

U.S.DepartmentofHousingandUrbanDevelopment
OfficeofPublicandIndianHousing

SmallPHAPlanUpdate
AnnualPlanforFiscalYear: **2002**

**NOTE:THISPHAPLANSTEMPLATE(HUD50075)ISTOBECOMPLETEDI N
ACCORDANCEWITHINSTRUCTIONSLOCATEDINAPPLICABLEPIHNOTICES**

**PHA Plan
Agency Identification**

PHAName: North Tarrytown Housing Authority

PHANumber: NY26

PHAFiscalYearBeginning:(mm/yyyy) 10/2002

PHAPlan Contact Information:

Name: **Kenneth M. Gentile**

Phone: **914-631-4626**

TDD:

Email(if available):

Public Access to Information

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

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

Display Locations For PHA Plans and Supporting Documents

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

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

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
FiscalYear20 02
 [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

[24CFRPart903.79(r)]

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

Not included.

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

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

None

2. Capital Improvement Needs

[24CFR 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? \$143,752

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.D Demolition and Disposition

[24CFR 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

Demolition/Disposition Activity Description (Not including Activities Associated with HOPE VI or Conversion Activities)	
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: <u>(DD/MM/YY)</u>	
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 24 CFR part 982? (If "No", skip to next component; if "yes", describe program using the table below (copy and complete questions for each program identified.) each

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):

5.SafetyandCrimePrevention:PHDEPPlan

[24CFRPart903.7(m)]

ExemptionsSection8OnlyPHAsmayskiptothenextcomponentPHAseligibleforPHDEPfundsmustprovidea PHDEPPlanmeetingspecifiedrequirementspriortoreceiptofPHDEPfunds.

A. Yes No: IsthePHAeligibletopart icipateinthePHDEPinthefiscalyearcoveredby thisPHAPlan?

B. WhatistheamountofthePHA'sestimatedoractual(ifknown)PHDEPgrantforthe upcomingyear? \$ _____

C. Yes No DoesthePHApl antoparticipateinthePHDEPinthepcomingyear?If yes,answerquestionD.Ifno,skiptonextcomponent.

D. Yes No: ThePHDEPPlanisattachedatAttachment _____

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 Attached at Attachment (Filename) **F**

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

- The PHA changed portions of the PHA Plan in response to comments. A list of these changes is included
 Yes No: below
 Yes No: at the end of the RAB Comments in Attachment ____.
- 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 Attachment **E**.
- Other: (list below)

B. Statement of Consistency with the Consolidated Plan

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

1. Consolidated Plan jurisdiction: (provide name here)
Westchester 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)
To provide low income housing
- 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)

Westchester County is committed to assisting the Authority in its efforts to maintain and make available affordable housing opportunities to low income families.

C. Criteria for Substantial Deviation and Significant Amendments

1. Amendment and Deviation Definitions

24 CFR Part 903.7(r)

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

A. Substantial Deviation from the 5-year Plan:

Our definition of "Substantial deviation" is defined as discretionary changes in the plans or policies of the housing authority that fundamentally change the mission, goals, objectives, or plans of the agency and which require formal approval of the Board of Commissioners.

B. Significant Amendment or Modification to the Annual Plan:

"Significant amendment or modification" are defined as discretionary changes in the plans or policies of the housing authority that fundamentally change the mission, goals, objectives, or plans of the agency and which require formal approval of the Board of Commissioners.

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
	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 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	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
	Any policy governing occupancy of Police Officers in Public Housing <input type="checkbox"/> check here if included in the public housing A&O Policy	Annual Plan: Eligibility, Selection, and Admissions Policies
	Section 8 Administrative Plan	Annual Plan: Eligibility, Selection, and Admissions Policies
X	Public housing rent determination policies, including the method for setting public housing flat rents <input checked="" type="checkbox"/> check here if included in the public housing A&O Policy	Annual Plan: Rent Determination
X	Schedule of flat rents offered at each public housing development <input type="checkbox"/> check here if included in the public housing A&O Policy	Annual Plan: Rent Determination
	Section 8 rent determination (payment standard) policies <input type="checkbox"/> check here if included in Section 8 Administrative Plan	Annual Plan: Rent Determination

