

U.S.DepartmentofHousingandUrbanDevelopment  
OfficeofPublicandIndianHousing

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**SmallPHAPlanUpdate  
AnnualPlanforFiscalYear:2002**

**NM033V04  
TUCUMCARI  
HOUSING  
AUTHORITY**

**PHA Plan  
Agency Identification**

**PHAName: City of Tucumcari Public Housing Authority**

**PHANumber: NM033**

**PHAFiscalYearBeginning: (07/2002)**

**PHA Plan Contact Information:**

**Name:** Robert Pacheco Executive Director

**Phone:** (505) 461 -4403

**Email:** tha@sr66.com

**Public Access to Information**

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

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

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

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

- Main administrative office of the PHA
- PHA development management offices
- Main administrative office of the local, county or State government
- Public library
- PHA website
- Other: Wautonomah Resident Council Community Center

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

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

**PHA Programs Administered :**

- Public Housing and Section 8       Section 8 Only       Public Housing Only

**AnnualPHAPlan**  
**FiscalYear2001**  
 [24CFRPart903.7]

**i. Table of Contents**

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

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## ii. Executive Summary

[24CFR Part 903.79 (r)]

The Tucumcari Public Housing Authority changed the 2000, 2001 and 2002 Capital Fund Part III "Implementation Schedule" to reflect **All Funds Obligated** within two years and **All Funds Expended** within three years. This will allow the Housing Authority to realistically administer these grants in a more productive manner and yet meet HUD requirements.

The Housing Authority will continue to focus on four major areas: Housing Management, CFP Grant Program, Maintenance, and Professional Development. The Housing Management Staff will concentrate on strong rent collection, keeping the vacancy rate low as in the past and maintaining the management standards. The CFP Program will follow the Annual Plan submitted to HUD this year. The maintenance staff will continue to be aggressive with work orders and provide additional assistance to continue to maintain high occupancy rates. Programs will consist of Drug Elimination, Resident Council initiatives, FSS Programs, Home Rehab, Section 8 Homeownership and leveraging dollars to expand the effectiveness of these programs which will promote Community, Individual Self Sufficiency, Reduce Crime, and create a better environment to live.

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

The Tucumcari Housing Authority modified its Admission and Continued Occupancy and Section 8 Administrative Plan changing preferences:

#### **OLD PREFERENCES**

1. Families with income less than thirty (30) percent of Annual Median Income.
2. Applicants with an adult family member enrolled in a employment training program, currently working 40 hours a week, or attending school on a full-time basis. This preference is also extended equally to all elderly families and all families whose head or spouse is receiving income based on their inability to work.
3. Displaces person(s): Individuals or families displaced by government action or whose dwelling has been extensively damaged or destroyed as a result of a disaster declared or otherwise formally recognized pursuant to Federal Disaster Relief Laws.
4. All other applicants who do not meet the definitions in the other preference categories.

#### **NEW PREFERENCES**

The City of Tucumcari Housing Authority will select families based on the following preferences within each bedroom size category:

1. Families with income less than thirty (30) percent of Annual Median Income. This preference is extended equally to displacement of families due to a natural disaster.

2. Elderly Family or Elderly Person (62 years of age and older) Persons with disabilities as defined in Section 223 of the Social Security Act (42 USC 423) or in Section 102 of the Development Disabilities Assistance and Bill of Rights Act (42 USC 6001).

Families with at least one adult who is employed, and is working a minimum of twenty hours per week. This preference is extended equally to elderly families or a family whose head or spouse is receiving income based on their inability to work.

Families who are graduates of or participants in education and training programs or whose head of household or spouse is enrolled full time (twelve credit hours or more) in an educational or training program designed to prepare people for the job market.

3. All other applicants

Based on the above preferences, all families in preference (1) will be offered housing before any families in preference (2), and preference (2) families will be offered housing before any families in preference (3).

The date and time of application will be noted and utilized to determine the sequence within the above prescribed preferences.

Notwithstanding the above, families who are elderly, disabled, or displaced will be offered housing before other single persons.

