

# PHAPlans

5-YearPlanforFiscalYears2000 -2004  
AnnualPlanforFiscalYear2002

**NOTE:THISPHAPLANSTEMPLATE(HUD50075)ISTOBEC OMPLETEDIN  
ACCORDANCEWITHINSTRUCTIONSLOCATEDINAPPLICABLEPIHNOTICES**

**PHA Plan  
Agency Identification**

**PHAName: The Housing Authority of the City of Lafayette**

**PHANumber: LA005**

**PHAFiscalYearBeginning: 10/2002**

**Public Access to Information**

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

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

**Display Locations For PHA Plans and Supporting Documents**

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

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

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

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

**5-YEAR PLAN**  
**PHAF ISCAL YEARS 2000 -2004**  
[24CFRPart903.5]

**A.Mission**

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

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

**B.Goals**

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

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

- PHA Goal: Expand the supply of assisted housing  
Objectives:
- Apply for additional rental vouchers:
  - Reduce public housing vacancies:
  - Leverage private or other public funds to create additional housing opportunities:
  - Acquire or build units or developments
  - Other (list below)
- PHA Goal: Improve the quality of assisted housing  
Objectives:
- Improve public housing management: (PHAS score)
  - Improve voucher management: (SEMAP score)
  - Increase customer satisfaction:
  - Concentrate one effort to improve specific management functions: (list; e.g., public housing finance; voucher unit inspections)

- Renovate or modernize public housing units:
- Demolish or dispose of obsolete public housing:
- Provide replacement public housing:
- Provide replacement vouchers:
- Other: (list below)

PHA Goal: Increase assisted housing choices

Objectives:

- Provide voucher mobility counseling:
- Conduct outreach effort to potential voucher landlords
- Increase voucher payment standards
- Implement voucher home ownership program:
- Implement public housing or other home ownership programs:
- Implement public housing site-based waiting lists:
- Convert public housing to vouchers:
- Other: (list below)

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

PHA Goal: Provide an improved living environment

Objectives:

- Implement measures to deconcentrate poverty by bringing higher income public housing households into lower income developments:
- Implement measures to promote income mixing in public housing by assuring access for lower income families into higher income developments:
- Implement public housing security improvements:
- Designate developments or buildings for particular resident groups (elderly, persons with disabilities)
- Other: (list below)

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

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

Objectives:

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

- Provide or attract supportive services to increase independence for the elderly or families with disabilities.
- Other: (list below)

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

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

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

**AnnualPHAPlan**  
**PHAFiscalYear2002**  
[24CFRPart903.7]

**i. AnnualPlanType:**

SelectwhichtypeofAnnualPlanthePHAwillsubmit.

**StandardPlan**

**StreamlinedPlan:**

- HighPerformingPHA**
- SmallAgency(<250PublicHousingUnits)**
- AdministeringSection8Only**

**TroubledAgencyPlan**

**ii. ExecutiveSummaryoftheAnnualPHAPlan**

In compliance with section 511 of the Quality Housing and Work Responsibility Act (QHWRA) of 1998 and ensuring HUD requirements, The Lafayette Housing Authority (LHA) has prepared this Agency Plan for submission to the U.S. Department of Housing and Urban Development. LHA agency plan is in the form of a standard plan as provided for in the QHWRA. A primary goal of the PHA is provide and maintain quality, affordable housing in a professional and fiscally prudent manner free from discrimination. The Annual Plan was developed with that goal in mind, a number of the provisions that have been formulated reflect that and other objectives that will have to be accomplished to achieve the stated mission. The PHA has adopted a policy to provide for a concentration of poverty and encourage income mixing by bringing higher income families into lower income developments and lower income families into higher income developments. Toward the end, the PHA will skip families on the waiting list to reach other families with a lower or higher income. This policy will be implemented in a uniform and non-discriminatory manner. The PHA has instituted several rental options designed to increase flexibility and encourage movement from welfare to work and expand employment opportunities of residents. The PHA will phase in rent for qualified residents that transition from welfare to work according to Section 508 to QHWRA. There will be no income calculated in their rent for the first year, only 50% calculated in the second year, and 100% calculated in the third year. The PHA will retain the calculation of rent payment at the greater of 30% of the adjusted monthly income or 10% of the gross monthly income, and will retain the existing ceiling rent policy and amounts at that time.

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

#### Required Attachments:

- Admissions Policy for Deconcentration (Attachment "A") **La005a01**
- FY2000 Capital Fund Program Annual Statement (Attachment "B") **La005b02**
- Most recent board -approved operating budget (Required Attachment for PHAs that are troubled or at risk of being designated troubled ONLY)  
**The Housing Authority of the City of Lafayette is currently not under an Advisory Board.**

Optional Attachments:

- PHA Management Organizational Chart (Attachment "D") La005d01
- FY2000 Capital Fund Program 5 -Year Action Plan (Attachment "C") La005b01
- Public Housing Drug Elimination Program (PHDEP) Plan
- Comments of Resident Advisory Board or Boards (must be attached if not included in PHA Plan text)
- Other (List below, providing each attachment name)
  - Pet Policy (Attachment "E") La005e01**
  - Deconcentration Calculation (Attachment "F") La005f01**
  - Statement of Progress on meeting 5 Year Plan (Attachment "G") La005g01**

**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
	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

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

<b>List of Supporting Documents Available for Review</b>		
<b>Applicable &amp; On Display</b>	<b>Supporting Document</b>	<b>Applicable Plan Component</b>
	1996 HUD Appropriations Act	
N/A	Approved or submitted public housing homeownership programs/plans	Annual Plan: Homeownership
N/A	Policies governing any Section 8 Homeownership program <input type="checkbox"/> check here if included in the Section 8 Administrative Plan	Annual Plan: Homeownership
N/A	Any cooperative agreement between the PHA and the TANF agency	Annual Plan: Community Service & Self-Sufficiency
X	FSS Action Plan/s for public housing and/or Section 8	Annual Plan: Community Service & Self-Sufficiency
X	Most recent self-sufficiency (ED/SS, TOP or ROSS or other resident services grant) grant program reports	Annual Plan: Community Service & Self-Sufficiency
X	The most recent Public Housing Drug Elimination Program (PHDEP) semi-annual performance report 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
N/A	Troubled PHAs: MOA/Recovery Plan	Troubled PHAs
N/A	Other supporting documents (optional) (list individually; use as many lines as necessary)	(specify as needed)

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

[24 CFR Part 903.79(a)]

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

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

<b>Housing Needs of Families in the Jurisdiction by Family Type</b>							
<b>Family Type</b>	<b>Overall</b>	<b>Afford- ability</b>	<b>Supply</b>	<b>Quality</b>	<b>Access- ibility</b>	<b>Size</b>	<b>Locatio n</b>
Income ≤ 30% of AMI	5726	N/A	N/A	N/A	N/A	N/A	N/A
Income < 30% but ≤ 50% of AMI	3287	N/A	N/A	N/A	N/A	N/A	N/A

Housing Needs of Families in the Jurisdiction by Family Type							
Family Type	Overall	Afford- ability	Supply	Quality	Access- ibility	Size	Locatio n
Income >50% but <80% of AMI	4248	N/A	N/A	N/A	N/A	N/A	N/A
Elderly	1324	N/a	N/a	N/a	N/a	N/a	N/a
Families with Disabilities							
Race/Ethnicity 4/O	624	N/A	N/A	N/A	N/A	N/A	N/A
Race/Ethnicity 1/W	47505	N/A	N/A	N/A	N/A	N/A	N/A
Race/Ethnicity 2/B	11280	N/A	N/A	N/A	N/A	N/A	N/A
Race/Ethnicity 3/O	883	N/A	N/A	N/A	N/A	N/A	N/A

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

- Consolidated Plan of the Jurisdiction/s  
Indicate year: 1999
- U.S. Census data: the Comprehensive Housing Affordability Strategy (“CHAS”) dataset
- American Housing Survey data  
Indicate year:
- Other housing market study  
Indicate year:
- Other sources: (list and indicate year of information)

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

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

### Housing Needs of Families on the Waiting List

Waiting list type: (select one)

- Section 8 tenant -based assistance  
 Public Housing  
 Combined Section 8 and Public Housing  
 Public Housing Site -Based or sub -jurisdictional waiting list (optional)

If used, identify which development/subjurisdiction:

