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

PHA Plans

5 Year Plan for Fiscal Years 2001 - 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

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

PHA Plan
Agency Identification

PHA Name: Manatee County Housing Authority

PHA Number: FL105
PHA Fiscal Year Beginning: (10/2002)

Public Access to Information

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

X 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)

X 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)

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

5-Year Plan
PHA Fiscal Years 2001 - 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.

X The PHA's mission is: (state mission here)

The aim of the Manatee County Housing Authority is to ensure safe, decent, and affordable housing: create opportunities for residents self-sufficiency and economic independence; and assure fiscal integrity in all programs administered

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.

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

X PHA Goal: Improve the quality of assisted housing

Objectives:

X Improve public housing management: (PHAS score) 91%

X Improve voucher management: (SEMAP score) ***Not Received***

X Increase customer satisfaction:

X Concentrate on efforts to improve specific management functions: (list; e.g., public housing finance; voucher unit inspections)

X Renovate or modernize public housing units:

X Demolish or dispose of obsolete public housing:

Provide replacement public housing:

Provide replacement vouchers:

Other: (list below)

X PHA Goal: Increase assisted housing choices

Objectives:

X Provide voucher mobility counseling:

X Conduct outreach efforts to potential voucher landlords

Increase voucher payment standards

Implement voucher homeownership program:

X Implement public housing or other homeownership programs:

Implement public housing site-based waiting lists:

X Convert public housing to vouchers:

Other: (list below)

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

X PHA Goal: Provide an improved living environment

Objectives:

X Implement measures to deconcentrate poverty by bringing higher income public housing households into lower income developments:

X Implement measures to promote income mixing in public housing by assuring access for lower income families into higher income developments:

X Implement public housing security improvements:

Designate developments or buildings for particular resident groups (elderly, persons with disabilities)

Other: (list below)

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

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

Objectives:

- X Increase the number and percentage of employed persons in assisted families:
- X Provide or attract supportive services to improve assistance recipients' employability:
- X 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

X PHA Goal: Ensure equal opportunity and affirmatively further fair housing

Objectives:

- X Undertake affirmative measures to ensure access to assisted housing regardless of race, color, religion national origin, sex, familial status, and disability:
- X 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:
- X 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:

X **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.

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:

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

Optional Attachments:

PHA Management Organizational Chart
X FY 2001 Capital Fund Program 5 Year Action Plan
Public Housing Drug Elimination Program (PHDEP) Plan
Comments of Resident Advisory Board or Boards (must be attached if not included in PHA Plan text)
Other (List below, providing each attachment name)

Supporting Documents Available for Review

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

List of Supporting Documents Available for Review		
Applicable & On Display	**Supporting Document**	**Applicable Plan Component**
•	PHA Plan Certifications of Compliance with the PHA Plans and Related Regulations	5 Year and Annual Plans
•	State/Local Government Certification of Consistency with the Consolidated Plan	5 Year and Annual Plans
•	Fair Housing Documentation: Records reflecting that the PHA has examined its programs or proposed programs, identified any impediments to fair	5 Year and Annual Plans

B. Significant Amendment or Modification to the Annual Plan:

THERE WERE NO SIGNIFICANT AMENDMENT OR MODIFICAION TO THE ANNUAL PLAN.

	the PHA's involvement.	
•	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
	Most recent board-approved operating budget for the public housing program	Annual Plan: Financial Resources;
•	Public Housing Admissions and (Continued) Occupancy Policy (A&O), which includes the Tenant Selection and Assignment Plan [TSAP]	Annual Plan: Eligibility, Selection, and Admissions Policies
•	Section 8 Administrative Plan	Annual Plan: Eligibility, Selection, and Admissions Policies
•	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 Quality Housing and Work Responsibility Act Initial Guidance; Notice* and any further HUD guidance) and 2. Documentation of the required deconcentration and income mixing analysis	Annual Plan: Eligibility, Selection, and Admissions Policies
•	Public housing rent determination policies, including the methodology for setting public housing flat rents X check here if included in the public housing A & O Policy	Annual Plan: Rent Determination
•	Schedule of flat rents offered at each public housing development X check here if included in the public housing A & O Policy	Annual Plan: Rent Determination
•	Section 8 rent determination (payment standard) policies X check here if included in Section 8 Administrative Plan	Annual Plan: Rent Determination
•	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
•	Public housing grievance procedures X check here if included in the public housing A & O Policy	Annual Plan: Grievance Procedures
•	Section 8 informal review and hearing procedures X check here if included in Section 8	Annual Plan: Grievance Procedures

