

**2003-2004  
Revised Agency Plan**

**Housing Authority of the  
County of Butte**



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

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# PHAP Plans

5 Year Plan for Fiscal Years 2000 -2004  
Annual Plan for Fiscal Year 2003

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

**PHA Plan  
Agency Identification**

**PHAName:** Housing Authority of the County of Butte

**PHA Number:** CA043

**PHA Fiscal Year Beginning:** (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 ePHA
- PHA development management offices
- PHA local offices

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

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

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

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

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

**5-YEAR PLAN**  
**PHAF ISCAL YEARS 2000 -2004**  
[24CFRPart903.5]

**A.Mission**

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

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

**The mission of the Housing Authority of the County of Butte is to assist low and moderate -income residents to secure and maintain high quality affordable housing.**

**B.Goals**

The goals and objectives listed below are derived from HUD's strategic Goals and Objectives and those emphasized in recent legislation. PHA may select any of these goals and objectives as their own, or identify other goals and/or objectives. Whether selecting the HUD -suggested objectives or their own, **PHAS ARE STRONGLY EN COURAGED TO IDENTIFY QUANTIFIABLE MEASURES 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.) PHA should identify these measures in the space to the right of or below the stated objectives.

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

- PHA Goal: Expand the supply of assisted housing  
Objectives:
  - Apply for additional rental vouchers: 300
  - Reduce public housing vacancies:
  - Leverage private or other public funds to create additional housing opportunities: \$110,000
  - 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 one effort to improve specific management functions: (list; e.g., public housing finance; voucher unit inspections)

- Renovate or modernize public housing units: 36
- 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)

**Implement Broad Range of Income, work with TANF and others to provide job training and opportunities for economic self-sufficiency, continue with Capital Fund program in public housing to improve quality of life.**

### **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: 25
- Provide or attract support services to improve assistance recipients' employability: 5 support services

- Provide or attract support 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: 5 workshops
  - 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: Continuing to participate with the North Valley Property Owners Association
  - 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)**

In addition, the Housing Authority has developed the following Strategic Goals:

**1. Streamline and/or conduct operations analysis for maintaining good customer service**

- a. Review operations to keep up with needs
- b. Create and/or revise organizational chart
- c. Evaluate office space and other space issues, including community space
- d. Review hardware and software computer system to keep up with program requirements and regulation changes.
- e. Implement regulatory changes as they become effective

**2. Implement and maintain quality affordable housing**

- a. Maintain program integrity in public housing and Section 8
- b. Overcome negative perceptions of assisted housing
- c. Develop self-sufficiency opportunities for participants
- d. Maintain lease up in Farm Labor Housing
- e. Look at opportunities for acquisition of non-HUD properties
- f. Complete conversion to Voucher leases
- g. Process incremental and special Voucher allocations
- h. Develop resident groups for strong neighborhoods

**3.Improveandmaintaininter -agencycooperation**

- a. Continuetoworkwithagenciestoprovideservices**
- b. Seektostreng thenlinksbetweenHACBandtheCounty**
- c. Lookatopportunitiestoincreaseparticipationbetweenagenciesfor self-sufficiencyactivities,includingchildcareandyouthactivities**

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

**I. Annual Plan Type:**

Select which type of Annual Plan the PHA will submit.

**Standard Plan**

**Streamlined Plan:**

- High Performing PHA**
- Small Agency (<250 Public Housing Units)**
- Administering Section 8 Only**

**Troubled Agency Plan**

**II. Executive Summary of the Annual PHA Plan**

[24CFR Part 903.79(r)]

Provide a brief overview of the information in the Annual Plan, including highlights of major initiatives and discretionary policies the PHA has included in the Annual Plan.

The Housing Authority of the County of Butte (HACB) is a high performing housing authority that operates Section 8, Public Housing, Farm Labor Housing and locally funded assisted housing.

As part of the Agency Plan process, the HACB has identified the following goals to meet over the next five (5) years:

1. Streamline and analyze operations
2. Implement and maintain quality affordable housing
3. Maintain and improve inter-agency cooperation

A discussion of the goals and objectives after completion of the first year of the Agency Plan can be found in the Attachments at "Goals and Objectives"

As part of the Agency Plan process, the HACB appointed a Resident Advisory Board, including recipients of Section 8 and Public Housing assistance. The Resident Advisory Board held two (2) meetings to review and comment on components of the Agency Plan. Comments from the residents at those meetings can be found in the Plan and in the Attachments.

The HACB is committed to working with other agencies, with the community and other partners in looking at the needs of its communities and funding opportunities to make these goals a reality.