	# of families	% of total families	Annual Turnover
Waiting list total	787		96
Extremely low income <= 30% AMI	604	78%	
Very low income (>30% but <=50% AMI)	171	21.98%	
Low income (>50% but <80% AMI)	12	.02%	
Families with children	692	88%	
Elderly families	40	5%	
Families with Disabilities	55	7%	
Race/ethnicity (B)	626	80%	
Race/ethnicity (W)	153	19%	
Race/ethnicity (O)	8	1%	
Race/ethnicity			
Characteristics by Bedroom Size (Public Housing Only)			
1BR			
2BR			
3BR			
4BR			
5BR			
5+BR			

**Housing Needs of Families on the Waiting List**

Isthe waiting list closed (select one)?     No     Yes

If yes:

How long has it been closed (# of months)?                      18 months

Does the PHA expect to re-open the list in the PHA Plan year?     No     Yes

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

**Housing Needs of Families on the Waiting List**

Waiting list type: (select one)

Section 8 tenant -based assistance

Public Housing

Combined Section 8 and Public Housing

Public Housing Site -Based or sub -jurisdictional waiting list (optional)

If used, identify which development/subjurisdiction:

	# of families	% of total families	Annual Turnover
Waiting list total	781		120
Extremely low income <= 30% AMI	604	77%	
Very low income (> 30% but <= 50% AMI)	117	15%	
Low income (> 50% but < 80% AMI)	63	8%	
Families with children	692	88%	
Elderly families	37	5%	
Families with Disabilities	55	7%	
Race/ethnicity (B)	626	80%	
Race/ethnicity (W)	153	19%	
Race/ethnicity (O)	8	1%	
Race/ethnicity			
Characteristics by Bedroom Size (Public Housing Only)			
1BR	284	36%	56
2BR	342	44%	50
3BR	128	16%	14

### Housing Needs of Families on the Waiting List

4BR	27	4%	N/A
5BR	N/A	N/A	N/A
5+BR	N/A	N/A	N/A
Is the waiting list closed (select one)? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes			
If yes:			
How long has it been closed (# of months)?		6 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 checked="" type="checkbox"/> Yes			

### C. Strategy for Addressing Needs

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

#### (1) Strategies

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

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

Select all that apply

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

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

Select all that apply

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

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

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

Select all that apply

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

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

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

Select all that apply

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

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

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

Select all that apply

- Seek designation of public housing for the elderly
- Apply for special -purpose voucher targeted to the elderly, should they become available

Other:(listbelow)

**Need:SpecificFamilyTypes:FamilieswithDisabilities**

**Strategy1: TargetavailableassistancetoFamilieswithDisabilities:**

Selectallthatapply

- Seekdesignationofpublichousingforfamilieswithdisabilities
- Carryoutthemodificationsneededinpublichousingbasedonthesection504 NeedsAssessmentforPublicHousing
- Applyforspecial -purposevoucherstargetedtofamilieswithdisabilities, shouldtheybecomeavailable
- Affirmativelymarkettolocalnon -profitagenciesthatassistfamilieswith disabilities
- Other:(listbelow)

**Need:SpecificFamilyTypes:Racesorethnicitieswithdisproportionatehousing needs**

**Strategy1:IncreaseawarenessofPHAresourcesamongfamiliesofracesand ethnicitieswithdisproportionateneeds:**

Selectifapplicable

- Affirmativelymarkettoraces/ethnicitiesshowntohavedisproportionate housingneeds
- Other:(listbelow)

**Strategy2:Conductactivitiestoaffirmativelyfurtherfairhousing**

Selectallthatapply

- Counselection8tenantsasto locationofunitsoutsideofareasofpovertyor minorityconcentrationandassistthemtolocatethoseunits
- Marketthesection8programtoownersoutsideofareasofpoverty/minority concentrations
- Other:(listbelow)

**Conductvariousworkshopswithtenantsandlandlordsonfairhousing**

**OtherHousingNeeds&Strategies:(listneedsandstrategiesbelow)**

**(2)ReasonsforSelectingStrategies**

Ofthefactorslistedbelow,selectallthatinfluencedthePHA 'sselectionofthe strategiesitwillpursue:

- Fundingconstraints
- Staffingconstraints
- Limitedavailabilityofsitesforassistedhousing

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

## **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>Financial Resources: Planned Sources and Uses</b>		
<b>Sources</b>	<b>Planned \$</b>	<b>Planned Uses</b>
<b>1. Federal Grants (FY 2003 grants)</b>		
a) Public Housing Operating Fund	1,222,319	
b) Public Housing Capital Fund	910,252	
c) HOPE VI Revitalization	N/A	
d) HOPE VI Demolition	N/A	
e) Annual Contributions for Section 8 Tenant -Based Assistance	3,961,002	
f) Public Housing Drug Elimination Program (including any Technical Assistance funds)	N/A	
g) Resident Opportunity and Self - Sufficiency Grants	48,392	
h) Community Development Block Grant	15,000	Public Housing Supportive Services
i) HOME	0	
Other Federal Grants (list below)	0	
<b>2. Prior Year Federal Grants (unobligated funds only) (list below)</b>	0	

<b>Financial Resources: Planned Sources and Uses</b>		
<b>Sources</b>	<b>Planned \$</b>	<b>Planned Uses</b>
<b>3. Public Housing Dwelling Rental Income</b>	829,450	Public Housing Supportive Services
<b>4. Other income</b> (list below)		
<b>4. Non -federal sources</b> (list below)		
<b>Interest</b>	25,260	
Late Charges	17,090	
<b>Work Orders</b>	12,450	Employee Benefits
<b>Evictions</b>	15,500	
<b>Clean-up</b>	<u>35,050</u>	
<b>Total</b>	105,350	
<b>Total resources</b>	6,181,513	

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

[24CFR Part 903.79(c)]

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

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

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

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

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

When families are reselected from waiting list to be housed

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

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

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

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

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

## (2) Waiting List Organization

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

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

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

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

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

1. How many site-based waiting lists will the PHA operate in the coming year?

2.  Yes  No: Are any or all of the PHA's site-based waiting lists new for the upcoming year (that is, they are not part of a previously HUD-approved site-based waiting list plan)? If yes, how many lists?

3.  Yes  No: May families be on more than one list simultaneously? If yes, how many lists?

4. Where can interested persons obtain more information about and sign up to be on the site -based waiting lists (select all that apply)?

- PHA main administrative office
- All PHA development management offices
- Management offices at developments with site -based waiting lists
- At the development to which they would like to apply
- Other (list below)

**(3) Assignment**

a. How many vacant unit choices are applicants ordinarily given before they fall to the bottom of or are removed from the waiting list? (select one)

- One
- Two
- Three or More

b.  Yes  No: Is this policy consistent across all waiting list types?

c. If answer to b is no, list variations for any other than the primary public housing waiting list/s for the PHA:

**(4) Admissions Preferences**

a. Income targeting:

- Yes  No: Does the PHA plan to exceed the federal targeting requirements by targeting more than 40% of all new admissions to public housing to families at or below 30% of median area income?

b. Transfer policies:

In what circumstances will transfer take precedence over new admissions? (list below)

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

c. Preferences

1.  Yes  No: Has the PHA established preferences for admission to public housing (other than date and time of application)? (If "no" is selected, skip to subsection **(5) Occupancy**)

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

Former Federal preferences:

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

Other preferences: (select below)

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

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

Date and Time

Former Federal preferences:

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

Other preferences (select all that apply)

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

**Families under Federal Protection Programs**

4. Relationship of preferences to income targeting requirements:

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

**(5) Occupancy**

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

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

PHA Employees

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

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

**(6) Deconcentration and Income Mixing**

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

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

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

- Adoption of site -based waiting lists  
If selected, list targeted developments below:
- Employing waiting list "skipping" to achieve deconcentration of poverty or income mixing goals at targeted developments  
If selected, list targeted developments below:
- Employing new admission preferences at targeted developments  
If selected, list targeted developments below:
- Other (list policies and development targeted below)

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

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

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

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

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

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

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

## B. Section 8

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

### (1) Eligibility

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

- Criminal or drug -related activity only to the extent required by law or regulation
- Criminal and drug -related activity, more extensively than required by law or regulation
- More general screening than criminal and drug -related activity (list factors below)
- Other (list below)

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

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

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

e. Indicate what kinds of information you share with prospective landlords? (select all that apply)

- Criminal or drug -related activity
- Other (describe below)
- Present and/or Prior address and Landlord, if requested

### (2) Waiting List Organization

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

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

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

- PHA Section 8 main administrative office
- Other (list below)

**(3) Search Time**

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

If yes, state circumstances below:

If applicant has turned in a Request for Lease Proposal and it's an of fault of their own they cannot go into that unit

**(4) Admissions Preferences**

a. Income targeting

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

b. Preferences

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

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

Former Federal preferences

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

Other preferences (select all that apply)

- Working families and those unable to work because of age or disability
- Veterans and veterans' families
- Residents who live and/or work in your jurisdiction
- Those enrolled currently in educational, training, or upward mobility programs
- Household that contribute to meeting income goals (broad range of incomes)

- Householdsthatcontributetomeetingincomerequiremen ts(targeting)
- Thosepreviouslyenrolledineducational,training,orupwardmobility programs
- Victimsofreprisalsorhatecrimes
- Otherpreference(s)(listbelow)

3.IfthePHAwillemployadmissionspreferences,pleaseprioritizebyplacinga“1”in thespace thatrepresentsyourfirstpriority,a“2”intheboxrepresentingyour secondpriority,andsoon.Ifyougiveequalweighttooneormoreofthese choices(eitherthroughanabsolute hierarchyorthroughapointsystem),placethe samenumbertoeach.Thatmeansyoucanuse“1”morethanonce,“2”more thanonce,etc.

