

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

PHA Plans

5 Year Plan for Fiscal Years 2002 - 2006
Annual Plan for Fiscal Year 2002

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

**PHA Plan
Agency Identification**

**PHAName: Housing Authority of the County of Scotts Bluff, NE
89A Woodley Park Road
Gering, NE 69341**

308-632-0473 Phone 308 -632-0476 Fax

sbha@prairieweb.com

PHANumber: NE078

PHA Fiscal Year Beginning: 07/01/2002

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)

The mission of the SBHA is to promote adequate and affordable housing, create opportunities for resident's self -sufficiency and economic independence; and assure fiscal integrity by all program participants and administrators.

In order to achieve this mission, we will:

- **Recognize the residents as our ultimate customer**
- **Strive to improve PHA management, communication and service delivery efforts through oversight, assistance, and selective intervention by highly skilled, dedicated and result -oriented personnel**
- **Seek problem -solving partnerships with PHA, resident, community and government leadership**
- **Act as an agent for change when performance improvements are needed**
- **Efficiently apply limited HUD resources by using risk management techniques to focus on our efforts**
- **Utilize a variety of public/private partnerships for financing housing expansion.**

B.Goals

The goals and objectives listed below are derived from HUD's strategic Goals and Objectives and those emphasized in recent legislation. PHA may select any of these goals and objectives as their own, or identify other goals and/or objectives. Whether selecting the HUD -suggested objectives or their own, **PHAS ARE STRONGLY ENCOURAGED TO IDENTIFY QUANTIFIABLE MEASURES OF SUCCESS IN REACHING THEIR OBJECTIVES OVER THE COURSE OF THE 5 YEARS.** (Quantifiable measures would include target sets such as: numbers of families served or PHA scores achieved.) PHA 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: In July 2002 to January 2003
- Reduce public housing vacancies:
- Leverage private or other public funds to create additional housing opportunities:
- Acquire or build units or developments Build 2 or more houses in Pathfinder
- Other (list below)

- PHA Goal: Improve the quality of assisted housing
Objectives:
 - Improve public housing management: (PHAS score) 86/adjusted to 89
 - Improve voucher management: (SEMAP score) 88
 - Increase customer satisfaction:
 - Concentrate on efforts to improve specific management functions: (list; e.g., public housing finance; voucher unit inspections)
 - Renovate or modernize public housing units:
 - Demolish or dispose of obsolete public housing:
 - Provide replacement public housing:
 - Provide replacement vouchers:
 - Other: (list below)

- PHA Goal: Increase assisted housing choices
Objectives:
 - Provide voucher mobility counseling:
 - Conduct outreach efforts to potential voucher landlords
 - Increase voucher payment standards Have requested Success Rate Voucher Standards - pending
 - Implement voucher homeownership program:
 - Implement public housing or other homeownership programs:
 - Implement public housing site-based waiting lists:
 - Convert public housing to vouchers:
 - Other: (list below)

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

- PHA Goal: Provide an improved living environment
Objectives:
 - Implement measures to deconcentrate poverty by bringing higher income public housing households into lower income developments:
 - Implement measures to promote income mixing in public housing by assuring access for lower income families into higher income developments:
 - Implement public housing security improvements:

- Designated developments or buildings for particular resident groups (elderly, persons with disabilities)
- Other: (list below) SBHA will continue to offer training opportunities in a variety of areas, primarily construction and maintenance through their TQM Program.

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: Assist Resident Council with ROS Grant preparation if desired
 - Provide or attract supportive services to improve assistance recipients' employability:
 - Provide or attract supportive services to increase independence for the elderly or families with disabilities.
 - Other: (list below) Accomplish through TQM and Senior ROSS Grant

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) Accomplished primarily through advertising and marketing of a variety of units now owned by SBHA

Other PHA Goals and Objectives: (list below)

AnnualPHAPlan
PHAFiscalYear2000
[24CFRPart903.7]

i. AnnualPlanType:

SelectwhichtypeofAnnualPlanthePHAwillsubmit.

StandardPlan

StreamlinedPlan:

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

TroubledAgencyPlan

ii. ExecutiveSummaryoftheAnnualPHAPlan

[24CFRPart903.79(r)]

ProvideabriefoverviewoftheinformationintheAnnualPlan,includinghighlightsanddiscretionarypoliciesofmajorinitiatives thePHAhasincludedintheAnnualPlan.

TheScottsBluffCountyHousingAgencyiscommittedtohousing income-qualifiedfamiliesaswellasthosemovingtoworkabovethe incomelimits.

- **Wechooset oofferhighquality,safeandaffordablehousing alongwithsupportiveservices,homeownershipandjob opportunitiesforourresidents.**
- **Wearealsocommittedtoprovidingchoiceofhousing throughtheadministrationofourSection8HousingChoice Voucherprogram.**
- **Proudly,wesubmitthatourresidenttrainingprogram (TQM)isoneofthebestinthenation**

Mostimportantly,webelievethatself -sufficiencyforour residentsisnotsomethingthatbestoweduponthem,but achievedwith themthroughteameffortswithotherresources, referralagencies,ourresidents,residentcouncil,housing authoritystaffandboardofCommissioner’sdedication. Ourteamofprofessionalseekstooffertheverybestof themselvesandtheprogramsfacilities,andresourcesthey administer.

iii. Annual Plan Table of Contents

[24CFR Part 903.79(r)]

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

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Attachments

Indicate which attachments are provided by selecting all that apply. Provide the attachment's name (A, B, 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 1
- FY2003 Capital Fund Program Annual Statement Attachment 5
- Most recent board -approved operating budget (Required Attachment for PHAs that are troubled or at risk of being designated troubled ONLY)

Optional Attachments:

- PHA Management Organizational Chart Attachment 6
- FY2003 Capital Fund Program 5 Year Action Plan (included in Work Plan #5)
- Public Housing Drug Elimination Program (PHDEP) Plan

- Comments of Resident Advisory Board or Boards (included)
- Other (List below, providing each attachment name)
 - Attachment 1 Deconcentration Policy
 - Attachment 2 Pet Policy
 - Attachment 3 Progress Report - Modernization
 - Attachment 4 Site -based waiting list
 - Attachment 7 Hardship Exemption Policy
 - Attachment 8 Utility Allowances
 - Attachment 9 Voluntary Conversion

Supporting Documents Available for Review

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

List of Supporting Documents Available for Review		
Applicable & On Display	Supporting Document	Applicable Plan Component
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 jurisdiction to implement any of the jurisdictions' initiatives to affirmatively further fair housing that require the PHA's involvement.	5 Year and Annual Plans
X	Consolidated Plan for the jurisdiction/s in which the PHA is located (which includes the Analysis of Impediments to Fair Housing Choice (AI)) and any additional backup data to support statement of housing needs in the jurisdiction	Annual Plan: Housing Needs
X	Most recent board -approved operating budget for the public housing program	Annual Plan: Financial Resources;
X	Public Housing Admissions and (Continued) Occupancy Policy (A&O), which includes the Tenant Selection and Assignment Plan [TSAP]	Annual Plan: Eligibility, Selection, and Admissions Policies
X	Section 8 Administrative Plan	Annual Plan: Eligibility, Selection, and Admissions Policies
X	Public Housing Deconcentration and Income Mixing Documentation: 1. PHA board certification 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	Annual Plan: Eligibility, Selection, and Admissions Policies

List of Supporting Documents Available for Review		
Applicable & On Display	Supporting Document	Applicable Plan Component
	2. Documentation of the required deconcentration and income mixing analysis	
X	Public housing rent determination policies, including the methodology for setting public housing flat rents <input checked="" type="checkbox"/> check here if included in the public housing A&O Policy	Annual Plan: Rent Determination
X	Schedule of flat rents offered at each public housing development <input 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
	Most recent CIAP Budget/Progress Report (HUD 52825) for any active CIAP grant	Annual Plan: Capital Needs
	Most recent, approved 5 Year Action Plan for the Capital Fund/Comprehensive Grant Program, if not included as an attachment (provided at PHA option)	Annual Plan: Capital Needs
	Approved HOPE VI applications or, if more recent, approved or submitted HOPE VI Revitalization Plans or any other approved proposal for development of public housing	Annual Plan: Capital Needs
	Approved or submitted application for demolition and/or disposition of public housing	Annual Plan: Demolition and Disposition
	Approved or submitted applications for designation of public housing (Designated Housing Plans)	Annual Plan: Designation of Public Housing
	Approved or submitted assessments of reasonable revitalization of public housing and approved or submitted conversion plans prepared pursuant to section 202 of the 1996 HUD Appropriations Act	Annual Plan: Conversion of Public Housing
	Approved or submitted public housing home ownership programs/plans	Annual Plan: Homeownership
X	Policies governing any Section 8 Homeownership program <input checked="" type="checkbox"/> check here if included in the Section 8 Administrative Plan	Annual Plan: Homeownership
X	Any cooperative agreement between the PHA and the TANF	Annual Plan: Community

List of Supporting Documents Available for Review		
Applicable & On Display	Supporting Document	Applicable Plan Component
	agency	Service & Self - Sufficiency
	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 result of that audit and the PHA's response to any findings	Annual Plan: Annual Audit
	Troubled PHAs: MOA/Recovery Plan	Troubled PHAs
	Other supporting documents (optional) (list individually; use as many lines as necessary)	(specify as needed)

1. Statement of Housing Needs

[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.

