

# PHAPlans

5YearPlanforFiscalYears200	3 -200 7
AnnualPlanforFiscalYear200	3

MalvernHousingAuthority

**NOTE:THISPHAPLANSTEMPL ATE(HUD50075)ISTOBECOMPLETEDIN  
ACCORDANCEWITHINSTRUCTIONSLOCATEDINAPPLICABLEPIHNOTICES**

## PHA Plan Agency Identification

**PHAName:** Malvern Housing Authority

**PHANumber:** AR094

**PHAFiscalYearBeginning:(mm/yyyy)** 10/ 2003

### Public Access to Information

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

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

### Display Locations For PHA Plans and Supporting Documents

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

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

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

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

**5-YEAR PLAN**  
**PHAF ISCAL YEARS 2003 -200 7**  
[24CFRPart903.5]

**A.Mission**

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

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

**B.Goals**

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

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

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

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

PHA Goal: Increase assisted housing choices

Objectives:

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

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

PHA Goal: Provide an improved living environment

Objectives:

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

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

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

Objectives:

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

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

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

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

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

**AnnualPHAPlan**  
**PHAFiscalYear2003**  
[24CFRPart903.7]

**i. AnnualPlanType:**

SelectwhichtypeofAnnualPlanthePHAwillsubmit.

**StandardPlan**

**StreamlinedPlan:**

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

**TroubledAgencyPlan**

**ii. ExecutiveSummaryoftheAnnualPHAPlan**

[24CFRPart903.79(r)]

ProvideabriefoverviewoftheinformationintheAnnualPlan,includinghighlightsofmajorinitiatives  
anddiscretionarypolicies,thePHAhasincludedintheAnnualPlan.

TheMalvernHousingAuthorityhaspreparedthisAgencyPlanincompliancewith  
Section511oftheQualityHousingandWorkResponsibilityActof1998andthe  
ensuingHUDrequirements.

Wehaveadoptedthefollowingmissionstatementtoguidetheactivitiesofthe  
MalvernHousingAuthority.  
Topromoteadequateandaffordablehousing,economicopportunityandasuitable  
livingenvironmentfreefromdiscrimination.

Wehavealsoadoptedthefollowinggoalsandobjectivesforthenextfiveyears.

Goal: Expandthesupplyofassistedhousing.

Objective: Reducepublichousingvacancies.

Goal: Improvethequalityofassistedhousing.

Objective: Improvepublichousingmanagement:(PHAScore)

Objective: Renovateormodernizepublichousingunits.

Goal: Provideanimprovedlivingenvironment.

- Objective: Implement public housing security improvements.
- Objective: Implement measures to deconcentrate poverty by bringing higher income public housing households into lower income developments.
- Objective: Implement measures to promote income mixing in public housing by assuring access for lower income families into higher income developments.
- Goal: Ensure equal opportunity and affirmatively further fair housing.
- Objective: 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.
- Objective: Undertake affirmative measures to ensure access to assisted housing regardless of race, color, religion, national origin, sex, familial status and disability.
- Objective: Undertake affirmative measures to ensure accessible housing to persons with all varieties of disabilities regardless of unit size required.

Our Annual Plan is based on the premise that if we accomplish our goals and objectives we will be working towards the achievement of our mission.

The Plans, statements, budget and policies set forth in the Annual Plan all lead towards the accomplishment of our goals and objectives. Taken as a whole, they outline a comprehensive approach towards our goals and objectives and are consistent with the Consolidated Plan. We are committed to improving the condition of affordable housing in Malvern. Some highlights of our Annual and Five Year Plan are to continue to renovate and modernize welling units at Project AR94 -01, and 02, and improve the physical condition of each development throughout the following 5 years. The amount of funds being requested is \$ 311,618 from the FY2003 Capital Fund Program.

### **iii. Annual Plan Table of Contents**

[24CFR Part 903.79(r)]

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

#### **Table of Contents**

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#### **Attachments**

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

#### Required Attachments:

- A  FY2003 Capital Fund Program Annual Statement
- Most recent board -approved operating budget (Required Attachment for PHAs that are troubled or at risk of being designated troubled ONLY)

#### Optional Attachments:

- PHA Management Organizational Chart
- B FY2003 Capital Fund Program 5 Year Action Plan
- C Public Housing Drug Elimination Program (PHDEP) Plan
- D Pet Policy
- E Resident Membership of the PHA Governing Board
- F Membership of the Resident Advisory Board

- G Statement of Progress in Meeting the 5 -Year Plan Mission and Goals
- H Performance and Evaluation Report (FY2000 CFP)
- I Performance and Evaluation Report (FY2001 CFP)
- J Performance and Evaluation Report (FY2002 CFP)
- K Deconcentration and Income Mixing
- L Voluntary Conversion
- Comments of Resident Advisory Board (included on Page 43)

**Supporting Documents Available for Review**

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

<b>List of Supporting Documents Available for Review</b>		
<b>Applicable &amp; On Display</b>	<b>Supporting Document</b>	<b>Applicable Plan Component</b>
X	PHA Plan 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	5 Year and Annual Plans
X	Fair Housing Documentation: Records reflecting that the PHA has examined its programs or proposed programs, identified any impediments to fair housing choice in those programs, addressed or is addressing those impediments in a reasonable fashion in view of the resources available, and worked or is working with local jurisdiction to implement any of the jurisdictions' initiatives to affirmatively further fair housing that require the PHA's involvement.	5 Year and Annual Plans
X	Consolidated Plan for the jurisdictions in which the PHA is located (which includes the Analysis of Impediments to Fair Housing Choice (AI)) and any additional backup data to support statement of housing needs in the jurisdiction	Annual Plan: Housing Needs
X	Most recent board -approved operating budget for the public housing program	Annual Plan: Financial Resources;
X	Public Housing Admissions and (Continued) Occupancy Policy (A&O), which includes the Tenant Selection and Assignment Plan [TSAP]	Annual Plan: Eligibility, Selection, and Admissions Policies
X	Section 8 Administrative Plan	Annual Plan: Eligibility, Selection, and Admissions Policies
	Public Housing Deconcentration and Income Mixing Documentation: 1. PHA board certifications of compliance with deconcentration requirements (section 16(a) of the US Housing Act of 1937, as implemented in the 2/18/99 <i>Quality Housing and Work Responsibility Act Initial Guidance; Notice</i> and any further HUD guidance) and 2. Documentation of the required deconcentration and	Annual Plan: Eligibility, Selection, and Admissions Policies

<b>List of Supporting Documents Available for Review</b>		
<b>Applicable &amp; On Display</b>	<b>Supporting Document</b>	<b>Applicable Plan Component</b>
X	income mixing analysis	
X	Public housing rent determination policies, including the methodology for setting public housing flat rents <input type="checkbox"/> check here if included in the public housing A&O Policy	Annual Plan: Rent Determination
X	Schedule of flat rents offered each public housing development <input type="checkbox"/> check here if included in the public housing A&O Policy	Annual Plan: Rent Determination
X	Section 8 rent determination (payment standard) policies <input type="checkbox"/> check here if included in Section 8 Administrative Plan	Annual Plan: Rent Determination
X	Public housing management and maintenance policy documents, including policies for the prevention or eradication of pest infestation (including cockroach infestation)	Annual Plan: Operations and Maintenance
X	Public housing grievance procedures <input type="checkbox"/> check here if included in the public housing A&O Policy	Annual Plan: Grievance Procedures
X	Section 8 informal review and hearing procedures <input type="checkbox"/> check here if included in Section 8 Administrative Plan	Annual Plan: Grievance Procedures
	The HUD - approved Capital Fund/Comprehensive Grant Program Annual Statement (HUD 52837) for the active grant year	Annual Plan: Capital Needs
	Most recent CIAP Budget/Progress Report (HUD 52825) for any active CIAP grant	Annual Plan: Capital Needs
	Most recent, approved 5 Year Action Plan for the Capital Fund/Comprehensive Grant Program, if not included as an attachment (provided at PHA option)	Annual Plan: Capital Needs
	Approved HOPE VI applications or, if more recent, approved or submitted HOPE VI revitalization plans or any other approved proposal for development of public housing	Annual Plan: Capital Needs
	Approved or submitted 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	Annual Plan: Conversion of Public Housing
	Approved or submitted public housing homeownership programs/plans	Annual Plan: Homeownership
	Policies governing any Section 8 Homeownership program <input type="checkbox"/> check here if included in the Section 8 Administrative Plan	Annual Plan: Homeownership
	Any cooperative agreement between the PHA and the TANF	Annual Plan: Community

