

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

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Small PHA Plan Update  
Annual Plan for Fiscal Year: **2002**

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

## PHA Plan Agency Identification

**PHA Name:** New Castle Housing Authority

**PHA Number:** IN050

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

### PHA Plan Contact Information:

Name: Jerry W. Cash

Phone: 765/529-1517

TDD: 765/521-3101

Email (if available): jerry@sui.net

### Public Access to Information

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

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

### Display Locations For PHA Plans and Supporting Documents

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

- Main administrative office of the PHA
- PHA development management offices
- Main administrative office of the local, county or State government
- Public library
- PHA website
- Other (list below)  
New Castle HA Section 8 Offices  
720 So. 15<sup>th</sup> Street  
New Castle, IN 47362

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

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

### PHA Programs Administered

Public Housing and Section 8

Section 8 Only

Public Housing Only

## Annual PHA Plan Fiscal Year 2002

[24 CFR Part 903.7]

### i. Table of Contents

Provide a table of contents for the Plan, including attachments, and a list of supporting documents available for public inspection. For Attachments, indicate which attachments are provided by selecting all that apply. Provide the attachment's name (A, B, etc.) in the space to the left of the name of the attachment. If the attachment is provided as a **SEPARATE** file submission from the PHA Plans file, provide the file name in parentheses in the space to the right of the title.

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<input checked="" type="checkbox"/> Other (List below, providing each attachment name)	
Attachment <u>F</u> : Resident Community Service Requirement	
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## **ii. Executive Summary**

[24 CFR Part 903.7 9 (r)]

At PHA option, provide a brief overview of the information in the Annual Plan

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

In this section, briefly describe changes in policies or programs discussed in last year's PHA Plan that are not covered in other sections of this Update.

- 1) Suspension of Voluntary Family Self-Sufficiency Program – Due to problems of recruitment of clients and administrative staffing limitations in both the Public Housing and Section 8 Programs, the Housing Authority will indefinitely suspend the voluntary Family Self-Sufficiency Program. In stead, the Housing Authority will increase utilization of education, training, and counseling services which are readily available in the local community by referral.
- 2) Intent to increase Section 8 Voucher utilization by seeking authorization to issue all 274 base-line Vouchers – At the first opportunity to do so, the Section 8 Voucher Program will see HUD approval to fully fund and utilize all available Section Vouchers, including those base-line units which are currently not in use due to inadequate budget authority.
- 3) Intent to submit for Low-Income Housing Tax Credit Application – The Housing Authority, in cooperation with the administration of the City of New Castle, will undertake a project to convert the historical Wittenbraker YMCA building into an elderly/disabled apartment facility. The application will require the formation of a not-for-profit organization to apply for Low Income Housing Tax Credits via the Indiana Housing Finance Authority.
- 4) Decision to suspend indefinitely the Resident Community Service Requirement – Since Congress will suspend the Resident Community Service Requirement for public housing tenants as part of the federal fiscal year 2002 budget authorization, the Housing Authority elects to discontinue this activity effective immediately.
- 5) Resident Advisory Board decision on acceptable uses of Resident Initiative Funding – In consultation with the Resident Advisory Board, the Housing Authority has identified a list of items which are acceptable expenditures for the supplemental Resident Initiatives Funding received in connection with the Housing Authority's operating subsidy for the fiscal year ending June 30, 2002.
- 6) Revision to Agency Personnel Policy - The Board of Commissioners have adopted changes in the Agency Personnel Policy with regard to Accumulation of Earned Vacation Leave.
- 7) Revision to Admissions & Continued Occupancy Policy (ACOP) - Updates to the ACOP reflecting changes in HUD Rules & Regulations will be implemented as well as certain PHA policy updates, such as policies regulating Portable Swimming/Wading Pools in Housing Authority properties and Day Care Centers in Housing Authority Owned Units.

- 8) Revisions to Dwelling Lease – The Dwelling Lease will be updated to reflect changes in the ACOP.
- 9) Increase in Flat Rent Schedules – As provided in the ACOP, the established formula for calculating Flat Rent Rates will updated to reflect increases in the most recent Fair Market Rent schedule for Henry County. The resulting rent increases will be effective with the effective date of each affected tenant’s annual re-exam following the start of the new fiscal year which begins July 1, 2002.

**2. Capital Improvement Needs**

[24 CFR Part 903.7 9 (g)]

Exemptions: Section 8 only PHAs are not required to complete this component.

A.  Yes  No: Is the PHA eligible to participate in the CFP in the fiscal year covered by this PHA Plan?

B. What is the amount of the PHA’s estimated or actual (if known) Capital Fund Program grant for the upcoming year? \$ 250,411 (Estimated award based on FFY 2001 Award)

C.  Yes  No Does the PHA plan to participate in the Capital Fund Program in the upcoming year? If yes, complete the rest of Component 7. If no, skip to next component.

D. Capital Fund Program Grant Submissions

**(1) Capital Fund Program 5-Year Action Plan**

The Capital Fund Program 5-Year Action Plan is not included as an attachment.

**(2) Capital Fund Program Annual Statement**

The Capital Fund Program Annual Statement is provided as Attachment B.

