

U.S.DepartmentofHousingandUrbanDevelopment
OfficeofPublicandIndianHousing

SmallPHAPlanUpdate
AnnualPlanforFiscalYear:2003

DoverHousingAuthority
Dover,AR72837

**NOTE:THISPHAPLANSTEMPLATE(HUD50075)I STOBECOMPLETEDIN
ACCORDANCEWITHINSTRUCTIONSLOCATEDINAPPLICABLEPIHNOTICES**

PHA Plan Agency Identification

PHAName: DoverHousingAuthority

PHANumber: AR085

PHAFiscalYearBeginning:(10/2003)

PHA Plan Contact Information:

Name: EddieHogrefe,ExecutiveDirector

Phone: (479)331 -2670

TDD:

Email(ifavailable): doverhou@cswnet.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 –200 Davis Street, Dover, AR 72837
 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 –200 Davis Street, Dover, AR 72837
 PHA development management offices
 Main administrative office of the local, county or State government
 Public library
 PHA website
 Other (list below)

A copy of this plan and supporting documents are available to agencies, institutions, organizations and political subdivisions, which may refer clients.

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

- Main business office of the PHA –200 Davis Street, Dover, AR 72837
 PHA development management offices
 Other (list below)

PHA Programs Administered :

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

Annual PHA Plan
Fiscal Year 2003
 [24CFR Part 903.7]

i. Table of Contents

Provide a table of contents for the Plan, including attachments, and a list of supporting documents available for public inspection. For Attachments, indicate which attachments are provided by selecting a 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.

	<u>Page#</u>
Annual Plan	
i. Executive Summary (optional)	
ii. Annual Plan Information	2
iii. Table of Contents	3
1. Description of Policy and Program Changes for the Upcoming Fiscal Year	4
2. Capital Improvement Needs	4
3. Demolition and Disposition	4-5
4. Homeownership: Voucher Homeownership Program	5
5. Crime and Safety: PHDEP Plan	5-6
6. Other Information:	
A. Resident Advisory Board Consultation Process	6
B. Statement of Consistency with Consolidated Plan	6
C. Criteria for Substantial Deviations and Significant Amendments	7
Attachments	
<input checked="" type="checkbox"/> Attachment A: Supporting Documents Available for Review	8-11
<input checked="" type="checkbox"/> Attachment B: Capital Fund Program Annual Statement	12-16
<input checked="" type="checkbox"/> Attachment C: Capital Fund Program 5 Year Action Plan	17-19
<input type="checkbox"/> Attachment __: Capital Fund Program Replacement Housing Factor Annual Statement	
<input checked="" type="checkbox"/> Attachment D: CF PFY 2001 Performance & Evaluation Report For Period Ending 3/31/03	20-23
<input checked="" type="checkbox"/> Attachment E: CF PFY 2002 Performance & Evaluation Report For Period Ending 3/31/03	24-27
<input type="checkbox"/> Attachment __: Public Housing Drug Elimination Program (PHDEP) Plan	28-34
<input checked="" type="checkbox"/> Attachment F: Resident Membership on PHA Board or Governing Body	35
<input checked="" type="checkbox"/> Attachment G: Membership of Resident Advisory Board or Boards	36
<input type="checkbox"/> Attachment __: Comments of Resident Advisory Board or Boards & Explanation of PHA Response (must be attached if not included in PHA Plan text)	
<input checked="" type="checkbox"/> Other (List below, providing each attachment name)	
<input checked="" type="checkbox"/> Attachment H: Summary/Comments of PHA Goals and Objectives	37-46
<input checked="" type="checkbox"/> Attachment I: De-concentration	47
<input checked="" type="checkbox"/> Attachment J: Results of Voluntary Conversion Assessment	48
<input checked="" type="checkbox"/> Attachment K: Follow-Up Plan Resident Survey	49

ii. Executive Summary

[24CFR Part 903.79 (r)]

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

The PHA has chosen not to submit an Executive Summary.

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.

We have no changes in policies discussed in last year's PHA Plan that are not covered in other sections of this Update.

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? \$34,539.00

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: (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 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):

5. Safety and Crime Prevention: PHDEP Plan

[24CFR Part 903.7(m)]

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

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

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

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

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

6. Other Information

[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) _____

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 _____.

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: State of Arkansas, Department of Economic Development, Office of Planning, One Capitol Mall, 4c300, Little Rock, AR 72201

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)
Reduction of vacancy rate, modernize public housing, attract or provide supportive services, assure fair housing for all, train staff, counsel residents on homeownership opportunities.

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 State has issued a Certification indicating that our Agency Plan is in compliance with the Consolidated Plan of the State of Louisiana. This Certification is on file at the PHA's Administrative Office.

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.

Our PHA has no significant amendments and deviation definitions from the 5 Year Plan.