<b>List of Supporting Documents Available for Review</b>		
<b>Applicable &amp; On Display</b>	<b>Supporting Document</b>	<b>Applicable Plan Component</b>
	agency	Service & Self - Sufficiency
	FSS Action Plans for public housing and/or Section 8	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
X	The most recent Public Housing Drug Elimination Program (PHDEP) semi - annual performance report for any open grant and most recently submitted PHDEP application (PHDEP Plan)	Annual Plan: Safety and Crime Prevention
X	The most recent fiscal year audit of the PHA conducted under section 5(h)(2) of the U.S. Housing Act of 1937 (42 U.S.C. 1437c(h)), the result of that audit and the PHA's response to any findings	Annual Plan: Annual Audit
	Troubled PHAs: MOA/Recovery Plan	Troubled PHAs
	Other supporting documents (optional) (list individually; use as many lines as necessary)	(specify as needed)

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

[24 CFR Part 903.79(a)]

### **A. Housing Needs of Families in the Jurisdictions Served by the PHA**

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

<b>Housing Needs of Families in the Jurisdiction by Family Type</b>							
<b>Family Type</b>	<b>Overall</b>	<b>Affordability</b>	<b>Supply</b>	<b>Quality</b>	<b>Accessibility</b>	<b>Size</b>	<b>Location</b>
Income <= 30% of AMI	265	5	5	3	2	3	4
Income > 30% but <= 50% of AMI	207	5	5	3	1	3	4
Income > 50% but < 80% of AMI	31	4	5	4	1	3	3
Elderly	186	5	5	4	3	3	4
Families with Disabilities	Unknown	NA	NA	NA	NA	NA	NA
Race/Ethnicity							

Housing Needs of Families in the Jurisdiction by Family Type							
Family Type	Overall	Affordability	Supply	Quality	Accessibility	Size	Location
black	130	5	5	4	1	3	4
Race/Ethnicity							
Race/Ethnicity							
Race/Ethnicity							

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

- Consolidated Plan of the Jurisdiction State of Arkansas  
Indicate year: 2000
- U.S. Census data: the Comprehensive Housing Affordability Strategy (“CHAS”) dataset
- American Housing Survey data  
Indicate year:
- Other housing market study  
Indicate year:
- Other sources: (list and indicate year of information)

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

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

Housing Needs of Families on the Waiting List			
Waiting list type: (select one)			
<input type="checkbox"/> Section 8 tenant-based assistance			
<input checked="" type="checkbox"/> Public Housing			
<input type="checkbox"/> Combined Section 8 and Public Housing			
<input type="checkbox"/> Public Housing Site-Based or sub-jurisdictional waiting list (optional)			
If used, identify which developments sub-jurisdiction:			
	# of families	% of total families	Annual Turnover
Waiting list total	40		40
Extremely low			

<b>Housing Needs of Families on the Waiting List</b>			
income <= 30% AMI	36	90	
Very low income (>30% but <=50% AMI)	2	5	
Low income (>50% but <80% AMI)	2	5	
Families with children	27	67	
Elderly families	0	0	
Families with Disabilities	5	12	
Race/ethnicity black	16	40	
Race/ethnicity white	24	60	
Race/ethnicity			
Race/ethnicity			
Characteristics by Bedroom Size (Public Housing Only)			
1BR	15	38	15
2BR	18	45	18
3BR	7	17	7
4BR			
5BR			
5+BR			
Is the waiting list closed (select one)? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes If yes: How long has it been closed (# of months)? Does the PHA expect to reopen the list in the PHA Plan year? <input type="checkbox"/> No <input type="checkbox"/> Yes Does the PHA permit specific categories of families onto the waiting list, even if generally closed? <input type="checkbox"/> No <input type="checkbox"/> Yes			

### Housing Needs of Families on the Waiting List

Waiting list type: (select one)

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

If used, identify which developments sub jurisdiction:

	# of families	% of total families	Annual Turnover
Waiting list total	142		142
Extremely low income <=30% AMI	116	82	
Very low income (>30% but <=50% AMI)	12	8	
Low income (>50% but <80% AMI)	4	3	
Families with children	110	77	
Elderly families	3	2	
Families with Disabilities	6	4	
Race/ethnicity black	47	33	
Race/ethnicity white	95	67	
Race/ethnicity			
Race/ethnicity			
Characteristics by Bedroom Size (Public Housing Only)			
1BR			
2BR			
3BR			
4BR			
5BR			
5+BR			

### Housing Needs of Families on the Waiting List

Isthe waiting list closed (select one)?     No     Yes

If yes:

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

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

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

### C. Strategy for Addressing Needs

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

#### (1) Strategies

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

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

Select all that apply

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

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

Select all that apply

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

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

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

Select all that apply

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

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

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

Select all that apply

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

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

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

Select all that apply

- Seek designation of public housing for the elderly
- Apply for special -purpose voucher targeted to the elderly, should they become available
- Other: (list below )

**Need: Specific Family Types: Families with Disabilities**

**Strategy 1: Target available assistance to Families with Disabilities:**

Select all that apply

- Seek designation of public housing for families with disabilities
- Carry out the modifications needed in public housing based on the section 504 Needs Assessment for Public Housing
- Apply for special -purpose voucher targeted to families with disabilities, should they become available
- Affirmatively market to local non -profit agencies that assist families with disabilities
- Other: (list below)

**Need: Specific Family Types: Races or ethnicities with disproportionate housing needs**

**Strategy 1: Increase awareness of PHA resources among families of races and ethnicities with disproportionate needs:**

Select if applicable

- Affirmatively market to races/ethnicities shown to have disproportionate housing needs
- Other: (list below)

**Strategy 2: Conduct activities to affirmatively further fair housing**

Select all that apply

- Counsel section 8 tenants as to location of units outside of areas of poverty or minority concentration and assist them to locate those units
- Market the section 8 program to owners outside of areas of poverty/minority concentrations
- Other: (list below)

**Other Housing Needs & Strategies: (list needs and strategies below)**

**(2) Reasons for Selecting Strategies**

Of the factors listed below, select all that influenced the PHA's selection of the strategies it will pursue:

- Funding constraints
- Staffing constraints
- Limited availability of sites for assisted housing
- Extent to which particular housing needs are met by other organizations in the community

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

## **2. Statement of Financial Resources**

[24CFR Part 903.79(b)]

List the financial resources that are anticipated to be available to the PHA for the support of Federal public housing and tenant-based Section 8 assistance programs administered by the PHA during the Plan year. Note: the table assumes that Federal public housing or tenant-based Section 8 assistance grant funds are expended on eligible purposes; therefore, uses of these funds need not be stated. For other funds, indicate the use for those funds as one of the following categories: public housing operations, public housing capital improvements, public housing safety security, public housing support services, Section 8 tenant-based assistance, Section 8 support services or other.