Housing Needs of Families in the Jurisdiction by Family Type							
Family Type	Overall	Afford- ability	Supply	Quality	Access- ibility	Size	Loca- tion
Income <= 30% of AMI	765	652	194	5	5	1-3br	County
Income > 30% but <= 50% of AMI	604	406	454	4	5	1-3br	County
Income > 50% but < 80% of AMI	789	236	523	3	5	1-3br	County
Elderly	803	374	193	3	5	1br	County
Families with Disabilities	7	7	0	n/a	5	3+br	County
Race/Ethnicity HISPANIC	51.1%	5	n/a	n/a	5	1-3+br	County

Housing Needsof FamiliesintheJurisdiction byFamilyType							
FamilyType	Overall	Afford- ability	Supply	Quality	Access- ibility	Size	Loca- tion
Race/Ethnicity Black	36%	5	n/a	n/a	5	1-3br	County
Race/Ethnicity							
Race/Ethnicity							

WhatsourcesofinformationdidthePHAusetoconductthisanalysis?(Checkallthat apply;allmaterials mustbemadeavailableforpublicinspection.)

- ConsolidatedPlanoftheJurisdiction/s
Indicateyear:StateofNebrask a2000 -2005
RelevantHighlights:
1)notmuchspeculativebuilding,expansionshavenotmaterialized
2)Whitepopulationgrowthby3%,Blackpopulationgrowthby10%,Native Americanpopulationgrowthby12%andAsian/PacificIslandersgrowthby 7%,Hispanicpopulationgrowthby16%.
3) Conservativeestimateofhousingneedswouldsuggestthatnear -homeless, homeless,and specialneeds populationwillgrowby4%
- U.S.Censusdata:theComprehensiveHousingAffordabilit yStrategy (“CHAS”)dataset1990
- AmericanHousingSurveydata
Indicateyear:
- Otherhousingmarketstudy
Indicateyear:
- Othersources:(listandindicateyearofinformation)
2000MarketStudyforBarrier -FreeHousing
Definateneedfor1,2&3 bedroomaccessibleunits

B. HousingNeedsofFamiliesonthePublicHousingandSection8 Tenant-BasedAssistanceWaitingLists

StatethehousingneedsofthefamiliesonthePHA’swaitinglist/s .Completeonetableforeachtype ofPHA -widewaitinglist administeredbythePHA. PHAsmayprovideseperatetablesforsite - basedorsub -jurisdictionalpublichousingwaitinglistsattheiroption.

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 Sec 8 PHA	% of total families	Annual Turnover Sec 8 PHA
Waiting list total	5116		240114
Extremely low income <= 30% AMI	5116	100%	
Very low income (>30% but <=50% AMI)			
Low income (>50% but <80% AMI)			
Families with children	3411	67%	
Elderly families	44	12%	
Families with Disabilities	51	9%	
Race/ethnicity white	4616	93%	
Race/ethnicity AI	50	8%	
Race/ethnicity Black	00	0%	
Race/ethnicity Asian Pacific Islander	00	0%	
Single 809%			
Characteristics by Bedroom Size (Public Housing Only)			
1BR	4	25%	
2BR	7	44%	
3BR	5	31%	
4BR			
5BR			
5+BR			

Housing Needs of Families on the Waiting List

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

If yes:

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

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

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

C. Strategy for Addressing Needs

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

(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 -up rates by establishing payment standards that will enable families to rent throughout the jurisdiction
- Undertake measures to ensure access to affordable housing among families assisted by the PHA, regardless of unit size required
- Maintain or increase section 8 lease -up rates by marketing the program to owners, particularly those outside of areas of minority and poverty concentration
- Maintain or increase section 8 lease -up rates by effective screening of 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: (list below) Admi ssion and occupancy policies reflect a preference for elderly and near -elderly in their communities in Colson Manor, Morrill Manor and Bluff View complex.

Need: Specific Family Types: Families with Disabilities

Strategy1: TargetavailableassistancetoFamilieswithDisabilities:

Selectallthatapply

- Seekdesignationofpublichousingforfamilieswithdisabilities
- Carryoutthemodifications neededinpublichousingbasedonthesection504 NeedsAssessmentforPublicHousing
- Applyforspecial -purposevoucherstargetedtofamilieswithdisabilities, shouldtheybecomeavailable
- Affirmativelymarkettolocal non- profitagenciesthatassistfamilieswith disabilities
- Other:(listbelow)TheadmissionsandoccupancypoliciesofSBHArelect firstpreferenceforelderlyanddisabledpersons,secondpreferencenear -elderlyover singleadults. Barrier-freehomeswerecompleted&100%occupiedbyOctober31, 2001.Theyremain100%occupied.

Need:SpecificFamilyTypes:Racesorethnicitieswithdisproportionatehousing needs

Strategy1:IncreaseawarenessofPHAresourcesamongfamiliesof racesand ethnicitieswithdisproportionateneeds:

Selectifapplicable

- Affirmativelymarkettoraces/ethnicitiesshowntohavedisproportionate housingneeds
- Other:(listbelow)SBHAaffirmativelymarketstoallraces/ ethnicgroups

Strategy2:Conductactivitiestoaffirmativelyfurtherfairhousing

Selectallthatapply

- Counselesection8tenantsastolocationofunitsoutsideofareasofpovertyor minorityconcentrationandassistthemtolocate thoseunits
- Marketthesection8programtoownersoutsideofareasofpoverty/minority concentrations
- Other:(listbelow)SBHAmakesavailabletoallSection8participantsalistof allavailablehousingt hatlandlordshavecalledinwithvacancies.Rentalsof apartmentsandhousesareallclippedfromthelocalnewspaperandpresented atbriefingaswellaspostedonourbulletinboardsinthelobby.

OtherHousingNeeds&Strategi es:(listneedsandstrategiesbelow)

(2)ReasonsforSelectingStrategies

Ofthefactorslistedbelow,selectallthatinfluencedthePHA'sselectionofthe strategiesitwillpursue:

- Fundingconstraints
- Staffingcons traints

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

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 supportives services, Section 8 tenant-based assistance, Section 8 supportives services or other.

Financial Resources: Planned Sources and Uses		
Sources	Planned \$	Planned Uses
1. Federal Grants (FY 2002 grants)		
a) Public Housing Operating Fund	\$281,862	
b) Public Housing Capital Fund	\$267,292	
c) HOPE VI Revitalization		
d) HOPE VI Demolition		
e) Annual Contributions for Section 8 Tenant-Based Assistance	1,378,316	
f) Public Housing Drug Elimination Program (including any Technical Assistance funds)		
g) Resident Opportunity and Self-Sufficiency Grants	Will apply for Homeownership/Family & Sr.	
h) Community Development Block Grant		
i) HOME		
Other Federal Grants (list below)		
2. Prior Year Federal Grants (unobligated funds only) (list below)		

Financial Resources: Planned Sources and Uses		
Sources	Planned \$	Planned Uses
PHDEP2000	13,287.50	13,287.50
PHDEP2001	22,043.36	22,043.36
ROSS	30,026.91	30,026.91
CapitolFund2001	280,809.00	280,809.00
3. Public Housing Dwelling Rental Income		
	265,000.00	265,000.00
4. Other income (list below)		
Management BHA	13,000.00	13,000.00
Management Barrier Fee & Valencia	3,452.00 9,360.00	3,452.00 9,360.00
4. Non -federal sources (list below)		
Total resources	\$2,564,448.77	\$2,564,448.77

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) The verification process begins at the time of application. Criminal records are checked weekly and SBH delinquent files are cross-referenced at time of application.

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? four

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 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? four

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 Applicants are removed to the bottom of the list if they refuse the unit offered. They are removed from the waiting list after three offers. Failure to respond to two offers results in immediate termination from the waiting list. Failure to update their information which results in return of mail offer, also results in termination from the waiting list.

- 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?

100% of the families on the waiting list are at or below 30% or less of AMI.

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) Elderly, disabled, then near-elderly have preference over single adults in our elderly complexes.

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

1 Date and Time

Former Federal preferences:

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

Substandard housing
Homelessness
High rent burden

Other preferences (select all that apply)

- Working families and those unable to work because of age or disability
- Veterans and veterans' families
- Residents who live and/or work in the jurisdiction
- Those enrolled currently in educational, training, or upward mobility programs
- 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)

4. Relationship of preferences to income targeting requirements:

- The PHA applies preferences within income tiers
- Not applicable: the pool of applicant families ensure that the PHA will meet income targeting requirements. With the pool of applicants 100% at 30% or less of AMI, we should meet the income targeting requirements.

(5) Occupancy

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

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

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

- At an annual reexamination and lease renewal
- 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(s) to determine concentrations of poverty indicate the need for measures to promote deconcentration of poverty or

incomemixing?

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 incomemixing? Our waiting list is comprised of 100% families at or below 30% AMI.

c. If the answer to b was yes, what changes were readopted? (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 incomemixing 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 incomemixing?

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

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

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

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

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

- 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) Information is shared only with signed consent form from applicant/tenant.

(2) Waiting List Organization

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

- None
- Federal public housing
- Federal moderate rehabilitation
- Federal project -based certificate program

Other federal or local program (list below)

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

PHA main administrative office

Other (list below)

(3) Search Time

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

If yes, state circumstances below: Applicant request required

(4) Admissions Preferences

a. Income targeting

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

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

1 Date and Time

Former Federal preferences

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

Other preferences (select all that apply)

- Working families and those unable to work because of age or disability
- Veterans and veterans' families
- Residents who live and/or work in your 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)

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

- Date and time of application
- Drawing (lottery) or other random choice technique

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 ensures 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)

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 higher of 30% of adjusted monthly income, 10% of unadjusted monthly income, the welfare rent, or minimum rent (less HUD mandatory deductions and exclusions). (If selected, skip to sub -component (2))

---or---

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

b. Minimum Rent

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

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

SBHA minimum rent is set at \$50

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

3. If yes to question 2, list the policies below : **on file in ACOP & Attachment 7**
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?