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	Administrative Plan	
	The HUD-approved Capital Fund/Comprehensive Grant Program Annual Statement (HUD 52837) for the active grant year	Annual Plan: Capital Needs
•	Most recent CIAP Budget/Progress Report (HUD 52825) for any active CIAP grant	Annual Plan: Capital Needs
•	Most recent, approved 5 Year Action Plan for the Capital Fund/Comprehensive Grant Program, if not included as an attachment (provided at PHA option)	Annual Plan: Capital Needs
	Approved HOPE VI applications or, if more recent, approved or submitted HOPE VI Revitalization Plans or any other approved proposal for development of public housing	Annual Plan: Capital Needs
	Approved or submitted applications for demolition and/or disposition of public housing	Annual Plan: Demolition and Disposition
	Approved or submitted applications for designation of public housing (Designated Housing Plans)	Annual Plan: Designation of Public Housing
	Approved or submitted assessments of reasonable revitalization of public housing and approved or submitted conversion plans prepared pursuant to section 202 of the 1996 HUD Appropriations Act	Annual Plan: Conversion of Public Housing
	Approved or submitted public housing homeownership programs/plans	Annual Plan: Homeownership
	Policies governing any Section 8 Homeownership program check here if included in the Section 8 Administrative Plan	Annual Plan: Homeownership
	Any cooperative agreement between the PHA and the TANF agency	Annual Plan: Community Service & Self-Sufficiency
	FSS Action Plan/s for public housing and/or Section 8	Annual Plan: Community Service & Self-Sufficiency
	Most recent self-sufficiency (ED/SS, TOP or ROSS or other resident services grant) grant program reports	Annual Plan: Community Service & Self-Sufficiency
	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
•	The most recent fiscal year audit of the PHA conducted under section 5(h)(2) of the U.S. Housing Act of 1937 (42 U. S.C. 1437c(h)), the results of that audit and the PHA's response to any findings	Annual Plan: Annual Audit
	Troubled PHAs: MOA/Recovery Plan	Troubled PHAs
•	Other supporting documents (optional) (list individually; use as many lines as necessary)	(specify as needed)
	a. Residents on PHA Governing Board b. Membership of the Resident Advisory Board c. Deconcentration Plan Statement d. Involuntary Conversion Statement e. Mission & Goal Statement	Annual Plan

1. Statement of Housing Needs

[24 CFR Part 903.7 9 (a)]

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

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

Housing Needs of Families in the Jurisdiction by Family Type							
Family Type	Overall	Afford-	Supply	Quality	Access-	Size	Loca-ti
Income <= 30% of AMI	458	3	4	3	3	3	3
Income >30% but <=50% of AMI	175	3	4	3	3	3	3
Income >50% but <80% of AMI	31	3	4	3	3	3	3
Elderly	26	3	4	3	3	3	3
Families with Disabilities	156	3	4	3	3	3	3
Race/Ethnicity W	250	3	4	3	3	3	3
Race/Ethnicity H	3	3	4	3	3	3	3
Race/Ethnicity B	411	3	4	3	3	3	3
Race/Ethnicity							

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

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

PHA local survey of jurisdiction / State of Florida & County of Manatee Consolidated Plans FY-2000. Latest available information

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

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

Housing Needs of Families on the Waiting List			
Waiting list type: (select one) Section 8 tenant-based assistance X Public Housing Combined Section 8 and Public Housing Public Housing Site-Based or sub-jurisdictional waiting list (optional) If used, identify which development/subjurisdiction:			
	# of families	% of total families	Annual Turnover
Waiting list total	407		57

Extremely low income <=30% AMI	289	71%	
Very low income (>30% but <=50% AMI)	98	24%	
Low income (>50% but <80% AMI)	20	05%	
Families with children	299	73%	
Elderly families	5	01%	
Families with Disabilities	89	22%	
Race/ethnicity B	210	52%	
Race/ethnicity H	1	0%	
Race/ethnicity W	196	48%	
Race/ethnicity			
Characteristics by Bedroom Size (Public Housing Only)			
1BR	108	27%	17
2 BR	141	35%	23
3 BR	158	38%	17
4 BR	0	0	0
5 BR	0	0	0
5+ BR	0	0	0

Is the waiting list closed (select one)? X No Yes

If yes:

How long has it been closed (# of months)? □□□□□

Does the PHA expect to reopen the list in the PHA Plan year? No Yes

Does the PHA permit specific categories of families onto the waiting list, even if generally closed? No Yes

Housing Needs of Families on the Waiting List

Waiting list type: (select one)
X Section 8 tenant-based assistance
Public Housing
Combined Section 8 and Public Housing
Public Housing Site-Based or sub-jurisdictional waiting list (optional)
If used, identify which development/subjurisdiction:

	# of families	% of total families	Annual Turnover
Waiting list total	257		33
Extremely low	169	66%	

income <=30% AMI			
Very low income (>30% but <=50% AMI)	77	30%	
Low income (>50% but <80% AMI)	11	04%	
Families with children	169	66%	
Elderly families	21	08%	
Families with Disabilities	67	26%	
Race/ethnicity B	201	78%	
Race/ethnicity H	2	01%	
Race/ethnicity W	54	21%	
Race/ethnicity			
Characteristics by Bedroom Size (Public Housing Only)			
1BR			
2 BR			
3 BR			
4 BR			
5 BR			
5+ BR			

Is the waiting list closed (select one)? X No Yes

If yes:

How long has it been closed (# of months)? □□□□□

Does the PHA expect to reopen the list in the PHA Plan year? No Yes

Does the PHA permit specific categories of families onto the waiting list, even if generally closed? No Yes

C. Strategy for Addressing Needs

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

The PHA will utilize the current housing stock to address the needs and will work with local housing agencies to provide housing to prospective residents.

