

U.S.DepartmentofHousingandUrbanDevelopment  
OfficeofPublicandIndianHousing

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# PHAPlans

AnnualPlanforFiscalYear2003  
beginning7/1/2002

**NOTE:THISPHAPLANSTEMPLATE(HUD50075)ISTOBECOMPLETEDIN  
ACCORDANCEWITHINSTRUCTIONSLOCATEDINAPPLICABLEPIHNOTICES**

## PHA Plan Agency Identification

**PHAName:** EasternIowaRegionalHousingAuthority

**PHANumber:** IA126

**PHAFiscalYearBeginning:**07/2002

### Public Access to Information

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

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

### Display Locations For PHA Plans and Supporting Documents

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

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

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

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

**AnnualPHAPlan**  
**PHAFiscalYear2003**  
[24CFRPart903.7]

**i. AnnualPlanType:**

SelectwhichtypeofAnnualPlanthePHAwillsubmit.

**StandardPlan**

**ii. ExecutiveSummaryoftheAnnualPHAPlan**

[24CFRPart903.79(r)]

ProvideabriefoverviewoftheinformationintheAnnualPlan,includinghighlightsofmajorinitiatives anddiscretionarypoliciesthePHAhasincludedintheAnnualPlan.

TheFY2003AnnualPlanrelatesdirectlytothemissionandgoals establishedintheEIRHAFive-YearPlan.EIRHAcontinuestobuildon itsmissionandgoals.TheFY2003AnnualPlanupdateswaitinglist information;providestheFY2002plannedCapitalFundexpenditures budgetandapprovingamendment;Annual Statement/Performance EvaluationReportforFY2000andFY2001CapitalFundProgram; includesabriefupdateontheapprovedHomeownershipPlan;Resident AdvisoryBoardinformationaswellasthenamesofresidentmembersof ourgoverningBoard;andfinally,theFY2003AnnualPlanaddresses the PetPolicyandtherecissionoftheCommunityServiceregulations. There isnotasubstantialdeviationfromtheactivitiesapprovedintheFive -Year Plan,however,therehasbeenslightmodificationsmadetotheFY2 000 andFY2001CapitalFundbudgetwiththeserevisionsincludedinthe AnnualStatement/PerformanceReport.

**iii. Annual Plan Table of Contents**

[24CFR Part 903.79(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, et c.) 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 filename in parentheses in the space to the right of the title.

Required Attachments:

- Admissions Policy for Deconcentration (Attachment A)
- FY2002 Capital Fund Program Annual Statement (Attachment B)
- FY2000 and FY2001** Capital Fund Program Annual Statement/Performance and Evaluation Report - Attachment C - Separate files save as (ia126a02)
- Most recent board - approved operating budget (Required Attachment for PHAs that are troubled or at risk of being designated troubled ONLY)
- Other (List below, providing each attachment name)
  - Attachment D - Home Ownership Plan; Attachment E - Community Service Recission; Attachment F - Pet Policy; Attachment G - Resident Membership of the Governing Board; Attachment H - Resident Advisory Board Membership; Attachment I - Progress Statement in meeting 5 year plan Mission and Goals

Optional Attachments:

- PHA Management Organizational Chart
- Capital Fund Program 5 Year Action Plan (As part of the Capital Fund Annual Statement/Performance and Evaluation Report (Attachment B))
- Public Housing Drug Elimination Program (PHDEP) Plan
- Comments of Resident Advisory Board or Boards (must be attached if not included in PHA Plan text)

**Supporting Documents Available for Review**

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

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

<b>List of Supporting Documents Available for Review</b>		
<b>Applicable &amp; On Display</b>	<b>Supporting Document</b>	<b>Applicable Plan Component</b>
	2. Documentation of the required deconcentration and income mixing analysis	
X	Public housing rent determination policies, including the methodology for setting public housing flat rents <input checked="" type="checkbox"/> check here if included in the public housing A&O Policy	Annual Plan: Rent Determination
X	Schedule of flat rents offered at each public housing development <input type="checkbox"/> check here if included in the public housing A&O Policy	Annual Plan: Rent Determination
X	Section 8 rent determination (payment standard) policies <input type="checkbox"/> check here if included in Section 8 Administrative Plan	Annual Plan: Rent Determination
X	Public housing management and maintenance policy documents, including policies for the prevention or eradication of pest infestation (including cockroach infestation)	Annual Plan: Operations and Maintenance
X	Public housing grievance procedures <input type="checkbox"/> check here if included in the public housing A&O Policy	Annual Plan: Grievance Procedures
X	Section 8 informal review and hearing procedures <input checked="" type="checkbox"/> check here if included in Section 8 Administrative Plan	Annual Plan: Grievance Procedures
	The HUD - approved Capital Fund/Comprehensive Grant Program Annual Statement (HUD 52837) for the active grant year	Annual Plan: Capital Needs
X	Most recent CIAP Budget/Progress Report (HUD 52825) for any active CIAP grant	Annual Plan: Capital Needs
X	Most recent, approved 5 Year Action Plan for the Capital Fund/Comprehensive Grant Program, if not included as an attachment (provided at PHA option)	Annual Plan: Capital Needs
	Approved HOPE VI applications or, if more recent, approved or submitted HOPE VI Revitalization Plans or any other approved proposal for development of public housing	Annual Plan: Capital Needs
X	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
X	Approved or submitted public housing homeownership programs/plans	Annual Plan: Homeownership
	Policies governing any Section 8 Homeownership program <input type="checkbox"/> check here if included in the Section 8 Administrative Plan	Annual Plan: Homeownership
	Any cooperative agreement between the PHA and the TANF agency	Annual Plan: Community Service & Self-Sufficiency