## 2. Capital Improvement Needs

[24 CFR Part 903.79(g)]

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

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

B. What is the amount of the PHA's estimated or actual (if known) Capital Fund Program grant for the upcoming year? **\$190,975**

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

D. Capital Fund Program Grant Submissions

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

The Capital Fund Program 5 - Year Action Plan is provided as **Attachment C**

### (2) Capital Fund Program Annual Statement

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

## 3. Demolition and Disposition

[24 CFR Part 903.79(h)]

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

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

2. Activity Description

<b>Demolition/Disposition Activity Description (Not including Activities Associated with HOPE VI or Conversion Activities)</b>	
1a. Development name:	
1b. Development (project) number:	
2. Activity type: Demolition <input type="checkbox"/> Disposition <input type="checkbox"/>	
3. Application status (select one) Approved <input type="checkbox"/> Submitted, pending approval <input type="checkbox"/> Planned application <input type="checkbox"/>	
4. Date application approved, submitted, or planned for submission: (DD/MM/YY)	
5. Number of units affected:	
6. Coverage of action (select one) <input type="checkbox"/> Part of the development <input type="checkbox"/> Total development	
7. Relocation resources (select all that apply) <input type="checkbox"/> Section 8 for units <input type="checkbox"/> Public housing for units <input type="checkbox"/> Preference for admission to other public housing or section 8 <input type="checkbox"/> Other housing for units (describe below)	
8. Timeline for activity: a. Actual or projected start date of activity: b. Actual or projected start date of relocation activities: c. Projected end date of activity:	

**4. Voucher Homeownership Program**

[24CFR Part 903.79(k)]

- A.  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 24CFR part 982? (If “No”, skip to next component; if “yes”, describe each program using the table below (copy and complete questions for each program identified.)

**B. Capacity of the PHA to Administer a Section 8 Homeownership Program**

The PHA has demonstrated its capacity to administer the program by (select all that apply):

- Establishing a minimum homeowner down payment requirement of at least 3 percent and requiring that at least 1 percent of the down payment comes from the family’s resources

- Requiring that financing for purchase of a home under its section 8 homeownership will be provided, insured or guaranteed by the state or Federal government; comply with secondary mortgage market underwriting requirements; or comply with generally accepted private sector underwriting standards
- Demonstrating that it has or will acquire other relevant experience (list PHA experience, or any other organization to be involved and its experience, below): The Housing Authority is attempting to contract with a professional consultant to implement the Section 8 Homeownership program, home rehabilitation, acquisition and other homeownership opportunities for the community. The program will initially be limited to families who have already been on our program for a year and to no more than 5 percent of our total Section 8 program participants. If demand is greater then we will give priority to existing Family Self Sufficiency (FSS) program clients since we know they are already making the effort to become self sufficient. The target groups in the Section 8 Voucher will be families earning between 30% and 60% of the Quay County Median Income, determined by HUD. Under Section 8 Voucher Homeownership Program, the monthly Payment Standard (PS) determines the total amount available for homeownership expense. Included in the homeownership expense are: Principle and Interest, Mortgage Insurance, estimated Taxes, Homeowner Insurance and Utility Allowance.

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

[24CFR Part 903.7(m)]

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

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

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

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

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

## **6. Other Information**

[24CFR Part 903.79(r)]

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

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

2. If yes, the comments are N/A

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

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

- Yes    No:below  
 Yes    No:attheendoftheRABCommentsinAttachment \_\_\_\_\_.
- Considered comments, but determined that no changes to the PHA Plan were necessary. An explanation of the PHA's consideration is included at the end of the RAB Comments in
- Other: The Resident Advisory Board was in complete agreement with the Annual Plan and CFP Modernization Plan.

## B. Statement of Consistency with the Consolidated Plan

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

1. Consolidated Plan jurisdiction: (Quay County)

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

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

3. PHA Requests for support from the Consolidated Plan Agency

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

4. The Consolidated Plan of the jurisdiction supports the PHA Plan with the following actions and commitments: (describe below) The City of Tucumcari and the County work in concert to support many of the housing needs for our community. By passing policies that are conducive to "quality of life" for the residents of public housing and Section 8, the Housing Authority is able to address and serve the needs of families in Quay County.