New residents select from flat rent or rent based on 30% of adjusted income upon move-in. At an annual re-exam, resident may select flat rent or rent based on 30% of income. If flat rent is selected and a change of income occurs, the resident must complete an interim examination providing the information and can re-select the option best suited to their needs.

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

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 all adults in the household, we will not utilize income for one year if the household previously received TANF for 6 months or the person has been in job training program or unemployed for one year. We would utilize 50% income for year two and full income for year three.

- For increases in earned income
 Fixed amount (other than general rent -setting policy)

If yes, state amount/s and circumstances below:

SBHA offers choice of flat rents which are recurrently set at our Fair Market Rents for our Region.

- Fixed percentage (other than general rent -setting policy)
If yes, state percentage/s and circumstances below:

- For household heads

- For other family members
- For transportation expenses
- For the non-reimbursed medical expenses of non-disabled or non-elderly families
- Other (describe below)

e. Ceiling rents

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

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

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

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

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

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

f. Rent re-determinations:

1. Between income re-examinations, 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) \$500
- Other (list below) Changes in family composition must always be reported. To add members to a household requires SBHA approval.

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.)

- Thesection 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) FMR's for our region
1BR3332BR4223BR5244BR620

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)

PAYMENT STANDARD 1BR 2BR 3BR 4BR

Bayard/Bridgeport 355451576682

Kimball 353451577685

Cheyenne County 353451576655

Scottsbluff County 366464576682

Utility Allowances are shown in Attachment 8

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

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

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

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

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

- Annually
- Other (list below)

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

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

(2) Minimum Rent

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

- \$0
- \$1-\$25
- \$26-\$50 \$50 is the minimum rent for SBHA Section 8 program

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

5. Operations and Management

[24 CFR Part 903.79(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.PHAManagementStructure

Describe the PHA’s management structure and organization.

(select one)

- An organization chart showing the PHA’s management structure and organization is attached. Attachment 6
- A brief description of the management structure and organization of the PHA follows:

B.HUDProgramsUnderPHAManagement

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

Program Name	Units or Families Served at Year Beginning	Expected Turnover
Public Housing	162	97
Section 8 Vouchers	409	240
Section 8 Certificates		
Section 8 Mod Rehab		
Special Purpose Section 8 Certificates/Vouchers (list individually)		
Public Housing Drug Elimination Program (PHDEP)		
2000 & 2001	162	97
Other Federal Programs (list individually)		
ROSS	86	10

C.ManagementandMaintenancePolicies

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.

ks

(1)PublicHousingMaintenanceandManagement:(listbelow)

ONFILE

(2)Section8Management:(listbelow)

ONFILE

6. PHAgrievanceProcedures

[24CFRPart903.79(f)]

Exemptionsfromcomponent6:HighperformingPHAsarenotrequiredtocompletecomponent6.
Section8 -OnlyPHAsareexemptfromsub -component6A.

A. PublicHousing

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

If yes, list additions to federal requirements below:

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

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

B. Section 8 Tenant -Based Assistance

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

If yes, list additions to federal requirements below:

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

- PHA main administrative office
- Other (list below)

7. Capital Improvement Needs

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

Select one:

The Capital Fund Program Annual Statement is provided as an attachment to the PHA Plan at Attachment (state name) Attachment 5

-or-

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

(2) Optional 5 -Year Action Plan

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

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

Our five-year plan is a part of the 2003 Annual Statement and plan for Work Activities which cover the period 2002 – 2006.

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

-or-

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

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

Applicability of sub-component 7B: All PHAs administering public housing. Identify any approved 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

[24 CFR 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.)

Demolition/Disposition Activity Description	
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 streamlined submission; PHAs completing streamlined submissions may skip to component 10.)

2. Activity Description

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

Designation of Public Housing Activity Description	
1a. Development name:	
1b. Development (project) number:	
2. Designation type:	
Occupancy by only the elderly	<input type="checkbox"/>
Occupancy by families with disabilities	<input type="checkbox"/>
Occupancy by only elderly families and families with disabilities	<input type="checkbox"/>
3. Application status (select one)	
Approved; included in the PHA's Designation Plan	<input type="checkbox"/>
Submitted, pending approval	<input type="checkbox"/>
Planned application	<input type="checkbox"/>
4. Date this designation approved, submitted, or planned for submission:	<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:	
7. Coverage of action (select one)	
<input type="checkbox"/> Part of the development	
<input type="checkbox"/> Total development	

10. Conversion of Public Housing to Tenant -Based Assistance

[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 streamlined submission. PHAs

completingstreamlinedsubmissionsmayskiptocomponent 11.)

2.ActivityDescription

Yes No: HasthePHAprovidedallrequiredactivitydescription informationforthiscompon entinthe **optional**PublicHousing AssetManagementTable?If“yes”,skiptocomponent11.If “No”,completetheActivityDescriptiontablebelow.

ConversionofPublicHousingActivityDescription
1a.Developmentname: 1b.Development(project)number:
2.Whatisthestatusoftherequiredassessment? <input type="checkbox"/> Assessmentunderway <input type="checkbox"/> AssessmentresultssubmittedtoHUD <input type="checkbox"/> AssessmentresultsapprovedbyHUD(ifmarked,proceedtonext question) <input type="checkbox"/> Other(explainbelow)
3. <input type="checkbox"/> Yes <input type="checkbox"/> No:IsaConversionPlanrequired?(Ifyes,gotoblock4;ifno,goto block5.)
4.StatusofConversionPlan(selectthestatementthatbestdescribesthecurrent status) <input type="checkbox"/> ConversionPlanindevelopment <input type="checkbox"/> ConversionPlansubmittedtoHUDon:(DD/MM/YYYY) <input type="checkbox"/> ConversionPlanapprovedbyHUDon:(DD/MM/YYYY) <input type="checkbox"/> ActivitiespursuanttoHUD -approvedConversionPlanunder way
5.Descriptionofhowrequirements ofSection202arebeingsatisfiedbymeansother thanconversion(selectone) <input type="checkbox"/> Unitsaddressedinapendingorapproveddemolitionapplication(date submittedorapproved: <input type="checkbox"/> UnitsaddressedinapendingorapprovedHOPEVIDemolitionapplication (datesubmittedorapproved:) <input type="checkbox"/> UnitsaddressedinapendingorapprovedHOPEVIREvitalizationPlan (datesubmittedora pproved:) <input type="checkbox"/> Requirementsnolongerapplicable:vacancyratesarelessthan10percent <input type="checkbox"/> Requirementsnolongerapplicable:sitenowhaslessthan300units <input type="checkbox"/> Other:(describewhatbelow)

B.ReservedforConversionspursuanttoSection22oftheU.S.HousingActof 1937

C.ReservedforConversionspursuanttoSection33oftheU.S.HousingActof 1937

11.HomeownershipProgramsAdministeredbythePHA

[24CFRPart903.79(k)]

A.PublicHousing

ExemptionsfromComponent11A:Section8onlyPHAsarenotrequiredtocomplete11A.

1. Yes No: DoesthePHAadministeranyhomeownershipprograms administeredbythePHAunderanapprovedsection5(h) homeownershipprogram(42U.S.C.1437c(h)),oranapproved HOPE Iprogram(42U.S.C.1437aaa)orhasthePHAappliedor plantoapplytoadministeranyhomeownershipprogramsunder section5(h),theHOPEIprogram,orsection32oftheU.S. Housing Actof1937(42U.S.C.1437z -4).(If“No”,skipto component11B;if“yes”,completeoneactivitydescriptionfor eachapplicableprogram/plan,unlesseligibletocompletea streamlinedsubmissiondueto **smallPHA** or **highperforming PHA**status.PHAscompletingstreamlinedsubmissionsmay skiptocomponent11B.)

2.ActivityDescription

Yes No: HasthePHAprovidedallrequiredactivitydescription informationforthiscomponentinthe **optional**PublicHousing AssetManagementTable?(If“yes”,skiptocomponent12.If “No”,completetheActivityDescriptiontablebelow.)

PublicHousingHomeownershipActivityDescription (Completeoneforeachdevelopmentaffected)	
1a.Developmentname:	
1b.Development(project)number:	
2.FederalProgramauthority:	
<input type="checkbox"/> HOPEI <input type="checkbox"/> 5(h) <input type="checkbox"/> TurnkeyIII <input type="checkbox"/> Section32oftheUSHAof1937(effective10/1/99)	
3.Applicationstatus:(selectone)	
<input type="checkbox"/> Approved;includedinthePHA’sHomeownershipPlan/Program <input type="checkbox"/> Submitted,pendingapproval <input type="checkbox"/> Plannedapplication	
4.DateHomeownershipPlan/Programapproved,submitted,orplannedforsubmission:	

(DD/MM/YYYY)

5. Number of units affected:

6. Coverage of action: (select one)

Part of the development

Total development

B. Section 8 Tenant Based Assistance

1. Yes 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:

Applicants may be Section 8 eligible or Public Housing residents who have participated in housing assistance for 1 year and are still eligible for Section 8 participation.

12. PHA Community Service and Self -sufficiency Programs

[24 CFR Part 903.79(1)]

Exemptions from Component 12: High performing and small PHAs are not required to complete this component. Section 8 - Only PHAs are not required to complete sub - component C.
SBHA is exempt from community service requirements for this fiscal year

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? 05/ 01/2001

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 programsto 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.)

The Scotts Bluff County Housing Authority does not have a traditional FSS program. In 1993, the SBHA developed their own resident training program (TQM) through administrative reserves to promote family self-sufficiency. The administrative reserves were paid back and the program is self-supporting.