A. Substantial Deviation from the 5-year Plan:

Our PHA has no substantial deviations from the 5 Year Plan.

B. Significant Amendment or Modification to the Annual Plan:

Our PHA has no significant amendment or modification to the Annual Plan.

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
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 checked="" 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 checked="" 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
	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 HOPE VI application or, if more recent, approved or submitted HOPE VI revitalization plans, or any other approved proposal for development of public housing	Annual Plan: Capital Needs
X	Self-evaluation, Needs Assessment and Transition Plan required by regulations implementing §504 of the Rehabilitation Act and the Americans with Disabilities Act. See, PIH 99 -52 (HA).	Annual Plan: Capital Needs
	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 home ownership 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
X	Cooperation agreement between the PHA and the TANF agency and between the PHA and local employment and training service agencies	Annual Plan: Community Service & Self-Sufficiency
	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
	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
	<p>PHDEP-related documentation:</p> <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	<p>Policy on Ownership of Pets in Public Housing Family Developments (as required by regulation at 24 CFR Part 960, Subpart G)</p> <p><input checked="" type="checkbox"/> check here if included in the public housing A&O Policy</p>	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)

ATTACHMENT B

Annual Statement/Performance and Evaluation Report

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

PHA Name: Dover Housing Authority	Grant Type and Number Capital Fund Program: AR48P08550103 Capital Fund Program Replacement Housing Factor Grant No:	Federal FY of Grant: 2003
-----------------------------------	--	------------------------------

Original Annual Statement
 Reserve for Disasters/Emergencies
 Revised Annual Statement (revision on:)
 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
1	Total Non-CFP Funds				
2	1406 Operations	\$20,000.00			
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	\$14,539.00			
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	1499 Development Activities				
19	1502 Contingency				
20	Amount of Annual Grant: (sum of lines 2-19)	\$34,539.00			
21	Amount of line 20 Related to LBP Activities				

ATTACHMENT B

Annual Statement/Performance and Evaluation Report

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

PHA Name: Dover Housing Authority		Grant Type and Number Capital Fund Program: AR48P08550103 Capital Fund Program Replacement Housing Factor Grant No:			Federal FY of Grant: 2003	
<input checked="" type="checkbox"/> Original Annual Statement		<input type="checkbox"/> Reserve for Disasters/Emergencies			<input type="checkbox"/> Revised Annual Statement (revision no:)	
<input type="checkbox"/> Performance and Evaluation Report for Period Ending:		<input type="checkbox"/> Final Performance and Evaluation Report				
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost		
22	Amount of line 20 Related to Section 504 Compliance					
23	Amount of line 20 Related to Security – Soft Costs					
24	Amount of line 20 Related to Security – Hard Costs					
25	Amount of line 20 Related to Energy Conservation Measures					
26	Collateralization Expense or Debt Service					

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

PHAName: DoverHousingAuthority		GrantTypeandNumber CapitalFundProgram#: AR48P08550103 CapitalFundProgram ReplacementHousingFactor#:			FederalFYofGrant: 2003			
Development Number Name/HA-Wide Activities	GeneralDescriptionofM ajorWork Categories	Dev.AcctNo.	Quantity	TotalEstimatedCost		TotalActualCost		Statusof Work
				Original	Revised	Funds Obligated	Funds Expended	
HA-Wide	Operations:HireAssistant@\$7,500, Training@\$6,250,andTravel@ \$6,250	1406	3	\$20,000.00				
	SiteImprovements:Landscaping@ \$5,000,concrete@\$9,539	1450	2	\$14,539.00				
TOTAL				\$34,539.00				

ATTACHMENT C

Capital Fund Program Five - Year Action Plan

Part I: Summary

PHAName: Dover Housing Authority		<input checked="" type="checkbox"/> Original 5 - Year Plan <input type="checkbox"/> Revision No:			
Development Number/Name/HA-Wide	Year 1	Work Statement for Year 2 FFY Grant: AR48P08550101 PHAFY: 10/2001	Work Statement for Year 3 FFY Grant: AR48P08550102 PHAFY: 10/2002	Work Statement for Year 4 FFY Grant: AR48P08550103 PHAFY: 10/2003	Work Statement for Year 5 FFY Grant: LA48P10150104 PHAFY: 10/2004
HA Wide HA Wide LA101	Annual Statement	Operations @ \$10,000 Site Improvements @ \$24,539	Operations @ \$20,000 Non-Dwelling Equipment @ \$14,539	Operations @ \$20,000 Site Improvements @ \$14,539	Operations @ \$20,000 Non-Dwelling Equipment @ \$14,539
CFPFunds Listed for 5-year planning		\$34,539	\$34,539	\$34,539	\$34,539
Replacement Housing Factor Funds					