List of Supporting Documents Available for Review

Applicable & On Display	Supporting Document	Related Plan Component
X	Public housing management and maintenance policy documents, including policies for the prevention or eradication of pest infestation (including cockroach infestation)	Annual Plan: Operations and Maintenance
X	Results of latest binding Public Housing Assessment System (PHAS) Assessment	Annual Plan: Management and Operations
X	Follow-up Plan to Results of the PHAS Resident Satisfaction Survey (if necessary)	Annual Plan: Operations and Maintenance and Community Service & Self-Sufficiency
	Results of latest Section 8 Management Assessment System (SEMAP)	Annual Plan: Management and Operations
	Any required policies governing any Section 8 special housing types <input type="checkbox"/> check here if included in Section 8 Administrative Plan	Annual Plan: Operations and Maintenance
X	Public housing grievance procedures <input checked="" type="checkbox"/> check here if included in the public housing A&O Policy	Annual Plan: Grievance Procedures
	Section 8 informal review and hearing procedures <input type="checkbox"/> check here if included in Section 8 Administrative Plan	Annual Plan: Grievance Procedures
X	The HUD -approved Capital Fund/Comprehensive Grant Program Annual Statement (HUD 52837) for any active grant year	Annual Plan: Capital Needs
X	Most recent CIAP Budget/Progress Report (HUD 52825) for any active CIAP grants	Annual Plan: Capital Needs
	Approved HOPEVI applications or, if more recent, approved or submitted HOPEVI revitalization Plans, or any other approved proposal for development of public housing	Annual Plan: Capital Needs
X	Self-evaluation, Needs Assessment and Transition Plan required by regulations implementing §504 of the Rehabilitation Act and the Americans with Disabilities Act. See, PIH 99 -52 (HA).	Annual Plan: Capital Needs
	Approved or submitted applications for demolition and/or disposition of public housing	Annual Plan: Demolition and Disposition
	Approved or submitted applications for designation of public housing (Designated Housing Plans)	Annual Plan: Designation of Public Housing
	Approved or submitted assessments of reasonable revitalization of public housing and approved or submitted conversion plans prepared pursuant to section 202 of the 1996 HUD Appropriations Act, 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
	Approved or submitted public housing homeownership programs/plans	Annual Plan: Homeownership

List of Supporting Documents Available for Review

Applicable & On Display	Supporting Document	Related Plan Component
	Policies governing any Section 8 Homeownership program (section _____ of the Section 8 Administrative Plan)	Annual Plan: Homeownership
	Cooperation agreement between the PHA and the TANF agency and between the PHA and local employment and training service agencies	Annual Plan: Community Service & Self-Sufficiency
	FSS Action Plan/sf or 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
	Most recent self-sufficiency (ED/SS, TOP or ROSS or other resident services grant) grant program reports	Annual Plan: Community Service & Self-Sufficiency
	The most recent Public Housing Drug Elimination Program (PHDEP) semi-annual performance report	Annual Plan: Safety and Crime Prevention
	PHDEP-related documentation: <ul style="list-style-type: none"> · Baseline law enforcement services for public housing developments assisted under the PHDEP plan; · Consortium agreement/s between the PHA participating in the consortium and a copy of the payment agreement between the consortium and HUD (applicable only to PHA participating in a consortium as specified under 24 CFR 761.15); · Partnership agreements (indicating specific leveraged support) with agencies/organizations providing funding, services or other in-kind resources for PHDEP-funded activities; · Coordination with other law enforcement efforts; · Written agreement(s) with local law enforcement agencies (receiving any PHDEP funds); and · 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. 	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 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
	Troubled PHAs: MOA/Recovery Plan	Troubled PHAs
	Other supporting documents (optional) (list individually; use as many lines as necessary)	(specify as needed)

AttachmentB:

AnnualStatement/PerformanceandEvaluationReport

CapitalFundProgramandCapitalFundProgramReplacementHousingFactor(CFP/CFPRHF)Part1:Summary

PHAName: NorthTarrytownHousingAuthority		GrantTypeandNumber CapitalFundProgram: NY36P026-501-02 CapitalFundProgram ReplacementHousingFactorGrantNo:			FederalFYofGrant: 2002	
<input checked="" type="checkbox"/> OriginalAnnualStatement		<input type="checkbox"/> ReserveforDisasters/Emergencies			<input type="checkbox"/> RevisedAnnualStatement(revisionno:)	
<input type="checkbox"/> PerformanceandEvaluationReportforPeriodEnding:		<input type="checkbox"/> FinalPerformanceandEvaluationReport				
Line No.	SummarybyDevelopmentAccount	TotalEstimatedCost		TotalActualCost		
		Original	Revised	Obligated	Expended	
1	Totalnon -CFPFunds	0				
2	1406Operations	0				
3	1408ManagementImprovements	7,000				
4	1410Administration	11,000				
5	1411Audit	0				
6	1415liquidatedDamages	0				
7	1430FeesandCosts	20,200				
8	1440SiteAcquisition	0				
9	1450SiteImprovement					
10	1460DwellingStructures	94,000				
11	1465.1DwellingEquipment —Nonexpendable	6,552				
12	1470Nondwelli ngStructures	0				
13	1475NondwellingEquipment	5,000				
14	1485Demolition	0				
15	1490ReplacementReserve	0				
16	1492MovingtoWorkDemonstration	0				
17	1495.1RelocationCosts	0				
18	1498ModUsedforDevelopment	0				
19	1502Contingency	0				
20	AmountofAnnualGrant:(sumoflines2 -19)	143,752				
21	Amountoffline20RelatedtoLBPActivities	0				
22	Amountoffline20RelatedtoSection504Compliance	0				

AttachmentB:

AnnualStatement/PerformanceandEvaluationReport

CapitalFundProgramandCapitalFundProgramReplacementHousingFactor(CFP/CFPRHF)Part1:Summary

PHAName: NorthTarrytownHousingAuthority		GrantTypeandNumber CapitalFundProgram: NY36P026-501-02 CapitalFundProgram ReplacementHousingFactorGrantNo:		FederalFYofGrant: 2002	
<input checked="" type="checkbox"/> OriginalAnnualStatement		<input type="checkbox"/> ReserveforDisasters/Emergencies		<input type="checkbox"/> RevisedAnnualStatement(revisionno:)	
<input type="checkbox"/> PerformanceandEvaluationReportforPeriodEnding:		<input type="checkbox"/> FinalPerformanceandEvaluationReport			
Line No.	SummarybyDevelopmentAccount	TotalEstimatedCost		TotalActualCost	
23	Amountoffline20RelatedtoSecurity	0			
24	Amountoffline20Related toEnergyConservation Measures	0			

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

PHAName: North Tarrytown Housing Authority		Grant Type and Number Capital Fund Program#: NY36P026-501-02 Capital Fund Program Replacement Housing Factor#:			Federal FY of Grant: 2002			
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work
				Original	Revised	Funds Obligated	Funds Expended	
HA Wide	Management Improvement	1408	N/A	7,000				
HA Wide	Administrative Fees	1410	N/A	11,000				
HA Wide	A/E Fees	1430.1	N/A	10,000				
HA Wide	Consultant Fees	1430.2	N/A	10,200				
HA Wide	Appliances	1465.1	N/A	6,552				
HA Wide	Office Equipment	1475.1	N/A	2,500				
HA Wide	Maintenance Equipment	1475.2	N/A	2,500				
			Subtotal	49,752				
NY26-1	Kitchen Cabinets	1460	50%	94,000				
			Subtotal	94,000				
			Total	143,752				

Attachment C :
Capital Fund Program 5 - Year Action Plan

Complete one table for each development in which work is planned in the next 5 PHA fiscal years. Complete a table for any PHA 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 -wide physical or management improvements - Year cycle, because this information is included in the Capital Fund Program Annual Statement.