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

(2) Family Self Sufficiency Program/s

a. Participation Description

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

b. Yes No: If the PHA is not maintaining the minimum program size required by HUD, does the most recent FSS Action Plan address

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

C. Welfare Benefit Reductions

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

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

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

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) Tough screening along with strict lease enforcement and police above baseline contracts have been successful. Crime statistics down in all housing units. Cooperation with WING effective.

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)
Elderly housing is the least affected by crime

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

1. List the crime prevention activities the PHA has undertaken or 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) Above baseline law enforcement contract Resident Security Guard @ Rebecca Winters & Bluff View

2. Which developments are most affected? (list below)
Family developments are the most affected. Senior ROSS program affects senior developments.

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) Bike patrol training held at SBHA offices

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

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)]

15. Civil Rights Certifications

[24CFR Part 903.79(o)]

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

16. Fiscal Audit

[24CFR Part 903.79(p)]

- 1. Yes No: Is the PHA required to have an audit conducted under section 5(h)(2) of the U.S. Housing Act of 1937 (42 U.S.C. 1437c(h))? (If no, skip to component 17.)
- 2. Yes No: Was the most recent fiscal audit submitted to HUD?
- 3. Yes No: Were there any findings as the result of that audit?

4. Yes No: If there were any findings, do any remain unresolved?
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

[24CFR Part 903.79(q)]

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

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

18. Other Information

[24CFR Part 903.79(r)]

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 as Attachment (Filename)
- Provided below:
- Based on RASS & Resident Comments at Resident Council meetings:
- 1) Want better maintenance and repair of properties at all developments, better

response time & quality of work.

Largest concern at Minatare

2) Enhanced communication with residents via personal contact, newsletters
Advanced notice of maintenance required: changing locks, new appliance
Installation, etc. Strict enforcement wanted as well as good screening
of residents. Minatare seemed to have the biggest concerns. Easy request of
work orders a concern of residents – continued education about work order
system.

3) Safety rated lowest in Minatare, Colson Manor – HA met with residents
& it didn't seem to be a concern at the meeting.

4) Neighborhood appearance a concern at Minatare & Rebecca Winters –
grass, sprinklers, trash, dog messes will all be focused on with Spring
& continual clean up days as well as lease enforcement.

5) Some residents wanted central air – we opted to use Capitol funds for
new a/c units.

6) Some elderly questioned whether they could have their old laundry facility
back and complained about the maintenance of the Lost Sock Laundry
Would like washer & dryer in their apartments – not able to because of
the way the units are constructed – lack of room. Stack units = ? cost

7) Interest in having senior programs – hire a Senior Coordinator with
ROSS funds to implement programs in March.

8) Bluff View residents want a larger community room and people to treat
each other with respect.

9) Residents questioned need for new storm windows in Bluff View, ceiling
fans in elderly, new peepholes on doors, or new storm doors because they
block the peepholes.

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:

Uses of Capitol Funds & ROSS Grant to enhance maintenance & repair &
upgrade of apartments and in management of public housing office personnel
and maintenance personnel.

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.)

Our Resident Commissioner was appointed by the Scotts Bluff County Commissioners to a five-year term that began in 2000. He is currently serving on the Board of Commissioners. Our Resident Commissioner is Thomas Ackerman, Bluff View.

3. Description of Resident Election Process

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

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

b. Eligible candidates: (select one)

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

c. Eligible voters: (select all that apply)

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

C. Statement of Consistency with the Consolidated Plan

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

1. Consolidated Plan jurisdiction: State of Nebraska

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)

- ThePHAhasbaseditsstatementofneeds offamiliesinthejurisdictiononthe needsexpressedintheConsolidatedPlan/s.
- ThePHAhasparticipatedinanyconsultationprocessorganizedandofferedby theConsolidatedPlanagencyinthedevelopmentoftheConsolidatedPlan.
- ThePHAhasconsultedwiththeConsolidatedPlanagencyduringthe developmentofthisPHAPlan.
- ActivitiestobeundertakenbythePHAinthecomingyearareconsistentwith theinitiativescontainedintheConsolidated Plan.(listbelow)
- Other:(listbelow)

4.TheConsolidatedPlanofthejurisdictionsupportsthePHAPlanwiththefollowing actionsandcommitments:(describebelow)

D.OtherInformationRequiredbyHUD

Usethissectiontoprovide anyadditionalinformationrequestedbyHUD.

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	Amount of Annual Grant (Sum of lines 2 -19)	
21	Amount of line 20 Related to LBP Activities	
22	Amount of line 20 Related to Section 504 Compliance	
23	Amount of line 20 Related to Security	
24	Amount of line 20 Related to Energy Conservation Measures	

Annual Statement
Capital Fund Program (CFP) Part II: Supporting Table

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

**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)
Total estimated cost over next 5 years				

Component 3,(6) Deconcentration and Income Mixing

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

If yes, list these developments as follows:

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

PET OWNERSHIP POLICIES

Pet Ownership is not new to the SBHA. Family and senior residents have been able to own pets previously. Established procedures for pet ownership policies are found in detail in our Admissions and Occupancy Policies under Part XI I, revised July 1, 2001.

In summary, pet ownership is permitted with prior approval by the SBHA management staff, proper registration of pet, and payment of a \$250 pet deposit in both our family and senior public housing communities.

Pets are restricted to common household pets as defined by our partner, the Humane Society with proof of vaccination and licensure as applicable. Pets are limited to one per household. Pets do have a height and weight size limit as well. All pets are required to be spayed or neutered before entering the premises.

Details regarding pet "babysitting", responsible pet care, abandonment, nuisance, liability, are detailed in our pet policies. Failure to comply with pet policies are also detailed in the Admissions and Occupancy policy without cost that may include lease termination.

SBHA has found that with appropriate policies in place, we now have few violations and little damage as well from pets.

Companion animals are also identified in our pet policies and excluded from the deposit requirement with medical verification they are companion animals.

PROGRESS REPORT IN MEETING 5 - YEAR PLAN MISSION & GOALS

The SBHA is making progress toward the 5 -year plan. Apartment Remodeling has been most appreciated by residents. The Capitol Fund allocation is very important as a major renovation to our apartment has been only a spot attempt to improve through CIAP funding. Since our apartments are over 30 years old, we are now finding major plumbing, wall repair, floors, etc. needing to be done. Although the extensive nature of the work does involve intense labor, the progress is slow, but on target.

New appliances have been installed in the elderly apartments which include refrigerators, stoves, range hoods and window a/c's for those desiring a/c with additional units available for new tenants.

We have replaced the family appliances with the elderly units in excellent condition so all have been upgraded. The off-line -family units have new appliances in them as well. Used a/c units are available to our family units at an affordable fee. Upon disposal, monies are earned which go back into operations.

New storm windows with screens were installed in Bluff View which greatly enhanced the neighborhood appearance of the complex.

Residents have been appreciative of the work done on their behalf.

SITEBASEDWAITINGLISTASSESSMENT

The 2002 current waiting list is comprised of 92% white and 8% Native Americans with the corresponding Hispanic waiting list at 37% and non-Hispanics on the wait list at 63%.

Currently housed at each site including new admissions is as follows:

Hispanic	Non	-His.	White	Blk	Native Am.	Asian
78-1	Colson Manor	01716010				
78-2	Morrill	120		21000		
78-3	Bluff View	233858210				
78-5	Rebecca Wtrs	252945090				

Our report in P.I. Conn new admissions based on Head of Household race is incorrect so it was not helpful. Our new admissions have been in only two of the races listed white and Native American which also corresponds with our current waiting list. When data is updated correctly, we will be able to more accurately assess this requirement.

From our written application/waiting lists, we have the following New admission breakouts:

Hispanic	Non	-His	White	Blk	Native Am	Asian
78-1	Colson	0431				
78-2	Morrill	156				
78-3	Bluff View	911		191		
78-5	Rbca Wintr	1117235				

This reflects that we have new admissions from 36% of the Hispanic and 64% Non-Hispanic as well as good representation from the Native American population at 12% of the new admissions. We believe this to be very representative of the overall population of our service area.

Fair Housing continues to be of paramount importance to the Scotts Bluff County Housing Authority.

CAPITAL FUND PROGRAM TABLES START HERE

Annual Statement/Performance and Evaluation Report ATTACHMENT 5					
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I: Summary					
PHAName: SCOTTS BLUFF COUNTY HOUSING AUTHORITY		Grant Type and Number Capital Fund Program Grant No: NE26078501 -02 Replacement Housing Factor Grant No:		Federal FY of Grant: 2002	
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input checked="" type="checkbox"/> Revised Annual Statement (revision no: 1) <input type="checkbox"/> Performance and Evaluation Report for Period Ending: <input type="checkbox"/> Final Performance and Evaluation Report					
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total Non -CFP 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	\$15,000			
10	1460 Dwelling Structures	\$236,292			
11	1465.1 Dwelling Equipment — Nonexpendable	\$16,000			
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	1499 Development Activities				
19	1501 Collateralization or Debt Service				
20	1502 Contingency				

Annual Statement/Performance and Evaluation Report ATTACHMENT 5
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I: Summary

PHAName: SCOTTSBLUFF COUNTY HOUSING AUTHORITY	Grant Type and Number Capital Fund Program Grant No: NE26078501 -02 Replacement Housing Factor Grant No:	Federal FY of Grant: 2002
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Original Annual Statement
 Reserve for Disasters/Emergencies
 Revised Annual Statement (revision no: 1)
 Performance and Evaluation Report for Period Ending:
 Final Performance and Evaluation Report

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
21	Amount of Annual Grant: (sum of lines 2 -20)	\$267,292			
22	Amount of line 21 Related to LBP Activities				
23	Amount of line 21 Related to Section 504 compliance				
24	Amount of line 21 Related to Security - Soft Costs				
25	Amount of Line 21 Related to Security - Hard Costs				
26	Amount of line 21 Related to Energy Conservation Measures				