DateandTime

FormerFederalpreferences

- 1 InvoluntaryDisplacement(Disaster,GovernmentAction,ActionofHousing Owner,Inaccessibility,PropertyDisposition)
- 1 Victimsofdomesticviolence Substandardhousing
- 1 Homelessness Highrentburden

Otherpreferences(selectallthatapply)

- Workingfamiliesandthoseunabletoworkbecauseofageordisability
- Veteransandveterans’families
- Residentstholiveand/orworkinyourjurisdiction
- Thoseenrolledcurrentlyineducational,training,orupwardmobilityprograms
- Householdsthatcontributetomeetingincomegoals(broadrangeofincomes)
- Householdsthatcontributetomeetingincomerequirements(targeting)
- Thosepreviouslyenrolledineducational,training,orupwardmobility programs
- Victimsofreprisalsorhatecrimes
- Otherpreference(s)(listbelow)

4.Amongapplicantsonthewaitinglistwiththeequalpreferencestatus,howare applicantsselected?(selectone)

- Dateandtimeofapplication
- Drawing(lottery)orotherrandomchoicetechnique

5.IfthePHAplanstoemploypreferencesfor“residentstwholiveand/ orworkinthe jurisdiction”(selectone)

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

6.Relationshipofpreferencesto incometargeting requirements:(selectone)

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

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

a.Inwhichdocumentsorotherreferencematerialsarethepoliciesgoverning eligibility,selection,andadmissionstoanyspecial -purpose section 8 program administeredbythePHAcontained?(selectallthatapply)

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

b. HowdoesthePHAannouncetheavailabilityofanyspecial -purpose section 8 programstothe public?

- Through published notices
- Other (list below)

**media**

## **4.PHARentDeterminationPolicies**

[24CFR Part 903.79(d)]

### **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 highest 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 :

- A. welfare time limit has expired
- B. No at fault loss of income

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:

Less than 15% of annual income @ a \$2750 Standard Deduction, only (1) one

Perfamily/giveneitheratthetimeofadmissionorwhennewlyemployed  
 Memb erwhomhasbeenemployedafterOctober,1996 -Exclusionisgivenfor  
 Amaximumof18months

- Forhouseholdheads
- Forotherfamilymembers
- Fortransportationexpenses
- Forthenon -reimbursedmedicalexpensesofnon -disabledornon -elderly families
- Other(describewhatbelow)

e.Ceilingrents

1. Doyouhaveceilingrents?(rentssetatalevellowerthan30%ofadjustedincome)  
 (selectone)

- Yesforalldevelopments
- Yesbutonlyforsomeddevelopments
- No

2. Forwhichkindsofdevelopmentsareceilingrentsinplace?(selectallthatapply)

- Foralldevelopments
- Forallgeneraloccupancydevelopments(notelderlyordisabledorelderly only)
- Forspecifiedgeneraloccupancydevelopments
- Forcertainpartsofdevelopments;e.g.,thehigh -riseportion
- Forcertainsize units;e.g.,largerbedroomsizes
- Other(listbelow)

3. Selectthespaceorspacesthatbestdescribewayouarriveatceilingrents(select allthatapply)

- Marketcomparabilitystudy
- Fairmarketrents(FMR)
- 95<sup>th</sup>percentilerents
- 75percentofoperatingcosts
- 100percentofoperatingcostsforgeneraloccupancy(family)developments
- Operatingcostsplusdebt service
- The“rentalvalue”oftheunit
- Other(listbelow)

f. Rentre -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
- Anytime the family experiences an income increase
- Anytime a family experiences an income increase above a threshold amount or percentage: (if selected, specify threshold) \_\_\_\_\_
- Other (list below)

**Anytime the family experiences an income decrease or change in 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.)

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

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

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

### (1) Payment Standards

Describe the voucher payment standards and policies .

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

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

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

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

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

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

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

- Annually
- Other (list below)

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

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

Open Market Rent

## **(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)

1. Head of Household Death
2. Welfare time has expired
3. No at fault loss of income

## **5. Operations and Management**

[24 CFR 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. PHA Management Structure**

Describe the PHA's management structure and organization.

(select one)

- An organization chart showing the PHA's management structure and organization is attached.
- A brief description of the management structure and organization of the PHA follows:

### **B. HUD Programs Under PHA Management**

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

<b>Program Name</b>	<b>Units or Families Served at Year Beginning</b>	<b>Expected Turnover</b>
Public Housing	572	120
Section 8 Vouchers	952	96
Section 8 Certificates	N/A	
Section 8 Mod Rehab	N/A	
Special Purpose Section 8 Certificates/Vouchers (list individually)	N/A	
Public Housing Drug Elimination Program (PHDEP)	N/A	
Other Federal Programs (list individually)	N/A	


**C. Management and Maintenance Policies**

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

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

Admission and Continued Occupancy Policies

Resident Handbook and Lease, Itemize work - order cost list

(2) Section 8 Management: (list below)

Administrative Plan

Briefing Package

**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.

**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 additional federal requirements below:

2. Which PHA offices should residents or applicants stop 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:

Request for informal hearing must be requested in writing no later than ten (10) days of notice

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**

[24CFR Part 903.79(g)]

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

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

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

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

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

Select one:

- The Capital Fund Program Annual Statement is provided as an attachment to the PHA Plan at Attachment (Attachment "B" **La005a01**) Capital Fund Program Annual Statement

-or-

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

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

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

**See (Attachment“C)La005b01**

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

b. If yes to question a, select one:

The Capital Fund Program 5 -Year Action Plan is provided as an attachment to the PHA Plan at Attachment(Attachment”C) **La005b01**

-or-

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

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

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

Yes  No: a) Has the PHA received a HOPEVI revitalization grant?(if no, skip to question c; if yes, provide responses to question b for each grant, copying and completing as many times as necessary)  
b) Status of HOPEVI revitalization grant (complete one set of questions for each grant)

1. Development name:

2. Development (project) number:

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

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

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

If yes, list development name/s below:

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

If yes, list developments or activities below:

Yes  No: (e) Will the PHA be conducting any other public housing development or replacement activities not discussed in the Capital Fund Program Annual Statement? If yes, list developments or activities below:

**8. Demolition and Disposition**

[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.)