## C. Criteria for Substantial Deviation and Significant Amendments

### 1. Amendment and Deviation Definitions

24 CFR Part 903.7(r)

Changes to the "PHA Mission, Policies, New Policies, or Capital needs" is considered substantial deviation from the 5-year Plan and Significant Amendment to the Annual Plan. The PHA will subject a change to the policies or activities described in the Annual Plan to full public hearing and HUD review before implementation.

**A. Substantial Deviation from the 5-year Plan:**

**None**

## **A. Significant Amendment or Modification to the Annual Plan:**

The Tukumcari housing authority modified its Admission and Continued Occupancy and Section 8 Administrative Plan changing preferences:

### **OLD PREFERENCES**

1. Families with income less than thirty (30) percent of Annual Median Income.
2. Applicants with an adult family member enrolled in an employment training program, currently working 40 hours a week, or attending school on a full-time basis. This preference is also extended equally to all elderly families and all families whose head or spouse is receiving income based on their inability to work.
3. Displaces person(s): Individuals or families displaced by government action or whose dwelling has been extensively damaged or destroyed as a result of a disaster declared or otherwise formally recognized pursuant to Federal Disaster Relief Laws.
4. All other applicants who do not meet the definitions in the other preference categories.

### **NEW PREFERENCES**

The City of Tukumcari Housing Authority will select families based on the following preferences within each bedroom size category:

1. Families with income less than thirty (30) percent of Annual Median Income. This preference is extended equally to displacement of families due to a natural disaster.
2. Elderly Family or Elderly Person (62 years of age and older) Persons with disabilities as defined in Section 223 of the Social Security Act (42 USC 423) or in Section 102 of the Development Disabilities Assistance and Bill of Rights Act (42 USC 6001).

Families with at least one adult who is employed, and is working a minimum of thirty hours per week. This preference is extended equally to elderly families or a family whose head or spouse is receiving income based on their inability to work.

Families who are graduates of or participants in education and training programs or whose head of household or spouse is enrolled full time (twelve credit hours or more) in educational or training programs designed to prepare people for the job market.

3. All other applicants

# Attachment -A

## Supporting Documents Available for Review

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

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

<b>List of Supporting Documents Available for Review</b>		
<b>Applicable &amp; On Display</b>	<b>Supporting Document</b>	<b>Related Plan Component</b>
<b>X</b>	Schedule of flat rent to offer each public housing development <input type="checkbox"/> check here if included in the public housing A&O Policy	Annual Plan: Rent Determination
<b>X</b>	Section 8 rent determination (payment standard) policies <input checked="" type="checkbox"/> check here if included in Section 8 Administrative Plan	Annual Plan: Rent Determination
<b>X</b>	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
<b>X</b>	Results of latest binding Public Housing Assessment System (PHAS) Assessment	Annual Plan: Management and Operations
<b>X</b>	Follow-up Plan to Results of the PHAS Resident Satisfaction Survey (if necessary)	Annual Plan: Operations and Maintenance and Community Service & Self-Sufficiency
<b>X</b>	Results of latest Section 8 Management Assessment System (SEMAP)	Annual Plan: Management and Operations
<b>X</b>	Any required policies governing any Section 8 special housing types <input checked="" type="checkbox"/> check here if included in Section 8 Administrative Plan	Annual Plan: Operations and Maintenance
<b>X</b>	Public housing grievance procedures <input checked="" type="checkbox"/> check here if included in the public housing A&O Policy	Annual Plan: Grievance Procedures
<b>X</b>	Section 8 informal review and hearing procedures <input checked="" type="checkbox"/> check here if included in Section 8 Administrative Plan	Annual Plan: Grievance Procedures
<b>X</b>	The HUD -approved Capital Fund/Comprehensive Grant Program Annual Statement (HUD 52837) for any active grant year	Annual Plan: Capital Needs
<b>X</b>	Most recent CIAP Budget/Progress Report (HUD 52825) for any active CIAP grants	Annual Plan: Capital Needs
<b>N/A</b>	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
<b>X</b>	Self-evaluation, Needs Assessment and Transition Plan required by regulations implementing §504 of the Rehabilitation Act and the Americans with Disabilities Act. See, PIH99 -52(HA).	Annual Plan: Capital Needs