<b>List of Supporting Documents Available for Review</b>		
<b>Applicable &amp; On Display</b>	<b>Supporting Document</b>	<b>Applicable Plan Component</b>
X	FSS Action Plan/s for public housing and/or Section 8	Annual Plan: Community Service & Self - Sufficiency
X	Most recent self - sufficiency (ED/SS, TOP or ROSS or other resident services grant) grant program reports	Annual Plan: Community Service & Self - Sufficiency
	The most recent Public Housing Drug Elimination Program (PHDEP) semi - annual performance report for any open grant and most recently submitted PHDEP application (PHDEP Plan)	Annual Plan: Safety and Crime Prevention
X	The most recent fiscal year audit of the PHA conducted under section 5(h)(2) of the U.S. Housing 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)

## **1. Statement of Housing Needs**

Waiting list of Eastern Iowa Regional Housing Authority (2002)  
183 for Section 8 and 52 public housing applicants

The past year EIRHA concentrated on marketing the Section 8 and Public Housing program to achieve 100% lease -up through advertisements in local newspapers and newsletters, posters, flyers, and briefing sessions held throughout our six county region. EIRHA has also contacted local community action agencies and schools to circulate flyers with their program mailings. At the present time the Section 8 Program is at 101% lease -up and has implemented a waiting list. The Public Housing Program is at 96% lease -up.

<b>Housing Needs of Families on the Waiting List</b>			
Waiting list type: (select one)			
<input type="checkbox"/> Section 8 tenant -based assistance			
<input type="checkbox"/> Public Housing			
<input checked="" type="checkbox"/> Combined Section 8 and Public Housing			
<input type="checkbox"/> Public Housing Site -Based or sub -jurisdictional waiting list (optional)			
If used, identify which development/subjurisdiction:			
	# of families	% of total families	Annual Turnover
Waiting list total	235		25
Extremely low income <= 30% AMI	211	89	

<b>Housing Needs of Families on the Waiting List</b>			
Very low income (>30% but ≤50% AMI)	24	11	
Low income (>50% but <80% AMI)	0		
Families with children	193	89	
Elderly families	22	9	
Families with Disabilities	20	8	
Race/ethnicity White	211	90	
Race/ethnicity Hispanic	2	1	
Race/ethnicity/black	19	8	
Race/ethnicity/other	3	1	
Characteristics by Bedroom Size (Public Housing Only)			
1BR	76	32	14
2BR	95	42	12
3BR	56	23	12
4BR	7	2	
5BR			
5+BR	1	1	
Is the waiting list closed (select one)? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes If yes: How long has it been closed (# of months)? Does the PHA expect to open the list in the PHA Plan year? <input type="checkbox"/> No <input type="checkbox"/> Yes Does the PHA permit specific categories of families onto the waiting list, even if generally closed? <input type="checkbox"/> No <input type="checkbox"/> Yes			

## **2. Statement of Financial Resources**

[24CFR Part 903.79(b)]

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

<b>FinancialResources: PlannedSourcesandUses</b>		
<b>Sources</b>	<b>Planned\$</b>	<b>PlannedUses</b>
<b>1. FederalGrants(FY2002grants)</b>		
a) PublicHousingOperatingFund	\$243,402	
b) PublicHousingCapitalFund	\$277,518(FY'01) \$286,700(FY'02)	
c) HOPEVIREvitali zation		
d) HOPEVIDemolition		
e) AnnualContributionsforSection 8Tenant -BasedAssistance	\$3,002,362	
f) PublicHousingDrugElimination Program(includinganyTechnical Assistancefunds)		
g) ResidentOpportunityandSelf - SufficiencyGrants	\$45,536	
h) CommunityDevelopmentBlock Grant		
i) HOME		
OtherFederalGrants(listbelow)		
<b>2.PriorYearFederalGrants (unobligatedfundsonly)(list below)</b>		
<b>3.PublicHousingDwellingRental Income</b>	\$260,000	260,000
<b>4.Otherinco me (listbelow)</b>	\$14,000	14,000
LaundryIncome		
InterestIncome		
<b>4.Non -federalsources (listbelow)</b>		-0-
<b>OperatingReserves</b>		
Section8	\$226,380	
PublicHousing	\$100,851	
<b>Totalresources</b>	\$4,166,513	