2. Activity Description

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

<b>Demolition/Disposition Activity Description</b>	
1a. Development name:	
1b. Development (project) number:	
2. Activity type: Demolition <input type="checkbox"/> Disposition <input type="checkbox"/>	
3. Application status (select one) Approved <input type="checkbox"/> Submitted, pending approval <input type="checkbox"/> Planned application <input type="checkbox"/>	
4. Date application approved, submitted, or planned for submission: (DD/MM/YY)	
5. Number of units affected:	
6. Coverage of action (select one) <input type="checkbox"/> Part of the development <input type="checkbox"/> Total development	
7. Timeline for activity: a. Actual or projected start date of activity: b. Projected end date of activity:	

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

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

2. Activity Description

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

<b>Designation of Public Housing Activity Description</b>	
1a. Development name: Irene Developments	
1b. Development (project) number: LA0054	
2. Designation type:	
Occupancy by only the elderly	<input type="checkbox"/>
Occupancy by families with disabilities	<input type="checkbox"/>
Occupancy by only elderly families and families with disabilities	<input checked="" type="checkbox"/>
3. Application status (select one)	
Approved; included in the PHA's Designation Plan	<input checked="" type="checkbox"/>
Submitted, pending approval	<input type="checkbox"/>
Planned application	<input type="checkbox"/>
4. Date this designation approved, submitted, or planned for submission: <u>          (DD/MM/YY)</u>	
5. If approved, will this designation constitute a (select one)	
<input type="checkbox"/> New Designation Plan	
<input type="checkbox"/> Revision of a previously approved Designation Plan?	
6. Number of units affected: 99	
7. Coverage of action (select one)	

<input type="checkbox"/> Part of the development
<input checked="" type="checkbox"/> Total development

**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.)

2. Activity Description

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

<b>Conversion of Public Housing Activity Description</b>
1a. Development name:
1b. Development (project) number:
2. What is the status of the required assessment? <input type="checkbox"/> Assessment underway <input type="checkbox"/> Assessment results submitted to HUD <input type="checkbox"/> Assessment results approved by HUD (if marked, proceed to next question) <input type="checkbox"/> Other (explain below)
3. <input type="checkbox"/> Yes <input type="checkbox"/> No: Is a Conversion Plan required? (If yes, go to block 4; if no, go to block 5.)
4. Status of Conversion Plan (select the statement that best describes the current status) <input type="checkbox"/> Conversion Plan in development <input type="checkbox"/> Conversion Plan submitted to HUD on: (DD/MM/YYYY) <input type="checkbox"/> Conversion Plan approved by HUD on: (DD/MM/YYYY)

<input type="checkbox"/> Activities pursuant to HUD -approved Conversion Plan underway
<p>5. Description of how requirements of Section 202 are being satisfied by means other than conversion (select one)</p> <p><input type="checkbox"/> Units addressed in a pending or approved demolition application (date submitted or approved: _____)</p> <p><input type="checkbox"/> Units addressed in a pending or approved HOPE VI demolition application (date submitted or approved: _____)</p> <p><input type="checkbox"/> Units addressed in a pending or approved HOPE VI Revitalization Plan (date submitted or approved: _____)</p> <p><input type="checkbox"/> Requirements no longer applicable: vacancy rates are less than 10 percent</p> <p><input type="checkbox"/> Requirements no longer applicable: site now has less than 300 units</p> <p><input type="checkbox"/> Other: (describe below)</p>

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

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

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

[24CFR Part 903.79(k)]

**A. Public Housing**

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

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

2. Activity Description

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

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

**B. Section 8 Tenant Based Assistance**

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

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**

[24CFR Part 903.79(l)]

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

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

1. Cooperative agreements:

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

If yes, what was the date that agreement was signed? 11 /12/00

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

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

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

**(1) General**

a. Self-Sufficiency Policies

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

- Public housing rent determination policies
- Public housing admissions policies
- Section 8 admissions policies
- Preference in admission to section 8 for certain public housing families
- Preferences for families working or engaging in training or education programs for non-housing programs operated or coordinated by the PHA
- Preference/eligibility for public housing homeownership option participation
- Preference/eligibility for section 8 homeownership option participation
- Other policies (list below)

b. Economic and Social self-sufficiency programs

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

Services and Programs				
Program Name & Description (including location, if appropriate)	Estimated Size	Allocation Method (waiting list/random selection/specific criteria/other)	Access (development office/ PHA main office/ other provider name)	Eligibility (public housing or section 8 participants or both)
<i>Family Self-Sufficiency Program Program to assist Section 8 Participants in becoming independent of all public assistance</i>	57	<i>voluntary</i>	<i>Section 8 Office</i>	<i>Section 8</i>
Youth Education Program (Tutorial Program)	120	Nowaiting list, students must be	Provided at Macon, MLK, Simcoe and	Public Housing

		ingrades1 -8	Mossstreet Developments	
DeltaAcademy/wDeltaSigma ThetaSorority/focuseonmath, science,leadership,and technologyskills	21	Youngladies betweentheages of11 -14,selected fromtutorial programand mustberesident ofpublichousing	LafayetteHousing AuthorityCommunity Center	PublicHousing
M.L.KingTheaterArtsProgram Consistofstory -telling,creative movement,dance,writing,and socialactivities	15	Studentsages12 - 15livinginthe M.L.King developmentand participatingin tutoringProgram	LafayetteConsolidated GovernmentParksand RecreationCenters	PublicHousing
FirePrevention/Intervention Program –informsresidentsof safetymeasurestopreventfires. Residentsparticipateinmockfire demonstrations,viewvideosabout firepreventionandhazardous situations	30	Allresidents of allages	AllDevelopments	PublicHousing
VitaProgram -Programtoimprove readingskills	5	Mustnotbe enrolledin schoolandat least16yearsold orolder	Alldevelopmentsand mainoffice	Both
SummerEnrichmentProgram -for studentstwhohavebehavioror academicproblemsduringthe priorschoolyear	10	Studentsbetween ages9 -14,only thoseresidingin LHA developments withacedemicor behavior problems	Moss,MLK,and Maconrd. developments	PublicHousing
FoodnetProgram/Providesfood commoditiest oqualified participants	55	Determinedby income	LocalChurchand Agencyprovides transportation	Both
OperationBootstrap(residentto workprogram)Designedto empowerresidentstwiththe importanceandunderstandingof becomingself -sufficient,provides jobreadinessskills	5	Residentstwho paysminimum rentand/orwho areunemployed	Varioustdepartment throughouttheAgency	Both

**(2)FamilySelfSufficiencyprogram/s**

**a.ParticipationDescription**

<b>FamilySelfSufficiency(FSS)Participation</b>
--

Program	Required Number of Participants (start of FY 2000 Estimate)	Actual Number of Participants (As of: DD/MM/YY)
Public Housing		
Section 8	57	2706 -01-02

- 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)

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

### 13. PHA Safety and Crime Prevention Measures

[24 CFR Part 903.79(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.

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

1. Describe the need for measures to ensure the safety of public housing residents

(select all that apply)

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

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

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

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

Simcoe Development  
M.L. King Development

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

1. List the crime prevention activities the PHA has undertaken or plan to undertake:

(select all that apply)

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

**By housing Law Enforcement Officers in the Development**

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

**Simcoe Development**  
**M.L. King Development**

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

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

- Police involvement in development, implementation, and/or ongoing evaluation of drug -elimination plan
- Police provide crime data to housing authority staff for analysis and action
- Police have established a physical presence on housing authority property (e.g., community policing office, officer in residence)
- Police regularly testify in and otherwise support eviction cases
- Police regularly meet with the PHA management and residents
- Agreement between PHA and local law enforcement agency for provision of above-baseline law enforcement services
- Other activities (list below)

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

**All**

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

PHA eligible for FY2000 PHDEP funds must provide a PHDEP Plan meeting specified requirements prior to receipt of PHDEP funds.

- Yes  No: Is the PHA eligible to participate in the PHDEP in the fiscal year covered by this PHA Plan?
- Yes  No: Has the PHA included the PHDEP Plan for FY2000 in this PHA Plan?
- Yes  No: This PHDEP Plan is an Attachment. (Attachment Filename: \_\_\_\_)

**14. RESERVED FOR PET POLICY**

[24CFR Part 903.79(n)]

See Attachment "E"

**15. Civil Rights Certifications**

[24CFR Part 903.79(o)]

See Attachment "D"

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

## **16. Fiscal Audit**

[24CFRPart903.79(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?  
If yes, how many unresolved findings remain? \_\_\_\_\_
5.  Yes  No: Have responses to any unresolved findings been submitted to HUD?  
If not, when are they due (state below)?

## **17. PHA Asset Management**

[24CFRPart903.79(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**

[24CFRPart903.79(r)]

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

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

2. If yes, the comments are: (if comments were received, the PHA **MUST** select one)

Attached at Attachment (Filename)

Provided below:

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

Considered comments, but determined that no changes to the PHA Plan were necessary.