CFP5 - Year Action Plan		
<input checked="" type="checkbox"/> Original statement <input type="checkbox"/> Revised statement		
Development Number	Development Name (or indicate PHA wide)	
NY26	North Tarrytown Housing Authority	
Description of Needed Physical Improvements or Management Improvements	Estimated Cost	Planned Start Date (HA Fiscal Year)
FFY2002 (See Attachment B Annual Statement)		10/01/2002
FFY2003 Roof Upgrade	\$94,000	10/01/2003
FFY2004 Roof Upgrade	\$56,000	10/01/2004
Façade Replacement	\$38,000	
FFY2005 Bifold Closet Door Replacement	\$50,000	10/01/2005
Sliding Closet Door Replacement	\$25,000	
Interior Room Door Replacement	\$19,000	
FFY2006 Smoke Detector Installation	\$94,000	10/01/2006
Totalestimatedcost overnext5years	\$376,000	

Required 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: *Dena Dernbach*

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

- Elected
 Appointed

C. The term of appointment is (include the date term expires): *Expires On: 09/30/2002*

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

- the PHA is located in a State that requires the members of a governing board to be salaried and serve on a full time basis
 the PHA has less than 300 public housing units, has provided reasonable notice to the resident advisory board of the opportunity to serve on the governing board, and has not been notified by any resident of their interest to participate in the Board.
 Other (explain):

B. Date of next term expiration of a governing board member:

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

Required 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.)

Louise Daniels	4D
May Foley	7G
Joseph Foley	7G

Attachment F :
Comments of Resident Advisory Board & Explanation of PHA Response

- One resident asked if future anti-drug funds would be available.

Authority Response

The Housing Authority responded that it never received anti-drug funds and the program was eliminated for further funding. The Housing Authority will continue to work with police as the drug problem is expanding. More funding in this area is needed.

- Residents were happy to hear of the replacement of kitchen through CFP.

Authority Response

The Housing Authority responded that resident input is critical to the success of the program.

AttachmentG :
ResidentAssessmentFollowUpPlan

NoResidentAssessmentFollow -upPlanisrequiredthisyear.Thefollowingscoreswere received:

<i>SurveySection</i>	<i>Score</i>	<i>NationalAverage</i>
<u>MaintenanceandRepai r</u>	97%	88%
<u>Communication</u>	79%	75%
<u>Safety</u>	81%	73%
<u>Services</u>	97%	91%
<u>NeighborhoodAppearance</u>	80%	75%

Attachment H :
Implementation of Public Housing Resident Community Service requirements

Currently, the North Tarrytown Housing Authority has no residents that are required to perform community service. In the event that any resident is found to be required to provide such service, the following policy will be utilized:

1.1 General

In order to be eligible for continued occupancy, each adult family member must either (1) contribute eight hours per month of community service (not including political activities) within the community in which the public housing development is located, or (2) participate in an economic self-sufficiency program unless they are exempt from this requirement

1.2 Exemptions

The following adult family members of tenant families are exempt from this requirement.

- A. Family members who are 62 or older
- B. Family members who are blind or disabled
- C. Family members who are the primary caregiver for someone who is blind or disabled
- D. Family members engaged in work activity
- E. Family members who are exempt from work activity under part A title IV of the Social Security Act or under any other State welfare program, including the welfare-to-work program
- F. Family members receiving assistance under a State program funded under part A title IV of the Social Security Act or under any other State welfare program, including welfare-to-work and who are in compliance with that program

1.3 Notification of the Requirement

The Housing Authority shall identify all adult family members who are apparently not exempt from the community service requirement.

The Housing Authority shall notify all such family members of the community service requirement and of the categories of individuals who are exempt from the requirement. The notification will provide the opportunity for family members to claim and explain an exempt status. The Housing Authority shall verify such claims.

The notification will advise families that their community service obligation will begin upon the effective date of their first annual reexamination on or after 10/1/99. For family's paying a flat rent, the obligation begins on the date their annual reexamination would have been effective had an annual reexamination taken place. It will also advise them that failure to comply with the community service requirement will result in ineligibility for continued occupancy at the time of any subsequent annual reexamination.