<b>Financial Resources: Planned Sources and Uses</b>		
<b>Sources</b>	<b>Planned \$</b>	<b>Planned Uses</b>
<b>1. Federal Grants (FY 2003 grants)</b>		
a) Public Housing Operating Fund	\$308,290	
b) Public Housing Capital Fund	\$311,618	
c) HOPEVI Revitalization		
d) HOPEVI Demolition		
e) Annual Contributions for Section 8 Tenant-Based Assistance	\$367,944	
f) Public Housing Drug Elimination Program (including any Technical Assistance funds)		
g) Resident Opportunity and Self-Sufficiency Grants		
h) Community Development Block Grant		
i) HOME		
Other Federal Grants (list below)		

<b>Financial Resources: Planned Sources and Uses</b>		
<b>Sources</b>	<b>Planned \$</b>	<b>Planned Uses</b>
<b>2. Prior Year Federal Grants (unobligated funds only) (list below)</b>		
PHDEP ( 2000 & 2001)	\$55,634.96	PHDEP
CFP(200 2)	\$301,618	CFP
<b>3. Public Housing Dwelling Rental Income</b>	\$195,420	PH Operations
<b>4. Other income (list below)</b>		
Section 8 Reserves	\$97,783.88	Operations
Low Rent Housing Reserves	\$206,070	PH Operations
<b>4. Non -federal sources (list below)</b>		
<b>Total resources</b>	<b>\$1,844,378.84</b>	

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

[24CFR Part 903.79(c)]

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

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

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

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

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

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

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

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

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

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

## (2) Waiting List Organization

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

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

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

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

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

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

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

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

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

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

**(3) Assignment**

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

- One
- Two
- Three or More

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

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

**(4) Admissions Preferences**

a. Income targeting:

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

b. Transfer policies:

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

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

c. Preferences

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

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

Former Federal preferences:

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

Other preferences: (select below)

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

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

Date and Time

Former Federal preferences:

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

Other preferences (select all that apply)

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

4. Relationship of preferences to income targeting requirements:

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

**(5) Occupancy**

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

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

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

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

**(6) Deconcentration and Income Mixing**

a.  Yes  No: Did the PHA's analysis of its family (general occupancy) developments to determine concentrations of poverty indicate the

need for measures to promote deconcentration of poverty or income mixing?

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

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

Adoption of site-based waiting lists  
If selected, list targeted developments below:

Employing waiting list "skipping" to achieve deconcentration of poverty or income mixing goals at targeted developments  
If selected, list targeted developments below:  
All developments

Employing new admission preferences at targeted developments  
If selected, list targeted developments below:

Other (list policies and development targeted below)

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

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

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

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

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

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

- Not applicable: results of analysis did not indicate a need for such efforts

- List (any applicable) developments below:

## **B. Section 8**

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

### **(1) Eligibility**

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

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

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

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

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

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

- Criminal or drug -related activity
- Other (describe below)  
size of family

### **(2) Waiting List Organization**

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

- None
- Federal public housing
- Federal moderate rehabilitation

- Federal project -based certificate program
- Other federal or local program (list below)

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

- PHA main administrative office
- Other (list below)

**(3) Search Time**

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

If yes, state circumstances below:

If reporting to HA on a regular basis - searching for housing

**(4) Admissions Preferences**

a. Income targeting

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

b. Preferences

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

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

Former Federal preferences

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

Other preferences (select all that apply)

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

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

Date and Time

Former Federal preferences

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

Other preferences (select all that apply)

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

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

- Date and time of application

Drawing (lottery) or other random choice technique

5. If the PHA plans to employ preferences for "residents who live and/or work in the jurisdiction" (select one)

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

6. Relationship of preferences to income targeting requirements: (select one)

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

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

a. In which documents or other reference materials are the policies governing eligibility, selection, and admission to any special purpose section 8 program administered by the PHA contained? (select all that apply)

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

b. How does the PHA announce the availability of any special purpose section 8 programs to the public?

- Through published notices  
 Other (list below)

#### **4. PHA Rent Determination Policies**

[24 CFR Part 903.79(d)]

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

Exemptions: PHA that do not administer public housing are not required to complete sub-component 4A.

##### **(1) Income Based Rent Policies**

Describe the PHA's income based rent setting policy/ies for public housing using, including discretionary (that is, not required by statute or regulation) income disregards and exclusions, in the appropriate spaces below.

a. Use of discretionary policies: (select one)

The PHA will not employ any discretionary rent setting policies for income based rent in public housing. Income based rents are set at the higher of 30% of adjusted monthly income, 10% of unadjusted monthly income, the welfare rent, or minimum rent (less HUD mandatory deductions and exclusions). (If selected, skip to sub-component (2))

---or---

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

b. Minimum Rent

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

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

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

3. If yes to question 2, list these policies below :

1. When the family has lost eligibility for or is waiting on eligibility determination for a Federal, State or local assistance program;
2. When the family would be evicted as a result of the imposition of the minimum rent requirement;
3. When the income of the family has decreased because of changed circumstances, including loss of employment;
4. When the family has an increase in expenses because of changed circumstances, for medical costs, childcare, transportation, education, or similar items;
5. When a death has occurred in the family.

c. Rents set at less than 30% than adjusted income

1.  Yes  No: Does the PHA plan to charge rents at a fixed amount or percentage less than 30% of adjusted income?

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

d. Which of the discretionary (optional) deductions and/or exclusions policies does the PHA plan to employ (select all that apply)

For the earned income of a previously unemployed household member

For increases in earned income

Fixed amount (other than general rent -setting policy)

If yes, state amounts and circumstances below:

Fixed percentage (other than general rent -setting policy)

If yes, state percentages and circumstances below:

For household heads

For other family members

For transportation expenses

For the non-reimbursed medical expenses of non-disabled or non-elderly families

Other (describe below)

e. Ceiling rents

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

Yes for all developments

Yes but only for some developments

No

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

For all developments

For all general occupancy developments (not elderly or disabled or elderly only)

For specified general occupancy developments

For certain parts of developments; e.g., the high-rise portion

For certain size units; e.g., larger bedroom sizes

Other (list below)

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

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

f. Rent review determinations:

1. Between income reexaminations, how often must tenants report changes in income or family composition to the PHA such that the changes result in an adjustment to rent? (select all that apply)

- Never
- At family option
- Anytime the family experiences an income increase
- Anytime a family experiences an income increase above a threshold amount or percentage: (if selected, specify threshold) \_\_\_\_\_
- Other (list below)

g.  Yes  No: Does the PHA plan to implement individual savings accounts for residents (ISAs) as an alternative to the required 12 month disallowance of earned income and phasing in of rent increases in the next year?

## **(2) Flat Rents**

1. In setting the market-based flat rents, what sources of information did the PHA use to establish comparability? (select all that apply.)

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

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

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

### **(1) Payment Standards**

Describe the voucher payment standards and policies .

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

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

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

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

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

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

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

- Annually
- Other (list below)

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

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

**(2)MinimumRent**

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

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

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

**5. Operations and Management**

[24CFR Part 903.79(e)]

**NOT APPLICABLE**

Exemptions from Component 5: High performing and small PHAs are not required to complete this section. Section 8 only PHAs must complete parts A, B, and C(2)

**A. PHA Management Structure**

Describe the PHA's management structure and organization.

(select one)

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

**B. HUD Programs Under PHA Management**

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

Program Name	Units or Families Served at Year Beginning	Expected Turnover
Public Housing		
Section 8 Vouchers		
Section 8 Certificates		
Section 8 Mod Rehab		
Special Purpose Section 8 Certificates/Vouchers (list individually)		
Public Housing Drug Elimination Program		

(PHDEP)		
Other Federal Programs (list individually)		

**C. Management and Maintenance Policies**

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

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

(2) Section 8 Management: (list below)

**6. PHA Grievance Procedures**

[24CFR Part 903.79(f)]

Exemptions from component 6: High performing PHAs are not required to complete component 6. Section 8 - Only PHAs are exempt from sub -component 6A.

**NOT APPLICABLE**

**A. Public Housing**

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

If yes, list additions to federal requirements below:

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

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

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

1.  Yes  No: Has the PHA established informal review procedures for applicants to the Section 8 tenant-based assistance program and informal hearing procedures for families assisted by the Section 8 tenant-based assistance program in addition to federal requirements found at 24CFR982?

If yes, list additions to federal requirements below:

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

- PHA main administrative office
- Other (list below)

**7. Capital Improvement Needs**

[24CFR Part 903.79(g)]

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

**A. Capital Fund Activities**

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

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

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

Select one:

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

-or-

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

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

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

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

b. If yes to question a, select one:

The Capital Fund Program 5 -Year Action Plan is provided as an attachment to the PHA Plan at Attachment (state name) Attachment B

-or-

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

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

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

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

1. Development name:

2. Development (project) number:

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

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

Yes  No: c) Does the PHA plan to apply for a HOPE VI Revitalization grant in the Plan year?  
If yes, list development names below:

Yes  No:d) Will the PHA be engaging in any mixed -financed development activities for public housing in the Plan year? If yes, list developments or activities below:

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

### **8. Demolition and Disposition**

[24CFR Part 903.79(h)]

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

1.  Yes  No: Does the PHA plan to conduct any demolition or disposition activities (pursuant to section 18 of the U.S. Housing Act of 1937 (42 U.S.C. 1437p)) in the plan Fiscal Year ? (If "No", skip to component 9; if "yes", complete one activity description for each development.)