<b>List of Supporting Documents Available for Review</b>		
<b>Applicable &amp; On Display</b>	<b>Supporting Document</b>	<b>Related Plan Component</b>
N/A	Approved or submitted applications for demolition and/or disposition of public housing	Annual Plan: Demolition and Disposition
N/A	Approved or submitted applications for designation of public housing (Designated Housing Plans)	Annual Plan: Designation of Public Housing
N/A	Approved or submitted assessments of reasonable revitalization of public housing and approved or submitted conversion plans prepared pursuant to section 202 of the 1996 HUD Appropriations Act, Section 22 of the US Housing Act of 1937, or Section 33 of the US Housing Act of 1937	Annual Plan: Conversion of Public Housing
N/A	Approved or submitted public housing homeownership programs/plans	Annual Plan: Homeownership
X	Policies governing any Section 8 Homeownership program (section 21.0 of the Section 8 Administrative Plan)	Annual Plan: Homeownership
N/A	Cooperation agreement between the PHA and the TANF agency and between the PHA and local employment and training service agencies Note : <b>Agencies will not sign MOA in Tucumcari.</b>	Annual Plan: Community Service & Self-Sufficiency
X	FSS Action Plan/s for public housing and/or Section 8	Annual Plan: Community Service & Self-Sufficiency
X	Section 3 documentation required by 24 CFR Part 135, Subpart E	Annual Plan: Community Service & Self-Sufficiency
N/A	Most recent self-sufficiency (ED/SS, TOP or ROSS or other residents services grant) grant program reports	Annual Plan: Community Service & Self-Sufficiency
N/A	The most recent Public Housing Drug Elimination Program (PHEDEP) semi-annual performance report	Annual Plan: Safety and Crime Prevention

**List of Supporting Documents Available for Review**

Applicable & On Display	Supporting Document	Related Plan Component
N/A	PHDEP-related documentation: <ul style="list-style-type: none"> <li>· Baseline law enforcement services for public housing developments assisted under the PHDEP plan;</li> <li>· Consortium agreement/s between the PHAs participating in the consortium and a copy of the payment agreement between the consortium and HUD (applicable only to PHAs participating in a consortium as specified under 24 CFR 761.15);</li> <li>· Partnership agreements (indicating specific leveraged support) with agencies/organizations providing funding, services or other in-kind resources for PHDEP-funded activities;</li> <li>· Coordination with other law enforcement efforts;</li> <li>· Written agreement(s) with local law enforcement agencies (receiving any PHDEP funds); and</li> <li>· All crime statistics and other relevant data (including Part I and specified Part II crimes) that establish need for the public housing sites assisted under the PHDEP Plan.</li> </ul>	Annual Plan: Safety and Crime Prevention
X	Policy on Ownership of Pets in Public Housing Family Developments (as required by regulation at 24 CFR Part 960, Subpart G) <input checked="" type="checkbox"/> check here if included in the public housing A&O Policy	Pet Policy
X	The results of the most recent fiscal year audit of the PHA conducted under section 5(h)(2) of the U.S. Housing Act of 1937 (42 U. S.C. 1437c(h)), the results of that audit and the PHA's response to any findings	Annual Plan: Annual Audit
N/A	Troubled PHAs: MOA/Recovery Plan	Troubled PHAs
	Other supporting documents (optional) (list individually; use as many lines as necessary)	(specify as needed)