1.4 Volunteer Opportunities

Community service includes performing work or duties in the public benefit that serve to improve the quality of life and/or enhance resident self-sufficiency, and/or increase the self-responsibility of the resident within the community.

An economic self-sufficiency program is one that is designed to encourage, assist, train or facilitate the economic independence of participants and their families or to provide work for participants. These programs may include programs for job training, work placement, basic skills training, education, English proficiency, work fare, financial or household management, apprenticeship, and any program necessary to ready a participant to work (such as substance abuse or mental health treatment).

The Housing Authority will coordinate with social service agencies, local schools, and the Human Resources Office in identifying a list of volunteer community service positions.

Together with the resident advisory councils, the Housing Authority may create volunteer positions such as hall monitoring, litter patrols, and supervising and recordkeeping for volunteers.

1.5 The Process

At the first annual reexamination on or after October 1, 1999, and each annual reexamination thereafter, the Housing Authority will do the following:

- A. Provide a list of volunteer opportunities to the family members.

- B. Provide information about obtaining suitable volunteer positions.
- C. Provide a volunteer time sheet to the family member. Instructions for the time sheet require the individual to complete the form and have a supervisor date and sign for each period of work.
- D. Assign family members to a volunteer coordinator who will assist the family members in identifying appropriate volunteer positions and in meeting their responsibilities. The volunteer coordinator will track the family member's progress monthly and will meet with the family member as needed to best encourage compliance.
- E. Thirty (30) days before the family's next lease anniversary date, the volunteer coordinator will advise the Housing Authority whether each applicable adult family member is in compliance with the community service requirement.

1.6 Notification of Non-compliance with Community Service Requirement

The Housing Authority will notify any family found to be in non-compliance of the following:

- A. The family member(s) has been determined to be in non-compliance;
- B. That the determination is subject to the grievance procedure; and
- C. That, unless the family member(s) enter into an agreement to comply, the lease will not be renewed or will be terminated;

1.7 Opportunity for cure

The Housing Authority will offer the family member(s) the opportunity to enter into an agreement prior to the anniversary of the lease. The agreement shall state that the family member(s) agrees to enter into an economic self-sufficiency program or agree to contribute to community service for as many hours as needed to comply with the requirement over the past 12-month period. The cure shall occur over the 12-month period beginning with the date of the agreement and the resident shall at the same time stay current with that year's community service requirement. The first hours a resident earns go toward the current commitment until the current year's commitment is made.

The volunteer coordinator will assist the family member in identifying volunteer opportunities and will track compliance on a monthly basis.

If any applicable family member does not accept the terms of the agreement, does not fulfill their obligation to participate in an economic self-sufficiency program, or falls behind in their obligation under the agreement to perform community service by more than three (3) hours after three (3) months, the Housing Authority shall take action to terminate the lease.

Status Update

No persons have been determined to have to perform community service.

Update - No longer required by HUD.

Attachment I.

P/EREPOR(T(2000CFP) -03/31/200 2

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I: Summary					
PHAName: North Tarrytown Housing Authority		Grant Type and Number Capital Fund Program Grant No: NY36P026-501-00 Replacement Housing Factor Grant No: N/A			Federal FY of Grant: 2000
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input checked="" type="checkbox"/> Revised Annual Statement (revision no: #2) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 03/31/2002 <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	0	0	0	0
2	1406 Operations	0	0	0	0
3	1408 Management Improvements Soft Costs	10,000	3,052	3,052	3,052
	Management Improvements Hard Costs	0	0	0	0
4	1410 Administration	11,000	11,000	11,000	0
5	1411 Audit	0	0	0	0
6	1415 Liquidated Damages	0	0	0	0
7	1430 Fees and Costs	20,200	20,604	20,604	18,904
8	1440 Site Acquisition	0	0	0	0
9	1450 Site Improvement	0	0	0	0
10	1460 Dwelling Structures	92,387	103,516	48,966	48,966
11	1465.1 Dwelling Equipment — Non-expendable	5,688	1,948	1,948	1,948
12	1470 Non dwelling Structures	0	0	0	0
13	1475 Non dwelling Equipment	5,000	4,155	2,970	2,970
14	1485 Demolition	0	0	0	0
15	1490 Replacement Reserve	0	0	0	0