### III. Annual Plan Table of Contents

[24CFR Part 903.79(r)]

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

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#### Attachments

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

#### Required Attachments:

- Admissions Policy for Deep Concentration (Eligibility and Selection)
- 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
- FY2003 Capital Fund Program 5 Year Action Plan
- Public Housing Drug Elimination Program (PHDEP) Plan

- Comments of Resident Advisory Board or Boards (must be attached if not included in PHA Plan text) (Resident Comments)
- Other (List below, providing each attachment name)  
**Attachments regarding Eligibility and Selection, Rent Determination, Safety and Crime Prevention, Self-Sufficiency and Community Service, Home Ownership**

### Supporting Documents Available for Review

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

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

<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	methodology for setting public housing flat rents <input type="checkbox"/> check here if included in the public housing A&O Policy	Determination
X	Schedule of flat rents offered at each public housing development <input type="checkbox"/> check here if included in the public housing A&O Policy	Annual Plan: Rent Determination
X	Section 8 rent determination (payment standard) policies <input checked="" type="checkbox"/> check here if included in Section 8 Administrative Plan	Annual Plan: Rent Determination
X	Public housing management and maintenance policy documents, including policies for the prevention or eradication of pest infestation (including cockroach infestation)	Annual Plan: Operations and Maintenance
X	Public housing grievance procedures <input checked="" type="checkbox"/> check here if included in the public housing A&O Policy	Annual Plan: Grievance Procedures
X	Section 8 informal review and hearing procedures <input checked="" type="checkbox"/> check here if included in Section 8 Administrative Plan	Annual Plan: Grievance Procedures
X	The HUD -approved Capital Fund/Comprehensive Grant Program Annual Statement (HUD 52837) for the active grant year	Annual Plan: Capital Needs
N/A	Most recent CIAP Budget/Progress Report (HUD 52825) for any active CIAP grant	Annual Plan: Capital Needs
X	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
N/A	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
N/A	Approved or submitted applications for demolition and/or disposition of public housing	Annual Plan: Demolition and Disposition
X	Approved or submitted applications for designation of public housing (Designated Housing Plans)	Annual Plan: Designation of Public Housing
N/A	Approved or submitted assessments of reasonable revitalization of public housing and approved or submitted conversion plans prepared pursuant to section 202 of the 1996 HUD Appropriations Act	Annual Plan: Conversion of Public Housing
N/A	Approved or submitted public housing home ownership programs/plans	Annual Plan: Homeownership
N/A	Policies governing any Section 8 Homeownership program <input type="checkbox"/> check here if included in the Section 8 Administrative Plan	Annual Plan: Homeownership
N/A	Any cooperative agreement between the PHA and the TANF agency	Annual Plan: Community Service & Self -Sufficiency
X	FSS Action Plan/s for public housing and/or Section 8	Annual Plan: Community Service & Self -Sufficiency
X	Most recent self -sufficiency (ED/S S, TOP or ROSS or other residents services grant) grant program reports	Annual Plan: Community Service & Self -Sufficiency

<b>List of Supporting Documents Available for Review</b>		
<b>Applicable &amp; On Display</b>	<b>Supporting Document</b>	<b>Applicable Plan Component</b>
N/A	The most recent Public Housing Drug Elimination Program (PHEDEP) 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 results of that audit and the PHA's response to any findings	Annual Plan: Annual Audit
N/A	Troubled PHAs: MOA/Recovery Plan	Troubled PHAs
	Other supporting documents (optional) (list individually; use as many lines as necessary)	(specify as needed)

# 1. Statement of Housing Needs

[24CFR Part 903.79(a)]

## A. Housing Needs of Families in the Jurisdiction/s Served by the PHA

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

<b>Housing Needs of Families in the Jurisdiction by Family Type —Chico(11,646 families total)</b>							
Family Type	Overall	Afford- ability	Supply	Quality	Access -ibility	Size	Loca- tion
Income <=30% of AMI	1331	5	5	3	2	3	3
Income >30% but <=50% of AMI	1305	4	4	3	2	3	3
Income >50% but <80% of AMI	1915	2	2	2	2	2	2
Elderly	1636	4	4	3	4	3	2
Families with Disabilities	N/A						
White/Hispanic	9310						
American Indian/ Pacific Islander	178						
Asian	372						
Black	187						