CapitalFundProgramFive -YearActionPlan
PartI:Summary

PHAName ScottsBluffCountyHousing Authority					<input type="checkbox"/> Original5 -YearPlan <input checked="" type="checkbox"/> RevisionNo:2
Development Number/Name/HA- Wide	Year1 2002	WorkStatementforYear2 FFYGrant:2003 PHAFY:7/01/2003	WorkStatementforYear3 FFYGrant:2004 PHAFY:7/01/04	WorkStatementforYear4 FFYGrant:2005 PHAFY:7/01/05	WorkStatementforYear5 FFYGrant:2006 PHAFY:7/01/06
78005	Annual Statement	SprinklerUpdate54FamilyUnits 48,000			
78005		RemodelApartmentscarpet,tile, cabinets,paint,205,809(17)	RemodelsApartments,carpet,ti le, Cabinets,paint41,809(4)	RemodelApartments. Carpet,tile,cabinets,paint 252,000(21)	RemodelApartments Carpet,tile,paint,cabinets (12)144,000
78005		Newappliancesforremodels17,000	Newappliancesforremodels4,000	NewAppliancesfor remodels21,000	Newappliancesfor remodels12,000
Ha-wide			Office/CommunityRoom remodel235,000		
Ha-wide		SideWalkRepair10,000		SidewalkRepair7,809	
HA-wide					CarpenterCenterParking Lot,carpet,tile,paint \$74,809
HA-Wide					Replacelaundryequipment Lostsock\$50,000
CFPFundsListedfor 5-yearplanning					

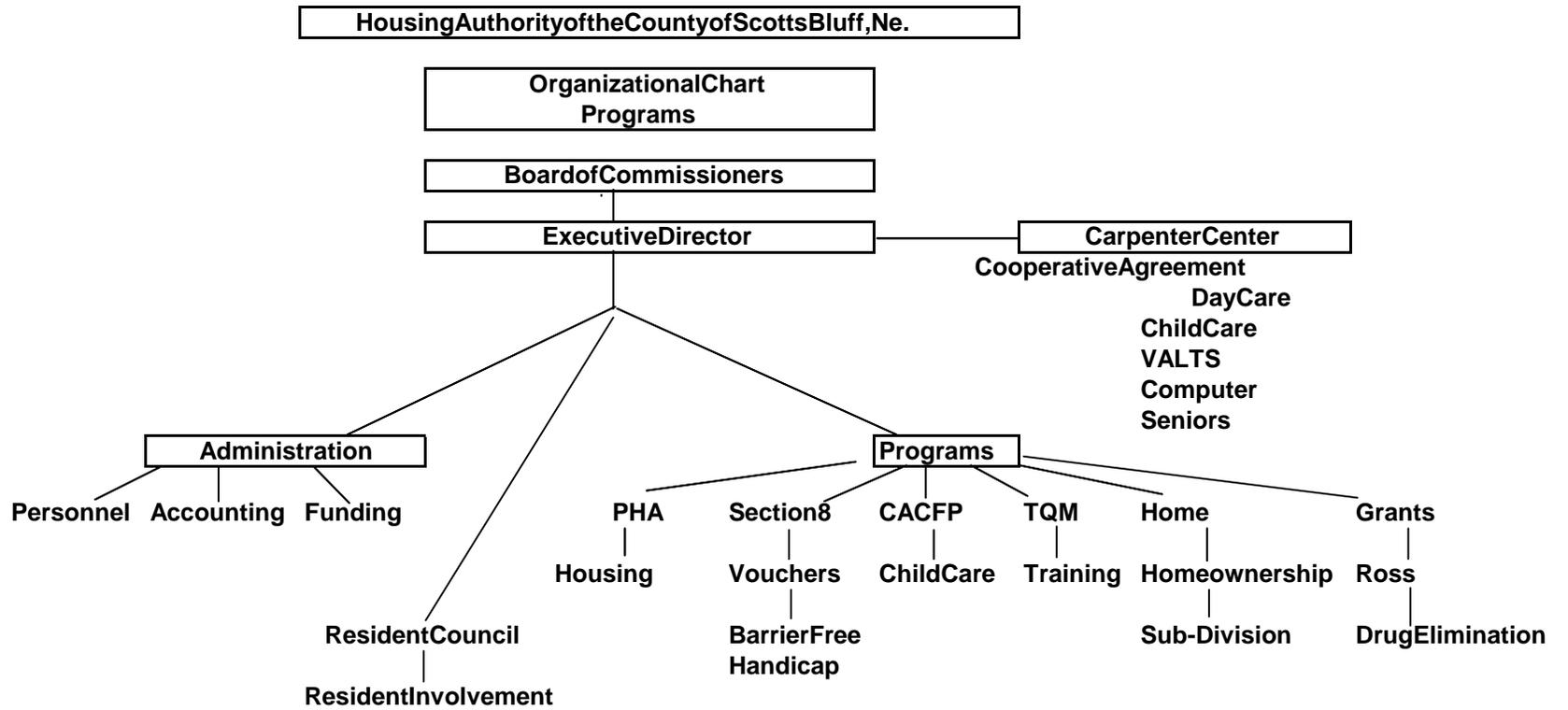
ReplacementHousing FactorFunds				
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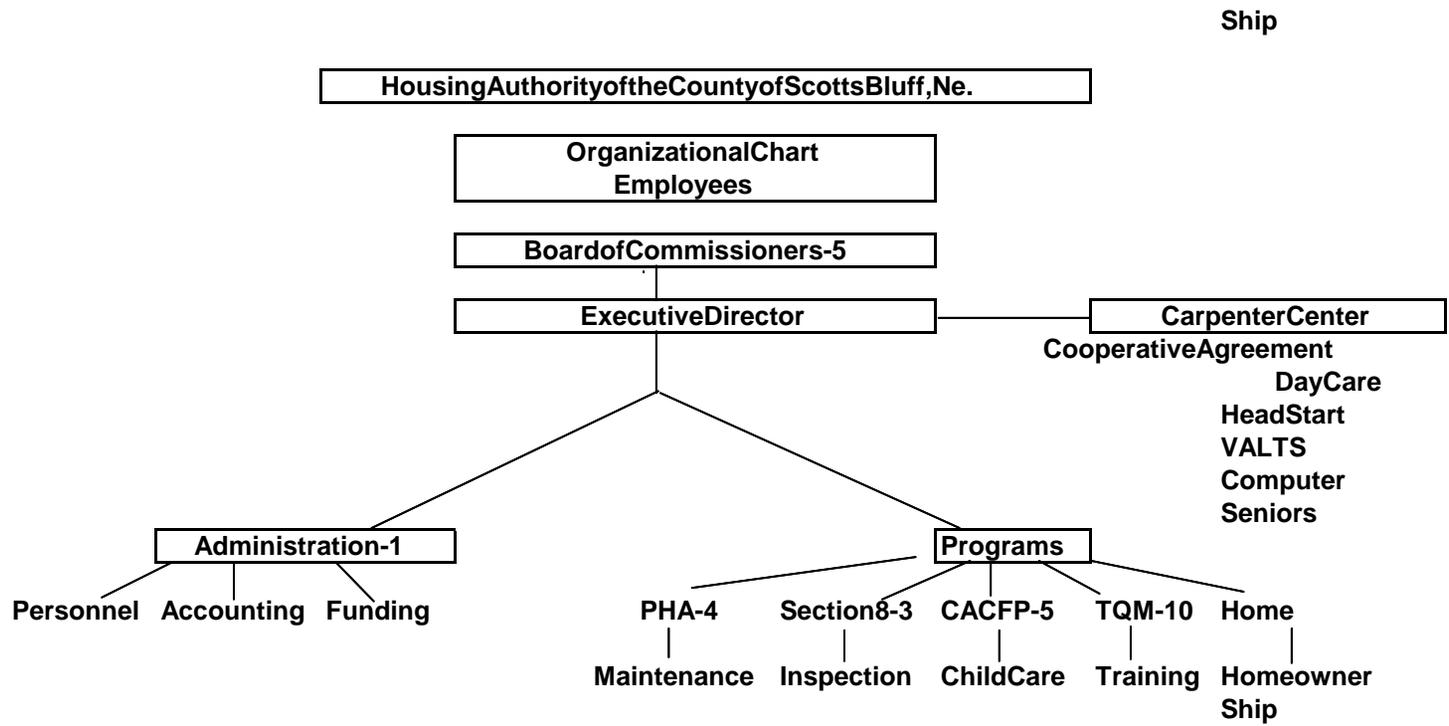
		TotalCFPEstimatedCost	\$280,809		280,809

**ScottsBluffCounty HousingAuthority
OrganizationalChart**

**ScottsBluffCountyCommissioners
ScottsBluffCountyHousingAuthorityBoardofCommissioners
ExecutiveDirector
ResourceDirector
Programs**

**TQM/Maintenance*Section8*PublicHousing*Child&Ad ultCareFoodProgram
Barrier-FreeHousing*PublicHousingDrugEliminationGrant*ResidentCouncil
*ValaciaApartments*PathfinderSubdivision*ROSSGrant*TQMResident
TrainingProgram**





Ship

Component 10(b) Voluntary Conversion on Initial Assessments

- a. How many of the PHA developments are subject to the Required Initial Assessments? Four (4)**
- b. How many of the PHA developments are not subject to the Required Initial Assessments based on exemptions (i.e. not elderly or disabled and not general occupancy units)? None (0)**
- c. How many assessments were conducted for the PPHA covered developments Four (4) One for each of the covered developments**
- d. Identify PHA developments that may be appropriate for conversion based on the Required Initial Assessments.**

None

At this point in time, the HAP payments would exceed the operating subsidy required. More people are eligible for public housing. If voucherized, some families would be required to find other housing as they would not be income eligible under the Voucher program. In public housing, other resources are available to provide support services to residents such as ROSS grants, if vouchers were utilized, this resource would not be available to increase the self-sufficiency and support services valued by our residents.