ATTACHMENTD

Annual Statement/Performance and Evaluation Report

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

PHAName: Dover Housing Authority		Grant Type and Number Capital Fund Program: AR48P0850101 Capital Fund Program Replacement Housing Factor Grant No:			Federal FY of Grant: 2001	
<input type="checkbox"/> Original Annual Statement		<input type="checkbox"/> Reserve for Disasters/Emergencies			<input type="checkbox"/> Revised Annual Statement (revision no:)	
<input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 3/31/03		<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	\$10,000.00	\$10,000.00	\$10,000.00	\$10,000.00	
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	\$24,539.00	\$24,539.00	\$24,539.00	\$22,558.31	
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	1499 Development Activities					
19	1502 Contingency					
20	Amount of Annual Grant: (sum of lines 2 -19)	\$34,539.00	\$34,539.00	\$34,539.00	\$32,558.31	

ATTACHMENT D

Annual Statement/Performance and Evaluation Report

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

PHA Name: Dover Housing Authority		Grant Type and Number Capital Fund Program: AR48P0850101 Capital Fund Program Replacement Housing Factor Grant No:			Federal FY of Grant: 2001	
<input type="checkbox"/> Original Annual Statement		<input type="checkbox"/> Reserve for Disasters/Emergencies			<input type="checkbox"/> Revised Annual Statement (revision no:)	
<input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 3/31/03		<input type="checkbox"/> Final Performance and Evaluation Report				
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost		
21	Amount of line 20 Related to LBP Activities					
22	Amount of line 20 Related to Section 504 Compliance					
23	Amount of line 20 Related to Security – Soft Costs					
24	Amount of line 20 Related to Security – Hard Costs					
25	Amount of line 20 Related to Energy Conservation Measures					
26	Collateralization Expense or Debt Service					

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

PHAName: DoverHousingAuthority		Grant Type and Number CapitalFundProgram#: AR48P08 50101 CapitalFundProgram ReplacementHousingFactor#:				FederalFYofGrant: 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	
HA-Wide	Operations: Hire Assistant @ \$7,500, Training and Travel @ \$2,500	1406	2	\$10,000	\$10,000	\$10,000	\$10,000	
HA-Wide	Site Improvements: Landscaping @ \$5,000, Concrete @ \$19,539	1450	2	\$24,539	\$24,539	\$24,539	\$22,558.31	
TOTAL				\$34,539	\$34,539	\$34,539	\$32,558.31	

ATTACHMENTE

Annual Statement/Performance and Evaluation Report

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

PHAName: Dover Housing Authority		Grant Type and Number Capital Fund Program: AR48P08550102 Capital Fund Program Replacement Housing Factor Grant No:			Federal FY of Grant: 2002	
<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: 3/31/03		<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	\$20,000.00	\$20,000.00	\$12,721.60	\$12,721.60	
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	\$14,539.00	\$14,539.00	\$6,420.48	\$6,420.48	
14	1485 Demolition					
15	1490 Replacement Reserve					
16	1492 Moving to Work Demonstration					
17	1495.1 Relocation Costs					
18	1499 Development Activities					
19	1502 Contingency					
20	Amount of Annual Grant: (sum of lines 2 - 19)	\$34,539.00	\$34,539.00	\$19,142.08	\$19,142.08	
21	Amount of line 20 Related to LBP Activities					

ATTACHMENT E

Annual Statement/Performance and Evaluation Report

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

PHA Name: Dover Housing Authority		Grant Type and Number Capital Fund Program: AR48P08550102 Capital Fund Program Replacement Housing Factor Grant No:		Federal FY of Grant: 2002	
<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: 3/31/03		<input type="checkbox"/> Final Performance and Evaluation Report			
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
22	Amount of line 20 Related to Section 504 Compliance				
23	Amount of line 20 Related to Security – Soft Costs				
24	Amount of line 20 Related to Security – Hard Costs				
25	Amount of line 20 Related to Energy Conservation Measures				
26	Collateralization Expense or Debt Service				

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

PHAName: DoverHousingAuthority		Grant Type and Number CapitalFundProgram#: AR48P085 50102 CapitalFundProgram ReplacementHousingFactor#:				FederalFYofGrant: 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 Work
				Original	Revised	Funds Obligated	Funds Expended	
HA-Wide	Operations: Hire Assistant @ 7,500, Travel and Training @ \$2,500	1406	2	\$20,000	\$20,000	\$12,721.60	\$12,721.60	
AR085	Non-Dwelling Equipment: Lawnmower, computer and office equipment @ \$14,539	1475	3	\$14,539	\$14,539	\$6,420.48	\$6,420.48	
TOTAL				\$34,539	\$34,539	\$19,142.08	\$19,142.08	