#### 2. Activity Description

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

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

7. Timeline for activity:

a. Actual or projected start date of activity:

b. Projected end date of activity:

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

[24CFR Part 903.79(i)]

Exemptions from Component 9; Section 8 only PHAs are not required to complete this section.

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

2. Activity Description

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

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

<p>5. If approved, will this designation constitute a (select one)</p> <p><input type="checkbox"/> New Designation Plan</p> <p><input type="checkbox"/> Revision of a previously -approved Designation Plan?</p>
<p>6. Number of units affected:</p> <p>7. Coverage of action (select one)</p> <p><input type="checkbox"/> Part of the development</p> <p><input type="checkbox"/> Total development</p>

**10. Conversion of Public Housing to Tenant -Based Assistance**

[24CFR Part 903.79(j)]

Exemptions from Component 10; Section 8 only PHAs are not required to complete this section.

**A. Assessment of Reasonable Revitalization Pursuant to section 202 of the HUD FY1996 HUD Appropriations Act**

1.  Yes  No: Have any of the PHA's developments or portions of developments been identified by HUD or the PHA as covered under section 202 of the HUD FY1996 HUD Appropriations Act? (If "No", skip to component 11; if "yes", complete one activity description for each identified development, unless eligible to complete as streamlined submission. PHAs completing streamlined submissions may skip to component 11.)

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

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

4. Status of Conversion Plan (select the statement that best describes the current status)

- Conversion Plan in development
- Conversion Plan submitted to HUD on: (DD/MM/YYYY)
- Conversion Plan approved by HUD on: (DD/MM/YYYY)
- Activities pursuant to HUD - approved Conversion Plan underway

5. Description of how requirements of Section 202 are being satisfied by means other than conversion (select one)

- Units addressed in a pending or approved demolition application (date submitted or approved: \_\_\_\_\_)
- Units addressed in a pending or approved HOPE VI demolition application (date submitted or approved: \_\_\_\_\_)
- Units addressed in a pending or approved HOPE VI revitalization plan (date submitted or approved: \_\_\_\_\_)
- Requirements no longer applicable: vacancy rates are less than 10 percent
- Requirements no longer applicable: site now has less than 300 units
- Other: (describe below)

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

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

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

[24CFR Part 903.79(k)]

**A. Public Housing**

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

1.  Yes  No: Does the PHA administer any homeownership programs administered by the PHA under an approved section 5(h) homeownership program (42 U.S.C. 1437c(h)), or an approved HOPE I program (42 U.S.C. 1437aaa) or has the PHA applied or plan to apply to administer any homeownership programs under section 5(h), the HOPE I program, or section 32 of the U.S.

Housing Act of 1937 (42 U.S.C. 1437z -4). (If "No", skip to component 11B; if "yes", complete one activity description for each applicable program/plan, unless eligible to complete a streamlined submission due to **small PHA** or **high performing PHA** status. PHAs completing streamlined submissions may skip to component 11B.)

2. Activity Description

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

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

**B. Section 8 Tenant Based Assistance**

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

high performer status. **High performing PHAs** may skip to component 12.)

2. Program Description:

a. Size of Program

Yes  No: Will the PHA limit the number of families participating in the section 8 homeownership option?

If the answer to the question above was yes, which statement best describes the number of participants? (select one)

- 25 or fewer participants
- 26- 50 participants
- 51 to 100 participants
- more than 100 participants

b. PHA - established eligibility criteria

Yes  No: Will the PHA's program have eligibility criteria for participation in its Section 8 Homeownership Option program in addition to HUD criteria?

If yes, list criteria below:

**12. PHA Community Service and Self -sufficiency Programs**

[24 CFR Part 903.79(1)]

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

**NOT APPLICABLE**

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

1. Cooperative agreements:

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

If yes, what was the date that agreement was signed? DD/MM/YY

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

Client referrals

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

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

**(1) General**

a. Self-Sufficiency Policies

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

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

b. Economic and Social self-sufficiency programs

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



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

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

### **13. PHA Safety and Crime Prevention Measures**

[24 CFR Part 903.79(m)]

Exemptions from Component 13: High performing and small PHAs not participating in PHDEP and Section 8 Only PHAs may skip to component 15. High performing and small PHAs that are participating in PHDEP and are submitting a PHDEP Plan with this PHA Plan may skip to sub-component D.

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

1. Describe the need for measures to ensure the safety of public housing residents (select all that apply)

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

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

- Safety and security survey of residents
- Analysis of crime statistics over time for crimes committed "in and around" public housing authority
- Analysis of cost trends over time for repair of vandalism and removal of graffiti
- Resident reports

- PHA employee reports
- Police reports
- Demonstrable, quantifiable success with previous or ongoing anti-crime/anti drug programs
- Other (describe below)

2. Which developments are most affected? (list below)  
AR94-01 and 02

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

1. List the crime prevention activities the PHA has undertaken or plan to undertake (select all that apply)

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

2. Which developments are most affected? (list below)  
AR94-01 and 02

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

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

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

2. Which developments are most affected? (list below)  
AR94-01 and 02

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

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

- Yes  No: Is the PHA eligible to participate in the PHDEP in the fiscal year covered by this PHA Plan?
- Yes  No: Has the PHA included the PHDEP Plan for FY2002 in this PHA Plan?
- Yes  No: This PHDEP Plan is an Attachment. (Attachment Filename: \_\_\_\_\_)

**14. RESERVED FOR PETP POLICY**

[24CFR Part 903.79(n)]

**15. Civil Rights Certifications**

[24CFR Part 903.79(o)]

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

**16. Fiscal Audit**

[24CFR Part 903.79(p)]

- 1.  Yes  No: Is the PHA required to have an audit conducted under section 5(h)(2) of the U.S. Housing Act of 1937 (42 U.S.C. 1437c(h))?  
(If no, skip to component 17.)
- 2.  Yes  No: Was the most recent fiscal audit submitted to HUD?
- 3.  Yes  No: Were there any findings as the result of that audit?
- 4.  Yes  No: If there were any findings, do any remain unresolved?  
If yes, how many unresolved findings remain? \_\_\_\_\_
- 5.  Yes  No: Have responses to any unresolved findings been submitted to HUD?  
If not, when are they due (state below)?

**17. PHA Asset Management**

[24CFR Part 903.79(q)]

**NOT APPLICABLE**

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

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

## **18. Other Information**

[24CFR Part 903.79(r)]

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

1.  Yes  No: Did the PHA receive any comments on the PHA Plan from the Resident Advisory Boards?
2. If yes, the comments are: (if comments were received, the PHA **MUST** select one)
- Attached at Attachment (Filename)
  - Provided below:  
Residents at AR094 -02 requested retaining walls and storage buildings.  
Residents at AR094 -01 requested retaining walls, kitchen and bathroom renovations, dryer connections, and interior door replacement.
3. In what manner did the PHA address those comments? (select all that apply)
- Considered comments, but determined that no changes to the PHA Plan were necessary.
  - The PHA changed portions of the PHA Plan in response to comments  
List changes below:
  - Other: (list below)

**B. Description of Election process for Resident on the PHA Board**  
**N/A – There are no openings on the PHA Board at this time.**

1.  Yes  No: Does the PHA meet the exemption criteria provided section 2(b)(2) of the U.S. Housing Act of 1937? (If no, continue to question 2; if yes, skip to sub-component C.)
2.  Yes  No: Was the resident who serves on the PHA Board elected by the residents? (If yes, continue to question 3; if no, skip to sub-component C.)