Development Name Number of Units

CAPITAL FUND PROGRAM TABLES START HERE

Annual Statement/Performance and Evaluation Report Attachment 10					
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I: Summary					
PHAName: SCOTTSBLUFF COUNTY HOUSING AUTHORITY		Grant Type and Number Capital Fund Program Grant No: NE26P08901 -00 Replacement Housing Factor Grant No:			Federal FY of Grant: 2000
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 12/31/02 <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 -CFP 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	\$15,000	\$15,000		0
10	1460 Dwelling Structures	\$261,317	\$190,317		\$60,616.44
11	1465.1 Dwelling Equipment — Nonexpendable	\$0	\$71,000		\$3,420.86
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	1499 Development Activities				
19	1501 Collateralization or Debt Service				

Annual Statement/Performance and Evaluation Report Attachment 10
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I: Summary

PHAName: SCOTTSBLUFF COUNTY HOUSING AUTHORITY	Grant Type and Number Capital Fund Program Grant No: NE26P08901 -00 Replacement Housing Factor Grant No:	Federal FY of Grant: 2000
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Original Annual Statement
 Reserve for Disasters/Emergencies
 Revised Annual Statement (revision no:)
 Performance and Evaluation Report for Period Ending: 12/31/02
 Final Performance and Evaluation Report

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
20	1502 Contingency				
21	Amount of Annual Grant: (sum of lines 2 -20)	\$276,317	\$276,317		\$64,037 .30
22	Amount of line 21 Related to LBP Activities				
23	Amount of line 21 Related to Section 504 compliance				
24	Amount of line 21 Related to Security - Soft Costs				
25	Amount of Line 21 Related to Security - Hard Costs				
26	Amount of line 21 Related to Energy Conservation Measures				

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part II: Supporting Pages								
PHAName: Scotts Bluff County Housing Authority			Grant Type and Number Capital Fund Program Grant No: NE26P07801 -00 Replacement Housing Factor Grant No:			Federal FY of Grant: 2000		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part III: Implementation Schedule							
PHAName: Scotts Bluff County Housing Authority		Grant Type and Number Capital Fund Program No: NE26P0780100 Replacement Housing Factor No:				Federal FY of Grant: 2000	
Development Number Name/HA-Wide Activities	All Fund Obligated (Quarter Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates
	Original	Revised	Actual	Original	Revised	Actual	
HA-wide	12/31/2001	03/2002	03/20/02	06/30/02			We were spending down grant and wanted to Obligate actual \$ left plus Board voted to move some 2001 activities forward to increase clients satisfaction.

CapitalFundProgramFive -YearActionPlan
PartII:SupportingPages —WorkActivities

Activitiesfor Year1	ActivitiesforYear: __ __ FFYGrant: PHAFY:			ActivitiesforYear: ____ FFYGrant: PHAFY:		
	Development Name/Number	MajorWork Categories	EstimatedCost	Development Name/Number	MajorWork Categories	EstimatedCost
See						
Annual						
Statement						
	TotalCFPEstimatedCost		\$			\$

CapitalFundProgramFive -YearActionPlan
PartI:Summary

SAMPLE

PHAName <i>AnytownHousing Authority</i>						<input type="checkbox"/> Original5 -YearPlan
						<input type="checkbox"/> RevisionNo:
Development Number/Name/HA-Wide	Year1	WorkStatementforYear2 FFYGrant: 2002 PHAFY: 2002	WorkStatementforYear3 FFYGrant: 2003 PHAFY: 2003	WorkSt atementforYear4 FFYGrant: 2004 PHAFY: 2004	WorkStatementforYear5 FFYGrant: 2005 PHAFY: 2005	
	Annual Statement					
<i>10-01/MainStreet</i>		<i>\$80,000</i>	<i>\$36,000</i>	<i>\$65,000</i>	<i>\$55,000</i>	
<i>10-02/Broadway</i>		<i>\$90,000</i>	<i>\$40,900</i>	<i>\$40,000</i>	<i>\$43,000</i>	
<i>HA-wide</i>		<i>\$100,000</i>	<i>\$50,000</i>	<i>\$35,000</i>	<i>\$27,000</i>	
CFPFundsListedfor 5-yearplanning		<i>\$270,000</i>	<i>\$162,900</i>	<i>\$140,000</i>	<i>125,000</i>	
ReplacementHousing FactorFunds		<i>\$40,000</i>				

CAPITAL FUND PROGRAM TABLES START HERE

Annual Statement/Performance and Evaluation Report					
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I: Summary					
PHAName: SCOTTSBLUFF COUNTY HOUSING AUTHORITY		Grant Type and Number Capital Fund Program Grant No: NE26P078501 -01 Replacement Housing Factor Grant No:			Federal FY of Grant: 2001
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input checked="" type="checkbox"/> Revised Annual Statement (revision no: 01) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 12/31/01 <input type="checkbox"/> Final Performance and Evaluation Report					
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total Non -CFP 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	\$15,000	\$66,840	\$0	\$0
10	1460 Dwelling Structures	\$223,200	\$144,360	\$0	\$0
11	1465.1 Dwelling Equipment — Nonexpendable	\$12,800	\$ 37,800	\$0	\$0
12	1470 Nondwelling Structures				
13	1475 Nondwelling Equipment	\$29,809	\$31,809	\$0	\$0
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1499 Development Activities				
19	1501 Collateralization or Debt Service				
20	1502 Contingency				

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

PHAName: SCOTTSBLUFF COUNTY HOUSING AUTHORITY	Grant Type and Number Capital Fund Program Grant No: NE26P078501 -01 Replacement Housing Factor Grant No:	Federal FY of Grant: 2001
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Original Annual Statement
 Reserve for Disasters/Emergencies
 Revised Annual Statement (revision no: 01)
 Performance and Evaluation Report for Period Ending: 12/31/01
 Final Performance and Evaluation Report

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
21	Amount of Annual Grant: (sum of lines 2 -20)	\$280,809	\$280,809	\$ 0	\$0
22	Amount of line 21 Related to LBP Activities				
23	Amount of line 21 Related to Section 504 compliance				
24	Amount of line 21 Related to Security - Soft Costs				
25	Amount of Line 21 Related to Security - Hard Costs				
26	Amount of line 21 Related to Energy Conservation Measures				

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

PHAName: ScottsBluffCountyHousingAuthority		GrantTypeandNumber CapitalFundProgramGrantNo: NE26P078501 -01 ReplacementHousingFactorGrantNo:				FederalFYofGrant:2001		
Development Number Name/HA-Wide Activities	GeneralDescriptionofMajorWork Categories	Dev.AcctNo.	Quantity	TotalEstimatedCost		TotalActualCost		Statusof Work
				Original	Revised	Funds Obligated	Funds Expended	
78001	SprinklerSystemUpdate	1450	All	\$0	\$15,000			Change basedon resident input
78003	SprinklerSystemUpdate		All	\$0	\$51,840			Change basedon resident input
78003	Apartmentremodel,carpet,tile,paint, cabinets	1460	19	\$171,360	144,360			Start6/02
78003	Newappliances,stove&refrigerator	1465	19	12,800	12,800			Start6/02
78001,78002, 78003,78005	RepairSidewalks/Cements	1450	All	15,000	\$0			Completed with2000 CFPfunds
78003	ReplaceStormwindows/screensfamily	1460	32units	51,840	\$0			Completed with2000 CFPfunds
HA-wide	Replacemaintenancevehicle	1475	1	14,000	16,000			Bidin2002
HA-wide	Replacecommercialmower	1475	1	15,809	15,809			BidFeb02

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

PHAName: Scotts Bluff County Housing Authority		Grant Type and Number Capital Fund Program Grant No: NE26P078501 -01 Replacement Housing Factor Grant No:			Federal FY of Grant: 2001			
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
78001, 78002, 78003	Complete replacement of window a/c's	1465	44	0	25,000			April-May 2002

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

PHAName: Scotts Bluff County Housing Authority	Grant Type and Number Capital Fund Program No: NE26P0785012 -02 Replacement Housing Factor No:	FY YEAR OF GRANT : 2001
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Capital Fund Program Five - Year Action Plan
Part II: Supporting Pages — Work Activities

Activities for Year 1	Activities for Year: __ __ FFY Grant: PHAFY:			Activities for Year: ____ FFY Grant: PHAFY:		
	Development Name/Number	Major Work Categories	Estimated Cost	Development Name/Number	Major Work Categories	Estimated Cost
See						
Annual						
Statement						
	Total CFPEstimatedCost		\$			\$

CapitalFundProgramFive -YearActionPlan
PartI:Summary

SAMPLE

PHAName <i>AnytownHousing Authority</i>						<input type="checkbox"/> Original5 -YearPlan <input type="checkbox"/> RevisionNo:
Development Number/Name/HA-Wide	Year1	WorkStatementforYear2 FFYGrant: 2002 PHAFY: 2002	WorkStatementforYear3 FFYGrant: 2003 PHAFY: 2003	WorkStatementforYear4 FFYGrant: 2004 PHAFY: 2004	WorkStatementforYear5 FFYGrant: 2005 PHAFY: 2005	
	Annual Statement					
<i>10-01/MainStreet</i>		<i>\$80,000</i>	<i>\$36,000</i>	<i>\$65,000</i>	<i>\$55,000</i>	
<i>10-02/Broadway</i>		<i>\$90,000</i>	<i>\$40,900</i>	<i>\$40,000</i>	<i>\$43,000</i>	
<i>HA-wide</i>		<i>\$100,000</i>	<i>\$50,000</i>	<i>\$35,000</i>	<i>\$27,000</i>	
CFPFundsListedfor 5-yearplanning		<i>\$270,000</i>	<i>\$162,900</i>	<i>\$140,000</i>	<i>125,000</i>	
ReplacementHousing FactorFunds		<i>\$40,000</i>				

**ScottsBluffCountyHousingAuthority
Section8HomeownershipProgram
Section8AdministrativePlanAmendment**

July1,2002

**AsAdoptedbytheScottsBluff
CountyHousingAuthority
BoardofCommissioners
Resolution_ 527____
April26 ,2002**

Introduction:

The Scotts Bluff County Housing Authority (hereinafter referred to as SBHA) hereby establishes a Section 8 Homeownership Program in accordance with US Department of Housing and Urban Development (HUD) final rule dated September 12, 2000. The establishment of this program is consistent with Scotts Bluff Housing Authority's annual and five-year plan. Our goal is to provide income-qualified families with an opportunity to become homeowners by allowing families to use Section 8 vouchers as assistance to purchase their own homes rather than rental assistance.