The PHA changed portions of the PHA Plan in response to comments  
List changes below:

Other: (list below)

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

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

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

3. Description of Resident Election Process

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

Candidates were nominated by resident and assisted family organizations

Candidates could be nominated by any adult recipient of PHA assistance

Self-nomination: Candidates registered with the PHA and requested a place on ballot

Other: (describe)

**LHA does not have a Board**

b. Eligible candidates: (select one)

Any recipient of PHA assistance

Any head of household receiving PHA assistance

Any adult recipient of PHA assistance

Any adult member of a resident or assisted family organization

Other (list)

c. Eligible voters: (select all that apply)

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

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

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

1. Consolidated Plan jurisdiction: **(Lafayette Consolidated Government)**

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

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

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

**Both have been developed to achieve the national statutory goals of providing for Extremely low, low and moderately income residents of Lafayette Parish decent, suitable, and affordable housing opportunity.**

**D. Other Information Required by HUD**

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

## Attachments

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

# PHA Plan Table Library

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

### Annual Statement Capital Fund Program (CFP) Part I: Summary

Capital Fund Grant Number      FFY of Grant Approval:      (MM/YYYY)

Original Annual Statement

Line No.	Summary by Development Account	Total Estimated Cost
1	Total Non -CGP Funds	
2	1406 Operations	
3	1408 Management Improvements	
4	1410 Administration	
5	1411 Audit	
6	1415 Liquidated Damages	
7	1430 Fees and Costs	
8	1440 Site Acquisition	
9	1450 Site Improvement	
10	1460 Dwelling Structures	
11	1465.1 Dwelling Equipment -Nonexpendable	
12	1470 Nondwelling Structures	
13	1475 Nondwelling Equipment	
14	1485 Demolition	
15	1490 Replacement Reserve	
16	1492 Moving to Work Demonstration	
17	1495.1 Relocation Costs	
18	1498 Mod Used for Development	
19	1502 Contingency	
20	<b>Amount of Annual Grant (Sum of lines 2 -19)</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	

**AnnualStatement**  
**CapitalFundProgram(CFP)PartII:SupportingTable**

Development Number/Name HA-WideActivities	GeneralDescriptionofMajorWork Categories	Development Account Number	Total Estimated Cost

**AnnualStatement  
CapitalFundProgram(CFP)PartIII:ImplementationSchedule**

Development Number/Name HA-WideActivities	AllFundsObligated (QuarterEndingDate)	AllFundsExpended (QuarterEndingDate)

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

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.

Optional 5 -Year Action Plan Tables				
Development Number	Development Name (or indicate PHA wide)	Number Vacant Units	% Vacancies in Development	
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>				



**TableLibrary**

## Attachment "E" La005e01

### Pet Policy

Only one house pet will be allowed in each unit. Guests may not bring pets into unit. Every dog and cat must wear a city animal tag, a valid rabies tag, and a tag bearing the owner's name, address, and telephone number.

Female dogs and cats must be neutered and spayed, unless a letter from a licensed veterinarian, giving a medical reason(s) why such is detrimental to the pet's health. Every tenant owning a pet must register the pet at the LHA Management Office at the time of annual recertification, every year. Registration requires proof of current licenses and tags. Updated inoculations, identification tag, and verification that pet has been spayed or neutered.

All tenants who wish to have a pet must pay a pet deposit, in addition to the regular security deposit.

**(Pet Deposit \$300)** All birds must be kept in a cage. No bird will be allowed to fly outside its cage.

While outside the unit, dogs and cats must be on a leash. The animal must be accompanied by a person who is able to control it. Pet owners are responsible for the daily cleaning of pet waste (feces) on the outside and the disposing of the waste in a proper manner. All litter and waste must be in plastic bags, tied and disposed of in a proper receptacle. The inside of the units must be kept free of animal odor and maintained in a clean and sanitary manner. No excessive noise or whining by pets will be permitted. Any tenant owning a pet is responsible for the pet's action. The pet's owner is liable for any injuries caused by his or her pet. **(LHA will not take any responsibility for any**

**injuries caused by tenant pets)** Exception to any or all sections of this Pet Policy apply to animals that are used to assist the disabled in accordance with 24 CFR 243.2 and 942.2.

This policy will automatically be amended to include any changes required by HUD.

**Attachment“ F”La005f01**

**DeconcentrationCalculation**

**LHAverageincomeforallfamilies\$4987.63**

**LHAadjustedAverageincome -AgencyWide\$4987.63**

**85%ofadjustedAverageincome\$4239.49**

**115%ofadjustedAverageincome\$6015.79**

## **Attachment “G” La005g01**

### **Statement of Progress on meeting 5 Year Plan**

**The Housing Authority of the City of Lafayette (LHA) has been instrumental in executing the goals of the Annual Plan for FY2001. Below, is a synopsis of the implementation of the goals and strategies that LHA has accomplished in the second year of the Five Year Plan of 2000 -2004.**

**LHA has expanded the supply of assisted housing by reducing public housing vacancies. LHA has also leverage private and/or public funds to create additional housing opportunities.**

**LHA has improved the quality of assisted housing by improving housing management (PHAS) scores, Housing Choice Voucher Management (SEMAP) scores, improved customer satisfaction. And also renovated/modernized public housing units**

**LHA has improved the quality of life and economic vitality by implementing measures to deconcentrate poverty in public housing, implementing measures to promote income mixing by assuring access for lower income families into higher income developments. LHA also continues to implement strict public housing security and designates specific developments for the elderly and families with disabilities.**

**LHA has taken measures provide a suitable living environment for families regardless of race, color, religion, national origin, sex, familial status, and disability; LHA has provided accessible housing to persons with all varieties of disabilities regardless of unit size required.**

**TableLibrary**

**Annual Statement-Performance and Evaluation Report  
Capital Fund Program (CFP)  
Part I: Summary**

**Attachment "B"**  
**U.S. Department of Housing and Urban Development**  
Office of Public and Indian Housing

HA Name: <b>LAFAYETTE HOUSING AUTHORITY</b>	Capital Fund Grant Number <b>LA48P00550302</b>	FFY of Grant Approval <b>2002</b>
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<input type="checkbox"/> Original Annual Statement	<input type="checkbox"/> Reserve for Disasters/Emergencies	Revised Annual Statement (Revision Number <input type="checkbox"/> )
<input type="checkbox"/> Performance & Evaluation Report for Program Year Ending <input type="checkbox"/> / <input type="checkbox"/> / <input type="checkbox"/>		<input type="checkbox"/> Final Performance and Evaluation Report

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total Non-CGPF Funds	0.00			
2	1406 Operations	135,000.00			
3	1408 Management Improvements Soft Costs	135,500.00			
	Management Improvements Hard Costs	25,000.00			
4	1410 Administration	47,000.00			
5	1411 Audit	0.00			
6	1415 Liquidated Damages	0.00			
7	1430 Fees and Costs	48,500.00			
8	1440 Acquisition	0.00			
9	1450 Site Improvement	86,500.00			
10	1460 Dwelling Structures	306,052.00			
11	1465.1 Dwelling Equipment-Nonexpendable	30,200.00			
12	1470 Nondwelling Structures	70,000.00			
13	1475 Nondwelling Equipment	17,000.00			
14	1485 Demolition	0.00			
15	1490 Replacement Reserve	0.00			
16	1492 Moving to Work Demonstration	0.00			
17	1495.1 Relocation Costs	4,500.00			
18	1498 Development Activities	0.00			
19	1501 Collateralization Expenses or Debt Service	0.00			
20	1502 Contingency (May not exceed 8% of line 20)	5,000.00			
21	<b>Amount of Annual Grant (Sum of Lines 2-19)</b>	<b>910,252.00</b>			
22	Amount of Line 21 Related to LBP Activities	0.00			
23	Amount of Line 21 Related to Section 504 Compliance	0.00			
24	Amount of Line 21 Related to Security Soft Costs	0.00			
25	Amount of Line 21 Related to Security Hard Costs	0.00			
26	Amount of Line 21 Related to Energy Conservation Measures	0.00			
		0.00			
		0.00			

Signature of Executive Director and Date  WALTER GUILLORY July 11, 2002	Signature of Public Housing Director/Office of Native American Programs Administrator and Date
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**Annual Statement-Performance and Evaluation Report  
Capital Fund Program(CFP)  
Part II: Supporting Pages**

