>	
<input type="checkbox"/> <b>Performance and Evaluation Report for Period Ending:</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	<b>166,373.00</b>			
3	1408 Management Improvements Soft Costs	<b>178,704.00</b>			
	Management Improvements Hard Costs				
4	1410 Administration	<b>166,373.00</b>			
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	<b>75,000.00</b>			
8	1440 Site Acquisition				
9	1450 Site Improvements	<b>64,700.00</b>			
10	1460 Dwelling Structures	<b>848,130.00</b>			
11	1465.1 Dwelling Equipment-Nonexpendable	<b>25,000.00</b>			
12	1470 Non dwelling Structures	<b>15,000.00</b>			
13	1475 Non dwelling Equipment	<b>14,452.00</b>			
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs	<b>45000</b>			
18	1499 Development Activities				
19	1502 Contingencies	<b>65,000.00</b>			
XX	Amount of Annual Grant: (sum of lines...)	<b>1,663,732.00</b>			
	Amount of line XX Related to LBP Activities				
	Amount of line XX Related to Section 504 compliance				
	Amount of line XX Related to Security-Soft Costs				
	Amount of line XX Related to Security-Hard Costs				
	Amount of line XX Related to Energy Conservation Measures	<b>560,000.00</b>			
	Collateralization Expenses or Debt Service				

Signature of Executive Director: _____ (MM / DD / YY):	Signature of Public Housing Director/Office of Native American Program Administrator: _____ (MM / DD / YY)
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**Annual Statement / Performance and Evaluation Report**  
**Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP / CFPRHF)**  
**Part II: Supporting Pages**

<b>PHA Name:</b> Housing Authority of The City of Fort Pierce		<b>Grant Type and Name:</b> Capital Fund Program Grant No: FL14P04150101 Replacement Housing Factor Grant No:				<b>Federal FY Grant:</b> 2001		
Development Number Name/HA-Wide Activities	General Description of Major Work Activities	Dev. Acct. No.	Quantity	Total Estimated Cost		Total Actual Cost		Status Of Work
				Original	Revised	Obligated	Revised	
HA Wide	Operations	1406	All	166,373.00				
	Management Improvements	1408						
	1. General Management Improvements			48,000.00				
	2. Skills training for Staff & Commissioners.			23,000.00				
	3. Technical assist for Resident Council.			30,000.00				
	4. Resident Education & Training.			20,000.00				
	5. Resident Economic Development & Resident owned business.			30,000.00				
	6. HTVN Programming.			6,000.00				
	7. Rental of space for Resident Council & Purchase of Equipment.			8,000.00				
	8. Economic Development, Revolving Loan Fund			13,704.00				
	<b>Sub Total</b>			<b>178,704.00</b>				
	Administration	1410		166,373.00				
	Fees & Costs	1430		75,000.00				
	Site Improvements	1450		64,700.00				