### **3.PHAPolicies Governing Eligibility, Selection, and Admissions**

[24CFRPart903.79(c)]

The Eastern Iowa Regional Housing Authority has previously submitted the Admissions and Continued Occupancy Policy, Grievance, the Section 8 Administrative Plan and the Informal Hearing and Review policies, with supporting documentation, to the U.S. Department of Housing and Urban Development. HUD has previously approved these plans. The FY2001 Five Year Plan also outlined both of these policies, with the Five Year Plan approved as submitted by HUD. These plans are recurrent and comply with the new law and regulations. These policies are reviewed on a regular basis to monitor compliance.

### **4.PHARent Determination Policies**

[24CFRPart903.79(d)]

The Eastern Iowa Regional Housing Authority rent determination policies are contained in the Admissions and Continued Occupancy Policy. This policy has been previously submitted and approved by HUD. A summary is below:

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

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

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

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

a. Use of discretionary policies: (select one)

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

---or---

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

b. Minimum Rent

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

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

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

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

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

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

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

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

- For the earned income of a previously unemployed household member
- For increases in earned income
- Fixed amount (other than general rent -setting policy)  
If yes, state amount/s and circumstances below:
- Fixed percentage (other than general rent -setting policy)  
If yes, state percentage/s and circumstances below:  
20% of earnings deducted
- 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)

Medical insurance payments  
child support payments

e. Ceiling rents

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

- Yes for all developments
- Yes but only for some developments
- No

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

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

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

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

f. Rent review determinations:

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

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

g.  Yes  No: Does the PHA plan to implement individual savings accounts for residents (ISAs) as an alternative to the required 12 month

disallowance of earned income and phasing in of rent increases in the next year?

**(2) Flat Rents**

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

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

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

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

**(1) Payment Standards**

Describe the voucher payment standards and policies .

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

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

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

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

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

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

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

- Annually  
 Other (list below)

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

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

## **(2) Minimum Rent**

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

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

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

## **5. Operations and Management**

[24CFR Part 903.79(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 copy of the following policies have been previously submitted and approved by HUD - Procurement, Capitalization and Disposition, Personnel, Rent Collection, Sexual Abuse Policy, Accident Policy, Family Medical Leave Act, Americans with Disability Policy, Pet Policy, Deconcentration Policy, Resident Guide, Rules or Handbooks, Grievance, Informal Review and Hearing, Admissions and Continued Occupancy Policy, and the Section 8 Administrative Plan. A listing of the programs operated by the Housing Authority is below.

**B. HUD Programs Under PHA Management**

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

<b>Program Name</b>	<b>Units or Families Served at Year Beginning</b>	<b>Expected Turnover</b>
Public Housing	168 units	
Section 8 Vouchers	703 Vouchers	
Section 8 Certificates		
Section 8 Mod Rehab		
Special Purpose Section 8 Certificates/Vouchers (list individually)		
Public Housing Drug Elimination Program (PHDEP)		
Other Federal Programs (list individually)		
Family Self Sufficiency	74 units	

**6. PHA Grievance Procedures**

[24CFR Part 903.79(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.

The Eastern Iowa Regional Housing Authority Grievance Policy as well as the Informal Hearing and Review Policy have been previously submitted and approved by HUD. A summary is below.

**A. Public Housing**

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

If yes, list additions to federal requirements below:

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

PHA main administrative office

- PHA development management offices
- Other (list below)

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

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

If yes, list addition to federal requirements below:

2. Which PHA offices should applicants or assisted families contact to initiate the informal review and informal hearing processes? (select all that apply)

- PHA main administrative office
- Other (list below)

**7. Capital Improvement Needs**

**Attachment C: FY2002 Capital Fund Budget  
 FY2001 Capital Fund Budget  
 FY2000 Capital Fund Program Annual  
 Statement/Performance and Evaluation Report –  
 Separate File**

**File Name – ia126a02**

[24CFR Part 903. 79(g)]

**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.

- The Capital Fund Program Annual Statement is provided as an attachment to the PHA Plan as Attachment C.