3. Description of Resident Election Process

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

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

b. Eligible candidates: (select one)

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

c. Eligible voters: (select all that apply)

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

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

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

1. Consolidated Plan jurisdiction: (provide name here) State of Arkansas  
Consolidated Plan

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)

- ThePHAhasbaseditsstatementofneedsoffamiliesinthejurisdictiononthe needsexpressedintheConsolidatedPlans.
- ThePHAhasparticipatedinanyconsultationprocessorganizedandofferedby theConsolidatedPlanagencyinthedevelopmentoftheConsolidatedPlan.
- ThePHAhasconsultedwiththeConsolidatedPlanagencyduringthe developmentofthisPHAPlan .
- ActivitiestobeundertakenbythePHAinthecomingyearareconsistentwith theinitiativescontainedintheConsolidatedPlan.(listbelow)  
SeeExecutiveSummary

Other:(listbelow)

3. TheConsolidatedPlanofthejurisdictionssupportsthePHAPlanwiththe followingactionsandcommitments:(describebelow)

AcommitmenttoprovidingdecenthousingforallArkansasresidents,a suitablelivingenvironmentandequalopportunity,freefromdiscrimination.

#### **D. Other Information Required by HUD**

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

##### **Definition of Substantial Deviation**

TheMalvernHousingAuthoritywillconsiderthefollowingtobechangesinits AgencyPlan necessaryandsufficient to require a full review by the Resident Advisory Board before a corresponding change in the Agency Plan can be adopted:

1. Any alteration of the PHA's Mission Statement.
2. Any change or amendment to a stated Strategic Goal.
3. Any change or amendment to a stated Strategic Objective except in a case where the change results from the objective having been met.
4. Any introduction of a new Strategic Goal or a new Strategic Objective.
5. Any alteration in the Capital Fund Program (CFP) that affects an expenditure greater than twenty percent (20%) of the CFP Annual Budget for that year.

In defining the above, the Malvern Housing Authority intends by "Strategic Goal" and "Strategic Objective" specifically those items in its Five Year Plan and any change in the above items will be considered a "substantial deviation" from the plan.

Furthermore, the PHA considers the following changes to require a public process before amending said changes and that these items are "significant amendments or modifications" to the Agency Plan:

1. Changes to rent or admissions policies or organization of the waiting list.
2. Addition of non-emergency work items (items not included in the current Annual Statement or 5-Year Action Plan) or change in use of replacement reserve funds under the Capital Fund.
3. Addition of new activities not included in any PHDEP Plan.
4. Any change with regard to demolition or disposition, designation, homeownership programs or conversion activities.

An exception to this definition will be made for any of the above that are adopted to reflect changes in HUD regulatory requirements; such changes will not be considered significant amendments by HUD.

## **Attachments**

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



## Attachment A

<b>Annual Statement/Performance and Evaluation Report</b> <b>Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary</b>						
<b>PHAName:</b> Malvern Housing Authority		<b>Grant Type and Number</b> Capital Fund Program Grant No: AR09450103 Replacement Housing Factor Grant No:			<b>Federal FY of Grant:</b> 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		
		Original	Revised	Obligated	Expended	
1	Total Non -CFP Funds					
2	1406 Operations	\$12,300				
3	1408 Management Improvements Soft Costs	\$5,000				
	Management Improvements Hard Costs					
4	1410 Administration	\$24,900				
5	1411 Audit					
6	1415 Liquidated Damages					
7	1430 Fees and Costs	\$45,740				
8	1440 Site Acquisition					
9	1450 Site Improvement	\$24,200				
10	1460 Dwelling Structures	\$77,662				
11	1465.1 Dwelling Equipment — Nonexpendable	\$22,125				
12	1470 Nondwelling Structures					
13	1475 Nondwelling Equipment	\$37,000				
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					
	Amount of Annual Grant: (sum of lines.....)	248,927				
	Amount of line XX Related to LBP Activities					

**Annual Statement/Performance and Evaluation Report**

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

<b>PHAName:</b> Malvern Housing Authority	<b>Grant Type and Number</b> Capital Fund Program Grant No: AR09450103 Replacement Housing Factor Grant No:	<b>Federal FY of Grant:</b> 2003
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Original Annual Statement  
  Reserve for Disasters/Emergencies  
  Revised Annual Statement (revision no:      )  
 Performance and Evaluation Report for Period Ending:     
  Final Performance and Evaluation Report

<b>Line No.</b>	<b>Summary by Development Account</b>	<b>Total Estimated Cost</b>		<b>Total Actual Cost</b>	
	Amount of line XX Related to Section 504 compliance				
	Amount of line XX Related to Security --Soft Costs				
	Amount of Line XX related to Security --Hard Costs				
	Amount of line XX Related to Energy Conservation Measures				
	Collateralization Expenses or Debt Service				

## Annual Statement/Performance and Evaluation Report

### Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPR HF)

#### Part II: Supporting Pages

PHAName: Malvern Housing Authority		Grant Type and Number Capital Fund Program Grant No: AR09450103 Replacement Housing Factor Grant No:				Federal FY of Grant: 2003		
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
HA-WIDE	Operations		1406	1LS	\$12,300			
HA-WIDE	Management Improvements (Software)		1408	1LS	\$5,000			
HA-WIDE	Publications		1410	1LS	\$300			
HA-WIDE	Administrative Salaries		1410	1LS	\$24,900			
HA-WIDE	Planning		1430	1LS	\$4,500			
HA-WIDE	Design		1430	1LS	\$17,940			
HA-WIDE	Construction Administration		1430	1LS	\$13,300			
HA-WIDE	Clerk of the Works		1430	1LS	\$10,000			
AR094-01	Site Improvements/Retaining Walls		1450	1LS	\$8,000			
AR094-02	Site Improvements/Retaining Walls		1450	1LS	\$8,000			
HA-WIDE	Patch/Pave Project Streets		1450	1LS	\$8,200			
HA-WIDE	Kitchen Renovations		1460	44D U	\$18,700			
HA-WIDE	Exterior Bldg. Improvements		1460	1LS	\$8,000			
HA-WIDE	Bathroom Renovations		1460	175EA	\$3,884			
HA-WIDE	Pedestal Lavatories		1460	175EA	\$11,000			
HA-WIDE	Termite Treatment		1460	1LS	\$15,000			
HA-WIDE	Sheetrock Replacement/Repair		1460	169DU	\$20,778			
HA-WIDE	Ranges		1465.1	40EA	\$11,800			
HA-WIDE	Refrigerators		1465.1	35EA	\$10,325			
HA-WIDE	Office Furniture/Equipment		1475	1LS	\$5,000			
HA-WIDE	Maintenance Vehicles		1475	2EA	\$32,000			



## AttachmentB

### CapitalFundProgramFive -YearActionPlan

#### PartI:Summary

PHAName:MalvernHousing Authority		<input checked="" type="checkbox"/> Original5 -YearPlan <input type="checkbox"/> RevisionNo:			
Development Number/Name/HA-Wide	Year1	WorkStatementforYear2 FFYGrant:200 4 PHAFY:200 4	WorkStatementforYear3 FFYGrant:200 5 PHAFY:200 5	WorkStatementforYear4 FFYGrant:200 6 PHAFY:200 6	WorkStatementforYear5 FFYGrant:200 7 PHAFY:200 7
AR094-01 AR094-02 HA-WIDE	Annual Statement	\$200,913	\$198,450	\$106,760 \$94,040	\$27,040 \$135,330 \$40,030
Subtotal		\$200,913	\$198,450	\$200,800	\$202,400
Administration		\$25,200	\$25,200	\$25,200	\$25,200
Non-Dwelling Structures& Equipment					
Other		\$85,505	\$87,968	\$85,618	\$84,018
TotalCFPFunds (Est.)		\$311,618	\$311,618	\$311,618	\$311,618
TotalReplacement HousingFactorFunds					