PHA Public Housing Drug Elimination Program Plan

NOT APPLICABLE

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

Section 1: General Information/History

A. Amount of PHDEP Grant \$ _____

B. Eligibility type (Indicate with an "x") **N1** _____ **N2** _____ **R** _____

C. FFY in which funding is requested _____

D. Executive Summary of Annual PHDEP Plan

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

E. Target Areas

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

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

F. Duration of Program

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

12 Months _____ **18 Months** _____ **24 Months** _____

G. PHDEP Program History

Indicate each FY that funding has been received under the PHDEP Program (place an "x" by each applicable Year) and provide amount of funding received. If previously funded programs havenot been closed out at the time of this submission, indicate the fund balance and anticipated completion date. The Fund Balance should reflect the balance as of Date of Submission of the PHDEP Plan. The Grant Term End Dates should include any HUD -approved extensions or waivers. For grant extensions received, place "GE" in column or "W" for waivers.

Fiscal Year of Funding	PHDEP Funding Received	Grant#	Fund Balance as of Date of this Submission	Grant Extensions or Waivers	Grant Start Date	Grant Term End Date
FY1995						
FY1996						
FY1997						
FY1998						
FY1999						

Section 2: PHDEP Plan Goals and Budget

A. PHDEP Plan Summary

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

B. PHDEP Budget Summary

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

FFY ____ PHDEP Budget Summary	
Original statement	
Revised statement dated:	
Budget Line Item	Total Funding
9110 - Reimbursement of Law Enforcement	
9115 - Special Initiative	
9116 - Gun Buyback TAMatch	
9120 - Security Personnel	
9130 - Employment of Investigators	
9140 - Voluntary Tenant Patrol	

9150 -PhysicalImprovements	
9160 -DrugPrevention	
9170 -DrugIntervention	
9180 -DrugTreatment	
9190 -OtherProgramCosts	
TOTALPHDEPFUNDING	

C. PHDEPPlanGoal sandActivities

Inthetablesbelow,provideinformationonthePHDEPstrategysummarizedabovebybudgetlineitem.Eachgoalandobjectiveshouldbenumberedsequentiallyforeachbudget lineitem(whereapplicable).Useasmanyrowsasnecessaryto listproposedactivities(additionalrowsmaybeinsertedinthetables).PHAsarenotrequiredtoprovide informationinshadedboxes.Informationprovidedmustbeconcise —nottoexceedtwosentencesinanycolumn.TablesforlineitemsinwhichthePH Ahasnoplannedgoalsor activitiesmaybedeleted.

9110 –ReimbursementofLawEnforcement					TotalPHDEPFunding:\$		
Goal(s)							
Objectives							
ProposedActivities	#of Persons Served	Target Population	Start Date	Expected Complete Date	PHEDE P Funding	OtherFunding (Amount/ Source)	PerformanceIndicators
1.							
2.							
3.							

9115 -SpecialInitiative					TotalPHDEPFunding:\$		
Goal(s)							
Objectives							
ProposedActivities	#of Persons Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	OtherFunding (Amount/ Source)	PerformanceIndicators
1.							

2.							
3.							

9116 -GunBuybackTAMatch					TotalPHDEPFunding:\$		
Goal(s)							
Objectives							
ProposedActivities	#of Persons Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	OtherFunding (Amount/Source)	PerformanceIndicators
1.							
2.							
3.							

9120 -SecurityPersonnel					TotalPHDEPFunding:\$		
Goal(s)							
Objectives							
ProposedActivities	#of Persons Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	OtherFunding (Amount/Source)	PerformanceIndicators
1.							
2.							
3.							

9130 –EmploymentofInvestigators					TotalPHDEPFunding:\$		
Goal(s)							
Objectives							
ProposedActivities	#of Persons Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	OtherFunding (Amount/Source)	PerformanceIndicators
1.							
2.							

3.							
----	--	--	--	--	--	--	--

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

9150 - Physical Improvements					Total PHDEP Funding: \$		
Goal(s)							
Objectives							
Proposed Activities	#of Persons Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	Other Funding (Amount/Source)	Performance Indicators
1.							
2.							
3.							

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

9170 -DrugIntervention					TotalPHDEPFunding:\$		
Goal(s)							
Objectives							
ProposedActivities	#of Persons Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	OtherFunding (Amount/Source)	PerformanceIndicators
1.							
2.							
3.							

9180 -DrugTreatment					TotalPHDEPFund ing:\$		
Goal(s)							
Objectives							
ProposedActivities	#of Person s Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	OtherFunding (Amount/Source)	PerformanceIndicators
1.							
2.							
3.							

9190 -OtherProgramCosts					TotalPHDEPFunds:\$		
Goal(s)							
Objectives							
ProposedActivities	#of Person s Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	OtherFunding (Amount/Source)	PerformanceIndicators
1.							
2.							

3.									
----	--	--	--	--	--	--	--	--	--

Required Attachment F
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 (explain):

B. Date of next term expiration of a governing board member: 02/28/2004

C. Name and title of appointing official(s) for governing board (indicate appointing official for the next position): Johnny Waldo, Mayor, City of Dover

Required Attachment G

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.)