**8. Demolition and Disposition** [24CFR Part 903.79(h)]

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

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

<b>Demolition/Disposition Activity Description</b>	
1a. Development name: Manchester Elderly Development	
1b. Development (project) number: IA126 -004	
2. Activity type: Demolition <input type="checkbox"/>	
Disposition <input checked="" type="checkbox"/> Conversion of 2 units to an on-site resident manager unit	
3. Application status (select one)	
Approved <input checked="" type="checkbox"/>	
Submitted, pending approval <input type="checkbox"/>	
Planned application <input type="checkbox"/>	
4. Date application approved, submitted, or planned for submission: (05/16/01)	
5. Number of units affected: 2	
6. Coverage of action (select one)	
<input checked="" type="checkbox"/> Part of the development	
<input type="checkbox"/> Total development	
7. Title line for activity: Approved and completed last FY as part of CFP 2000	
a. Actual or projected start date of activity: 5/16/01	
b. Projected end date of activity: 6/30/01	

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

[24CFR Part 903.79(i)]

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

1.  Yes  No: Has the PHA design a ted or applied for approval to designate or does the PHA planto 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.)

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

[24CFR Part 903.79(j)]

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

### **A. Assessment of Reasonable Revitalization Pursuant to Section 202 of the HUD FY1996 HUD Appropriations Act**

1.  Yes  No: Have any of the PHA's developments or portions of developments been identified by HUD or the PHA as covered under section 202 of the HUD FY1996 HUD Appropriations Act? (If "No", skip to component 11; if "yes", complete one activity description for each identified development, unless eligible to complete as streamlined submission. PHAs completing streamlined submissions may skip to component 11.)

## **11. Homeownership Programs Administered by the PHA**

[24CFR Part 903.79(k)]

### **A. Public Housing Attachment D – Homeownership Plan**

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

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

#### 2. Activity Description

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

<b>Public Housing Homeownership Activity Description (Complete one for each development affected)</b>
1a. Development name: Dyersville Family 1b. Development (project) number: A126 -001
2. Federal Program authority: <input type="checkbox"/> HOPEI <input checked="" type="checkbox"/> 5(h) <input type="checkbox"/> Turnkey III <input type="checkbox"/> Section 32 of the USHA of 1937 (effective 10/1/99)
3. Application status: (select one) <input checked="" type="checkbox"/> Approved; included in the PHA's Homeownership Plan/Program <input type="checkbox"/> Submitted, pending approval <input type="checkbox"/> Planned application
4. Date Homeownership Plan/Program approved, submitted, or planned for submission: (06/01/2000) Approved: <u>10/31/2001</u>
5. Number of units affected: 6 6. Coverage of action: (select one) Part of Development

<b>Public Housing Homeownership Activity Description (Complete one for each development affected)</b>
1a. Development name: Manchester Family 1b. Development (project) number: A126 -002
2. Federal Program authority: <input type="checkbox"/> HOPEI <input checked="" type="checkbox"/> 5(h) <input type="checkbox"/> Turnkey III <input type="checkbox"/> Section 32 of the USHA of 1937 (effective 10/1/99)
3. Application status: (select one) <input checked="" type="checkbox"/> Approved; included in the PHA's Homeownership Plan/Program <input type="checkbox"/> Submitted, pending approval <input type="checkbox"/> Planned application
4. Date Homeownership Plan/Program approved, submitted, or planned for submission: (06/01/2000) Approved: <u>10/31/2001</u>
5. Number of units affected: 9 6. Coverage of action: (select one) Part of Development

Public Housing Homeownership Activity Description (Complete one for each development affected)	
1a. Development name:	Dyersville Family
1b. Development (project) number:	A126 -014
2. Federal Program authority:	<input type="checkbox"/> HOPEI <input checked="" type="checkbox"/> 5(h) <input type="checkbox"/> Turnkey III <input type="checkbox"/> Section 32 of the USHA of 1937 (effective 10/1/99)
3. Application status: (select one)	<input checked="" type="checkbox"/> Approved; included in the PHA's Homeownership Plan/Program <input type="checkbox"/> Submitted, pending approval <input type="checkbox"/> Planned application
4. Date Homeownership Plan/Program approved, submitted, or planned for submission:	(06/01/2000) Approved: <u>10/31/2001</u>
5. Number of units affected:	3
6. Coverage of action: (select one) Part of Development	Development