**3. Demolition and Disposition**

[24 CFR Part 903.7 9 (h)]

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

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

2. Activity Description

**Demolition/Disposition Activity Description**  
**(Not including Activities Associated with HOPE VI or Conversion Activities)**



**5. Safety and Crime Prevention: PHDEP Plan**

[24 CFR Part 903.7 (m)]

Exemptions Section 8 Only PHAs may skip to the next component PHAs eligible for PHDEP funds must provide a PHDEP Plan meeting specified requirements prior to receipt of PHDEP funds.

A.  Yes  No: Is the PHA eligible to participate in the PHDEP in the fiscal year covered by this PHA Plan?

B. What is the amount of the PHA’s estimated or actual (if known) PHDEP grant for the upcoming year? \$ \_\_\_\_\_

C.  Yes  No Does the PHA plan to participate in the PHDEP in the upcoming year? If yes, answer question D. If no, skip to next component.

D.  Yes  No: The PHDEP Plan is attached at Attachment \_\_\_\_\_

**6. Other Information**

[24 CFR Part 903.7 9 (r)]

**B. Resident Advisory Board (RAB) Recommendations and PHA Response**

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

2. If yes, the comments are Attached at Attachment (File name) F.

3. In what manner did the PHA address those comments? (select all that apply)

The PHA changed portions of the PHA Plan in response to comments  
A list of these changes is included

Yes  No: below or

Yes  No: at the end of the RAB Comments in Attachment F.\_\_\_\_

Considered comments, but determined that no changes to the PHA Plan were necessary. An explanation of the PHA’s consideration is included at the at the end of the RAB Comments in Attachment \_\_\_\_\_.

Other: (list below)

The Plan Update was formulated as cooperative effort of HA Administration and the Resident Advisory Board (RAB). Accordingly, the RAB had direct input in the Policy and Program changes summarized in Section 1 above.

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

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

1. Consolidated Plan jurisdiction: (provide name here) State of Indiana

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

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

3. PHA Requests for support from the Consolidated Plan Agency

Yes  No: Does the PHA request financial or other support from the State or local government agency in order to meet the needs of its public housing residents or inventory? If yes, please list the 5 most important requests below:

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

**C. Criteria for Substantial Deviation and Significant Amendments**

**1. Amendment and Deviation Definitions**

24 CFR Part 903.7(r)

PHAs are required to define and adopt their own standards of substantial deviation from the 5-year Plan and Significant Amendment to the Annual Plan. The definition of significant amendment is important because it defines when the PHA will subject a change to the policies or activities described in the Annual Plan to full public hearing and HUD review before implementation.

**A. Substantial Deviation from the 5-year Plan:** A Substantial Deviation from the 5 Year Plan is defined by the Housing Authority as a substantive change in the Mission Statement of the Agency and/or

the addition, elimination, or substantial revision of one or more of the Goals as originally adopted in the 5 Year Plan and/or subsequent Annual Plan Updates.

**B. Significant Amendment or Modification to the Annual Plan:** A Significant Amendment or Modification to the Annual Plan is defined by the Housing Authority as a substantive revision to the Administrative Policies of the Housing Authority, including the Public Housing Admissions and Continued Occupancy Policy, the Public Housing Rent Determination Policy, and the Section 8 Administrative Plan. However, the adoption or incorporation into existing Policy of non-discretionary policy changes to reflect mandatory change in program rules and regulations enacted by Congress or as required by HUD are not considered to be a Significant Amendment unless they include the adoption of other discretionary policy.

## Attachment A

### Supporting Documents Available for Review

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

<b>List of Supporting Documents Available for Review</b>		
<b>Applicable &amp; On Display</b>	<b>Supporting Document</b>	<b>Related Plan Component</b>
X	PHA Plan Certifications of Compliance with the PHA Plans and Related Regulations	5 Year and Annual Plans
X	State/Local Government Certification of Consistency with the Consolidated Plan (not required for this update)	5 Year and Annual Plans
X	Fair Housing Documentation Supporting Fair Housing Certifications: Records reflecting that the PHA has examined its programs or proposed programs, identified any impediments to fair housing choice in those programs, addressed or is addressing those impediments in a reasonable fashion in view of the resources available, and worked or is working with local jurisdictions to implement any of the jurisdictions’ initiatives to affirmatively further fair housing that require the PHA’s involvement.	5 Year and Annual Plans
X	Housing Needs Statement of the Consolidated Plan for the jurisdiction/s in which the PHA is located and any additional backup data to support statement of housing needs in the jurisdiction	Annual Plan: Housing Needs
X	Most recent board-approved operating budget for the public housing program	Annual Plan: Financial Resources
X	Public Housing Admissions and (Continued) Occupancy Policy (A&O/ACOP), which includes the Tenant Selection and Assignment Plan [TSAP]	Annual Plan: Eligibility, Selection, and Admissions Policies
X	Any policy governing occupancy of Police Officers in Public Housing <input checked="" type="checkbox"/> check here if included in the public housing A&O Policy	Annual Plan: Eligibility, Selection, and Admissions Policies
X	Section 8 Administrative Plan	Annual Plan: Eligibility, Selection, and Admissions Policies
X	Public housing rent determination policies, including the method for setting public housing flat rents <input checked="" type="checkbox"/> check here if included in the public housing A & O Policy	Annual Plan: Rent Determination
X	Schedule of flat rents offered at each public housing development <input checked="" type="checkbox"/> check here if included in the public housing A & O Policy	Annual Plan: Rent Determination