1. Stella Sanders
2. Grace Brown
3. Thelma Hatcher
4. Janie Bewely

ATTACHMENTH

Summary/Comments of Goals and Objectives

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

- PHA Goal: Expand the supply of assisted housing
- Objectives:
- Apply for additional rental vouchers:
 - Reduce public housing vacancies to 2% and maintain a percentage which is equal to 2% or lower than 2% by 09/30/04: To accomplish this objective, the Dover Housing Authority will take affirmative steps to insure that units are returned around as quickly as possible. Under "normal" circumstances, we propose to implement a turnaround period that would not exceed 16 days. Further, we will expeditiously as possible screen applicants to assure timely admission. Our implementation schedule is as follows:
Year 1: Reduce the vacancy rate to 2% or maintain a 2% vacancy rate.
Progress Report: As of this date, the Dover Housing Authority has met this goal.

Year 2: Reduce the vacancy rate to 2% or maintain a 2% vacancy rate.
Progress Report: As of this date, the Dover Housing Authority has met this goal.

Year 3: Reduce the vacancy rate to 2% or maintain a 2% vacancy rate.
Progress Report: As of this date, the Dover Housing Authority has met this goal.

Year 4: Reduce the vacancy rate to 2% or maintain a 2% vacancy rate.
Year 5: Reduce the vacancy rate to 2% or maintain a 2% vacancy rate.
 - Leverage private or other public funds to create additional housing opportunities:
 - Acquire or build units or developments:
 - Other (list below)
- PHA Goal: Improve the quality of assisted housing
- Objectives:
- Maintain public housing management: (PHAS score) between 95 and 99.5 by 09/30/04. The Dover Housing Authority has a current PHAS score of 100. To accomplish this objective, the Dover Housing Authority will strictly enforce all policies governing management and maintenance including assuring timely unit turnaround and reduce the number of vacancies, assure timely inspections of dwelling units and systems, assure

timely response to work orders, assure timely response to resident requested services which will increase customer satisfaction, and assure sound financial management. We propose our target score to be as follows:

Baseline (current score): 100

Year 1: Maintain a PHAS between 95 and 99.5

Progress Report: As of this date, the Dover Housing Authority has a PHAS score of 95.

Year 2: Maintain a PHAS score between 95 and 99.5

Progress Report: As of this date, the Dover Housing Authority has a PHAS score of 95

Physical: 26 out of 30

Financial: 30 out of 30

Management: 30 out of 30

Resident: 9 out of 10

Year 3: Maintain a PHAS score between 95 and 99.5

Progress Report: As of this date, the Dover Housing Authority has a PHAS score of 92

Physical: 27 out of 30

Financial: 28 out of 30

Management: 30 out of 30

Resident: 7 out of 10

Year 4: Maintain a PHAS score between 95 and 99.5

Year 5: Maintain a PHAS score between 95 and 99.5



Improve voucher management: (SEMAP score)



Increase customer satisfaction to 100% of program participants by improving response time to requests for services by 09/30/04: To accomplish this objective the Dover Housing Authority will emphasize customer satisfaction as a top priority. Response time will be improved in areas of work orders for routine, non-routine and emergency calls, application taking, resident requested services, and PHA generated services. Our implementation schedule is proposed as follows:

Year 1: Achieve 80% customer satisfaction.

Progress Report: As of this date, the Dover Housing Authority has met this goal.

Year 2: Achieve 85% customer satisfaction.

Progress Report: As of this date, the Dover Housing Authority has met this goal.

Year3: Achieve 90% customer satisfaction.

Progress Report: As of this date, the Dover Housing Authority has not met this goal.

Year4: Achieve 95% customer satisfaction.

Year5: Achieve 100% customer satisfaction.



Concentrate on efforts to improve specific management functions by 09/30/04: To accomplish this objective the Dover Housing Authority will assure that staff is adequately trained and possesses the necessary skills to perform effectively and efficiently. Such management areas as financial management, Admissions and Continued Occupancy, unit inspections, voucher management, and maintenance service delivery will be scheduled on a regular basis to assure continued quality of services. Our implementation schedule is as follows:

Year1: Attend at least 4 training sessions rotating staff attendance.

Progress Report: As of this date, the Dover Housing Authority has achieved this goal.

Year2: Attend at least 4 training sessions rotating staff attendance.

Progress Report: As of this date, the Dover Housing Authority has achieved this goal.

Year3: Attend at least 4 training sessions rotating staff attendance.

Progress Report: As of this date, the Dover Housing Authority has achieved this goal.

Year4: Attend at least 4 training sessions rotating staff attendance.

Year5: Attend at least 4 training sessions rotating staff attendance.