(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

X Employ effective maintenance and management policies to minimize the number of public housing units off-line

X Reduce turnover time for vacated public housing units

X Reduce time to renovate public housing units

Seek replacement of public housing units lost to the inventory through mixed finance development

X Seek replacement of public housing units lost to the inventory through section 8 replacement housing resources

X 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

X Maintain or increase section 8 lease-up rates by marketing the program to owners, particularly those outside of areas of minority and poverty concentration

X Maintain or increase section 8 lease-up rates by effectively screening Section 8 applicants to increase owner acceptance of program

X 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

X Apply for additional section 8 units should they become available

Leverage affordable housing resources in the community through the creation of mixed - finance housing

X 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

X Exceed HUD federal targeting requirements for families at or below 30% of AMI in public housing
x 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
X 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
X 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
X Apply for special-purpose vouchers targeted to the elderly, should they become available
Other: (list below)

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
X Carry out the modifications needed in public housing based on the section 504 Needs Assessment for Public Housing
X Apply for special-purpose vouchers targeted to families with disabilities, should they become available
X 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

X 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

X Counsel section 8 tenants as to location of units outside of areas of poverty or minority concentration and assist them to locate those units
X 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:

X Funding constraints
X 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
X Influence of the housing market on PHA programs
Community priorities regarding housing assistance
Results of consultation with local or state government
Results of consultation with residents and the Resident Advisory Board
Results of consultation with advocacy groups
Other: (list below)

2. Statement of Financial Resources

[24 CFR Part 903.7 9 (b)]
List the financial resources that are anticipated to be available to the PHA for the support of Federal public housing and tenant-based Section 8 assistance programs administered by the PHA during the Plan year. Note: the table assumes that Federal public housing or tenant based Section 8 assistance grant funds are expended on eligible purposes; therefore, uses of these funds need not be stated. For other funds, indicate the use for those funds as one of the following categories: public housing operations, public housing capital improvements, public housing safety/security, public housing supportive services, Section 8 tenant-based assistance, Section 8 supportive services or other.

Financial Resources: Planned Sources and Uses		
Sources	**Planned $**	**Planned Uses**
1. **Federal Grants (FY 2000 grants)**		
a) Public Housing Operating Fund	117,501.	

b) Public Housing Capital Fund	156,407.	
c) HOPE VI Revitalization		
d) HOPE VI Demolition		
e) Annual Contributions for Section 8 Tenant-Based Assistance	4,121,011 .	
f) Public Housing Drug Elimination Program (including any Technical Assistance funds)	.	
g) Resident Opportunity and Self-Sufficiency Grants		
h) Community Development Block Grant		
i) HOME		
Other Federal Grants (list below)		
2. Prior Year Federal Grants (unobligated funds only) (list below)		
3. Public Housing Dwelling Rental Income	112,867.	PHA Operations
4. Other income (list below)		
5. Non-federal sources (list below)		
Total resources	$ 4,507,786.	

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)
.

X When families are within a certain time of being offered a unit: (***60-Days***)

Other: (describe)

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

X Criminal or Drug-related activity

X Rental history

X Housekeeping

Other (describe)

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

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

e. Yes X 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)

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

b. Where may interested persons apply for admission to public housing?
X 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)
X One
Two
Three or More

b. X 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:

X 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)

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

c. Preferences

1. Yes X 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.

□□□□□ Date and Time

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

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

X 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)

X The PHA-resident lease

X The PHA's Admissions and (Continued) Occupancy policy

X 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

X Any time family composition changes

At family request for revision

Other (list)

(6) Deconcentration and Income Mixing

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

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

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

Adoption of site-based waiting lists
If selected, list targeted developments below:

Employing waiting list „skipping“ to achieve deconcentration of poverty or income mixing goals at targeted developments
If selected, list targeted developments below:

Employing new admission preferences at targeted developments
If selected, list targeted developments below:

Other (list policies and developments targeted below)

d. Yes X No: Did the PHA adopt any changes to **other** policies based on the results of the required analysis of the need for deconcentration of poverty and income mixing?

e. If the answer to d was yes, how would you describe these changes? (select all that apply)

Additional affirmative marketing
Actions to improve the marketability of certain developments
Adoption or adjustment of ceiling rents for certain developments
Adoption of rent incentives to encourage deconcentration of poverty and income-mixing
Other (list below)

f. Based on the results of the required analysis, in which developments will the PHA make special efforts to attract or retain higher-income families? (select all that apply)

X Not applicable: results of analysis did not indicate a need for such efforts
List (any applicable) developments below:

g. Based on the results of the required analysis, in which developments will the PHA make special efforts to assure access for lower-income families? (select all that apply)

X Not applicable: results of analysis did not indicate a need for such efforts
List (any applicable) developments below:

B. Section 8

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

(1) Eligibility

a. What is the extent of screening conducted by the PHA? (select all that apply)

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

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

d. Yes X 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)

X 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)

X 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)

X PHA main administrative office
Other (list below)

(3) Search Time

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

If yes, state circumstances below:

Hard to find a unit.