# Attachment B

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

<b>PHAName:</b> <b>Tucumcari Public Housing Authority</b>	<b>Grant Type and Number</b> NM02 -P033501-00 Capital Fund Program: Capital Fund Program Replacement Housing Factor Grant No:	<b>Federal FY of Grant:</b>  <b>2000</b>
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Original Annual Statement
  Reserve for Disasters/Emergencies Revised Annual Statement (revision no: )
  Performance and Evaluation Report for Period Ending: December 31, 2001
  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	\$60,754		\$60,754	\$60,754
3	1408 Management Improvements				
4	1410 Administration	\$18,000		\$18,000	18,000
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	10,000		9,800	9,800
8	1440 Site Acquisition				
9	1450 Site Improvement	\$114,000		114,000	94,164
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)	\$202,754		202,554.00	182,718
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 Compliance				
23	Amount of line 20 Related to Security				
24	Amount of line 20 Related to Energy Conservation Measures				





## Annual Statement/Performance and Evaluation Report

### Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1 : Summary

PHA Name:  <b>Tucumcari Public Housing Authority</b>	Grant Type and Number: NM02P033501 -01 Capital Fund Program: Capital Fund Program Replacement Housing Factor Grant No:	Federal FY of Grant:  <b>2001</b>
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Original Annual Statement     
  Reserve for Disasters/Emergencies Revised Annual Statement (revision no: \_\_\_\_\_)  
 Performance and Evaluation Report for Period Ending: December 31, 2001     
  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	<b>\$50,000</b>		<b>50,000</b>	<b>50,000</b>
3	1408 Management Improvements				
4	1410 Administration	<b>\$18,000</b>		<b>18,000</b>	<b>18,000</b>
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	<b>\$12,000</b>			
8	1440 Site Acquisition				
9	1450 Site Improvement	<b>\$126,816</b>			
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)	<b>\$206,816</b>		<b>68,000</b>	<b>68,000</b>
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 Compliance				
23	Amount of line 20 Related to Security				
24	Amount of line 20 Related to Energy Conservation Measures				





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

PHAName: <b>Tucumcari Public Housing Authority</b>	Grant Type and Number NM02P033501 -02 Capital Fund Program: Capital Fund Program Replacement Housing Factor Grant No:	Federal FY of Grant:  <b>2002</b>
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Original Annual Statement  
 Performance and Evaluation Report for Period Ending:

Reserve for Disasters/Emergencies Revised Annual Statement (revision no):  
 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	35,000			
3	1408 Management Improvements	5,000			
4	1410 Administration				
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	14,000			
8	1440 Site Acquisition				
9	1450 Site Improvement	136,975			
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)	\$190,975			
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				





# Attachment C



## Capital Fund Program Five - Year Action Plan

### Part I: Summary

PHAName Tucumcari Housing Authority					<input type="checkbox"/> Original 5 - Year Plan <input checked="" type="checkbox"/> Revision No: 01	
Development Number/Name/HA-Wide	Year1	Work Statement for Year 2 FFY Grant: 2002 PHAFY: 2002	Work Statement for Year 3 FFY Grant: 2003 PHAFY: 2003	Work Statement for Year 4 FFY Grant: 2004 PHAFY: 2004	Work Statement for Year 5 FFY Grant: 2005 PHAFY: 2005	
NM033						
Transfer to Operations		35,000	50,000	50,000	50,000	
Professional Dev/Training		5,000	5,000	5,000	5,000	
Part Time CFP Coordinator		15,000	\$18,000	\$18,000	\$18,000	
Architect/Engineer		14,000	\$12,000	\$12,000	\$12,000	
Site Improv/Stucco		121,975	121,816	121,816	121,816	
Non-dwelling/vehicle		25,000				
		190,975	206,816	206,816	206,816	
CFP Funds Listed for 5 - year planning						
Replacement Housing Factor Funds						







# Attachment D

## Resident Member on the PHA Governing Board

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

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

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

- Elected  
 Appointed

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

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

- the PHA is located in a State that requires the members of a governing board to be salaried and serve on a full-time basis  
 the PHA has less than 300 public housing units, has provided reasonable notice to the resident advisory board of the opportunity to serve on the governing board, and has not been notified by any resident of their interest to participate in the Board.  
 Other: The PHA requested volunteers and had no response.