Under the Section 8 Homeownership Program, Housing Assistance Payments can be used to supplement the participant's income when calculating their housing ratio for a home mortgage. It is the goal of the Scotts Bluff County Housing Authority to provide this expanded choice of housing assistance that will promote homeownership.

Advisory Committee:

The Section 8 Homeownership Program will be developed with input from local 1) non-profit housing groups 2) homeownership counseling groups 3) lending institutions 4) economic development groups 5) service providers 6) real estate professionals and 7) income-qualified persons working cooperatively with SBHA. The purpose of the Advisory Committee will be to educate, promote and provide annual assessment of the Section 8 Homeownership Program.

I. OUTREACH

Information regarding the Section 8 Homeownership program will be made available to all applicants during the initial interview and at briefing. Annually, at recertification time, families will receive information on the Section 8 Homeownership Program. Information will be posted in the SBHA Office and handouts regarding the program and its guidelines available and distributed to referral partners.

II. ELIGIBILITY

Qualified applicants/participants must meet the following guidelines:

- Must be a Section 8 Participant or Public Housing Resident (who qualifies for Section 8 assistance) for at least one year who is in good standing (i.e. has not violated any Section 8/Public Housing Program requirements) in the SBHA programs.

- Must meet the HUD definition of first-time homeowner (i.e. means that the participant has not had homeownership interest in a home in the past three years except for a displaced homemaker or person with a disability) A right to purchase title to a residence under a lease-purchase agreement is not considered a "ownership interest." A lease-purchase agreement is not considered a "ownership interest." A member of a cooperative also qualifies as a first-time homeowner."
- The participant or applicant must not have previously defaulted on a mortgage that was obtained through a home ownership assistance program.
- One or more adults must have a gross annual income greater than or equal to at least 2000 hours of work at the federal minimum wage (Not less than 30 hours per week) . And has been continuously employed for one year prior to application. The SBHA may allow for interruptions in employment for certain instances such as lay-off or illnesses on a case-by-case basis.

An exception to this requirement is granted to families who's head of household or spouse is elderly or disabled. Families with a disabled member may also request an exception from SBHA to this requirement. This requirement is applicable at the initial qualification for home ownership assistance and is not a requirement for continued assistance.

Public assistance may only be included as income when determining eligibility for a family with an elderly or disabled head of household or spouse. This requirement is applicable at the initial qualification for home ownership assistance and is not a requirement for continued assistance.

- The Participant must attend and successfully complete the pre-assistance home ownership counseling program offered through CDC/USDA Rural Development training partners or HUD-approved counseling agencies designated by SBHA.
- Must have the greater of 1% of the purchase price for down payment or \$ 500 from the participant's own funds or SBHA approved down payment assistance programs. Referral to down payment assistance programs will be provided as availability is announced to SBHA.
- Must sign a "Statement of Homeowner Obligations" with SBHA and agree to use the home as their sole residence.
- Must have fully repaid any outstanding debt owed to the SBHA or any other Housing Authority. Nothing in this provision will preclude Section 8 participants that have fully repaid such debt(s) from participating in the Section 8 program.

Eligibility will be determined through the application process. Ineligible applicants may participate in the Homebuyer's Club TBA pursuant to ROSS Homeownership funding. The goal of the HBClub will be to repair the applicant's creditworthiness. Minimum income requirements will be established for eligibility, with a goal of repair of credit in an 18 month period.

III. JUR ISDICTION/EIGIBLE UNIT:

The initial program will be offered to participants locating a home in Scotts Bluff County, Sidney, Kimball, Bridgeport, Bayard or other communities which are in the Scotts Bluff County Housing Authority Section 8 program jurisdiction. Portability will not be optional in the SBHA Homeownership Program. SBHA may deny a unit if the owner has been debarred or suspended under Section 24 CFR, Part 24.

Eligible units will be considered as the following

- 1) Single family existing unit
- 2) Single family home under construction at eligibility
- 3) Existing home available for purchase/ with qualified rehab of a minimum of \$5,000 with lender approval.
- 4) Manufactured home on a privately owned or leased lot.
- 5) Lease - Purchase home

IV. APPLICATION PROCESS:

Applications for the homeownership program will be given to interested and preliminarily qualified applicants upon request. Completed applications will be reviewed for eligibility status. If the applicant is deemed eligible, they will be processed. If the applicant is deemed ineligible and denied, they may reapply in the future. When the verification process is completed, a briefing is held, which participants must attend. Once eligible, the participants should begin Homeownership Counseling classes.

V. HOMEOWNERSHIP COUNSELING

Participants in this program must attend and successfully complete the pre-assistance homeownership counseling program (Six hours of classroom plus 1 hour budgeting one on one) approved by the SBHA. The homeownership counseling program will cover topics such as

- a) Home maintenance
- b) Budgeting and money management
- c) Aspects of Financing a Home
- d) Credit Counseling and Credit Repair

- e) Predatory lending prevention
 - f) How to find a home and negotiate the purchase price
 - g) Fair Housing/Fair lending
 - h) Foreclosure Prevention
 - i) Real Estate Law
- TBA are Post -Homeownership Counseling Classes which are also mandatory based on SBHA funding through ROSS Homeownership funding.

VI. TIMELINE

The participant will have a maximum of six (6) months from the time of their successful completion of pre -homeownership counseling to find a home to purchase and enter into a contract of sale. If the participants are unable to locate a desirable home and enter into a contract of sale before the end of six months, the participants will be allowed to continue their assistance toward a rental unit. Extension of the six month time limit is at SBHA discretion.

VII. SALE OF CONTRACT:

Once the participants select the home they would like to purchase, they must enter into a Sale of Contract with the seller of the property. The Sale of Contract must include the following:

- 1) The purchase price and terms of the sale.
- 2) State that pre -purchase inspections will be completed to the satisfaction of the participants and the SBHA and that the sale is conditional upon the participants' and SBHA's acceptance of the inspection reports.
- 3) State that the participants are not obligated to pay for repairs that are needed as a result of the findings of the inspection report unless qualifying for a purchase with rehab loan as a part of the sale contract.
- 4) Certification that the seller is not debarred, suspended, or subject to limited denial of participation by HUD.

VIII. DOWN PAYMENTS

The SBHA requires a down -payment of 1% of the purchase price or \$500 (whichever is greater) from the participant's own funds or SBHA approved down -payment assistance programs.

IX.INSPECTIONS

Two inspections must be performed prior to purchase. An independent professional home inspection must be completed by a third party selected by participant and/or lender. Cost of this inspection is the buyers (participants). This inspection must cover major building systems and components. These include, but are not limited to, the structural integrity of the home and its foundation, the age and quality of the roof, the interior and exterior make-up, and an inspection of the plumbing, heating/cooling and electrical systems.

In addition, the Scotts Bluff Housing Authority will conduct a Housing Quality Standards Inspection and review the independent professional home inspection. The SBHA or its designated party may disqualify a home from participating in the Section 8 Homeownership Plan based on either inspection.

X.FINANCING AND PURCHASING REQUIREMENTS:

The participant family has the discretion to choose which lender they use, but the terms of the loan will be subject to approval of the SBHA. SBHA will provide referral assistance to available lenders who are informed about and willing to participate in the Section 8 Homeownership Plan. Housing Assistance Payments funds may not be used for the financing costs of purchasing a home. Pursuant to ROSS Homeownership funding constraints, a Lender's/Real Estate Homeownership Class will be originated and those completing the training will be listed as resources on information provided to the applicant.

The first mortgage lenders should be a federally regulated financial institution. Loan fees should not exceed five (5) percent of the purchase price. Prepayment penalties, balloon payments and/or prepaid life insurance will not be allowed in any financing arrangement.

The family may not re-finance, apply for an equity loan or make any other loans against the home without SBHA approval.

XI.HOME OWNERSHIP ASSISTANCE AMOUNT

Housing Assistance Payments for participants will be the lesser of 1) current Section 8 Voucher Payment Standard minus the Total Tenant Payment or 2) the participants monthly homeownership expenses minus the Total Tenant Payment. The Total Tenant Payment will be the greatest of 1) thirty (30%) percent of the family's adjusted monthly income, 2) Ten percent (10%) of the families gross monthly income, or 3) the minimum rent established by the Scotts Bluff County Housing Authority.

Monthly home ownership expenses used to calculate the Housing Assistance payments will include: 1) principal and interest on mortgaged debt, 2) mortgage insurance, 3) real estate taxes and assessments, 4) home insurance, 5) USDA's allowances for maintenance and major repairs and SBHA's utility allowance.