(4) Admissions Preferences

a. Income targeting

X 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. X 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
X High rent burden (rent is > 50 percent of income)

Other preferences (select all that apply)

X 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.

□□□□□ Date and Time

Former Federal preferences

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

Other preferences (select all that apply)
1 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)
X 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
X 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)

X The Section 8 Administrative Plan
X 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?

X 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)

X 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
X $1-$25
$26-$50

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

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

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

1. Yes X 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
X No

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

For all developments
For all general occupancy developments (not elderly or disabled or elderly only)
For specified general occupancy developments
For certain parts of developments; e.g., the high-rise portion

For certain size units; e.g., larger bedroom sizes
Other (list below)

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

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

f. Rent re-determinations:

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

Never
At family option
X 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 X 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

X Survey of rents listed in local newspaper
X 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 below100% of FMR
X 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)X

X 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)

X Success rates of assisted families

X Rent burdens of assisted families

Other (list below)

(2) Minimum Rent

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

$0

X $1-$25

$26-$50

b. Yes X 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.

X A brief description of the management structure and organization of the PHA follows: ***Executive Director, Administrative Staff, Public Housing Staff, Section „8" Staff and a Maintenance Staff.***

B. HUD Programs Under PHA Management

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

Program Name	Units or Families Served at Year Beginning	Expected Turnover
Public Housing	80	20
Section 8 Vouchers	623	100
Section 8 Certificates	75	15
Section 8 Mod Rehab		
Special Purpose Section 8 Certificates/Vouchers (list individually)		
Public Housing Drug Elimination Program (PHDEP)		
Other Federal Programs(list individually)		

C. Management and Maintenance Policies

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

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

Admissions and Continued Occupancy Policy
Lease Part I & II
Greivance
Procurement
Capitalization
Disposition
Travel
One Strike
Maintenance Plan

Rent Policy

(2) Section 8 Management: (list below)

Administrative Plan

6. PHA Grievance Procedures

[24 CFR Part 903.7 9 (f)]

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

A. Public Housing

1. X 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:

Notification of Gulf Coast Legal Services

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

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

B. Section 8 Tenant-Based Assistance

1. Yes X 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)

X 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) □□□□□

-or-

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

Annual Statement/Performance and Evaluation Report
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/

PHA Name:	**Grant Type and Number**
	Capital Fund Program: FL14P10550102

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

MANATEE COUNTY HOUSING AUTHORITY	Capital Fund Program Replacement Housing Factor Grant No:

X **Original Annual Statement** **Reserve for Disasters/ Emergencies Revised Annual**
Performance and Evaluation Report for Period Ending: **Final Performance and Evaluation Report**

Line No.	**Summary by Development Account**	**Total Estimated Cost**		
		Original	**Revised**	
1	Total non-CFP Funds			
2	1406 Operations	145,003.00		
3	1408 Management Improvements			
4	1410 Administration			
5	1411 Audit			
6	1415 liquidated Damages			
7	1430 Fees and Costs			
8	1440 Site Acquisition			
9	1450 Site Improvement			
10	1460 Dwelling Structures			
11	1465.1 Dwelling Equipment—Nonexpendable			
12	1470 Nondwelling Structures			
13	1475 Nondwelling Equipment			
14	1485 Demolition			
15	1490 Replacement Reserve			
16	1492 Moving to Work Demonstration			
17	1495.1 Relocation Costs			
18	1498 Mod Used for Development			
19	1502 Contingency			
20	Amount of Annual Grant: (sum of lines 2-19)	145,003.00		
21	Amount of line 20 Related to LBP Activities			
22	Amount of line 20 Related to Section 504 Compliance			
23	Amount of line 20 Related to Security			
24	Amount of line 20 Related to Energy Conservation Measures			

Annual Statement/Performance and Evaluation Report
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP
Part II: Supporting Pages

PHA Name: MANATEE COUNTY HOUSING AUTHORITY	**Grant Type and Number** Capital Fund Program #: FL14P10550102 Capital Fund Program Replacement Housing Factor #:

Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost	
				Original	Revised
FL105 pha WIDE	OPERATIONS:	1406		145,003.00	
	TOTAL			145,003.00	

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

PHA Name: MANATEE COUNTY HOUSING AUTHORITY	**Grant Type and Number** Capital Fund Program #: fl14p10550102 Capital Fund Program Replacement Housing Factor #:	**Federal**

Development Number Name/HA-Wide Activities	All Fund Obligated (Quart Ending Date)			All Funds Expended (Quarter Ending Date)			
	Original	Revised	Actual	Original	Revised	Actual	
FL105 PHA WIDE	3/31/03			3/31/05			

Annual Statement/Performance and Evaluation Report
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP

PHA Name:	Grant Type and Number
Manatee County Housing Authority	Capital Fund Program: **FL29P10550101** Capital Fund Program Replacement Housing Factor Grant No:

Original Annual Statement **Reserve for Disasters/ Emergencies Revised Annual**
Performance and Evaluation Report for Period Ending: **X Final Performance and Evaluation Report**