<b>List of Supporting Documents Available for Review</b>		
<b>Applicable &amp; On Display</b>	<b>Supporting Document</b>	<b>Related Plan Component</b>
X	Section 8 rent determination (payment standard) policies <input checked="" type="checkbox"/> check here if included in Section 8 Administrative Plan	Annual Plan: Rent Determination
X	Public housing management and maintenance policy documents, including policies for the prevention or eradication of pest infestation (including cockroach infestation)	Annual Plan: Operations and Maintenance
X	Results of latest binding Public Housing Assessment System (PHAS) Assessment	Annual Plan: Management and Operations
N/A	Follow-up Plan to Results of the PHAS Resident Satisfaction Survey (if necessary)	Annual Plan: Operations and Maintenance and Community Service & Self-Sufficiency
X	Results of latest Section 8 Management Assessment System (SEMAP)	Annual Plan: Management and Operations
N/A	Any required policies governing any Section 8 special housing types <input type="checkbox"/> check here if included in Section 8 Administrative Plan	Annual Plan: Operations and Maintenance
X	Public housing grievance procedures <input checked="" type="checkbox"/> check here if included in the public housing A & O Policy	Annual Plan: Grievance Procedures
X	Section 8 informal review and hearing procedures <input checked="" type="checkbox"/> check here if included in Section 8 Administrative Plan	Annual Plan: Grievance Procedures
X	The HUD-approved Capital Fund/Comprehensive Grant Program Annual Statement (HUD 52837) for any active grant year	Annual Plan: Capital Needs
X	Most recent CIAP Budget/Progress Report (HUD 52825) for any active CIAP grants	Annual Plan: Capital Needs
N/A	Approved HOPE VI applications or, if more recent, approved or submitted HOPE VI Revitalization Plans, or any other approved proposal for development of public housing	Annual Plan: Capital Needs
X	Self-evaluation, Needs Assessment and Transition Plan required by regulations implementing §504 of the Rehabilitation Act and the Americans with Disabilities Act. See, PIH 99-52 (HA).	Annual Plan: Capital Needs
N/A	Approved or submitted applications for demolition and/or disposition of public housing	Annual Plan: Demolition and Disposition
N/A	Approved or submitted applications for designation of public housing (Designated Housing Plans)	Annual Plan: Designation of Public Housing

<b>List of Supporting Documents Available for Review</b>		
<b>Applicable &amp; On Display</b>	<b>Supporting Document</b>	<b>Related Plan Component</b>
N/A	Approved or submitted assessments of reasonable revitalization of public housing and approved or submitted conversion plans prepared pursuant to section 202 of the 1996 HUD Appropriations Act, Section 22 of the US Housing Act of 1937, or Section 33 of the US Housing Act of 1937	Annual Plan: Conversion of Public Housing
N/A	Approved or submitted public housing homeownership programs/plans	Annual Plan: Homeownership
N/A	Policies governing any Section 8 Homeownership program (section _____ of the Section 8 Administrative Plan)	Annual Plan: Homeownership
X	Cooperation agreement between the PHA and the TANF agency and between the PHA and local employment and training service agencies	Annual Plan: Community Service & Self-Sufficiency
N/A	FSS Action Plan/s for public housing and/or Section 8	Annual Plan: Community Service & Self-Sufficiency
X	Section 3 documentation required by 24 CFR Part 135, Subpart E	Annual Plan: Community Service & Self-Sufficiency
N/A	Most recent self-sufficiency (ED/SS, TOP or ROSS or other resident services grant) grant program reports	Annual Plan: Community Service & Self-Sufficiency
N/A	The most recent Public Housing Drug Elimination Program (PHDEP) semi-annual performance report	Annual Plan: Safety and Crime Prevention
N/A	PHDEP-related documentation: <ul style="list-style-type: none"> <li>·? Baseline law enforcement services for public housing developments assisted under the PHDEP plan;</li> <li>·? Consortium agreement/s between the PHAs participating in the consortium and a copy of the payment agreement between the consortium and HUD (applicable only to PHAs participating in a consortium as specified under 24 CFR 761.15);</li> <li>·? Partnership agreements (indicating specific leveraged support) with agencies/organizations providing funding, services or other in-kind resources for PHDEP-funded activities;</li> <li>·? Coordination with other law enforcement efforts;</li> <li>·? Written agreement(s) with local law enforcement agencies (receiving any PHDEP funds); and</li> <li>·? All crime statistics and other relevant data (including Part I and specified Part II crimes) that establish need for the public housing sites assisted under the PHDEP Plan.</li> </ul>	Annual Plan: Safety and Crime Prevention
X	Policy on Ownership of Pets in Public Housing Family Developments (as required by regulation at 24 CFR Part 960, Subpart G) <input checked="" type="checkbox"/> check here if included in the public housing A & O Policy	Pet Policy

<b>List of Supporting Documents Available for Review</b>		
<b>Applicable &amp; On Display</b>	<b>Supporting Document</b>	<b>Related Plan Component</b>
X	The results of the most recent fiscal year audit of the PHA conducted under section 5(h)(2) of the U.S. Housing Act of 1937 (42 U. S.C. 1437c(h)), the results of that audit and the PHA's response to any findings	Annual Plan: Annual Audit
	Troubled PHAs: MOA/Recovery Plan	Troubled PHAs
X	Other supporting documents (optional) (list individually; use as many lines as necessary)  <u>Voluntary Conversion of Public Housing to Tenant-Based Assistance</u> – Required Initial Assessment – Certification of Results	(specify as needed)  10 (b)