As the fair market rent payment standard changes, adjustments will be made to the Housing Assistance Payments (HAP) by SBHA. In the event that the participant's income increases enough that HAP is no longer needed, the participant will still remain eligible for such payments for 180 calendar days or annual date, whichever comes first. After a continuous period of 180 days without HAP, the participant's eligibility for such assistance will automatically discontinue.

Housing Assistance Payments will be provided only when the participants remain in their home and will be in effect for fifteen (15) years if the initial mortgage is twenty (20) years or longer. In all other cases, the term of the HAP will be provided for ten (10) years. These terms DONOT apply to elderly and disabled families. However, if an elderly or disabled family ceases to be qualified as such while receiving HAP for home ownership, the maximum term shall be determined from the date of initial commencement of home ownership assistance. The family will receive a minimum of six (6) months of HAP after the maximum term, provided the family continues to be eligible and is complying with family obligations.

The term of the assistance is applied from the time of the initial purchase, regardless if the participants move to a new unit under the Section 8 Homeownership Program. Participants can choose to sell their home and stay in the program by purchasing another home, provided that a default on their mortgage has not occurred and they are in compliance with the "Statement of Homeowner Obligations." If this happens, the initial eligibility requirements apply, with the exception of the first-time homebuyer and the pre-assistance home ownership counseling.

SBHA will provide the lender with the amount of the Housing Assistance Payments prior to closing. Housing Assistance Payments will be made directly to the lender or to an escrow account established by the lender for payment each month.

XII LEASE PURCHASE

Families may enter into lease-purchase agreements while receiving Section 8 Rental assistance. All requirements of the housing choice voucher program apply to lease-purchase agreements, except that families are permitted to pay an extra amount out-of-pocket to the owner for purchaser related expenses—a "homeownership premium." Any "homeownership" premium defined as an increment of value attributable to the value of the lease-purchase right or agreement is excluded from SBHA's rent reasonableness determination and subsidy calculation, and must be absorbed by the family. When a Lease-purchase participant is ready to exercise their option, they must notify the Home

Ownership Counselor or Section 8 staff at SBHA and apply for the homeownership option. If determined eligible for homeownership assistance, the family may be admitted to the homeownership program and must meet all the requirements of these policies.

XIII CONTINUED PARTICIPATION

Families participating in the Section 8 Homeownership Program must still abide by the Rules and Regulations of the Section 8 Program. The family is STILL a Section 8 participant, being a homeowner rather than a renter. If the family violates any of the rules and regulations of the Section 8 program, they will be terminated and be responsible for the entire mortgage payment.

Annual recertification and HQS inspection will continue to ensure the family is still eligible for assistance. If the family is determined ineligible for Section 8 assistance, they will be terminated and be responsible for the entire mortgage. The family must also comply with the Statement of Homeownership Obligations and sign it annually at recertification.

XIV DEFAULT

SBHA will receive copies of late payment/default notices to utilize in posthomeownership counseling with the family. The family must notify SBHA immediately if the mortgage goes into default within two days of receipt of default letter.

In the event of a default, the participant is not eligible for future participation in SBHA Homeownership Programs.

It is at the Authority's discretion whether or not to allow the family to revert to Section 8 Housing Choice Voucher Rental Assistance Program after a mortgage default through the SBHA's Homeownership Program.

XV MAXIMUM TERM OF ASSISTANCE

Families can receive homeownership assistance for a maximum of 15 years if using a mortgage with a term of 20 years or more. If the family is elderly or disabled, there is no time limit. If the mortgage term is less than 20 years, participants are eligible for up to 10 years of Housing Assistance Payments based on their continued eligibility.

XVI COMPLIANCE

Upon purchase of a home, the family must execute documentation as required by HUD and SBHA, consistent with State and local law, securing SBHA's right to recapture the homeownership assistance in accordance with Section XIX. The lien securing the recapture of homeownership subsidy may be subordinated.

XVII GROUNDS FOR TERMINATION OF HOMEOWNERSHIP ASSISTANCE

(1) Failure to Comply with Family Obligations Under Section 8 or SBHA's Home Ownership Policies.

A family's homeownership assistance may be terminated if the family fails to comply with its obligations under the Section 8 Program, SBHA homeownership policies, fails to attend the homeownership counseling classes as required or if the family defaults on the mortgage. The family must comply with the terms of any mortgage incurred to purchase the home. The family must provide SBHA with advance notice of any sale, plan to transfer any interest in the home; any plan to move out of the home prior to the move; the family's household income and home ownership expenses on an annual basis; and any other notices which may be required pursuant to SBHA homeownership policies. The family may not convey or transfer the home to any entity or person other than a member of the assisted family while receiving homeownership assistance.

(2) Occupancy of Home:

Homeownership assistance will only be provided while the family resides in the home. If the family moves out of the home, SBHA will not continue home ownership assistance commencing with the month after the family moves out. **The initial family purchasing the home is the only family allowed to reside in the unit.**

(3) Changes in Income Eligibility:

A family's homeownership assistance may be changed at annual recertification of the household income, but participation in the Section 8 Home Ownership program shall continue until such time as the assistance payment amount is \$0 for a period of six (6) consecutive months or an annual date, whichever comes first.

(4) Maximum Term of Home Ownership Assistance

Section 8 Home Ownership Assistance Payments will be provided only if the participants remain in their home for a period of fifteen (15) years and the initial mortgage is twenty (20) years or longer. In all other cases, the term of the HAP payments will be provided for ten (10) years. These terms DONOT apply to elderly and disabled families. However, if an elderly or disabled family ceases to be qualified as such while receiving HAP for home ownership, the maximum terms shall be determined from the date of the initial commencement of home ownership assistance. The family will receive a minimum of six (6) months of Housing Assistance payments after the maximum term, provided the family continues to be eligible and is complying with family obligations.

XVIII PROCEDURE FOR TERMINATION OF HOME OWNERSHIP ASSISTANCE

A participant in the Section 8 Home Ownership program shall be entitled to the same termination notice and informal hearing procedures as set forth in the Administrative Plan of the SBHA for the Section 8 Housing Choice Voucher Program.

XIX RECAPTURE OF HOME OWNERSHIP ASSISTANCE

Prior to the purchase of the home, the participant must execute documentation as required by HUD that secures the SBHA's right to recapture Housing Assistance Payments in some circumstances upon the sale or refinancing of the home prior to the end of the 10 or 15 year compliance period.

The amount that is subject to recapture reduces in annual increments of 10% per year on 10 year notes and respectively on 15 year notes, commencing one year from the initial purchase price. The amount subject to recapture is zero (0) at the end of the 10 year period and (0) at the end of the 15 year period respectively.

If the home is sold and sale proceeds are used by the participant to purchase another home under the Section 8 Home Ownership Program, Housing Assistance Payments are not subject to recapture. In addition, if a participant refinances a mortgage to receive better financing terms and no proceeds are realized, a recapture penalty is not applied.

In the event that a home is sold and the participant does not purchase another home under the Section 8 Homeownership Program, the amount of recapture is the lesser of 1) the amount of Housing Assistance Payments subject to recapture, or 2) the difference between the sales price and the purchase price less any capital expenditures, sales costs, amount used toward the purchase of a new home and previous recapture amount. Clients are to remember that any sale of home, refinancing, or collateral pledge required prior approval of the SBHA.

If the mortgage is refinanced and the participant realizes proceeds from the refinancing, the recapture amount is the lesser of 1) the amount of Housing Assistance Payments subject to recapture or 2) the difference between the current mortgage debt and the new mortgage debt less any costs of capital expenditures, refinancing costs, and amounts previously recaptured.

XX ADMINISTRATIVE FEE:

The Scotts Bluff County Housing Authority will receive the same ongoing administrative fee as in the Section 8 rental program as outlined in Section 24CFR 982.152(b)

XXI FAIR HOUSING :

In compliance with the Fair Housing Act (title VIII of the Civil Rights Act, 1988) the Section 8 Homeownership program will not discriminate based on race, color, national origin, sex, handicap or familial status.

XIV. STATEMENT OF HOMEOWNER OBLIGATIONS

The family must:

- ** have been receiving Section 8 Assistance or have been a Public Housing Resident in good standing for 1 year without any violation of program requirements.
- ** meet the HUD first-time homebuyer definition.
- ** meet all eligibility criteria as specified in the SBHA administrative plan.
- ** enter into this Statement of Homeowner Obligations as prescribed by HUD and comply with provisions herein.
- ** agree to use the home as their sole residence.
- ** comply with all lender requirements.
- ** attend homeownership counseling prior to purchase and post-purchase as developed and approved by SBHA.
- ** secure the family's own financing through a HUD-approved lender.
- ** be able to make the monthly payment of the family's portion of the mortgage.
- ** sign a release allowing SBHA and other lending, counseling, service providers to exchange information on the family.
- ** find and close on a home within 180 days of eligibility.
- ** report on progress in locating a unit at such intervals and times determined by SBHA.
- ** only enter into a sales contract with the sellers subject to SBHA approval.
- ** secure an independent, professional home inspector to inspect the home and provide a written report to SBHA.
- ** agree to maintain the condition of the home to comply with HQS and to allow annual inspections of the property.
- ** acknowledge that termination of assistance for failure to comply will follow termination process as stated in HUD Section 8 rental assistance regulations and SBHA Section 8 administrative and homeownership addendum.
- ** acknowledge that termination of Section 8 Homeownership Assistance obligates the family for the entire mortgage payment.
- ** agree that the family may not sell, refinance or pledge as collateral the home without SBHA approval.
- ** agree to comply with all aspects of the SBHA Homeownership Addendum and Section 8 rules and regulations.

Signature _____
Date _____