Line No.	Summary by Development Account	Total Estimated Cost		
		Original	Revised	

1	Total non-CFP Funds			
2	1406 Operations	156,407		
3	1408 Management Improvements			
4	1410 Administration			
5	1411 Audit			
6	1415 liquidated Damages			
7	1430 Fees and Costs			
8	1440 Site Acquisition			
9	1450 Site Improvement			
10	1460 Dwelling Structures			
11	1465.1 Dwelling Equipment—Nonexpendable			
12	1470 Nondwelling Structures			
13	1475 Nondwelling Equipment			
14	1485 Demolition			
15	1490 Replacement Reserve			
16	1492 Moving to Work Demonstration			
17	1495.1 Relocation Costs			
18	1498 Mod Used for Development			
19	1502 Contingency			
20	Amount of Annual Grant: (sum of lines 2-19)	**156,407.**		
21	Amount of line 20 Related to LBP Activities			
22	Amount of line 20 Related to Section 504 Compliance			
23	Amount of line 20 Related to Security			
24	Amount of line 20 Related to Energy Conservation Measures			

Annual Statement/Performance and Evaluation Report
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP
Part II: Supporting Pages

PHA Name: **Manatee County Housing Authority**	**Grant Type and Number** Capital Fund Program #: **FL29P10550101** Capital Fund Program Replacement Housing Factor #:

Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost	
				Original	Revised
FL052	**OPERATIONS**	1406		**156,407**	
	GRAND TOTAL			**156,407.**	

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

PHA Name: **Manatee County Housing Authority**	**Grant Type and Number** Capital Fund Program #: **FL29P10550101** Capital Fund Program Replacement Housing Factor #:	**Federal**

Development Number Name/HA-Wide Activities	All Fund Obligated (Quart Ending Date)			All Funds Expended (Quarter Ending Date)			
	Original	Revised	Actual	Original	Revised	Actual	
FL105-1	3/31/02			3/31/03			

Annual Statement/Performance and Evaluation Report
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP

PHA Name: **MANATEE COUNTY HOUSING AUTHORITY**	**Grant Type and Number** Capital Fund Program: FL14P10550100 Capital Fund Program Replacement Housing Factor Grant No:

Original Annual Statement **Reserve for Disasters/ Emergencies Revised Annual St**
X Performance and Evaluation Report for Period Ending: 3/30/02 **X Final Performance and Evaluation Report**

Line No.	**Summary by Development Account**	**Total Estimated Cost**		
		Original	**Revised**	
1	Total non-CFP Funds			
2	1406 Operations	153,355.00		153,3
3	1408 Management Improvements			

4	1410 Administration			
5	1411 Audit			
6	1415 liquidated Damages			
7	1430 Fees and Costs			
8	1440 Site Acquisition			
9	1450 Site Improvement			
10	1460 Dwelling Structures			
11	1465.1 Dwelling Equipment—Nonexpendable			
12	1470 Nondwelling Structures			
13	1475 Nondwelling Equipment			
14	1485 Demolition			
15	1490 Replacement Reserve			
16	1492 Moving to Work Demonstration			
17	1495.1 Relocation Costs			
18	1498 Mod Used for Development			
19	1502 Contingency			
20	Amount of Annual Grant: (sum of lines 2-19)	153,355.00		153,3
21	Amount of line 20 Related to LBP Activities			
22	Amount of line 20 Related to Section 504 Compliance			
23	Amount of line 20 Related to Security			
24	Amount of line 20 Related to Energy Conservation Measures			

Annual Statement/Performance and Evaluation Report
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP
Part II: Supporting Pages

PHA Name: Manatee County Housing Authority	Grant Type and Number Capital Fund Program #: FL14P10550100 Capital Fund Program Replacement Housing Factor #:

Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost	
				Original	Revised
FL 105PHA wide	OPERATIONS:	1406		153,355.00	

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

PHA Name: Manatee County Housing Authority	**Grant Type and Number** Capital Fund Program #: FL14P10550100 Capital Fund Program Replacement Housing Factor #:	**Federal**

Development Number Name/HA-Wide Activities	All Fund Obligated (Quart Ending Date)			All Funds Expended (Quarter Ending Date)			
	Original	Revised	Actual	Original	Revised	Actual	
FL015 PHWA wide	3/1/00			3/31/02			

Annual Statement/Performance and Evaluation Report
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP

PHA Name:	Grant Type and Number
MANATEE COUNTY HOUSING AUTHORITY	Capital Fund Program: FL14P10550101 Capital Fund Program Replacement Housing Factor Grant No:

Original Annual Statement **Reserve for Disasters/ Emergencies Revised Annual St**
X Performance and Evaluation Report for Period Ending: 3/30/02 **X Final Performance and Evaluation Report**