<b>Annual Statement/Performance and Evaluation Report</b>					
<b>Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary</b>					
<b>PHA Name:</b> New Castle Housing Authority		<b>Grant Type and Number</b> Capital Fund Program: IN36P05050100 Capital Fund Program Replacement Housing Factor Grant No:		<b>Federal FY of Grant:</b> 2000	
<input type="checkbox"/> <b>Original Annual Statement</b>		<input type="checkbox"/> <b>Reserve for Disasters/ Emergencies</b> <input checked="" type="checkbox"/> <b>Revised Annual Statement (revision no: 3)</b>			
<input type="checkbox"/> <b>Performance and Evaluation Report for Period Ending:</b>		<input type="checkbox"/> <b>Final Performance and Evaluation Report</b>			
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations	25,000	25,000		
3	1408 Management Improvements				
4	1410 Administration				
5	1411 Audit				
6	1415 liquidated Damages				
7	1430 Fees and Costs	15,000	13,837		
8	1440 Site Acquisition				
9	1450 Site Improvement	26,761	27,990		
10	1460 Dwelling Structures	148,167	148,167		
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Nondwelling Structures	27,357	27,357		
13	1475 Nondwelling Equipment	3,200	3,134		
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)	245,845	245,845		
21	Amount of line 20 Related to LBP Activities				

<b>Annual Statement/Performance and Evaluation Report</b> <b>Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary</b>					
PHA Name: New Castle Housing Authority		<b>Grant Type and Number</b> Capital Fund Program: IN36P05050100 Capital Fund Program Replacement Housing Factor Grant No:		<b>Federal FY of Grant:</b> 2000	
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input checked="" type="checkbox"/> Revised Annual Statement (revision no: 3) <input type="checkbox"/> Performance and Evaluation Report for Period Ending: <input type="checkbox"/> Final Performance and Evaluation Report					
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
22	Amount of line 20 Related to Section 504 Compliance	10,450	10,450		
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/CFPRHF)**  
**Part II: Supporting Pages**

PHA Name: New Castle Housing Authority		Grant Type and Number Capital Fund Program #: IN36P05050100 Capital Fund Program Replacement Housing Factor #:			Federal FY of Grant: 2000			
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work
				Original	Revised	Funds Obligated	Funds Expended	
HA Wide	Operations	1406		25,000	25,000			
HA Wide	A & E Services	1430		15,000	13,837			
IN 50-2	Demolish & replace walks/patios	1450		26,761	27,990			
IN 50-2	Demolish & replace privacy screens	1460		18,239	18,239			
IN 50-1	Renovate front foyer area	1460		10,280	10,280			
IN 50-2	Continue window/door replacements	1460		112,148	112,148			
IN 50-1	Renovate public restrooms for ADA	1460		7,500	7,500			
IN 50-2	Renovate Playgroud Equipment	1470		27,357	27,357			
IN 50-1	Equipment/furnishings for lobby	1475		3,200	3,134			



**Annual Statement/Performance and Evaluation Report**  
**Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary**

<b>PHA Name:</b> New Castle Housing Authority	<b>Grant Type and Number</b> Capital Fund Program: IN36P05050100 Capital Fund Program Replacement Housing Factor Grant No:	<b>Federal FY of Grant:</b> 2000
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Original Annual Statement       Reserve for Disasters/ Emergencies       Revised Annual Statement (revision no: )  
 Performance and Evaluation Report for Period Ending: 12/31/01      Annual Performance and Evaluation Report

Line No.	Summary by Development Account	Total Estimated Cost/		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations	25,000		25,000	25,000
3	1408 Management Improvements				
4	1410 Administration				
5	1411 Audit				
6	1415 liquidated Damages				
7	1430 Fees and Costs	15,000		13,633	13,615
8	1440 Site Acquisition				
9	1450 Site Improvement	26,761		26,761	26,761
10	1460 Dwelling Structures	148,167		148,167	148,185
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Nondwelling Structures	27,357		27,357	27,357
13	1475 Nondwelling Equipment	3,200		3,134	3,134
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)	245,845		245,845	245,845

<b>Annual Statement/Performance and Evaluation Report</b> <b>Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary</b>						
PHA Name: New Castle Housing Authority		<b>Grant Type and Number</b> Capital Fund Program: IN36P05050100 Capital Fund Program Replacement Housing Factor Grant No:			<b>Federal FY of Grant:</b> 2000	
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input type="checkbox"/> Revised Annual Statement (revision no: )						
<input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 12/31/01                       Annual Performance and Evaluation Report						
Line No.	Summary by Development Account	Total Estimated Cost/		Total Actual Cost		
21	Amount of line 20 Related to LBP Activities					
22	Amount of line 20 Related to Section 504 Compliance	10,450		10,450	10,450	
23	Amount of line 20 Related to Security					
24	Amount of line 20 Related to Energy Conservation Measures					