**Capital Fund Program Five - Year Action Plan**  
**Part II: Supporting Pages — Work Activities**

Activities for Year 1	Activities for Year: <u>2</u> FFY Grant: 200 4 PHAFY: 200 4			Activities for Year: <u>3</u> FFY Grant: 200 5 PHAFY: 200 5		
See	DevNo./Major Work	Acct	Total Est. Cost	DevNo./Major Work	Acct	Total Est. Cost
Annual	AR094-01			AR094-01		
	Windows	1460	\$148,613	Bathroom Renovations	1460	\$93,040
Statement	Ext. Bldg. Improv.	1460	\$8,500	Kitchen Renovations	1460	\$91,410
	Site Improvements	1450	\$4,800	Interior Doors	1460	\$14,000
	Floor Tile	1460	\$18,000			
	HVAC Improvements	1460	\$21,000			

**CapitalFundProgramFive -YearActionPlan**  
**PartII:SupportingPages —WorkActivities**

Activitiesfor Year1	ActivitiesforYear: <u> 4 </u> FFYGrant:200 6 PHAFY:200 6			ActivitiesforYear: <u> 5 </u> FFYGrant:200 7 PHAFY:200 7		
See	DevNo./ MajorWork	Acct	TotalEst.Cost	DevNo./MajorWork	Acct	TotalEst.Cost
Annual	AR094-01			HA-WIDE		
	RecreationalFacilities	1450	18,000			
Statement	Patch/PaintWalls&Ceilings	1460	52,720	Ranges&Refrigerators	1465.1	21,230
	Washer/DryerEnclosures	1460	36,040	ComputerHardware	1475	15,000
				H.A.Signs	1475	3,800
	AR094-02			AR094-01		
	Patch/PaintWalls&Ceilings	1460	31,640	SiteImprovements	1450	27,040
	KitchenRenovations	1460	38,400			
	ElectricalImprovements	1460	24,000	AR094-02		
				SiteImprovements	1450	28,000
				ExteriorBdg.Improvements	1460	72,130
				BathroomRenovations	1460	35,200

# Attachment C 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.**

### Annual PHDEP Plan Table of Contents:

1. General Information/History
2. PHDEP Plan Goals/Budget
3. Milestones
4. Certifications

### 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. The summary must not be more than five (5) sentences long.

The Malvern Housing Authority will continue to employ a security officer to patrol the drug trafficking areas. All of the residents in the Housing Authority's developments will be served by the continuation of this program.

### **E. Target Areas**

Complete the following table by indicating each PHDEP Target Area (development or 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.

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).

**6 Months** \_\_\_\_\_ **12 Months** \_\_\_\_\_ **18 Months** \_\_\_\_\_ **24 Months** \_\_\_\_\_ **Other** \_\_\_\_\_

**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. 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	Anticipated Completion Date
FY1995					
FY1996					
FY1997					
FY1998					
FY1999					
FY2000					

**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.

FY2000 PHDEP Budget Summary	
Budget Line Item	Total Funding
9110 - Reimbursement of Law Enforcement	
9120 - Security Personnel	
9130 - Employment of Investigators	
9140 - Voluntary Tenant Patrol	
9150 - Physical Improvements	
9160 - Drug Prevention	
9170 - Drug Intervention	
9180 - Drug Treatment	
9190 - Other Program Costs	
<b>TOTAL PHDEP FUNDING</b>	

**C. PHDEP Plan Goals and Activities**

In the tables below, provide information on the PHDEP strategy summarized above by budget line item. Each goal and objective should be numbered sequentially for each budget line item (where applicable). Use

as many rows as necessary to list proposed activities (additional rows may be inserted in the tables). PHAs are not required to provide information in shaded boxes. Information provided must be concise —not to exceed two sentences in any column. Tables for line items in which the PHA has no planned goals or activities may be deleted.

<b>9110 -Reimbursement of Law Enforcement</b>					<b>Total PHDEP Funding: \$</b>		
Goal(s)							
Objectives							
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHDEP Funding	Other Funding (Amount/Source)	Performance Indicators
1.							
2.							
3.							

<b>9120 -Security Personnel</b>		<b>Total PHDEP Funding: \$41,522</b>					
Goal(s)							
Objectives							

<b>9130 -Employment of Investigators</b>					<b>Total PHDEP Funding: \$</b>		
Goal(s)							
Objectives							
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHDEP Funding	Other Funding (Amount/Source)	Performance Indicators
1.							
2.							
3.							

Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHDEP Funding	Other Funding (Amount/Source)	Performance Indicators
1. Security Officer							
2.							
3.							

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

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

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

<b>9170 - Drug Intervention</b>						<b>Total PHDEP Funding: \$</b>	
Goal(s)							
Objectives							
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHDEP Funding	Other Funding (Amount /Source)	Performance Indicators
1.							
2.							
3.							

<b>9180 -DrugTreatment</b>					<b>TotalPHDEPFunding:\$</b>		
Goal(s)							
Objectives							
ProposedActivities	#of Persons Served	TargetPopulation	Start Date	Expected Complete Date	PHDEP Funding	Other Funding (Amount /Source)	PerformanceIndicators
1.							
2.							
3.							

<b>9190 -OtherProgramCosts</b>					<b>TotalPHDEPFunds:\$</b>		
Goal(s)							
Objectives							
ProposedActivitie s	#of Persons Served	TargetPopulation	Start Date	Expected Complete Date	PHDEP Funding	Other Funding (Amount /Source)	PerformanceIndicators
1.							
2.							
3.							

**Section3:Expenditure/ObligationMilestones**

IndicatebyBudgetLineItemandtheProposedActivity(basedontheinformationcontainedinSection2 PHDEPPlanBudgetandGoals),the% offundsthatwillbeexpended(atleast25% ofthetotalgrant award)andobligated(atleast50%ofthetotalgrantaward )within12monthsofgrantexecution.

<b>BudgetLine Item#</b>	<b>25%Expenditure ofTotalGrant FundsByActivity #</b>	<b>TotalPHDEP Funding Expended(sumof theactivities)</b>	<b>50%Obligationof TotalGrant FundsbyActivity #</b>	<b>TotalPHDEP Funding Obligated(sumof theactivities)</b>
<i>e.g. BudgetLine Item#9120</i>	<i>Activities1,3</i>		<i>Activity2</i>	
9110				
9120				
9130				
9140				
9150				
9160				
9170				
9180				
9190				
<b>TOTAL</b>				

**Section4:Certifications**

Acomprehensivecertificationofc ompliancewithrespecttothePHDEPPlansubmission isincludedinthe“PHACertificationsofCompliancewiththePHAPlanandRelated Regulations.”

**ATTACHMENT D**  
**MALVERN HOUSING AUTHORITY**  
**PET POLICY INFORMATION**

A resident may own one or more common household pets if the resident maintains each pet responsibly and in accordance with all applicable laws subject to the requirements of the Housing Authority. The requirements are as follows:

- 1) Each Head of Household may own up to two pets. If one of the pets is a dog or cat, (or other four-legged animal), the second pet must be contained in a cage or an aquarium for fish. Each bird or other animals, other than fish, shall be counted as one pet.
- 2) Pets shall be restricted to varieties commonly known as "household pets." For example: dogs, cats, caged birds. No snakes, monkeys, cheetahs or other exotic animals not commonly known as household pets.
- 3) Restrictions as to size:  
DOGS AND CATS: Not to exceed 18" in length from tip to tip.  
Not to exceed 20 lbs. in weight.  
BIRDS: Common small birds (parrots, e.g.) and in cages.
- 4) All pet owners shall furnish veterinarian's certification of having the proper shots (rabies, etc.).
- 5) No dogs or cats will be allowed to roam the project unattended. They must be on a leash, at all times when outside the unit.
- 6) All pets must be spayed or neutered before they move in by the resident.
- 7) All pet owners will post an additional \$100.00 security deposit (perpet) with the Housing Authority.
- 8) Prior to housing a pet on the premises, the tenant must notify the Housing Authority and furnish all necessary proof that all the above items have been taken care of.
- 9) All dogs must have city license. All pets must be clean and free of fleas at all times.
- 10) No pens will be constructed outside on the property.
- 11) Rules prescribing sanitary standards governing the disposal of pet waste areas follows:
  - (a) The pet owner will not allow the pet to dispose of waste inside the building.