Line No.	Summary by Development Account	Total Estimated Cost		
		Original	Revised	
1	Total non-CFP Funds			
2	1406 Operations	156,407.00		156,4
3	1408 Management Improvements			
4	1410 Administration			
5	1411 Audit			
6	1415 liquidated Damages			
7	1430 Fees and Costs			
8	1440 Site Acquisition			
9	1450 Site Improvement			
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14	1485 Demolition			
15	1490 Replacement Reserve			
16	1492 Moving to Work Demonstration			
17	1495.1 Relocation Costs			
18	1498 Mod Used for Development			
19	1502 Contingency			
20	Amount of Annual Grant: (sum of lines 2-19)	156,407.00		156,4
21	Amount of line 20 Related to LBP Activities			
22	Amount of line 20 Related to Section 504 Compliance			
23	Amount of line 20 Related to Security			

24	Amount of line 20 Related to Energy Conservation Measures			

Annual Statement/Performance and Evaluation Report
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP
Part II: Supporting Pages

PHA Name: Manatee County Housing Authority	Grant Type and Number Capital Fund Program #: FL14P10550101 Capital Fund Program Replacement Housing Factor #:

Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost	
				Original	Revised
FL 105PHA wide	OPERATIONS:	1406		156,407.00	

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

PHA Name: Manatee County Housing Authority	**Grant Type and Number** Capital Fund Program #: FL14P10550101 Capital Fund Program Replacement Housing Factor #:	**Federal**

Development Number Name/HA-Wide Activities	All Fund Obligated (Quart Ending Date)			All Funds Expended (Quarter Ending Date)			
	Original	Revised	Actual	Original	Revised	Actual	
FL015 PHWA wide	3/1/00			3/31/01			

(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. X 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 (state name

-or-

X 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)

Capital Fund Program 5-Year Action Plan

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

CFP 5-Year Action Plan X **Original statement** **Revised statement**		
Development Number	**Development Name (or indicate PHA wide)**	
FL105	**Manatee County Housing Authority**	
Description of Needed Physical Improvements or Management Improvements	**Estimated Cost**	**Planned Start D (HA Fiscal Yea**
PHA OPERATIONS	**145,003.**	**2003**
PHA OPERATIONS	**145,003.**	**2004**
PHA OPERATIONS	**145,003.**	**2005**
PHA OPERATIONS	**145,003.**	**2006**
Total estimated cost over next 5 years	**725,015.**	

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 X 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 X 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 X 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 X 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 X 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.)

Demolition/Disposition Activity Description
1a. Development name: 1b. Development (project) number:
2. Activity type: Demolition Disposition
3. Application status (select one) Approved Submitted, pending approval Planned application
4. Date application approved, submitted, or planned for submission: (_____)
5. Number of units affected: 6. Coverage of action (select one) Part of the development 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 X No: Has the PHA designated or applied for approval to designate or does the PHA plan to apply to designate any public housing for occupancy only by the elderly families or only by families with disabilities, or by elderly families and families with disabilities or will apply for designation for occupancy by only elderly families or only families with disabilities, or by elderly families and families with disabilities as provided by section 7 of the U.S. Housing Act of 1937 (42 U.S.C. 1437e) in the upcoming fiscal year? (If „No“, skip to component 10. If „yes“, complete one activity description for each development, unless the PHA is eligible to complete a streamlined submission; PHAs completing streamlined submissions may skip to component 10.)

2. Activity Description

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

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

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

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

Conversion of Public Housing Activity Description
1a. Development name: 1b. Development (project) number:
2. What is the status of the required assessment? Assessment underway Assessment results submitted to HUD Assessment results approved by HUD (if marked, proceed to next question) Other (explain below)
3. Yes 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) Conversion Plan in development Conversion Plan submitted to HUD on: (DD/MM/YYYY) Conversion Plan approved by HUD on: (DD/MM/YYYY) 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)

Units addressed in a pending or approved demolition application (date submitted or approved: □□□□□

Units addressed in a pending or approved HOPE VI demolition application (date submitted or approved: □□□□□)

Units addressed in a pending or approved HOPE VI Revitalization Plan (date submitted or approved: □□□□□)

Requirements no longer applicable: vacancy rates are less than 10 percent

Requirements no longer applicable: site now has less than 300 units

Other: (describe below)

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

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

11. Homeownership Programs Administered by the PHA

[24 CFR Part 903.7 9 (k)]

A. Public Housing

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

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

2. Activity Description

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

Public Housing Homeownership Activity Description (Complete one for each development affected)
1a. Development name: 1b. Development (project) number:
2. Federal Program authority: HOPE I 5(h) Turnkey III

Section 32 of the USHA of 1937 (effective 10/1/99)
3. Application status: (select one) Approved; included in the PHA's Homeownership Plan/Program Submitted, pending approval 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) Part of the development Total development

B. Section 8 Tenant Based Assistance

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

2. Program Description:

a. Size of Program

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

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

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

b. PHA-established eligibility criteria

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

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

Services and Programs				
Program Name & Description (including location, if appropriate)	Estimated Size	Allocation Method (waiting list/random selection/specific criteria/other)	Access (development office / PHA main office / other provider name)	Eligibility (public housing or section 8 participants or both)

(2) Family Self Sufficiency program/s

a. Participation Description

Family Self Sufficiency (FSS) Participation		
Program	Required Number of Participants (start of FY 2000 Estimate)	Actual Number of Participants (As of: DD/MM/YY)
Public Housing		
Section 8	ALL PARTICIPANTS HAVE GRADUATED.	