<b>Annual Statement/Performance and Evaluation Report</b> <b>Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)</b> <b>Part II: Supporting Pages</b>								
PHA Name: New Castle Housing Authority			<b>Grant Type and Number</b> Capital Fund Program #: IN36P05050100 Capital Fund Program Replacement Housing Factor #:			Federal FY of Grant: 2000		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work
				Original	Revised	Funds Obligated	Funds Expended	
HA Wide	Operations	1406		25,000		25,000	25,000	Complete
HA Wide	A & E Services	1430		15,000		13,633	13,615	Complete
IN 50-2	Demolish & replace walks/patios	1450		26,761		26,761	26,761	Pending Completion
IN 50-2	Demolish & replace privacy screens	1460		18,239		18,239	18,239	Complete
IN 50-1	Renovate front foyer area	1460		10,280		10,280	10,280	Complete
IN 50-2	Continue window/door replacements	1460		112,148		112,148	112,148	Complete
IN 50-1	Renovate public restrooms for ADA	1460		7,500		7,500	7,500	Complete
IN 50-2	Renovate Playgroud Equipment	1470		27,357		27,357	27,357	Complete
IN 50-1	Equipment/furnishings for lobby	1475		3,200		3,134	3,134	Complete





<b>Annual Statement/Performance and Evaluation Report</b>					
<b>Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary</b>					
<b>PHA Name:</b> New Castle Housing Authority		<b>Grant Type and Number</b> Capital Fund Program: IN36P05050101 Capital Fund Program Replacement Housing Factor Grant No:		<b>Federal FY of Grant:</b> 2001	
<input type="checkbox"/> <b>Original Annual Statement</b> <input type="checkbox"/> <b>Reserve for Disasters/ Emergencies</b> <input type="checkbox"/> <b>Revised Annual Statement (revision no:    )</b> <input checked="" type="checkbox"/> <b>Performance and Evaluation Report for Period Ending: 12/31/01</b> <input type="checkbox"/> <b>Final Performance and Evaluation Report</b>					
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations	25,000		25,000	25,000
3	1408 Management Improvements				
4	1410 Administration				
5	1411 Audit				
6	1415 liquidated Damages				
7	1430 Fees and Costs	20,000		13,700	0
8	1440 Site Acquisition				
9	1450 Site Improvement	140,000		23,737	23,737
10	1460 Dwelling Structures	65,411		19,411	19,411
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)	250,411		81,848	68,148
21	Amount of line 20 Related to LBP Activities				

<b>Annual Statement/Performance and Evaluation Report</b> <b>Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary</b>						
PHA Name: New Castle Housing Authority		<b>Grant Type and Number</b> Capital Fund Program: IN36P05050101 Capital Fund Program Replacement Housing Factor Grant No:			<b>Federal FY of Grant:</b> 2001	
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:    )						
<input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 12/31/01 <input type="checkbox"/> Final Performance and Evaluation Report						
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost		
22	Amount of line 20 Related to Section 504 Compliance					
23	Amount of line 20 Related to Security	50,411				
24	Amount of line 20 Related to Energy Conservation Measures					



<b>Annual Statement/Performance and Evaluation Report</b> <b>Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)</b> <b>Part II: Supporting Pages</b>								
PHA Name: New Castle Housing Authority			<b>Grant Type and Number</b> Capital Fund Program #: IN36P05050101 Capital Fund Program Replacement Housing Factor #:			Federal FY of Grant: FFY 2001		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work
				Original	Revised	Funds Obligated	Funds Expended	

<b>Annual Statement/Performance and Evaluation Report</b> <b>Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)</b> <b>Part III: Implementation Schedule</b>							
PHA Name: New Castle Housing Authority		<b>Grant Type and Number</b> Capital Fund Program #: IN36P05050101 Capital Fund Program Replacement Housing Factor #:				Federal FY of Grant: FFY 2001	
Development Number Name/HA-Wide Activities	All Fund Obligated (Quart Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates
	Original	Revised	Actual	Original	Revised	Actual	
HA Wide	04/30/02			01/31/03			
IN 50-1	04/30/02			01/31/03			
IN 50-2	04/30/02			01/31/03			



<b>PHA Name:</b> New Castle Housing Authority		<b>Grant Type and Number</b> Capital Fund Program: IN36p05050102 Capital Fund Program Replacement Housing Factor Grant No:		<b>Federal FY of Grant:</b> FFY 2002	
<input checked="" type="checkbox"/> <b>Original Annual Statement</b>		<input type="checkbox"/> <b>Reserve for Disasters/ Emergencies</b> <input type="checkbox"/> <b>Revised Annual Statement (revision no: )</b>			
<input type="checkbox"/> <b>Performance and Evaluation Report for Period Ending:</b>		<input type="checkbox"/> <b>Final Performance and Evaluation Report</b>			
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations	27,500			
3	1408 Management Improvements				
4	1410 Administration				
5	1411 Audit				
6	1415 liquidated Damages				
7	1430 Fees and Costs	15,000			
8	1440 Site Acquisition				
9	1450 Site Improvement	172,500			
10	1460 Dwelling Structures	25,000			
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Nondwelling Structures				
13	1475 Nondwelling Equipment	10,411			
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)	250,411			
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 Compliance	16,605			
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/CFPRHF)**  
**Part II: Supporting Pages**

PHA Name: New Castle Housing Authority		Grant Type and Number Capital Fund Program #: IN36p05050102 Capital Fund Program Replacement Housing Factor #:			Federal FY of Grant: FFY 2002			
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work
				Original	Revised	Funds Obligated	Funds Expended	
HA Wide	Operations	1406		27,500				
HA Wide	A&E Services	1430		15,000				
IN 50-1	Phase 2 of Parking Lot repair/expansion and retainer walls	1450		55,000				
IN 50-2	Phase 2 of Sidewalk, Porch, Patio replacements	1450		117,500				
IN 50-1	Interior Hallway renovations/updates	1460		12,500				
IN 50-2	Replace selected decorative door trim	1460		5,000				
IN 50-2	Construct 2 furniture/appliance corrals	1460		7,500				
HA Wide	Replace/upgrade computer system hardware	1475		10,411				