Renovate or modernize public housing by 09/30/04: To accomplish this objective, the Dover Housing Authority had a comprehensive needs assessment conducted which revealed that the only items needed within the next five years will be the replacement of ranges and refrigerators. Therefore over the next five years, the Dover PHA will provide Modernization as follows:

Year1: Replace all ranges and refrigerators at AR085

Progress Report: Because the Dover Housing Authority has not yet received any funds for this year, this goal has not been met.

Year2: Operations, Site Improvements.

Progress Report: As of this date, the Dover Housing Authority has hired an assistant, has provided training and travel, purchased a lawn edger and power pole, made site improvements and purchased refrigerators, ranges and vent hoods.

Year3:OperationsandSiteImprovements.

ProgressReport: Asofthisdate,theDoverHousingAuthorityhashired anassistant,hasprovidedtrainingandtravel,purchasedalawnedger and powerpole,madesiteimprovementsandpurchasedrefrigerators,ranges andventhoods,haspurchasedacomputerandofficeequipment,andhas pouredconcreteonparkingbaysandunderfence.

Year4:Operations,DwellingImprovements.

Year5:Operations,DwellingImprovements.

- Demolishordisposeofobsoletepublichousing:
- Providereplacementpublichousing:
- Providereplacementvouchers:
- Other:(listbelow)

PHAGoal:Increaseassistedhousingchoices

Objectives:

- Providevoucher mobilitycounselingtoparticipatingfamilies:
- Conductoutreacheffortstopotentialvoucherlandlords:
- Increasevoucherpaymentstandards
- Implementvoucherhomeownershipprogram:
- Implementpublichousingorotherhomeownershipprogramsbyproviding homeownershipcounselingtoatleast100%offamiliesinpossessionby 09/30/04:Toaccomplishthisobjective,theDoverHousingAuthoritywill linkwithanon-profitorganizationprovidinghomeownershipcounseling tofamilies.Topicswillincludebutwillnotbelimitedto:
 1. Preparingforhomeownership -advantagesversusdisadvantages, affordability,examiningcreditreports
 2. Shoppingforahome -decidingnewversusold,findingtheright house,negotiatingthepurchase,submittingtheoffer,termsofthe contract,conductinganappraisal,homeinspection
 3. Obtainingamortgage -shoppingforaloan,themortgage checklist,applyingforaloan,loanprocessing
 4. Loanclosing -preparingforclosing,theactualclosingdocuments
 5. Lifeasahomeowner -settlingin,maintenance,financial management,taxplanning,homeequity,refinancing,pre-paying themortgage

Wepropose toimplementasfollows:

Year1:Counsel20%ofLowRentandSection8familiesonthewaiting listandinpossession

ProgressReport: Asofthisdate,theDoverHousingAuthorityhasmet thisgoal.

Year2:Counsel20%ofLowRentandSection8familiesonthewaiting listandinpossession

Progress Report: As of this date, the Dover Housing Authority has met this goal.

Year 3: Counsel 20% of Low Rent and Section 8 families on the waiting list and in possession

Progress Report: As of this date, the Dover Housing Authority has met this goal.

Year 4: Counsel 20% of Low Rent and Section 8 families on the waiting list and in possession

Year 5: Counsel 20% of Low Rent and Section 8 families on the waiting list and in possession

- 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 at least 5 higher income public housing households into lower income developments by 09/30/04: To accomplish this objective, the Dover Housing Authority will revise its Admissions and Occupancy Policy to include steps to deconcentrate poverty and seek opportunities to increase the number of higher-income families in lower/extremely -low income properties and lower/extremely-low income families in higher -income properties. Based on an analysis, the Dover Housing Authority does not have properties with significant numbers of higher -income families. Rather, our PHA desires for all of its families property to enjoy a greater percentage of working families. With this in mind, the Dover Housing Authority intends to increase the number of working families over the next five years. This will afford a mix of income levels among the lower/extremely -low income families and the higher -income families. Our proposed implementation schedule is as follows:

Year 1: House at least 1 higher income families in lower income communities and at least 1 lower income families in higher income communities.

Progress Report: As of this date, the Dover Housing Authority is exempt from this goal.

Year 2: House at least 1 higher income families in lower income communities and at least 1 lower income families in higher income communities.

ProgressReport: Asofthisdate,theDoverHousingAuthorityisexempt fromthisgoal.

Year3:Houseatleast1higherincomefamiliesinlowerincome communitiesandatleast1lowerincomefamiliesinhigherincome communities.

ProgressReport: Asofthisdate,theDoverHousingAuthorityisexempt fromthisgoal.

Year4:Houseatleast1higherincomefamiliesinlowerincome communitiesandatleast1lowerincomefamiliesinhigherincome communities.

Year5:Houseatleast1higherincomefamiliesinlowerincome communitiesandatleast1lowerincomefamiliesinhigherincome communities.