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

PHAName: North Tarrytown Housing Authority	Grant Type and Number Capital Fund Program Grant No: NY36P026-501-00 Replacement Housing Factor Grant No: N/A	Federal FY of Grant: 2000
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Original Annual Statement Reserve for Disasters/Emergencies Revised Annual Statement (revision no: #2)
 Performance and Evaluation Report for Period Ending: **03/31/2002** Final Performance and Evaluation Report

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
16	1492 Moving to Work Demonstration	0	0	0	0
17	1495.1 Relocation Costs	0	0	0	0
18	1499 Development Activities	0	0	0	0
19	1502 Contingency	0	0	0	0
	Amount of Annual Grant: (sum of lines.....)	144,275	144,275	88,540	75,840
	Amount of line XX Related to L BP Activities	0	0	0	0
	Amount of line XX Related to Section 504 compliance	0	0	0	0
	Amount of line XX Related to Security --Soft Costs	0	0	0	0
	Amount of Line XX related to Security --Hard Costs	0	0	0	0
	Amount of line XX Related to Energy Conservation Measures	0	0	0	0
	Collateralization Expenses or Debt Service	0	0	0	0

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

PHAName: North Tarrytown Housing Authority		Grant Type and Number Capital Fund Program Grant No: NY36P026-501-00 Replacement Housing Factor Grant No: N/A				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	Obligated	Expended		
NY26-1	Management Improvement	1408	N/A	10,000	3,052	3,052	3,052	Completed	
NY26-1	Administrative Fees	1410	N/A	11,000	11,000	11,000	0	Working in Process	
NY26-1	A/E Fees	1430.1	N/A	10,000	204	204	204	Completed	
NY26-1	Consultant Fees	1430.2	N/A	10,200	20,400	20,400	18,700	Working in Process	
NY26-1	Appliances	1465.1	N/A	5,688	1,948	1,948	1,948	Completed	
NY26-1	Office Equipment	1475.1	N/A	2,500	2,060	875	875	Working in Process	
NY26-1	Maintenance Equipment	1475.2	N/A	2,500	2,095	2,095	2,095	Completed	
NY26-1	00/01: Kitchen Cabinets (30 Units)	1460	100%	80,387	55,389	839	839	Working in Process	
NY26-1	Bathroom Tubs	1460	100%	10,000	4,800	4,800	4,800	Completed	
NY26-1	Emergency Entrance Doors	1460	100%	2,000	2,000	2,000	2,000	Completed	
NY26-1	Misc. Plumbing & Heating	1460	100%	0	19,402	19,402	19,402	Completed	
NY26-1	Boiler Upgrade	1460	100%	0	11,503	11,503	11,503	Completed	
NY26-1	Misc. Improvement	1460	100%	0	2,052	2,052	2,052	Completed	
NY26-1	98/99: Bathroom Upgrade	1460	100%	0	8,370	8,370	8,370	Completed	
			Total	144,275	144,275	88,540	75,840		

Attachment J .