<b>Annual Statement/Performance and Evaluation Report</b> <b>Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)</b> <b>Part II: Supporting Pages</b>								
PHA Name: New Castle Housing Authority			<b>Grant Type and Number</b> Capital Fund Program #: IN36p05050102 Capital Fund Program Replacement Housing Factor #:			Federal FY of Grant: FFY 2002		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work
				Original	Revised	Funds Obligated	Funds Expended	

<b>Annual Statement/Performance and Evaluation Report</b> <b>Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)</b> <b>Part III: Implementation Schedule</b>							
PHA Name: New Castle Housing Authority		<b>Grant Type and Number</b> Capital Fund Program #: IN36P05050102 Capital Fund Program Replacement Housing Factor #:				Federal FY of Grant: FFY 2002	
Development Number Name/HA-Wide Activities	All Fund Obligated (Quart Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates
	Original	Revised	Actual	Original	Revised	Actual	
HA Wide	06/30/03			06/30/04			
IN 50-1	06/30/03			06/30/04			
IN 50-2	06/30/03			06/30/04			





### 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		
<input type="checkbox"/> Original statement <input type="checkbox"/> Revised statement		
Development Number	Development Name (or indicate PHA wide)	
Description of Needed Physical Improvements or Management Improvements	Estimated Cost	Planned Start Date (HA Fiscal Year)
<b>Total estimated cost over next 5 years</b>		



## PHA Public Housing Drug Elimination Program Plan

**Note: THIS PHDEP Plan template (HUD 50075-PHDEP Plan) is to be completed in accordance with Instructions located in applicable PIH Notices.**

### Section 1: General Information/History

- A. Amount of PHDEP Grant \$ \_\_\_\_\_
- B. Eligibility type (Indicate with an "x") N1 \_\_\_\_\_ N2 \_\_\_\_\_ R \_\_\_\_\_
- C. FFY in which funding is requested \_\_\_\_\_
- D. **Executive Summary of Annual PHDEP Plan**

In the space below, provide a brief overview of the PHDEP Plan, including highlights of major initiatives or activities undertaken. It may include a description of the expected outcomes. The summary must not be more than five (5) sentences long

### **E. Target Areas**

Complete the following table by indicating each PHDEP Target Area (development or site where activities will be conducted), the total number of units in each PHDEP Target Area, and the total number of individuals expected to participate in PHDEP sponsored activities in each Target Area. Unit count information should be consistent with that available in PIC.

PHDEP Target Areas (Name of development(s) or site)	Total # of Units within the PHDEP Target Area(s)	Total Population to be Served within the PHDEP Target Area(s)

### **F. Duration of Program**

Indicate the duration (number of months funds will be required) of the PHDEP Program proposed under this Plan (place an "x" to indicate the length of program by # of months. For "Other", identify the # of months).

12 Months \_\_\_\_\_ 18 Months \_\_\_\_\_ 24 Months \_\_\_\_\_

**G. PHDEP Program History**

Indicate each FY that funding has been received under the PHDEP Program (place an “x” by each applicable Year) and provide amount of funding received. If previously funded programs have not been closed out at the time of this submission, indicate the fund balance and anticipated completion date. The Fund Balances should reflect the balance as of Date of Submission of the PHDEP Plan. The Grant Term End Date should include any HUD-approved extensions or waivers. For grant extensions received, place “GE” in column or “W” for waivers.

Fiscal Year of Funding	PHDEP Funding Received	Grant #	Fund Balance as of Date of this Submission	Grant Extensions or Waivers	Grant Start Date	Grant Term End Date
FY 1995						
FY 1996						
FY 1997						
FY1998						
FY 1999						

**Section 2: PHDEP Plan Goals and Budget**

**A. PHDEP Plan Summary**

In the space below, summarize the PHDEP strategy to address the needs of the target population/target area(s). Your summary should briefly identify: the broad goals and objectives, the role of plan partners, and your system or process for monitoring and evaluating PHDEP-funded activities. This summary should not exceed 5-10 sentences.

**B. PHDEP Budget Summary**

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

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

**C. PHDEP Plan Goals and Activities**

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

<b>9110 – Reimbursement of Law Enforcement</b>					<b>Total PHDEP Funding: \$</b>		
Goal(s)							
Objectives							
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHEDE P Funding	Other Funding (Amount/ Source)	Performance Indicators
1.							
2.							
3.							

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

<b>9116 - Gun Buyback TA Match</b>					<b>Total PHDEP Funding: \$</b>		
Goal(s)							
Objectives							

Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	Other Funding (Amount /Source)	Performance Indicators
1.							
2.							
3.							

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

<b>9130 – Employment of Investigators</b>					<b>Total PHDEP Funding: \$</b>		
Goal(s)							
Objectives							

Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	Other Funding (Amount /Source)	Performance Indicators
1.							
2.							
3.							

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

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

2.						
3.						

<b>9160 - Drug Prevention</b>					<b>Total PHDEP Funding: \$</b>		
Goal(s)							
Objectives							
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHDEP Funding	Other Funding (Amount /Source)	Performance Indicators
1.							
2.							
3.							