☒ Implementmeasurestopromoteincomemixinginpublichousingby assuringaccessforatleast5lowerincomefamiliesintohigherincome developmentsby09/30/04:Toaccomplishthisobjective,theDover HousingAuthoritywillreviseitsAdmissionsandOccupancyPolicyto includestepstodeconcentratepovertyandseekopportunitiestoincrease thenumberofhigher-incomefamiliesinlower/extremely-lowincome propertiesandlower-incomefamiliesinhigher-incomeproperties.Based onanalysis,theDoverHousingAuthoritydoesnothavepropertieswith significantnumbersofhigher-incomefamilies.Rather,ourPHAdesires forallfitsfamiliespropertytoenjoyagreaterpercentageofworking families.Withthisinmind,theDoverHousingAuthorityintendsto increasethenumberofworkingfamiliesatleast5overthenextfive years.Thiswillaffordamixofincomelevelsamongthelower/extremely-low incomefamiliesandthehigher-incomefamilies.Ourproposed implementationscheduleissameasabove.

Year1:

ProgressReport: Asofthisdate,theDoverHousingAuthorityisexempt fromthisgoal.

Year2:

ProgressReport : Asofthisdate,theDoverHousingAuthorityisexempt fromthisgoal.

Year3:

ProgressReport: Asofthisdate,theDoverHousingAuthorityisexempt fromthisgoal.

Year4:

Year5:

- Implement public housing security improvements
- Designated developments or buildings for particular resident groups (elderly, persons with disabilities)
- Other: (list below)

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

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

Objectives:

Increase the number and percentage of employed persons in assisted families by at least 5 by 09/30/04: To accomplish this objective, the Dover Housing Authority will take affirmative measures to assist those interested in working the opportunity to work. A combination of incentives will be implemented including ceiling rents, working preferences, improved collaboration with business partners in our community. We will identify and utilize resources to assist residents seek and obtain meaningful employment. Once employed, we will treat their income in compliance with section 12(d) of the U.S. Housing Act. Our implementation is as follows:

Year 1: Assist at least 1 resident to become employed

Progress Report: As of this date, the Dover Housing Authority has met this goal.

Year 2: Assist an additional 1 resident to become employed

Progress Report: As of this date, the Dover Housing Authority has met this goal.

Year 3: Assist an additional 1 resident to become employed

Progress Report: As of this date, the Dover Housing Authority has met this goal.

Year 4: Assist an additional 1 resident to become employed

Year 5: Assist an additional 1 resident to become employed

Provide or attract supportive services to at least 5 assisted families to improve assistance recipients' employability by 09/30/04: To accomplish this objective, the Dover Housing Authority will take affirmative measures to attract supportive services for those interested in employability. We will link with transportation providers, day care providers, health care providers, and social services agencies in an effort to provide the needed supportive services for job maintenance. Our implementation schedule is as follows:

Year 1: Assist at least 1 resident to acquire supportive services

ProgressReport: Asofthisdate,theDoverHousingAuthorityhasmet thisgoal.

Year2:Assistanadditional1resid enttoacquiresupportiveservices

ProgressReport: Asofthisdate,theDoverHousingAuthorityhasmet thisgoal.

Year3:Assistanadditional1residenttoacquiresupportiveservices

ProgressReport: Asofthisdate,theDoverHousingAuthorityhas met thisgoal.

Year4:Assistanadditional1residenttoacquiresupportiveservices

Year5:Assistanadditional1residenttoacquiresupportiveservices

Provideorattractssupportiveservicestoincreaseindependenceforatleast 5elderlyfamiliesand/orfamilieswithdisabilitiesby09/30/04.To accomplishthisobjective,theDoverHousingAuthoritywilltake affirmativemeasuresstoattractssupportiveservicesfortheelderlyand thosewithdisabilities.Wewilllinkwithtransport ationproviders,meals programs,healthcareproviders,andsocialservicesagenciesinaneffortto providetheneededsupportiveservices.Ourimplementationscheduleisas follows:

Year1:Assistatleast1residenttoacquiresupportiveservices

ProgressReport: Asofthisofdate,theDoverHousingAuthorityhasmet thisgoal.

Year2:Assistanadditional1residenttoacquiresupportiveservices

ProgressReport: Asofthisdate,theDoverHousingAuthorityhasmet thisgoal.

Year3:Assistanadd itional1residenttoacquiresupportiveservices

ProgressReport: Asofthisdate,theDoverHousingAuthorityhasmet thisgoal.