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
X Informing residents of new policy on admission and reexamination
X 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

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)

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

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

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

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

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)

D. Additional information as required by PHDEP/PHDEP Plan

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

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

14. RESERVED FOR PET POLICY

[24 CFR Part 903.7 9 (n)]

PET POLICY
MANATEE COUNTY HOUSING AUTHORITY

This Statement of Pet Policy is established for the Manatee County Housing Authority by

action of the Board of Commissioners on this ____ day of _____, 19____.

1. An additional security deposit of $150.00 plus a non-refundable Pet Fee of $200.00 must be paid at the time of the pet move in, unless it is an assistive animal. (The Pet Fee must be paid in full.) The deposit may be paid in increments of not less than $10.00 per month for each succeeding month until the sum of $150.00 is paid, Pet Fee must be paid prior to occupancy. The security deposit or any part thereof may not be used for any damages incurred on the unit unless directly related to said pet.

2. Pet owner may be required to demonstrate liability insurance coverage on the pet of no less than $100,000 minimum permitted by renters insurance, and to agree to assume responsibility for all damage incurred by said pet.

3. Signed statement assigning responsibility to no less than two persons to care for the pet in the event the pet owner dies, is incapacitated or is otherwise unable to care for the pet.

4. The size of the pet is limited to a maximum of twenty-five (25) pounds (adult weight), unless it is an assistive animal.

5. Owner of the pet will be responsible for all cleanup anywhere on the grounds or in the building. If pet owner is unable, or contact with the tenant cannot be made, a $25.00 fee for each cleanup performed by the Housing Authority will be assessed.

6. All pet owners must submit an up-to-date immunization record from a qualified veterinarian and must display a current license tag for said pet. Immunization records and pet license tags are to be rectified during the month of the pet owner's rectification of tenant eligibility.

7. Pet owner must make a bonafide effort to control fleas and ticks at all times.

8. Limit one pet per unit. Pet must be neutered or spayed and will be restricted to designated pet areas only. Pets will not be allowed in any designated area unless accompanied by a responsible person and is restrained on a leash or similar device.

9. A visiting pet will not be allowed accommodations for a period longer than fourteen (14) days and nights and demonstrate, prior to entry, updated proof of immunization.

10. A pet owner is in violation of the city ordinance on animal control when his or her animal causes objectionable noises, destroys or damages the property of others.

11. Pet owners must comply with all Housing Authority, County, State, and Federal Regulations on animal regulatory laws.

12. When litter boxes are in use, the pet owner will not change the litter more than twice each week and will separate pet waste from litter when disposing of same.

13. Inspections other than those permitted under the lease may be made after proper notification and during reasonable hours if a complaint is received in writing and the Housing Authority has reasonable grounds to believe that a nuisance or threat to health and safety of the occupants of the dwelling or surrounding area exist.

14. In the event of a pet rule violation, the pet owner will have up to fifteen (15) days from date of service of the notice to cure the violation, to remove the pet or to make a written request for a meeting to discuss said violation(s). The pet owner is entitled to be accompanied by another person of his or her choice. Failure to cure the violation, to request a meeting, or to appear at a requested meeting may result in termination of tenancy.

15. If a pet is removed due to the death or incapacity of the pet owner and the two responsible parties are contacted and are unwilling or unable to remove the pet; or cannot be contacted, the pet will be removed and placed in a pet facility for a period not to exceed thirty (30) days. The cost of the animal care shall be borne by the pet owner or his/her estate. If unable or unwilling to pay, the cost will be paid from the pet deposit.

16. All conditions must be met and the lease signed before admitting said pet to the dwelling unit.

I, _____, having duly read the above pet rules, understand and agree to comply with said rules as long as I retain a pet on the Authority premises.

TENANT'S SIGNATURE _____ DATE _____

WITNESS:_____ _

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. X 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. X Yes No: Was the most recent fiscal audit submitted to HUD?
3. X Yes No: Were there any findings as the result of that audit?
4. X Yes No: If there were any findings, do any remain unresolved?
If yes, how many unresolved findings remain?__4__
5. X Yes No: Have responses to any unresolved findings been submitted to HUD?
If not, when are they due (state below)?

17. PHA Asset Management

[24 CFR Part 903.7 9 (q)]

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

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

18. Other Information

[24 CFR Part 903.7 9 (r)]

A. Resident Advisory Board Recommendations

1. X 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) □□□□□
X Provided below:

Work orders within Housing community.

Work Orders
Parking improvements
Playground equipment
Speed bumps
Trespassing signs

3. In what manner did the PHA address those comments? (select all that apply)
X 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 X 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 X 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: (provide name here)

State of Florida / County of Manatee

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)

X The PHA has based its statement of needs of families in the jurisdiction on the needs expressed in the Consolidated Plan/s.
X The PHA has participated in any consultation process organized and offered by the Consolidated Plan agency in the development of the Consolidated Plan.
X The PHA has consulted with the Consolidated Plan agency during the

development of this PHA Plan.