B. Date of next term expiration of a governing board member: The Housing Authority has a "City Commission" governing board and each year, coinciding with the Annual Plan, every resident is given an opportunity to serve on the governing board. In the event that a volunteer is found, one member of the city commission would step down during the board meeting to prevent a "deadlock" and keep the composition of the board at five members.

C. Name and title of appointing official(s) for governing board (indicate appointing official for the next position): **Mayor Calvin Litchfield**

# Attachment E

## Membership of the Resident Advisory Board or Boards

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

NAME	ORGANIZATION
Vacant	President Wautonomah Resident Council
Evelyn Aguirre	Vice President
Diane Aragon	Corresponding Secretary
Kimberly Roberts	Reporting Secretary
Angie Aragon	Treasurer
Hignio Salas	Member at Large Wautonomah Resident Council

# Attachment F

**Attachment F - Section 8 Homeownership Capacity Statement**

The Housing Authority is attempting to contract with a professional consultant to implement the Section 8 Homeownership program, home rehabilitation, acquisition and other home ownership opportunities for the community. The program will initially be limited to families who have already been on our program for a year and will be limited to no more than 5 percent of our total Section 8 program participants. If demand is greater then we will give priority to existing Family Self Sufficiency (FSS) program clients since we know they are already making the effort to become self sufficient. The target groups in the Section 8 Voucher will be families earning between 30% and 60% of the Quay County Median Income, determined by HUD. Under Section 8 Voucher Homeownership Program, the monthly Payment Standard (PS) determines the total amount available for homeownership expense. Included in the homeownership expense are: Principle and Interest, Mortgage Insurance, estimated Taxes, Homeowner Insurance and Utility Allowance.

# Attachment G

## **CERTIFICATION ON CONVERSION OF PUBLIC HOUSING TO TENANT-BASED ASSISTANCE**

The Tucumcari Housing Authority certifies that it has reviewed the development's operation as public housing and considered the implications of converting the public housing to tenant-based assistance. Based on the review, the PHA has concluded that conversion of the development is inappropriate because it will adversely affect the availability of affordable housing in the community. In addition, the fastest growing population in public housing is elderly and voluntary conversion does not apply to elderly housing.

# Attachment H

## Plan for PFS Waiver to House a Police Officer

A request to house a police officer was approved on October 19, 1999 with an expiration date of October 31, 2002. This security initiative has been highly successful because the occupancy rates have remained high, and the unit turnover around kept to a minimum since Officer Aguirre moved in to Site B. The police department has always been very supportive of our anti-crime/drug efforts and I have received a letter from the Chief of Police who is committed in supporting the Housing Authority's efforts. I also have the "Crime Statistics for 1998-1999 and 2001-2002, which shows a reduction of total calls to the Police Department. Although crime will not be eradicated, Officer Aguirre's presence has and continues to have an impact on crime and the morale of the community of Site B. The Housing Authority of the City of Tucumcari is requesting approval to keep a Police Officer in a dwelling unit. In accordance with 24 CFR 960.505, and 990.108(b)(2)(i) through (v) the following updated Plan is hereby submitted:

- a. The total number of units under management by your PHA is 89. One (1) unit is the community center for the Wautonomah Resident Council
- b. Specific Housing Developments:
  - o NM33001: Site "B" 29 Units 28 family, (4) elderly
  - o NM33001: Site "G" 11 Units 11 family, (4) elderly
  - o NM33001: Site "F" 10 Units 10 family, (1) elderly
  - o NM33001: Site "H" 28 Units 28 family, (13) elderly
  - o NM33001: Site "T" 12 Units 12 family, (8) elderly
- c. One Unit, Site "B", 624 E. McGee in NM33001 has been selected to house the police officer and his family. The particular unit is a five bedroom and is located in the area, that receives the most calls to the Police and Fire Department. The police officer qualifies for a five bedroom unit because of his family composition. The housing is safe and suitable for its intended use and is maintained by the Tucumcari Housing Authority.
- d. The Police Officer's duty will include, but not be limited, to patrolling the Housing Authority areas and being in close contact with the residents. When the officer is off-duty, residents will be able to contact him/her with problems they're experiencing (of a criminal nature) or to receive information from the residents that can be passed on to the local Drug Task Force, or to be investigated.
- e. Having a Police Officer reside in one of the Dwelling Units has increased security for the housing residents. This area receives the majority of the calls in which the Officer is placed. Having a Police Officer reside in one of the dwelling units is conducive to good rental management. Our resident's morale and safety concerns remain my top priority and reflect in our "RASS" scores.