- (b) Each pet owner will be required to designate areas in their backyard to permit the pet to exercise or deposit waste. The owner will then be required to pick up the waste and place it in a plastic bag, tied and placed in the garbage can for pickup by the trash collector. Animal waste will not be tolerated on the grounds, this will be handled as we handle the trash pickup notices for the yards, (a 24-hour notice) if not removed, a work order will be issued and charged accordingly.
- (c) In the case of cats, the pet owner will be required to change the litter twice each week.

**Required Attachment E: 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: Ozzie Smith

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

- Elected  
 Appointed

C. The term of appointment is (include the date term expires): 7/03-1/05

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): There are no openings on the Board at this time.

. Date of next term expiration of a governing board member: 1/04

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

Mr. Steven Northcut, Mayor of Malvern

**Required Attachment F: 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.)

Ms. Carol Coleman

Mr. David Bohnet

Mr. Ozzie Smith

**ATTACHMENT G**  
**MALVERN HOUSING AUTHORITY**  
**STATEMENT OF PROGRESS IN MEETING**  
**THE 5 - YEAR PLAN MISSION AND GOALS**

The mission of the Malvern Housing Authority remains to promote adequate and affordable housing, economic opportunity, and a suitable living environment free from discrimination. Our goals are:

- To expand the supply of assisted housing by reducing public housing vacancies.
- To improve the quality of assisted housing by renovating or modernizing public housing units and improving public housing management (PHAS score).
- To provide an improved living environment by implementing deconcentration measures, income mixing, and security improvements.
- To ensure equal opportunity and affirmatively further fair housing by undertaking affirmative measures to ensure access and provide a suitable living environment for families living in assisted housing regardless of race, color, religion, national origin, sex, familial status, and disability.

We feel that progress is being made to accomplish the mission and goals of our plan. We have done substantial modernization at developments AR094 -01 and 02, including window and door replacement. Our Annual Plan is based on the premise that if we accomplish our goals and objectives we will be working toward the achievement of our mission.

The plans, statements, budget and policies set forth in the Annual Plan all lead towards the accomplishment of our goals and objectives. Taken as a whole, they outline a comprehensive approach towards our goals and objectives and are consistent with the Consolidated Plan. We are committed to improving the condition of affordable housing in Malvern. Some highlights of our Annual and Five Year Plan are to continue to renovate and modernize welling units at developments AR094 -01 and -02 in the first year and improve the physical condition of each development throughout the following 5 years.

## Attachment H

<b>Annual Statement/Performance and Evaluation Report</b> <b>Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary</b>					
<b>PHAName:</b> Malvern Housing Authority		<b>Grant Type and Number</b> Capital Fund Program Grant No: AR09450100 Replacement Housing Factor Grant No:			<b>Federal FY of Grant:</b> 2000
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:    ) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 3/30/03 <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	\$15,000	\$15,000	\$15,000	\$15,000
3	1408 Management Improvements Soft Costs	\$5,000	\$45,000	\$45,000	\$45,000
	Management Improvements Hard Costs				
4	1410 Administration	\$15,300	\$15,300	\$15,300	\$15,300
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	\$57,240	\$18,996.14	\$18,996.14	\$18,996.14
8	1440 Site Acquisition				
9	1450 Site Improvement	\$59,090	\$49,834.82	\$49,834.82	\$48,000.67
10	1460 Dwelling Structures	\$150,625	\$151,762	\$151,762	\$151,762
11	1465.1 Dwelling Equipment — Nonexpendable				
12	1470 Nondwelling Structures				
13	1475 Nondwelling Equipment		\$8,165.85	\$8,165.85	
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1499 Development Activities				

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

<b>PHAName:</b> Malvern Housing Authority	<b>Grant Type and Number</b> Capital Fund Program Grant No: AR09450100 Replacement Housing Factor Grant No:	<b>Federal FY of Grant:</b> 2000
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Original Annual Statement  
  Reserve for Disasters/Emergencies  
  Revised Annual Statement (revision no:    )  
  Performance and Evaluation Report for Period Ending: 3/30/03  
  Final Performance and Evaluation Report

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
19	1502 Contingency	\$9,737	\$7,933.19	\$7,933.19	
	Amount of Annual Grant: (sum of lines.....)	\$311,992	\$311,992	\$311,992	\$294,058.81
	Amount of line XX Related to LBP Activities				
	Amount of line XX Related to Section 504 compliance				
	Amount of line XX Related to Security --Soft Costs				
	Amount of Line XX related to Security --Hard Costs				
	Amount of line XX Related to Energy Conservation Measures				
	Collateralization Expenses 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: Malvern Housing Authority		Grant Type and Number Capital Fund Program Grant No: AR09450100 Replacement Housing Factor Grant No:					Federal FY of Grant: 2000		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories		Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
					Original	Revised	Obligated	Expended	
HA-WIDE	Operations		1406	1LS	15,000	15,000	15,000	15,000	In Process
HA-WIDE	Management Improvements ( Insurance Premium)		1408	1LS	5,000	45,000	45,000	45,000	Complete
HA-WIDE	Publications		1410	1LS	300				
HA-WIDE	Administrative Salaries		1410	1LS	15,300	15,300	15,300	15,300	Complete
HA-WIDE	A/E Fees		1430	1LS	27,940	18,996.14	18,996.14	18,996.14	Complete
HA-WIDE	Construction Administration		1430	1LS	19,300	0			
HA-WIDE	Clerk of the Works		1430	1LS	10,000	0			
AR094-02	Water Line Replacement & Indiv. Meters		1450	1LS	58,180	0			
HA-WIDE	Contingency		1502	1LS	9,737	7,933.19	7,933.19		
AR094-01	Fencing Replacements		1450	35LF	910	5,007.82	5,007.82	5,007.82	Complete
AR094-01	HVAC Renovations		1460	50DU	140,000	0	0	0	
AR094-01	Remove and Replace Ext. Faucets		1460	169DU	10,625	0	0	0	
HA-WIDE	Floor Tile		1460	1LS	0	2020	2020	2020	
AR094-02	Pavement Repair/Parking		1450	1LS	0	34,827	34,827	34,827	
HA-WIDE	Lawn Mower		1475	1LS	0	8,165.85	8,165.85	8,165.85	Complete
HA-WIDE	Windows		1460	1LS	0	149,742	149,742	149,742	Complete



**AttachmentI**

<b>AnnualStatement/PerformanceandEvaluationReport</b>					
<b>CapitalFundProgramandCapitalFundProgramReplacementHousingFactor(CFP/CFPRHF)Part1:Summary</b>					
<b>PHAName:</b> MalvernHousingAuthority		<b>GrantTypeandNumber</b> CapitalFund ProgramGrantNo:AR09450101 ReplacementHousingFactorGrantNo:			<b>FederalFYofGrant:</b> 2001
<input type="checkbox"/> <b>OriginalAnnualStatement</b> <input type="checkbox"/> <b>ReserveforDisasters/Emergencies</b> <input type="checkbox"/> <b>RevisedAnnualStatement(revisi onno: )</b> <input checked="" type="checkbox"/> <b>PerformanceandEvaluationReportforPeriodEnding: 3/30/03</b> <input type="checkbox"/> <b>FinalPerformanceandEvaluationReport</b>					
Line No.	SummarybyDevelopmentAccount	TotalEstimatedCost		TotalActualCost	
		Original	Revised	Obligated	Expended
1	Totalnon -CFPFunds				
2	1406Operations	\$10,000	\$10,000	\$10,000	\$10,000
3	1408ManagementImprovementsSoftCosts	\$5,000	\$5,000	\$5,000	\$4,763
	ManagementImprovementsHardCosts				
4	1410Administration	\$15,300	\$15,300	\$15,300	\$7,565
5	1411Audit				
6	1415LiquidatedDamages				
7	1430FeesandCosts	\$41,240	\$41,240	\$41,240	
8	1440SiteAcquisition				
9	1450SiteImprovement				
10	1460DwellingStructures	\$195,840	\$219,465.00	\$195,840	\$170,328.41
11	1465.1DwellingEquipment —Nonexpendable	\$25,625	\$2,000	\$25,625	\$470.28
12	1470NondwellingStructures				
13	1475NondwellingEquipment	\$16,000	\$16,000	\$16,000	\$239.18
14	1485Demolition				
15	1490ReplacementReserve				
16	1492MovingtoWork Demonstration				
17	1495.1RelocationCosts				
18	1499DevelopmentActivities				
19	1502Contingency	\$9,356	\$9,356	\$9,356	
	AmountofAnnualGrant:(sumoflines.....)	\$318,361	\$318,361	\$318,361	\$193,366.07
	AmountofflineXXRelatedtoLBPA ctivities				
	AmountofflineXXRelatedtoSection504compliance				
	AmountofflineXXRelatedtoSecurity --SoftCosts				
	AmountofLineXXrelatedtoSecurity --HardCosts	\$162,240			