X Activities to be undertaken by the PHA in the coming year are consistent with the initiatives contained in the Consolidated Plan. (list below)

To provide housing to eligible residents that is safe, sanitary and decent in an affordable manner to meet the prospective resident's needs.

Other: (list below)

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

To provide housing to eligible prospective resident that is safe, sanitary and decent. To provide economic opportunity to the prospective resident and work with other housing agencies within the jurisdiction.

D. Other Information Required by HUD

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

Attachments

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

Required Attachment : Resident Member on the PHA Governing Board

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

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

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

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

2. A. If the PHA governing board does not have at least one member who is directly assisted by the PHA, why not?
the PHA is located in a State that requires the members of a governing board to be salaried and serve on a full time basis
X the PHA has less than 300 public housing units, has provided reasonable notice to the resident advisory board of the opportunity to serve on the governing board, and has not been notified by any resident of their interest to participate in the Board.
Other (explain):

B. Date of next term expiration of a governing board member: **1/05/02**

C. Name and title of appointing official(s) for governing board (indicate appointing official for the next position): **Jeb Bush, Governor of the State of Florida**

Required Attachment : Membership of the Resident Advisory Board or Boards

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

Resident Advisory Board
Gwendolyn Earley
Joann Marie Miller
Maria Bologna

Board of Commissioners
Johnny McKinney
Sylvia Camarena
Marie Stenersen
Linda Gallen
Kelly Waterman

Manatee County Housing Authority

Income Targeting and Tenant Selection and Assignment

(Section – 513)

The primary goals of this policy are to:

1- Prohibition of concentration of low-income families in public housing and
2- Income targeting.

The Manatee County Housing Authority may not concentrate very low-income families in

public housing units in certain public housing projects or certain buildings within projects. The Manatee County Housing Authority will submit with its annual PHA plan an admission policy designed to provide for deconcentration of poverty and income-mixing by bringing higher income tenant into lower income projects and lower income tenants into higher income projects. The Manatee County Housing Authority may offer incentives for eligible families having higher incomes to occupy dwelling units in projects predominantly occupied be eligible families having lower incomes and provide for occupancy of eligible families having lower incomes in projects predominantly occupied by eligible families having higher incomes. The skipping of a family on the waiting list to reach another family to implement deconcentration will be utilized as permitted by HUD. This policy will not interfere with the use of site-based waiting list.

Not less than 40% of new families will have incomes at or below 30% of the area median income.

Other admissions will be at or below 80% of the area median income.

Fundability will be allowed only to the extent that relatively higher income families move into public housing units in census tracts having a poverty rate of at least 30%.

This Income Targeting and Tenant Selection and Assignment Policy is in accordance with the Summary of the Q.H.W.R.A. of 1998 as prepared by the Office of Policy, Program and Legislation Initiatives and is established for the Manatee County Housing Authority, by action of the Board of Commissioners.

Manatee County Housing Authority
Policy for the Implementation of
Community Service and Self Sufficiency Requirements

The Manatee County Housing Authority, to meet the Community Service requirements, offers the Public Housing Resident and opportunity to contribute to the community that supports them.

The community service opportunities, or locations, will include but are not limited to:

within the jurisdiction; activities to improve the physical environment of the resident's development; volunteer work in local schools, hospitals, child care centers or approved non-profit social service agencies. No resident will perform community service with any political affiliation or activities.

The PHA can administer its own community service program, form cooperative relationship with other entities in order to make opportunities available for residents, or contract the entire community service program to a third party. The PHA retains full authority and responsibility to assure contract compliance, should the program be contracted to a third party. Should a for-profit, third party be utilized, the PHA should ensure that the administration that oversees the program does not have a financial interest in the entity, where community service participants are assigned.

The PHA will, to the extent possible, attempt to ensure that the conditions under which the work is to be performed are not otherwise hazardous, that the work is not labor that would be performed by the PHA's employees responsible for essential maintenance and property service, or that the work is otherwise unacceptable.

Should the PHA have a self-sufficiency program, the self-sufficiency program activities may, if acceptable, be substituted for the community service requirements.

Component 3, (6) Deconcentration and Income Mixing

a. Yes 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. 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:

Deconcentration Policy for covered Developments

Development Name	Number of Units	Explanation (if any)	Deconcentration Policy (if no explanation)

Voluntary Conversion Initial Assessment

a. How many of the PHA's developments are subject to the Required initial Assessment.

All

b. How many of the PHA's developments are not subject to the Required Initial Assessment.

None

a. How many Assessments were conducted

All Developments

b. Identify PHA developments that may be appropriate for conversion.

None

e. PHA complete all assessments.

Certification Procedures for Voluntary Conversion of Developments from Public Housing Stock

The certifies that it has reviewed the development's operation as Public Housing, considered the implications of converting the public housing to tenant-based assistance; and concluded that conversion of the developments are inappropriate because removal of the developments would not meet the necessary conditions for voluntary conversion as described in 24 CFR 972.200 (c) .

Rob Rogers

_____

Executive Director

MISSION & GOAL STATEMENT

The Manatee County Housing Authority is meeting the Mission and goals of the annual plan.