**U.S. Department of Housing and Urban Development  
Office of Public and Indian Housing  
LAFAYETTE HA 2002 CFP**

HAName: <b>LAFAYETTE HOUSING AUTHORITY</b>				Capital Fund Grant Number <b>LA48P00550302</b>		FFY of Grant Approval <b>2002</b>		
Number/Name	General Description of Major Work Categories	Development Acct. Number	Quantity	Total Estimated Cost		Total Actual Cost		Status of Propose Work
				Original	Revised(1)	Funds Obligated(2)	Funds Expended(2)	
	<b>1406 OPERATIONS</b>							
	A. INSURANCE, STAFF SALARIES			58,000				
	B. E.D. AUTO			20,000				
	C. TEN MAST COMPUTER CONSULTANT			18,500				
	D. LOCAL COMPUTER CONSULTANT (MISSY HICKS)			2,500				
	E. ACCOUNT CLERK (OPERATING ACCOUNT)			6,000				
	F. CONTRACT ACCOUNTING (OPERATING ACCOUNT)			30,000				
	TOTAL 1406	<b>1406</b>		135,000				
	<b>1408 MANAGEMENT IMPROVEMENTS</b>							
	A. STAFF/RESIDENT TRAINING			12,000				
	B. COMPUTER SOFTWARE UPGRADE			5,000				
	C. RESIDENT PROGRAM TRANSPORTATION			5,500				
	D. RESIDENT TUTORING PROGRAM			2,500				
	E. RESIDENT WORK PROGRAM			12,000				
	F. RESIDENT INITIATIVE SUPPLIES			10,500				
	G. RESIDENT APPRENTICESHIP CARPENTRY PROGRAM			16,000				
	H. RESIDENT INITIATIVE COOR. ASST.			30,000				
	I. SRC CITIZEN PROGRAM COORDINATOR			18,000				
	J. SERVICE/ATHLETIC COORDAIDE			12,000				
	K. FRINGE BENEFITS/TAXES			12,000				
	SUBTOTAL SOFT COSTS			135,500				
	L. COMPUTER/OFFICE EQUIP			25,000				
	SUBTOTAL HARD COSTS			25,000				
	TOTAL 1408	<b>1408</b>		160,500				
	<b>1410 ADMIN COSTS</b>							
	A. CFP ACCOUNT CLERK			6,000				
	B. CFP ADMIN COORDINATOR			35,000				
	C. CFP MONITORING BY MAINT STAFF			6,000				
	TOTAL 1410	<b>1410</b>		47,000				
	PAGETOTAL			342,500				
1) To be completed for the Performance and Evaluation Report or a Revised Annual Statement.				2) To be completed for the Performance and Evaluation Report				
Signature of Executive Director and Date				Signature of Public Housing Director/Office of Native American Programs Administrator and Date				



**Annual Statement-Performance and Evaluation Report  
Capital Fund Program (CFP)  
Part II: Supporting Pages**

**U.S. Department of Housing and Urban Development  
Office of Public and Indian Housing LAFAYETTE HA 2002**

HAName: <b>LAFAYETTE HOUSING AUTHORITY</b>				Capital Fund Grant Number <b>LA48P00550302</b>		FFY of Grant Approval <b>2002</b>		
Number/Name	General Description of Major Work Categories	Development Acct. Number	Quantity	Total Estimated Cost		Total Actual Cost		Status of Propose Wo
				Original	Revised (1)	Funds Obligated (2)	Funds Expended (2)	
	<b>1465 DWELLING EQUIP</b> A. APPLIANCES B. FIRE EXTINGUISHERS  TOTAL 1465	<b>1465</b>		15,200 15,000 30,200				
	<b>1470 NON-DWELLING STRUCTURE</b> SUBTOTAL #1460 RENOVATE MAINT AREA FOR CLASSROOM/SHOP RENOVATE MAINT AREA FOR MEETING ROOM/WORK AREA RENOV EXIST ADMIN OFFICE  TOTAL 1470	<b>1470</b>		20,000 25,000 25,000 70,000				
	<b>1475 NON-DWELLING EQUIPMENT</b> BLDG WASHER SYSTEM, TOOLS, EQUIP TABLES AND CHAIRS LAWN EQUIP TOTAL 1475	<b>1475</b>		5,000 2,000 10,000 17,000				
	<b>1495 RELOCATION</b>	<b>1495</b>		4,500				
	<b>1502 CONTINGENCY</b>	<b>1502</b>		5,000				
	<b>1430 FEES AND COSTS</b> A. A/FEES B. CONTRACT ACCOUNTING C. CFP ANNUAL STATEMENT D. PRINTING OF PLANS E. ADV/RECORDATION/MISC COSTS  TOTAL 1430	<b>1430</b>		38,000 6,000 2,500 1,500 500 48,500				
PAGETOTAL				131,700				
1) To be completed for the Performance and Evaluation Report or a Revised Annual Statement.				2) To be completed for the Performance and Evaluation Report				
Signature of Executive Director and Date				Signature of Public Housing Director/Office of Native American Programs Administrator and Date				

**Annual Statement-Performance and Evaluation Report  
Capital Fund Program (CFP)  
Part III: Implementation Schedule**

U.S. Department of Housing and Urban Development  
Office of Public and Indian Housing **LAFAYETTEHA2002**

HAName: <b>LAFAYETTEHOUSINGAUTHORITY</b>			Capital Fund Grant Number <b>LA48P00550302</b>	FFY of Grant Approval <b>2002</b>
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Number/Name	All Funds Obligated (Qtr Ending Date)			All Funds Expended (Qtr Ending Date)			Reasons for Revised target Dates
	Original	Revised(1)	Actual(2)	Original	Revised(1)	Actual(2)	
MOSS	09/30/04			09/30/05			
MOSS	09/30/04			09/30/05			
SIMCOE	09/30/04			09/30/05			
MACONRD	09/30/04			09/30/05			
C.O.CIRCLE	09/30/04			09/30/05			
MLK	09/30/04			09/30/05			
IRENE	09/30/04			09/30/05			
PHAWIDE	09/30/04			09/30/05			

1) To be completed for the Performance and Evaluation Report or a Revised Annual Statement. Signature of Executive Director and Date	2) To be completed for the Performance and Evaluation Report Signature of Public Housing Director/Office of Native American Programs Administrator and Date
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**Five-Year Action Plan  
Part I: Summary**

**Attachment "C"**

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

LAFAYETTEHA2002

**Capital Fund Program (CFP)**

HAName: <b>LAFAYETTE HOUSING AUTHORITY</b>		Locality: (City/County & State) LAFAYETTE, LAFAYETTE, LOUISIANA		Original X	Revision No. _____	
A. DEVELOPMENT NUMBER/NAME	Work Statement For Year 1	Work Statement for Year 2 FFY:2003	Work Statement for Year 3 FFY:2004	Work Statement for Year 4 FFY:2005	Work Statement for Year 5 FFY:2006	
GENSITWORK	<b>See Annual Statement</b>	48,500	103,500	48,500	48,500	
MOSSST		43,500	18,000	18,000	18,000	
SIMCOEST		38,000	23,500	18,000	18,000	
MACONRD		114,500	122,500	80,000	98,750	
MLK		18,000	110,000	180,000	100,000	
COCIRCLE		36,000	36,000	36,000	96,000	
IRENE		18,000	18,000	78,000	78,000	
PHAWIDE		3,500	3,500	3,500	3,500	
B. PHYSICAL IMPROVEMENTS SUBTOTAL			319,000	434,000	461,000	459,750
C. MANAGEMENT IMPROVEMENTS			160,000	160,000	160,000	160,000
D. HA-WIDEN ON DWELLING STRUCT & EQUIPMENT			203,000	78,000	68,000	68,000
E. ADMINISTRATION			47,000	49,500	49,500	49,500
F. OTHER			53,000	53,000	53,000	53,000
G. OPERATIONS			120,000	120,000	105,000	105,000
H. DEMOLITION			0	0	0	0
I. REPLACEMENT RESERVE		0	0	0	0	
J. MOD USED FOR DEVELOPMENT		0	0	0	0	
K. TOTAL CFP FUNDS		902,000	894,500	896,500	895,250	
L. TOTAL NON-CFP FUNDS		0	0	0	0	
M. GRAND TOTAL		<b>902,000</b>	<b>894,500</b>	<b>896,500</b>	<b>895,250</b>	
Signature of Executive Director and Date			Signature of Public Housing Director/Office of Native American Programs Administrator and Date			
WALTER GUILLORY July 11, 2002						