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

<b>PHAName:</b> Malvern Housing Authority	<b>Grant Type and Number</b> Capital Fund Program Grant No: AR09450101 Replacement Housing Factor Grant No:	<b>Federal FY of Grant:</b> 2001
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Original Annual Statement  
  Reserve for Disasters/Emergencies  
  Revised Annual Statement (revision no: )  
 Performance and Evaluation Report for Period Ending: 3/30/03  
  Final Performance and Evaluation Report

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
	Amount of line XX Related to Energy Conservation Measures				
	Collateralization Expenses 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: Malvern Housing Authority		Grant Type and Number Capital Fund Program Grant No: AR09450101 Replacement Housing Factor Grant No:				Federal FY of Grant: 2001			
Development Number Name/HA-Wide Activities	General Description of Major Work Categories		Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
					Original	Revised	Obligated	Expended	
HA-WIDE	Operations		1406	1LS	\$10,000	\$10,000	\$10,000	\$10,000	Complete
HA-WIDE	Management Improvements		1408	1LS	\$5,000	\$5,000	\$5,000	\$4,763.20	In Process
HA-WIDE	Publications		1410	1LS	\$300				In Process
HA-WIDE	Administrative Salaries		1410	1LS	\$15,300	\$15,300	\$15,300	\$7,565	In Process
HA-WIDE	Design		1430	1LS	\$17,940	\$17,940	\$17,940	0	In Process
HA-WIDE	Construction Administration		1430	1LS	\$13,300	\$13,300	\$13,300		In Process
HA-WIDE	Clerk of the Works		1430	1LS	\$10,000	\$10,000	\$10,000		In Process
AR094-02	Kitchen Renovations		1460	28DU	\$33,600	\$33,600			In Process
AR094-01	Front Exterior Entry Doors and Jambs		1460	169EA	\$162,240	\$15,536			In Process
HA-WIDE	Ranges		1465.1	40EA	\$11,800	\$1,000			In Process
HA-WIDE	Refrigerators		1465.1	35EA	\$13,825	\$1,000			In Process
HA-WIDE	Computer Hardware		1475	1LS	\$16,000	\$16,000	\$16,000	\$239.18	In Process
HA-WIDE	Contingency		1502	1LS	\$9,356	\$9,356	\$9,356		In Process
AR094-01	Siding		1460	1LS		\$3,088.01	\$3,088.01	\$3,088.01	In Process
AR094-01	HCHardware		1460	1LS		\$605.94	\$605.94	\$605.94	In Process
AR094-01	Floor Tile		1460	1LS		\$13,474.26	\$13,474.26	\$13,474.26	In Process
AR094-01	Windows		1460	1LS		\$153,160.02	\$153,160.02	\$153,160.02	Complete



ATTACHMENTK

<b>Annual Statement/Performance and Evaluation Report</b>						
<b>Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary</b>						
<b>PHAName:</b> Malvern Housing Authority		<b>Grant Type and Number</b> Capital Fund Program Grant No: AR09450102 Replacement Housing Factor Grant No:			<b>Federal FY of Grant:</b> 2002	
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input checked="" type="checkbox"/> Revised Annual Statement (revision no: 1) <input 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	62,000	10,000	10,000	
3	1408 Management Improvements Soft Costs	5,000	5,000			
	Management Improvements Hard Costs					
4	1410 Administration	25,200	25,200			
5	1411 Audit					
6	1415 Liquidated Damages					
7	1430 Fees and Costs	55,240	35,240			
8	1440 Site Acquisition					
9	1450 Site Improvement	15,000	15,000			
10	1460 Dwelling Structures	159,553	124,313			
11	1465.1 Dwelling Equipment — Nonexpendable	25,625	25,625			
12	1470 Nondwelling Structures					
13	1475 Nondwelling Equipment	16,000	16,000			
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					
	Amount of Annual Grant: (sum of lines.....)	311,618	311,618	10,000	10,000	
	Amount of line XX Related to LBPA Activities					
	Amount of line XX Related to Section 504 Compliance					
	Amount of line XX Related to Security --Soft Costs					
	Amount of Line XX Related to Security --Hard Costs					

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

<b>PHAName:</b> Malvern Housing Authority	<b>Grant Type and Number</b> Capital Fund Program Grant No: AR09450102 Replacement Housing Factor Grant No:	<b>Federal FY of Grant:</b> 2002
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Original Annual Statement  
  Reserve for Disasters/Emergencies  
  Revised Annual Statement (revision no: 1)  
 Performance and Evaluation Report for Period Ending: 3/31/03  
  Final Performance and Evaluation Report

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
	Amount of line XX Related to Energy Conservation Measures				
	Collateralization Expenses 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: Malvern Housing Authority		Grant Type and Number Capital Fund Program Grant No: AR09450102 Replacement Housing Factor Grant No:				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 Work
					Original	Revised	Obligated	Expended	
HA-WIDE	Operations		1406	1LS	10,000	62,000	10,000	10,000	In Process
HA-WIDE	Management Improvements (Software)		1408	1LS	5,000	5,000			
HA-WIDE	Publications		1410	1LS	300	300			
HA-WIDE	Administrative Salaries		1410	1LS	24,900	24,900			
HA-WIDE	Planning		1430	1LS	4,000	4,000			
HA-WIDE	Design		1430	1LS	17,940	17,940			
HA-WIDE	Construction Administration		1430	1LS	13,300	13,300			
HA-WIDE	Clerk of the Works		1430	1LS	20,000				
AR094-02	Site Improvements/Erosion Control		1450	1LS	5,000	5,000			
HA-WIDE	Patch/Pave Project Streets		1450	1LS	10,000	10,000			
HA-WIDE	Kitchen Renovations		1460	44DU	48,400	13,160			
HA-WIDE	Exterior Bldg. Improvements		1460	1LS	15,000	15,000			
HA-WIDE	Bathroom Renovations		1460	175EA	21,875	21,875			
HA-WIDE	Pedestal Lavatories		1460	175EA	38,500	38,500			
HA-WIDE	Termite Treatment		1460	1LS	15,000	15,000			
HA-WIDE	Sheetrock Replacement/Repair		1460	169DU	20,778	20,778			
HA-WIDE	Ranges		1465.1	40EA	11,800	11,800			
HA-WIDE	Refrigerators		1465.1	35EA	13,825	13,825			
HA-WIDE	Computer Hardware		1475	1LS	6,000	6,000			
HA-WIDE	Office Furniture/Equipment		1475	1LS	10,000	10,000			



## Attachment K

### Component 3,(6) Deconcentration and Income Mixing

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

Ifyes,listthesedevelopmentsasfollows:

<b>DeconcentrationPolicyforCoveredDevelopments</b>			
<b>Development Name:</b>	<b>Number of Units</b>	<b>Explanation(ifany)[seestep 4at§903.2(c)(1)(iv)]</b>	<b>Deconcentration policy(ifno explanation)[seestep 5at §903.2(c)(1)(v)]</b>

## Attachment L

### Component 10(B) Voluntary Conversion Initial Assessments

- a) How many of the PHA's developments are subject to the Required Initial Assessment? 4
- 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)? 0
- c) How many Assessments were conducted for the PHA's covered developments? 4
- d) Identify PHA developments that may be appropriate for conversion based on the Required Initial Assessments. None
- e) If the PHA has not completed the Required Initial Assessments, describe the Status of these assessments.