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

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

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

**Required Attachment C: Resident Member on the PHA Governing Board**

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

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

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

Elected

Appointed

C. The term of appointment is (include the date term expires): 12/31/2005

2. A. If the PHA governing board does not have at least one member who is directly assisted by the PHA, why not?

the PHA is located in a State that requires the members of a governing board to be salaried and serve on a full time basis

the PHA has less than 300 public housing units, has provided reasonable notice to the resident advisory board of the opportunity to serve on the governing board, and has not been notified by any resident of their interest to participate in the Board.

Other (explain):

B. Date of next term expiration of a governing board member: 12/31/2002

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

City of New Castle, Indiana

**Required Attachment D: Component 10 (B) 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 descriptions sufficient to identify how members are chosen.)

RAB Member Representing Forrest Knoll Apartments

Lora Beerbower  
720 So. 15<sup>th</sup> Street, Apartment E-2  
New Castle, IN 47362

RAB Member Representing Thorncroft Apartments

Jennifer Adams  
2326 Grand Avenue, Apartment J-2  
New Castle, IN 47362

RAB Member Representing Maplewood Terrace Apartments

Helen Smith  
274 South 14<sup>th</sup> Street, Apartment 506  
New Castle, IN 47362

RAB Member Representing the Section 8 Housing Choice Voucher Program

Marcia Godfrey  
2406 State Street  
New Castle, IN 47362

## **Attachment F: Discontinuation of the Mandatory Community Service Requirement**

Jerry W. Cash, executive director, explained to the members of the Resident Advisory Board that the Mandatory Community Service Requirement (MCSR) which the Housing Authority has been in the process of implementing will be discontinued by Congress effective with the start of the agency's new fiscal year on July 1, 2002. He explained that since the MCSR will be discontinued by Congress at the start of the agency's new fiscal year, agencies have been given the option of suspending implementation on or before that date. The RAB agreed with Mr. Cash's recommendation that the Housing Authority should immediately suspend implementation and enforcement of the MCSR. This recommendation was included and adopted in the New Castle Housing Authority's Annual Plan Update for 2002.

## Required Attachment E: Comments of Resident Advisory Board or Boards & Explanation of PHA Response

### Annual Plan Update Comments

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The Resident Advisory Board (RAB) met on three occasions to review and comment on the Annual Plan Update for 2002. The dates of the meetings were January 24, 2002, January 31, 2002, and March 27, 2002. In addition, most of the RAB members attended the Annual Plan Update public hearing held on March 27, 2002. RAB members participating in the review and comment on the Annual Plan Update for 2002 were Marcia Godfrey, Helen Smith, Jennifer Adams, and Lora Beerbower.

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The following are areas of the plan for which RAB comments were requested and/or received:

1) Developing plans and recommendations for use of Resident Participation Funding

Jerry explained that the Housing Authority received \$3,825 in its FYE 6/30/02 Operating Subsidy award from HUD to be used for Resident Participation activities as outlined in PIH Notice 2001-3. In discussions with RAB members, it was suggested that these funds could be used for the following types of activities and in the following amounts:

- 2) Up to \$225 to be used to support local community efforts to provide drug prevention speakers/information for children. The group agreed that any activities undertaken should be announced in a flyer for distribution to public housing residents and that the flyer should acknowledge the NCHA Resident Initiative Fund contribution.
- 3) Up to \$250 to be used for postage/printing costs associated with providing special notices and information (non-administrative) to residents.
- 4) Up to \$1,000 to be used to pay for training fees and registration costs for self-improvement or job readiness training, including Adult Basic Education fees, High School Continuing Education Classes, IU East New Castle Center Classes, etc.
- 5) Up to \$1,000 to be used for developing a *New Resident Orientation* video to be shown to new lease-ups. Video would feature information from a resident's point of view.
- 6) Up to \$350 to be used to purchase household items to make up Welcome Gifts for new residents moving into the Maplewood Terrace, Forrest Knoll, and Thorncroft Apartments.
- 7) An unspecified amount to be combined with other funding to purchase fire escape ladders for apartments at Forrest Knoll and Thorncroft Apartments

A question was asked about whether these funds were available for the Section 8 program as well. Jerry Cash responded that since the funds are specifically incorporated in the Low Rent (public housing) operating budget, it is his opinion

that the use of the funds should be limited to that program area

8) Addressing the proposed suspension of the Housing Authority's voluntary Family Self-Sufficiency Project

Jerry explained that the staff of the Section 8 Voucher Program and the Low Rent Housing Program voluntarily implemented a Family Self Sufficiency (FSS) Project several years ago to encourage families to work toward self-sufficiency. After discussion, it was agreed by consensus that the FSS Project should be suspended but that staff of the Section 8 Program and the Low Rent Program should continue to provide support and referral for assisted families seeking job training, educational opportunities, and homeownership and/or credit counseling.

9) A proposal to develop the soon-to-be vacated Wittenbraker YMCA building into an affordable housing project for low-income elderly and disabled

Jerry Cash explained that the Housing Authority Board of Commissioners has entered into an agreement with the City of New Castle to submit a Low Income Housing Tax Credit (LIHTC) application to the Indiana Housing Finance Authority (IHFA) to develop the Wittenbraker YMCA Building and the adjoining Church Street Gymnasium into a 32 unit elderly housing property with an adjoining parking/community recreation facility. There was general consensus by the RAB that this planned activity should proceed.