**Five-Year Action Plan  
Part II: Supporting Pages  
Physical Needs Work Statement(s)  
Capital Fund Program (CFP)**

OMB Approval No. 2577-015

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

**LAFAYETTE HA2002**

Work Statement FFY:2002	Work Statement for Year 2 FFY:2003					
	of Major Work Categories	Quantity	Estimated Cost	of Major Work Categories	Quantity	
<b>See Annual Statement</b>	<b>SITE IMPROVEMENTS</b>			<b>MLK</b>		
	MISC SITE WORK FOR BLDGS		12,000	INSTALL CENTRAL A/C UNITS (INCL INSUL+ELEC) (4 UNITS)		
	SIDEWALK REPAIR		5,000	SUBTOTAL		
	SPEED BUMPS-MOSSST		3,000			
	FENCING		10,000			
	LANDSCAPING/DIRT FILL		10,000			
	UTILITY SYSTEM IMPROVEMENTS		8,500			
			48,500			
	<b>MOSSST</b>			<b>C.O. CIRCLE</b>		
	REPLACE DRAIN BASKETS		18,000	INSTALL CENTRAL A/C UNITS (INCL INSUL+ELEC) (8 UNITS)		
	REPLACE DOOR LOCKS (DEADBOLTS)		7,500	SUBTOTAL		
	INSTALL CENTRAL A/C UNITS (INCL INSUL+ELEC) (4 UNITS)		18,000			
	SUBTOTAL		43,500			
	<b>SIMCOE</b>			<b>IRENE</b>		
	REPLACE DOOR LOCKS (DEADBOLTS)		5,000	INSTALL CENTRAL A/C UNITS (INCL INSUL+ELEC) (4 UNITS)		
	INSTALL CENTRAL A/C UNITS (INCL INSUL+ELEC) (4 UNITS)		18,000	SUBTOTAL		
	REPLACE METAL COLUMNS		15,000			
	SUBTOTAL		38,000			
	<b>MACON ROAD</b>			<b>NON DWELLING BUILDINGS</b>		
	SECURITY DOORS		20,000	COMMUNITY BLDG AT IRENE		
	REPLACE DOOR LOCKS (DEADBOLTS)		7,500			
	BATHROOM/KITCHEN RENOVATIONS (8)		36,000			
	REPLACE DRAIN BASKETS		14,500	<b>DWELLEQUIP</b>		
	INSTALL CENTRAL A/C UNITS (INCL INSUL+ELEC) (4 UNITS)		18,000	APPLIANCES		
	REPLACE FLOOR TILE (8)		15,000			
	TERMITER REPAIR		3,500			
	SUBTOTAL		114,500	<b>NON DWELLEQUIP</b>		
	<b>PHAWIDE</b>			LAWN/MAINT SHOPEQUIP		
	REPLACE 20 KITCHEN HOODS		2,500	MAINT TRUCK		
	WINDOW BLINDS		1,000			
		Subtotal of Estimated Cost			Subtotal of Estimated Cost	

**Five-Year Action Plan  
Part II: Supporting Pages  
Physical Needs Work Statement(s)  
Capital Fund Program (CFP)**

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

**LAFAYETTE HA**

Estimated Cost	Work Statement FFY:2002	Work Statement for Year 3 FFY:2004				
		of Major Work Categories	Quantity	Estimated Cost	of Major Work Categories	
	<b>See Annual Statement</b>	<b>SITE IMPROVEMENTS</b>			<b>MLK</b>	
18,000		MISC SITE WORK FOR BLDGS		12,000	BATHROOM/KITCHEN RENOVATIONS(12)	
18,000		SIDEWALK REPAIR		5,000	REPLACE FLOOR TILE(12)	
		SPEED BUMPS-MOSS ST		3,000	INSTALL CENTRAL A/C UNITS (INCL INSUL+ELEC)(4 UNITS)	
		FENCING		10,000	PAINT BEDROOMS IN 12 UNITS	
		LANDSCAPING/DIRT FILL		10,000	REPLACE INTERIOR DOORS(40)	
		CONC. DRIVE AND PARKING AT MAINT BLDG		55,000	REPLACE INTERIOR LOCKSETS	
		UTILITY SYSTEM IMPROVEMENTS		8,500	SUBTOTAL	
				103,500		
			<b>MOSS ST</b>			<b>C.O.CIRCLE</b>
			INSTALL CENTRAL A/C UNITS (INCL INSUL+ELEC)(4 UNITS)		18,000	INSTALL CENTRAL A/C UNITS (INCL INSUL+ELEC)(8 UNITS)
36,000			SUBTOTAL		18,000	SUBTOTAL
36,000						
			<b>SIMCOE</b>			
			INSTALL CENTRAL A/C UNITS (INCL INSUL+ELEC)(4 UNITS)		18,000	
			REPLACE INTERIOR DOORS(20)		2,500	<b>IRENE</b>
18,000			REPLACE INTERIOR LOCKSETS		3,000	INSTALL CENTRAL A/C UNITS (INCL INSUL+ELEC)(4 UNITS)
18,000			SUBTOTAL		23,500	SUBTOTAL
			<b>MACON ROAD</b>			
			BATHROOM/KITCHEN RENOVATIONS(12)		48,000	<b>NON DWELLING BUILDINGS</b>
150,000		REPLACE FLOOR TILE(12)		22,000	COMMUNITY ROOM AT C.O.CIRCLE	
		INSTALL CENTRAL A/C UNITS (INCL INSUL+ELEC)(4 UNITS)		18,000	OFFICE MODIFICATIONS	
		REPLACE 10 EXT DOORS		7,500		
		WEATHER-STRIP DOORS		5,000	<b>DWELLEQUIP</b>	
23,000		PAINT BEDROOMS IN 12 UNITS		12,000	APPLIANCES	
		REPLACE INTERIOR DOORS(40)		5,000		
		REPLACE INTERIOR LOCKSETS		5,000	<b>NON DWELLEQUIP</b>	
10,000		SUBTOTAL		122,500	LAWN/MAINT SHOP EQUIP	
20,000						
30,000		<b>PHAWIDE</b>				
		REPLACE 20 KITCHEN HOODS		2,500		
		WINDOW BLINDS		1,000		
<b>\$522,000</b>			Subtotal of Estimated Cost		Subtotal of Estim:	



**Five-Year Action Plan  
Part II: Supporting Pages  
Physical Needs Work Statement(s)  
Capital Fund Program (CFP)**

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

LAFAYETTE HA 2002

		Work Statement FFY:2002	Work Statement for Year 5 FFY:2006			
			of Major Work Categories	Quantity	Estimated Cost	of Major Work C
			<b>SITE IMPROVEMENTS</b>			<b>MLK</b>
		100,000	MISC SITE WORK FOR BLDGS		12,000	BATHROOM/KITCHEN RENOVATION
		36,000	SIDEWALK REPAIR		5,000	REPLACE FLOORING (12)
		18,000	SPEED BUMPS-MACON RD		3,000	PAINT BEDROOMS IN 12 UNITS
		8,000	FENCING		10,000	INSTALL CENTRAL A/C UNITS (INCLIN
TS)		18,000	LANDSCAPING/DIRT FILL		10,000	SUBTOTAL
		180,000	UTILITY SYSTEM IMPROVEMENTS		8,500	
					48,500	
			<b>MOSS ST</b>			<b>C.O. CIRCLE</b>
			INSTALL CENTRAL A/C UNITS (INCLIN SUL+ELEC) (4 UNITS)		18,000	INSTALL CENTRAL A/C UNITS (INCLIN
TS)		36,000	SUBTOTAL		18,000	BATHROOM/KITCHEN RENOVATION
		36,000			18,000	PAINT KITCHEN-BEDROOMS IN 25 UN
						SUBTOTAL
			<b>SIM COE</b>			<b>IRENE</b>
TS)		18,000	INSTALL CENTRAL A/C UNITS (INCLIN SUL+ELEC) (4 UNITS)		18,000	INSTALL CENTRAL A/C UNITS (INCLIN
		48,000	SUBTOTAL		18,000	BATHROOM/KITCHEN RENOVATION
		12,000				PAINT BEDROOMS IN 12 UNITS
		78,000	SUBTOTAL			SUBTOTAL
			<b>MACON ROAD</b>			<b>NON DWELLING BUILDINGS</b>
			BATHROOM/KITCHEN RENOVATIONS (8)		36,000	
		10,000	REPLACE FLOOR TILE (8)		18,000	OFFICE MODIFICATIONS
		10,000	REPLACE 25 EXT DOORS		18,750	SUBTOTAL
			INSTALL CENTRAL A/C UNITS (INCLIN SUL+ELEC) (4 UNITS)		18,000	
			PAINT BEDROOMS IN 8 UNITS		8,000	<b>DWELLEQUIP</b>
		28,000	SUBTOTAL		98,750	APPLIANCES
						<b>NON DWELLEQUIP</b>
		10,000				LAWN/MAINT SHOPEQUIP
		20,000	<b>PHAWIDE</b>			MAINT TRUCK
		30,000	REPLACE 20 KITCHEN HOODS		2,500	
			WINDOW BLINDS		1,000	
		<b>\$529,000</b>				
Subtotal of Estimated Cost				Subtotal of Estimated Cost		