Public Housing Homeownership Activity Description (Complete one for each development affected)	
1a. Development name:	Hopkinton Family
1b. Development (project) number:	A126 -015
2. Federal Program authority:	<input type="checkbox"/> HOPEI <input checked="" type="checkbox"/> 5(h) <input type="checkbox"/> Turnkey III <input type="checkbox"/> Section 32 of the USHA of 1937 (effective 10/1/99)
3. Application status: (select one)	<input checked="" type="checkbox"/> Approved; included in the PHA's Homeownership Plan/Program <input type="checkbox"/> Submitted, pending approval <input type="checkbox"/> Planned application
4. Date Homeownership Plan/Program approved, submitted, or planned for submission:	(06/01/2000) Approved: <u>10/31/2001</u>
5. Number of units affected:	2
6. Coverage of action: (select one) Part of Development	Development

Public Housing Homeownership Activity Description (Complete one for each development affected)	
1a. Development name:	Preston Family
1b. Development (project) number:	A126 -022
2. Federal Program authority:	<input type="checkbox"/> HOPEI <input checked="" type="checkbox"/> 5(h) <input type="checkbox"/> Turnkey III <input type="checkbox"/> Section 32 of the USHA of 1937 (effective 10/1/99)
3. Application status: (select one)	<input checked="" type="checkbox"/> Approved; included in the PHA's Homeownership Plan/Program <input type="checkbox"/> Submitted, pending approval <input type="checkbox"/> Planned application
4. Date Homeownership Plan/Program approved, submitted, or planned for submission:	(06/01/2000) Approved: <u>10/31/2001</u>
5. Number of units affected:	2
6. Coverage of action: (select one) Part of Development	

Public Housing Homeownership Activity Description (Complete one for each development affected)	
1a. Development name:	Worthington Family
1b. Development (project) number:	A126 -024
2. Federal Program authority:	<input type="checkbox"/> HOPEI <input checked="" type="checkbox"/> 5(h) <input type="checkbox"/> Turnkey III <input type="checkbox"/> Section 32 of the USHA of 1937 (effective 10/1/99)
3. Application status: (select one)	<input checked="" type="checkbox"/> Approved; included in the PHA's Homeownership Plan/Program <input type="checkbox"/> Submitted, pending approval <input type="checkbox"/> Planned application
4. Date Homeownership Plan/Program approved, submitted, or planned for submission:	(06/01/2000) Approved: <u>10/1/2001</u>
5. Number of units affected:	6
6. Coverage of action: (select one) Total Development	

<b>Public Housing Homeownership Activity Description (Complete one for each development affected)</b>
1a. Development name: Delmar Family 1b. Development (project) number: A126 -025
2. Federal Program authority: <input type="checkbox"/> HOPEI <input checked="" type="checkbox"/> 5(h) <input type="checkbox"/> Turnkey III <input type="checkbox"/> Section 32 of the USHA of 1937 (effective 10/1/99)
3. Application status: (select one) <input checked="" type="checkbox"/> Approved; included in the PHA's Homeownership Plan/Program <input type="checkbox"/> Submitted, pending approval <input type="checkbox"/> Planned application
4. Date Homeownership Plan/Program approved, submitted, or planned for submission: (06/01/2000) Approved: <u>10/31/2001</u>
5. Number of units affected: 2 6. Coverage of action: (select one) Total Development

<b>Public Housing Homeownership Activity Description (Complete one for each development affected)</b>
1a. Development name: DeWitt Family 1b. Development (project) number: A126 -027
2. Federal Program authority: <input type="checkbox"/> HOPEI <input checked="" type="checkbox"/> 5(h) <input type="checkbox"/> Turnkey III <input type="checkbox"/> Section 32 of the USHA of 1937 (effective 10/1/99)
3. Application status: (select one) <input checked="" type="checkbox"/> Approved; included in the PHA's Homeownership Plan/Program <input type="checkbox"/> Submitted, pending approval <input type="checkbox"/> Planned application
4. Date Homeownership Plan/Program approved, submitted, or planned for submission: (06/01/2000) Approved: <u>10/31/2001</u>
5. Number of units affected: 6 6. Coverage of action: (select one) Part of Development

## B. Section 8 Tenant Based Assistance

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

### 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 - Attachment E

[24 CFR Part 903.79(1)]

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

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

#### 1. Cooperative agreements:

- Yes  No: Has the PHA entered into a cooperative agreement with the TANF Agency, to share information and/or target supportive

services(ascontemplatedbysection12(d)(7)oftheHousingAct of1937)?