10) Discontinuation of the Mandatory Community Service Requirement

Jerry Cash explained that the Volunteer Community Service Requirement (MCSR) which the Housing Authority has been in the process of implementing will be discontinued by Congress effective with the start of the agency's new fiscal year on July 1, 2002. He explained that since the MCSR will be discontinued, agency's have the option of not continuing implementation even prior to the start of the new fiscal year. The RAB agreed that Housing Authority should immediately suspend implementation and enforcement of the MCSR.

1) Capital Fund Program Modernization Items for Federal Fiscal Year 2003

Jerry Cash reminded the RAB members that the Housing Authority had a *Comprehensive Needs Assessment and Five Year Plan* prepared by Forum Architects in March of 2000. He indicated that this Plan serves as the structure for use of modernization funds from HUD's Capital Fund Program (CFP) which are expected to amount to approximately \$250,000 annually. Although work items for CFP Grant IN36P05050101 were established in 2001 Annual Plan Update and are already in design phase, items discussed for consideration from the 5 Year Modernization Plan to implemented in CFP Grant IN36P05050102 include:

Maplewood Terrace

- 1) Replacing the wood privacy fence on the patio
- 2) Replacing the emergency generator
- 3) Replacing the apartment intercom/emergency pull cord system
- 4) Replacing ceiling tile systems in hallways and common areas
- 5) Replacing tile in hallways and common areas on first floor

- 6) Renovating the dining room by removing remaining modernfold doors, replacing kitchen cabinets and installing commercial stove, etc.
- 7) Replacing sliding closet doors in apartments

Gemini Apartments (Forrest Knoll and Thorncroft)

- 1) Installing new street lighting – including at entrance to complex
- 2) Renovation/Replacement of resident storage buildings – including possible re-design of how “back yards” of apartments are utilized
- 3) Building a furniture/appliance disposal corral in each complex
- 4) Re-furbishing and possibly re-designing the existing trash corrals
- 5) Playground improvements at Gemini Apartments – including possible basketball court/equipment
- 6) Replacing lighting in apartments
- 7) Replacing kitchen cabinets in apartments
- 8) Improving landscaping around apartments
- 9) Replacing air conditioning compressor units
- 10) Installing a new television looped antenna system
- 11) Replacing octagon windows at front doors
- 12) Replacing decorative door trim on units with such trim
- 13) Installing screen doors

Some of the more specific suggestions included moving the storage buildings behind the apartments so that a larger patio area could be available. Also possibly combining the storage buildings into one structure behind each unit with a storage compartment for each apartment. Both Lora and Jennifer commented that the looped antenna system in their complexes do not provide acceptable reception. Jerry commented on his concerns that a basketball might invite youths from outside the complex into the complex where they could increase problems with behavior, etc. Everyone agreed that the trash corrals are frequently over-flowing and unsightly and recommended thinking about ways to decrease these problems.

Everyone agreed that the recent and continuing work to replace porches, patios, handrails, and patio privacy screens has resulted in a much better appearance for the properties.

A question was raised about replacing the coin-operated dryers in the Maplewood Terrace laundry. Jerry indicated that he has been working with Rust Maytag to try to identify and correct drying time problems, but that the Housing Authority is prepared to replace the dryers from the non-routine operating budget if the problems cannot be resolved. He asked for the RAB’s advice on the prospect of increasing fees if new equipment is installed. He explained that in spite of significant increases in utility costs, fees have not increase for at least ten years. The current fees are 50 cents to wash and 25 cents to dry. Helen indicated that she thought the residents wouldn’t object to increased fees so long as the efficiency of the equipment improved. Lora commented that she would like to see something done about replacing the flexible hose dryer vents in the family apartments with a rigid metal vent.

- 1) Proposal to Increase Flat Rent Amount

Jerry Cash reviewed the draft Annual Plan Update with Jennifer Adams and asked for comments or recommendations. He explained that the Plan Update includes a proposal to increase Flat Rents in accordance with the provisions already contained in the Agency's Admissions & Continued Occupancy Policy. The RAB recommended approval of the proposal to increase Flat Rent as per the Housing Authority's Admission & Continued Occupancy Policy.

2) Operation of Child Day Care Centers in Public Housing

Jerry Cash reviewed the recently developed policy regarding the operation of child day care centers in public housing. The RAB members recommended that discussion of this topic be continued at the Public Hearing which was scheduled to be held at 3:00 p.m. the same day. The RAB members recommended that the Child Day Care Policy be amended to include more specifics as to what types of child care are permitted and/or prohibited in public housing.

## **Annual Plan Update Actions**

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In adopting the Annual Plan Update for 2002, the Board of Commissioners of the New Castle Housing Authority considered and incorporated all of the comments and recommendations of the Residents Advisory Board.

**Required Attachment G: Voluntary Conversion Required Initial Assessments**

- a. How many of the PHA’s developments are subject to the Required Initial Assessments? One (1)
- b. How many of the PHA’s developments are not subject to the Required Initial Assessments based on exemptions (e.g., elderly and/or disabled developments not general occupancy projects)? One (1)
- c. How many Assessments were conducted for the PHA’s covered developments? One (1)
- d. Identify PHA developments that may be appropriate for conversion based on the Required Initial Assessments:

<b>Development Name</b>	<b>Number of Units</b>
none	none

- a. If the PHA has not completed the Required Initial Assessments, describe the status of the assessments.