Year4:Assistanadditional1residenttoacquiresupportiveservices

Year5:Assistanadditional1residenttoacquire supportiveservices

Other:(listbelow)

HUDStrategicGoal:EnsureEqualOpportunityinHousingforallAmericans

PHAGoal:Ensureequalopportunityandaffirmativelyfurtherfairhousing

Objectives:

Undertakeaffirmativemeasuresstoensureaccesstoassistedhousing regardlessfrace,color,religionnationalorigin,sex,familialstatus,and disabilityfor100%offamiliesinpossessionand100%offamiliesonthe

waiting list by 09/30/04: To accomplish this objective, the Dover Housing Authority will implement the following:

Post in conspicuous places such as bulletin boards, churches, grocery stores, department stores, civic and other organizations, aspects of equal opportunity and fair housing as provided by the Dover PHA, distribute flyers about fair housing provided by your PHA, provide copies of fair housing literature to persons on the waiting list as well as those in possession, provide counseling to landlords about fair housing. Our implementation schedule is as follows:

Year 1: Distribute at least 50 flyers regarding fair housing

Progress Report: As of this date, the Dover Housing Authority has met this goal.

Year 2: Distribute at least 50 flyers regarding fair housing

Progress Report: As of this date, the Dover Housing Authority has met this goal.

Year 3: Distribute at least 50 flyers regarding fair housing

Progress Report: As of this date, the Dover Housing Authority has met this goal.

Year 4: Distribute at least 50 flyers regarding fair housing

Year 5: Distribute at least 50 flyers regarding fair housing

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 100% of persons with all varieties of disabilities regardless of unit size required by 09/30/04: To accomplish this objective the Dover Housing Authority will take affirmative steps to assure that persons with disabilities have access to housing. This will be accomplished by assuring that a minimum of 5% of our low rent units are in compliance with Section 504 of the American Disabilities Act, that where possible, units are equipped with devices for the visually and hearing impaired, and insuring that the office is equipped for accessibility, and pathway to the office provide a direct path for easy access.

Year 1:

Progress Report: As of this date, the Dover Housing Authority has met this goal.

Year 2:

Progress Report: As of this date, the Dover Housing Authority has met this goal.

Year3:

Progress Report: Asofthisdate,theDoverHousingAuthorityhasmet thisgoal.

Year4:

Year5:

Other:(listbelow)

OtherPHAGoalsandObjectives:(listbelow)

ATTACHMENT I

Component 3.(6) Deconcentration and Income Mixing

- a. Yes No: DoesthePHAhaveanygeneraloccupancy(family)publichousing developmentscoveredbythedeconcentrationrule?Ifno,this sectioniscomplete.Ifyes,continuetonextquestion.
- b. Yes No: Doanyofthesecovereddevelopmentshaveaverageincomes aboveorbelow85%to115%oftheaverageincomesofallsuch developments?Ifno,thisquestioniscomplete.

Ifyes,listthesedevelopmentsasfollows:

Deconcentration Policy for Covered Developments

DevelopmentName:	NumberofUnits	Explanation(ifany)/ seestep4at §903.2©(1)(iv)/	Deconcentration policy(ifno explanation)/see step5at §903.2©(1(v)/

ATTACHMENT J
COMPONENT 10(b) Voluntary Conversion Initial Assessments

- a. How many of the PHA's developments are subject to the Required Initial Assessments?
 The Dover Housing Authority has 1 development which is subject to the Initial Assessments.

- 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 are not general occupancy projects)?
 The Dover Housing Authority has no development not subject to the Required Initial Assessments.

- c. How many Assessments were conducted for the PHA's covered developments?
 The Dover Housing Authority conducted 1 assessment for the 1 covered development.

- d. Identify PHA developments that may be appropriate for conversion based on the Required Initial Assessments:
 None of the PHA developments are considered appropriate for conversion based on the Required Initial Assessments.

Development Name	Number of Units

- e. If the PHA has not completed the Required Initial Assessment, describe the status of these assessments.
 The Dover Housing Authority has completed the Required Initial Assessments.

ATTACHMENTK –FOLLOW -UPPLANFY2002

TheDoverHousingAuthorit yreceivedabelownationalaveragescoreinonecomponent oftheResidentSatisfactionSurvey.Thisfollow -upplanaddressestheDoverHousing Authority'sproposedactionstoaddressthisitem.

COMMUNICATION

1. Inordertoimprovecommunicationswithreside nts,theDoverHousingAuthority haspostedonitsbulletinboardallPHAproposedactivities,specialup -coming events,HUDNotices,policyandprocedureschangesandresidentnews.Further, thePHAhasmetwithitsResidentAdvisoryBoard(RAB)onsevera lloccasionsto includetheminplanningPHAoperationssuchasCapitalFunding,andAgency Planpreparation.
2. PHAstaffhasbeentrainedtoeffectivelyandpolitelycommunicatewithresidents.
3. ThePHAstaffattendsregularstaffmeetingsatleastmonthly,t oensureproper communications.
4. ThePHAhasmetwithresidentsonseveraloccasionstoassureeffective communicationwithresidents.