Ifyes,whatwasthedatethatagreemen twassigned? DD/MM/YY

2.OthercoordinationeffortsbetweenthePHAandTANFagency(selectallthat apply)

- Clientreferrals
- Informationsharingregardingmutualclients(forrentdeterminationsand otherwise)
- Coordinatetheprovisionofspecificsocialandsel -sufficiencyservicesand programstoeligiblefamilies
- Jointlyadministerprograms
- PartnertoadministeraHUDWelfare -to-Workvoucherprogram
- Jointadministrationofotherdemonstrationprogram
- Other(describe)establishedacommutyservicecommittee

**B. Servicesandprogramsofferedtoresidentsandparticipants**

**(1)General**

a.Self -SufficiencyPolicies

Which,if anyofthefollowingdiscretionarypolicieswillthePHAemployto enhancetheeconomicandsocialsel -sufficiencyofassistedfamiliesinthe followingareas?(selectallthatapply)

- Publichousingrentdeterminationpolicies
- Publichousingadmissionspolicies
- Section8admissionspolicies
- Preferenceinadmissiontosection8forcertainpublichousingfamilies
- Preferencesforfamiliesworkingorengagingintraini ngoreducation programsfornon -housingprogramsoperatedorcoordinatedbythe PHA
- Preference/eligibilityforpublichousinghomeownershipoption participation
- Preference/eligibilityforsection8homeownershipoption participation
- Otherpolicies(listbelow)

b.EconomicandSocialsel -sufficiencyprograms

- Yes  No: DoesthePHAcoordinate,promoteorprovideany programstoenhancetheeconomicandsocialsel - sufficiencyofresidents?(If“yes”,completethefollowing table;if“no”skiptosub -component2,FamilySelf SufficiencyPrograms.Thepositionofthetablemaybe alteredtofacilitateitsuse.)

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

a. Participation Description

Family Self Sufficiency (FSS) Participation		
Program	Required Number of Participants (start of FY2001 Estimate)	Actual Number of Participants (As of: 12/31/01)
Public Housing	29	17
Section 8	46	45

- 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 plan to take to achieve at least the minimum program size?  
If no, list steps the PHA will take below:

**C. Welfare Benefit Reductions**

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

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

**D. Reserved for Community Service Requirement pursuant to section 12(c) of the U.S. Housing Act of 1937 – See Attachment D for a summary of Community Service Requirement Recission.**

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

[24 CFR Part 903.79(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.

The Eastern Iowa Regional Housing Authority is not experiencing safety or crime related issues in its housing programs. However, EIRHA has contacted the local police, sheriff and fire departments to notify us immediately should there be crime related calls to an EIRHA owned housing unit. EIRHA has an established working relationship with the local law enforcement offices. A safety and crime related call log is being maintained at our office to track such calls with a copy of the police or sheriff reports.

**14. RESERVED FOR PET POLICY**

[24CFR Part 903.79(n)]

The Eastern Iowa Regional Housing Authority has adopted pet policies permitting public housing residents to own pets according to the new regulations, 24CFR Part 960, Subpart G. Attachment F summarizes the policy.

**15. Civil Rights Certifications**

[24CFR Part 903.79(o)]

The Eastern Iowa Regional Housing Authority will carry out its plan in compliance with all applicable civil rights requirements and will affirmatively further fair housing. Fair Housing Certifications were resubmitted and approved to HUD as part of our five year plan.

**16. Fiscal Audit**

[24CFR Part 903.79(p)]

1.  Yes  No: Is the PHA required to have an audit conducted under section 5(h)(2) of the U.S. Housing Act of 1937 (42 U.S.C. 1437c(h))? (If no, skip to component 17.)
2.  Yes  No: Was the most recent fiscal audit submitted to HUD?
3.  Yes  No: Were there any findings as the result of that audit?
4.  Yes  No: If there were any findings, do any remain unresolved? N/A  
If yes, how many unresolved findings remain? \_\_\_\_\_
5.  Yes  No: Have responses to any unresolved findings been submitted to HUD? N/A  
If not, when are they due (state below)?

## **17. PHA Asset Management**

[24CFR Part 903.79(q)]

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

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

## **18. Other Information**

[24CFR Part 903.79(r)]

Resident Membership on the Governing Board – See Attachment G

### **Resident Advisory Board Recommendations**

1.  Yes  No: Did the PHA receive any comments on the PHA Plan from the Resident Advisory Board/s?

Resident Advisory Board – See Attachment H

### **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 Iowa
  
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)

- ThePHAhasbaseditsstatementofneedsoffamiliesinthejurisdictiononthe needsexpressedintheConsolidatedPlan/s.
- ThePHAhasparticipatedinanyconsultationprocessorganizedandofferedby theConsolidatedPlanagencyinthedevelopmentoftheConsolidatedPlan.
- ThePHAhasconsultedwiththeConsolidatedPlanagencyduringthe developmentofthisPHAPlan.
- ActivitiestobeundertakenbythePHAinthecomingyearareconsistentwith theinitiativescontainedintheConsolidatedPlan.(listbelow)
- Other:(listbelow)

4.TheConsolidatedPlanofthejurisdictionssupportsthePHA Planwiththefollowing actionsandcommitments:(describebelow)

**D.OtherInformationRequiredbyHUD**

UsethissectiontoprovideanyadditionalinformationrequestedbyHUD.