## Five-Year Action Plan Part III: Supporting Pages Management Needs Work Statement(s) Capital Fund Program (CFP)

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

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LAFAYETTEHA2002

		Work Statement FFY:2002	Work Statement for Year 2 FFY:2003			
Categories	Quantity	Estimated Cost	of Major Work Categories	Quantity	Estimated Cost	
IS(12)		48,000	<b>OPERATIONS</b> A. INSURANCE, STAFF SALARIES B. TENMAST COMPUTER CONSULTANT C. LOCAL COMPUTER CONSULTANT D. ACCOUNTING CLERK (OPERATING ACCOUNT) E. CONTRACT ACCOUNTING (OPERATING ACCOUNT)  <b>MANAGEMENT IMPROVEMENTS</b> A. STAFF/RESIDENT TRAINING B. COMPUTER SOFTWARE UPGRADE C. RESIDENT APPRENTICESHIP PROGRAM D. RESIDENT PROGRAM TRANSPORTATION E. RESIDENT TUTORING PROGRAM F. RESIDENT WORK PROGRAM G. RESIDENT INITIATIVE SUPPLIES H. RESIDENT INITIATIVE COOR. ASST. I. SRC CITIZENSHIP PROGRAM COORDINATOR J. SERVICE/ATHLETIC COORDINATOR K. FRINGE BENEFITS/TAXES SUBTOTAL L. COMPUTER HARDWARE UPGRADE  <b>ADMIN</b> A. CFP ACCOUNT CLERK B. CFP ADMIN COOR C. CFP MONITORING BY MAIN STAFF  <b>FEES AND COSTS</b> A. A/E FEES B. CONTRACT ACCOUNTING C. CFP ANNUAL STATEMENT D. PLANNING COSTS			
		22,000				60,000
		12,000				19,500
ISUL+ELEC)(4UNITS)		18,000				3,000
		100,000				7,500
				TOTAL 1406		30,000
						120,000
ISUL+ELEC)(4UNITS)		18,000				12,000
IS(12)		48,000				5,000
ITS		30,000				16,000
		96,000				5,500
						8,500
						12,000
						10,500
ISUL+ELEC)(4UNITS)		18,000			31,500	
IS(12)		48,000			18,000	
		12,000			12,000	
		78,000			14,000	
			TOTAL 1408		145,000	
					15,000	
					160,000	
		10,000				
		10,000			6,500	
					37,000	
					6,000	
		28,000	TOTAL 1411		49,500	
		10,000			38,000	
		20,000			6,000	
		30,000			2,500	
			TOTAL 1430		2,000	
					48,500	
Subtotal of Estimated Cost		<b>\$527,750</b>	Subtotal of Estimated Cost		<b>\$378,000</b>	

## Five-Year Action Plan Part III: Supporting Pages Management Needs Work Statement(s) Capital Fund Program (CFP)

Urban Development

LAFAYETTEHA2002

U.S. Department  
Office of Publican

Work Statement for Year 3 FFY:2004			Work Statement FFY:2002	Work Statement for Year 4 FFY:2005		
of Major Work Categories	Quantity	Estimated Cost		of Major Work Categories	Quantity	Estimated Cost
<b>OPERATIONS</b>			<b>See Statement</b>	<b>OPERATIONS</b>		
STAFF SALARIES		60,000		A. INSURANCE, STAFF SALARIES		50,000
COMPUTER CONSULTANT		19,500		B. TENANT COMPUTER CONSULTANT		19,500
LOCAL CONSULTANT		3,000		C. LOCAL COMPUTER CONSULTANT		3,000
CLERK (OPERATING ACCOUNT)		7,500		D. ACCOUNTING CLERK (OPERATING ACCOUNT)		7,500
ACCOUNTING (OPERATING ACCOUNT)		30,000		E. CONTRACT ACCOUNTING (OPERATING ACCOUNT)		25,000
TOTAL 1406		120,000		TOTAL 1406		105,000
<b>IMPROVEMENTS</b>				<b>MANAGEMENT IMPROVEMENTS</b>		
TRAINING		12,000		A. STAFF/RESIDENT TRAINING		12,000
SOFTWARE UPGRADE		5,000		B. COMPUTER SOFTWARE UPGRADE		5,000
RENTICESHIP PROGRAM		16,000		C. RESIDENT APPRENTICESHIP PROGRAM		16,000
GRAM TRANSPORTATION		5,500		D. RESIDENT PROGRAM TRANSPORTATION		5,500
DRIVING PROGRAM		8,500		E. RESIDENT TUTORING PROGRAM		8,500
WORK PROGRAM		12,000		F. RESIDENT WORK PROGRAM		12,000
INITIATIVE SUPPLIES		10,500	G. RESIDENT INITIATIVE SUPPLIES		10,500	
INITIATIVE COOR. ASST.		31,500	H. RESIDENT INITIATIVE COOR. ASST.		31,500	
PROGRAM COORDINATOR		18,000	I. SRC CITIZEN PROGRAM COORDINATOR		18,000	
ETHNIC COORDINATOR		12,000	J. SERVICE/ATHLETIC COORDINATOR		12,000	
FRINGE BENEFITS/TAXES		14,000	K. FRINGE BENEFITS/TAXES		14,000	
		145,000	SUBTOTAL		145,000	
HARDWARE UPGRADE		15,000	L. COMPUTER HARDWARE UPGRADE		15,000	
TOTAL 1408		160,000	TOTAL 1408		160,000	
<b>ADMIN</b>			<b>ADMIN</b>			
CLERK		6,500	A. CFP ACCOUNT CLERK		6,500	
COORDINATOR		37,000	B. CFP ADMIN COOR		37,000	
BY MAIN STAFF		6,000	C. CFP MONITORING BY MAIN STAFF		6,000	
TOTAL 1411		49,500	TOTAL 1411		49,500	
<b>FEES AND COSTS</b>			<b>FEES AND COSTS</b>			
		38,000	A. A/F FEES		38,000	
ACCOUNTING		6,000	B. CONTRACT ACCOUNTING		6,000	
STATEMENT		2,500	C. CFP ANNUAL STATEMENT		2,500	
PLANNING COSTS		2,000	D. PLANNING COSTS		2,000	
TOTAL 1430		48,500	TOTAL 1430		48,500	
Subtotal of Estimated Cost				Subtotal of Estimated Cost		
<b>\$378,000</b>				<b>\$363,000</b>		

**to of Housing and Urban Development**

of Indian Housing

**LAFAYETTE HA2002**

Work Statement for Year 5		
FFY: 2006		
of Major Work Categories	Quantity	Estimated Cost
<b>OPERATIONS</b>		
A. INSURANCE, STAFF SALARIES		50,000
B. TENANT COMPUTER CONSULTANT		19,500
C. LOCAL COMPUTER CONSULTANT		3,000
D. ACCOUNTING CLERK (OPERATING ACCOUNT)		7,500
E. CONTRACT ACCOUNTING (OPERATING ACCOUNT)		25,000
TOTAL 1406		105,000
<b>MANAGEMENT IMPROVEMENTS</b>		
A. STAFF/RESIDENT TRAINING		12,000
B. COMPUTER SOFTWARE UPGRADE		5,000
C. RESIDENT APPRENTICESHIP PROGRAM		16,000
D. RESIDENT PROGRAM TRANSPORTATION		5,500
E. RESIDENT TUTORING PROGRAM		8,500
F. RESIDENT WORK PROGRAM		12,000
G. RESIDENT INITIATIVE SUPPLIES		10,500
H. RESIDENT INITIATIVE COOR. ASST.		31,500
I. SRC CITIZEN PROGRAM COORDINATOR		18,000
J. SERVICE/ATHLETIC COORDINATOR		12,000
K. FRINGE BENEFITS/TAXES		14,000
SUBTOTAL		145,000
L. COMPUTER HARDWARE UPGRADE		15,000
TOTAL 1408		160,000
<b>ADMIN</b>		
A. CFP ACCOUNT CLERK		6,500
B. CFP ADMIN COOR		37,000
C. CFP MONITORING BY MAIN STAFF		6,000
TOTAL 1411		49,500
<b>FEES AND COSTS</b>		
A. A/EFEEES		38,000
B. CONTRACT ACCOUNTING		6,000
C. CFP ANNUAL STATEMENT		2,500
D. PLANNING COSTS		2,000
TOTAL 1430		48,500
Subtotal of Estimated Cost		<b>\$363,000</b>

# LAFAYETTEHOUSINGAUTHORITY ORGANIZATIONALCHART(Attachment“D”)La005d01

**WalterGuillory**  
ExecutiveDirector

**JanieAnderson**  
DeputyDirector

**Admin.Asst .**