- f. The Officer would pay a “reasonable rent” of \$100.00 to \$125.00 per month plus utilities for the unit. This is the average rent paid by the tenants in public housing, which is limited loss of income to the Housing Authority.
- g. Assessment of the Current Waiting List shows no applications for a five Bedroom Unit. There are sufficient five bedroom units that will not result in a significant reduction of units available for eligible families.
- h. The Officer’s Dwelling Lease will contain wording from the Notice under “Continued Employment”.
- i. The Tucumcari Housing Authority understands the dwelling unit must be removed from the rent roll for PFS calculation in the budget at any rent paid by the officer would be included in “their income” for PFS calculation in the budget.

**LEASE AGREEMENT**  
State of New Mexico  
County of Quay

*This lease agreement is made and entered into by and between the Housing Authority of City of Tucumcari, Quay County, New Mexico and City of Tucumcari Police Officer Charlie Aguirre in consideration of the mutual convenience hereinafter set forth and agree as follows:*

- 1) The Police Officer and his immediate family hereby leases the following described premises located in Tucumcari, New Mexico: 624 E. McGee.

The lease shall be for a period of one year beginning on the 1st day of October, 2002 and ending 30th day of September, 2003, unless terminated by mutual agreement of the parties hereto or by the terms of the Contract.

The lease agreement shall be automatically renewed for a successive term of one year at the end of its term unless either party provides thirty (30) days written notice to the contrary.

The officer and his family shall comply with all the rules and regulations which are signed and attached and become a part of this lease agreement.

- 2) The Police Officer hereby agrees to pay to the Housing Authority rent of \$101.00 per month and agrees to pay all utility deposits by the move-in date and further agrees to pay all utility bills within the time limits established by the individual utility companies.

The amount of rent established above shall be paid until such time it is determined that the rent is unreasonable in relation to upkeep of the Unit, at which time a new amount of rent would be negotiated with the Officer.

- 3) A Security Deposit of \$ 0.00 will be held by the Housing Authority to be used by the Authority toward reimbursement of the cost of cleaning and repairing any damages beyond normal WEAR and TEAR to the Unit and/or premises caused by the family or guests. Payment of the Security Deposit is to be made upon occupancy and any refund of the Deposit due the occupant will be refunded within thirty (30) days after the occupant yields possession of the keys to the Unit to the Housing Authority.
- 4) The Housing Authority would expect the visibility and interaction of the Officer with the residents of the Housing Authority to be part of this agreement.
- 5) The Officer is required to oversee and provide the necessary leadership to the Neighborhood Watch, attend all Resident Council meetings, patrol the sites on foot and mail all incidents reports to the Executive Director.
- 6) The Officer's right of occupancy of the Unit is dependent on continued employment with the City of Tucumcari Police Department. Should the Officer terminate employment with the City of Tucumcari Police Department, the Officer and family will be expected to vacate the Unit within 30 days of Notice of termination of employment.

The Housing Authority agrees to maintain the premises and the project in a decent, safe and sanitary condition. Maintenance and repair work (beyond normal wear and tear), will be billed to the Officer at a rate as specified in the "Charge Sheet" as posted in the Office of the Authority. Payment for such charges shall become due and payable two (2) weeks after the Authority gives written notice of the charge.

The Authority will not be responsible for any loss, liability or expense (including attorney's fees) due to fire, theft or accident or any other events occurring on the rented premises or site. It is the occupant's responsibility to provide for their own "Renter's Insurance".

In Witness Hereof, the parties have executed this Lease Agreement on this 1st day of **October 2002**.

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*Officer*

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**PH Representative**