**BriefStatementofProgressInMeetingthe5 -YearPlanMissionand Goals –SeeAttachmentI**

**ATTACHMENT A  
DECONCENTRATION AND INCOME MIXING**

**Component 3, (6) Deconcentration and Income Mixing**

- a.  Yes  No: Does the PHA have any general occupancy (family) public housing developments covered by the deconcentration rule? If no, this section is complete. If yes, continue to the next question.
- b.  Yes  No: Do any of these covered developments have average incomes above or below 85% to 115% of the average incomes of all such developments? If no, this section is complete.

If yes, list these developments as follows:

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

# PHA Plan – ATTACHMENT B Table Library

## Component 7 Capital Fund Program Annual Statement Parts I, II, and III

**Eastern Iowa Regional Housing Authority**  
**Annual Statement – Capital Fund Program – FY2002 – Projected Budget**  
**Capital Fund Program (CFP) Part I: Summary**

Capital Fund Grant Number \_\_\_\_\_ FFY of Grant Approval: (2002)

Original Annual Statement – FY2002 Capital Fund Program

Line No.	Summary by Development Account	Total Estimated Cost
1	Total Non - CGP Funds	
2	1406 Operations	<b>\$80,000.00</b>
3	1408 Management Improvements	<b>\$100,000.00</b>
4	1410 Administration	<b>\$10,000.00</b>
5	1411 Audit	
6	1415 Liquidated Damages	
7	1430 Fees and Costs	<b>\$20,000.00</b>
8	1440 Site Acquisition	
9	1450 Site Improvement	
10	1460 Dwelling Structures	<b>\$76,700.00</b>
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	<b>Amount of Annual Grant (Sum of lines 2 - 19)</b>	<b>\$286,700.00</b>
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 –FY2002 Capital Fund –Original Budget Submission  
Capital Fund Program(CFP) Part II: Supporting Table**

Development Number/Name HA-Wide Activities	General Description of Major Work Categories	Development Account Number	Total Estimated Cost
HA-Wide	Operations	1406	\$80,000.00
HA-Wide	Administration	1410	\$10,000.00
HA-Wide	Spec Writing and Inspections	1430	\$20,000.00
HA-Wide	Management Improvements Relocation of EIRHA Administrative Offices to a more convenient and accessible location for our residents/clients	1408	\$100,000.00
126-007B	Replace concrete	1460	\$2,500.00
126-009	Replace kitchen cabinets and flooring.	1460	\$46,400.00
126-007C	Replace kitchen cabinets and flooring	1460	\$12,400.00
126-007M	Replace windows and air conditioning units	1460	\$15,400.00
	<b>TOTAL 2002 Capital Fund Budget</b>		<b>\$286,700.00</b>

**Annual Statement –FY2002 Capital Fund –Original Budget Submission  
Capital Fund Program (CFP) Part II: Supporting Table**

Development Number/Name HA-Wide Activities	General Description of Major Work Categories	Development Account Number	Total Estimated Cost

**ATTACHMENT C – CAPITAL FUND PROGRAM  
ANNUAL PERFORMANCE AND EVALUATION REPORT  
FY 2000-2005**

**SEPARATE FILE – FILENAME(ia126a02)**

## ATTACHMENT D – HOMEOWNERSHIP PLAN

This plan was submitted with our Five -Year Plan. Our Homeownership Plan has not changed since the original submission with the Five -Year Plan. We received approval of the Homeownership Plan from the Chicago HUD Office on October 31, 2001. All residents have been notified of the program. Currently six Public Housing residents have expressed interest in purchasing their Public Housing unit by requesting a program application. The Family/Elderly Self -Sufficiency Coordinator has been sent to training to better prepare for administering the homeownership program and counseling the participating households.

EIRHA is also considering setting aside \$50,000 of its Section 8 Operating Reserve to initiate an additional Homeownership component in the community of Asbury where there are no existing Public Housing units to sell. The funds will be set aside out of the Section 8 Operating Reserve account to establish a revolving loan fund to further low income homeownership opportunities.

**ATTACHMENT E –IMPLEMENTATION OF PUBLIC HOUSING  
RESIDENT COMMUNITY SERVICE REQUIREMENT**

As of January 1, 2002, Public Housing residents are not required to perform Community Service in adherence to Section 12 of the United States Housing Act of 1937. We have notified all residents, in writing, of this change and suspended our Community Service requirements.