P/EREPOR(2001CFP) -03/31/2002

Annual Statement/Performance and Evaluation Report					
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)					
Part I: Summary					
PHAName: North Tarrytown Housing Authority		Grant Type and Number Capital Fund Program Grant No: NY36P026-501-01 Replacement Housing Factor Grant No: N/A			Federal FY of Grant: 2001
<input checked="" type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input checked="" type="checkbox"/> Revised Annual Statement (revision no: #1) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 03/31/2002 <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	0	0	0	0
2	1406 Operations	0	0	0	0
3	1408 Management Improvements Soft Costs	10,000	7,250	0	0
	Management Improvements Hard Costs	0	0	0	0
4	1410 Administration	11,000	11,000	0	0
5	1411 Audit	0	0	0	0
6	1415 Liquidated Damages	0	0	0	0
7	1430 Fees and Costs	20,200	22,950	12,750	5,992
8	1440 Site Acquisition	0	0	0	0
9	1450 Site Improvement	0	0	0	0
10	1460 Dwelling Structures	94,000	94,000	0	0
11	1465.1 Dwelling Equipment — Non-expendable	6,420	6,420	0	0
12	1470 Nondwelling Structures	0	0	0	0
13	1475 Nondwelling Equipment	5,000	5,000	0	0
14	1485 Demolition	0	0	0	0
15	1490 Replacement Reserve	0	0	0	0

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

PHAName: North Tarrytown Housing Authority	Grant Type and Number Capital Fund Program Grant No: NY36P026-501-01 Replacement Housing Factor Grant No: N/A	Federal FY of Grant: 2001
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Original Annual Statement Reserve for Disasters/Emergencies Revised Annual Statement (revision no: #1)
 Performance and Evaluation Report for Period Ending: **03/31/2002** Final Performance and Evaluation Report

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
16	1492 Moving to Work Demonstration	0	0	0	0
17	1495.1 Relocation Costs	0	0	0	0
18	1499 Development Activities	0	0	0	0
19	1502 Contingency	0	0	0	0
	Amount of Annual Grant: (sum of lines.....)	146,620	146,620	12,750	5,992
	Amount of line XX Related to LBP Activities	0	0	0	0
	Amount of line XX Related to Section 504 compliance	0	0	0	0
	Amount of line XX Related to Security --Soft Costs	0	0	0	0
	Amount of Line XX related to Security --Hard Costs	0	0	0	0
	Amount of line XX Related to Energy Conservation Measures	0	0	0	0
	Collateralization Expenses or Debt Service	0	0	0	0

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

PHAName: North Tarrytown Housing Authority		Grant Type and Number Capital Fund Program Grant No: NY36P026-501-01 Replacement Housing Factor Grant No: N/A				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	Obligated	Expended		
NY26-1	Management Improvement	1408	N/A	10,000	7,250	0	0	Planning Phase	
NY26-1	Administrative Fees	1410	N/A	11,000	11,000	0	0	Planning Phase	
NY26-1	A/E Fees	1430.1	N/A	10,000	12,750	12,750	5,992	Working in Process	
NY26-1	Consultant Fees	1430.2	N/A	10,200	10,200	0	0	Planning Phase	
NY26-1	Appliances	1465.1	N/A	6,420	6,420	0	0	Planning Phase	
NY26-1	Office Equipment	1475.1	N/A	2,500	2,500	0	0	Planning Phase	
NY26-1	Maintenance Equipment	1475.2	N/A	2,500	2,500	0	0	Planning Phase	
NY26-1	00/01: Kitchen Cabinets	1460	100%	64,000	64,000	0	0	Planning Phase	
NY26-1	00/01: Laundry Room Upgrade	1460	100%	30,000	30,000	0	0	Planning Phase	
			Total	146,620	146,620	12,750	5,992		

Attachment K :
Voluntary Conversion Initial Assessments

The North Tarrytown Housing Authority is comprised of only one mixed occupancy building (seniors & family units). It is not financially feasible to convert the site from public housing to tenant based assistance, and to do so would have an adverse effect on needed low income units in the area.

Voluntary Conversion Initial Assessments

- a) How many of the PHA's developments are subject to the Required Initial Assessments?
One.
- b) How many of the PHA's developments are not subject to the Required Initial Assessments based on exemptions (e.g., elderly and/or disabled developments not general occupancy projects)?
None.
- c) How many Assessments were conducted for the PHA's covered developments?
One.
- d) Identify PHA developments that may be appropriate for conversion based on the Required Initial Assessments:
None.

Development Name	Number of Units

- e) If the PHA has not completed the Required Initial Assessments, describe the status of these assessments:

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NY0262002200207110529-02.sig,NY0262002200207110529-02.sig