## **ATTACHMENT F –PETPOLICY**

Pursuant to 24 CFR part 960 Subpart G, Pet Ownership in Public Housing, effective the date of approval of the Annual Plan, EIRHA adopted a pet policy for residents of public housing with the FY2002 Annual Plan. The policy is consistent with the issuance of regulations issued by the Department of Housing and Urban Development as they pertain to the residents of EIRHA's public housing general occupancy family developments.

EIRHA adopted reasonable requirements for pet ownership. The policy was submitted with the FY2002 Annual Plan.

**ATTACHMENTG –RESIDENTMEMBERSHIP  
OFGOVERNINGBOARD**

AsrequiredintheHUDregulationsissuedOctober21,1999,  
EIRHAhas two residents as members of our Board of Directors.  
Residents were notified of this requirement and asked to volunteer their  
time and services. Interested residents were required to contact their local  
city clerk to be appointed to the Board. The City they reside in then made  
the appointment to the Board. The resident Board members are as  
follows:

Donald Canty, Director/Commissioner  
208 Sycamore #7; P.O. Box 395  
Sabula, IA 52070  
Term 4/02 – 4/2004

Keith Van Pelt, Director/Commissioner  
626 13<sup>th</sup> St., #108  
De Witt, Iowa 52742  
Term 10/00 – 10/2002

Terms are renewed by the City at the time of expiration or if the  
term is not renewed, the City will appoint a new resident  
commissioner/director to the Board.

**ATTACHMENTH –RESIDENTADVISORY  
BOARDMEMBERSHIP**

EIRHA’sResid entAdvisoryBoardconsistsoffourmembersthat adequatelyreflectandrepresenttheresidentsassistedbyEIRHA.The ResidentAdvisoryBoardmembersareasfollows:

LoriO’Meara  
5123<sup>rd</sup>St.,NW  
Dyersville,Iowa52040

NeolaZehr  
420S.Tama  
Manchester,Iowa52057

DonaldCanty  
208Sycamore#7,P.O.Box395  
Sabula,IA52070

KeithVanPelt  
62613<sup>th</sup>St.,#108  
DeWitt,Iowa52742

## **ATTACHMENT I – PROGRESS STATEMENT IN MEETING FIVE-YEAR PLAN MISSION AND GOALS**

Below are EIRHA's goals in the Five -Year Plan with a brief progress statement outlining the progress we have made in reaching those goals over the past year.

**Goal One – Increase the availability of decent, safe and affordable housing. Objectives included expanding the supply of assisted housing through reducing public housing vacancies; improving the quality of assisted housing through improving public housing management, voucher management, and renovating public housing units; and increase assisted housing choices through implementing homeownership programs.**

During this past year, the second year of our Five -Year Plan, EIRHA has been concentrating on marketing and improving unit turn around time. We have maintained lease -up in public housing at 96% or above. After receiving our PHA score, we examined some of our management procedures. Based on this review for July 1, 2001, EIRHA hired two staff full -time maintenance managers instead of the existing contract maintenance. EIRHA converted (2) one bedroom apartment to (1) two bedroom resident manager apartment. This has improved both unit turn around time as well as our work order system. Our FY2000 and FY2001 CFP budgets were reviewed and amended to reflect this change in maintenance management. Funds were shifted to accommodate initial investments to hire on staff maintenance and complete the conversion. Revised/amended Board approved budgets were submitted to HUD for approval. These changes were ran by our tenants and a public hearing was held prior to submitting to HUD.

EIRHA's homeownership plan received approval from HUD on October 31, 2001. EIRHA is proposing to sell 4 single family public housing units per year for the next five years. We have notified the residents of the program and have sent the Family/Elderly Self -Sufficiency coordinator to training.

## **ATTACHMENT I –Continued**

**Goal Two –Promoteself -sufficiencyandassetdevelopmentof familiesandindividuals.Objectivesincludedincreasingthenumber andpercentageofemployedpersonsinassistedfamilies;provideor attractsupportiveservicestoimproveassistancerecipients’ employability.**

EIRHAhasasuccessfulFamilySelf -Sufficiencyprogramwith62active participantsof74currentslots.Afull -timeSelf -Sufficiencycoordinator workswithhouseholdsinachievingself -sufficiencyandrecruiting additionalhouseholdsfortheprogram.Ofthe62participants,52%have anactiveescrowaccount.TheFSSCoordinatorhasalsoestablisheda CommunityServiceCommittee,whichshechairs,tocoordinate communityservice activitieswithlocalhospitals,socialservice organizations,schools,nursinghomes,etc.Thisisanotheroutletfor employmentopportunitiesforthehousingresidents.

EIRHAhasrecentlyreceivedboardapprovalforthe coordinatortoassist theelderlypopulationaswell.Thegoalistoprovidesocialactivities, promoteindependence,andemotionalsupportfortheelderlypopulation.




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