<b>Housing Needs of Families in the Jurisdiction by Family Type —Butte County(49,740 families total)</b>							
Family Type	Overall	Afford- ability	Supply	Quality	Access -ibility	Size	Loca- tion
Income <=30% of AMI	5015	5	5	4	2	3	3
Income >30% but <=50% of AMI	5881	4	4	3	2	3	3
Income >50% but <80% of AMI	8487	2	2	2	2	2	2
Elderly	10970	5	5	4	4	3	2
Families with Disabilities	N/A						
White/Hispanic	43615						
American Indian/ Pacific Islander	883						
Asian	1078						
Black	540						

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/s  
Indicate year: 2000 -2004
- 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 list/s. **Complete one table for each type of PHA-widewaiting list administered by the PHA.** PHAs 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 development/subjurisdiction:			
	<b># of families</b>	<b>% of total families</b>	<b>Annual Turnover</b>
Waiting list total	475		105
Extremely low income <=30%AMI	323	68%	
Very low income (>30% but <50%AMI)	99	21%	
Low income (>50% but <80%AMI)	53	11%	
Families with children	275	58%	
Elderly families	24	5%	
Families with Disabilities	176	37%	
White	265	56%	
Hispanic	86	18%	
Black	42	9%	
American Indian	15	3%	
Asian Pacific Islander	62	13%	
Other	5	1%	
<b>Characteristics by Bedroom Size (Public Housing Only)</b>			
0BR	9	2%	
1BR	181	38%	
2BR	171	36%	
3BR	76	16%	
4BR	28	6%	
5BR	10	2%	
5+BR	0	0	
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 open the list in the PHA Plan year? <input type="checkbox"/> No <input type="checkbox"/> Yes			
Does the PHA permit specific categories of families on 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 development/subjurisdiction:

	# of families	% of total families	Annual Turnover
Waiting list total	1,669		605
Extremely low income <=30%AMI	1,071	64%	
Very low income (>30% but <50%AMI)	598	36%	
Low income (>50% but <80%AMI)	N/A	N/A	
Families with children	867	52%	
Elderly families	166	10%	
Families with Disabilities	636	38%	
White	1,198	72%	
Hispanic	187	11%	
Black	115	7%	
American Indian	88	5%	
Asian/Pacific Islander	67	4%	
Other	14	1%	

#### Characteristics by Bedroom Size (Public Housing Only)

0BR	5	0.5%	
1BR	682	41%	
2BR	736	44%	
3BR	221	13%	
4BR	21	1%	
5BR	4	0.5%	
5+BR	0	0	

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

If yes:

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

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

Does the PHA permit specific categories of families on 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 ELLELIGIBLE 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:S PECIFIC FAMILY TYPES:F AMILIESATORBELOW 30% OFMEDIAN**

**Strategy1:Targetavailableassistan cetofamiliesatorbelow30%ofAMI**

Selectallthatapply

- ExceedHUDfederaltargetingrequirementsforfamiliesatorbelow30%ofAMI  
inpublichousing
- ExceedHUDfederaltargetingrequirementsforfamiliesator below30%ofAMI  
intenat -basedsection8assistance
- Employadmissionspreferencesaimedatfamilieswitheconomichardships
- Adoptrentpoliciestosupportandencouragework
- Other:(listbelow)

**NEED:S PECIFIC FAMILY TYPES:F AMILIESATORBELOW 50% OFMEDIAN**

**Strategy1:Targetavailableassistanceto familiesatorbelow50%ofAMI**

Selectallthatapply

- Employadmissionspreferencesaimedatfamilieswhoareworking
- Adoptrentpoliciestosupportandencouragework
- Other:(listbelow)

**NEED:S PECIFIC FAMILY TYPES:T HE ELDERLY**

**Strategy1: Targetavailableassistancetotheelderly:**

Selectallthatapply

- Seekdesignationof publichousingfortheelderly
- Applyforspecial -purposevoucherstargetedtotheelderly,shouldtheybecome  
available
- Other:(listbelow)

**NEED:S PECIFIC FAMILY TYPES:F AMILIESWITH DISABILITIES**

**Strategy1: TargetavailableassistancetoFamilieswithDisabilities:**

Selectallthatapply

- Seekdesignationofpublichousingforfamilieswithdisabilities
- Carryoutthomodificationsneededinpublichousingbasedonthesection504  
NeedsAssessmentforPublicHousing
- Applyforspecial -purposevoucherstargetedtofamilieswithdisabilities,should  
theybecomeavailable
- Affirmativelymarkettolocalnon -profitagenciesthatassistfamilieswith  
disabilities
- Other:(listbelow)

**NEEDS 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	278,110	
b) Public Housing Capital Fund	799,897	
c) HOPEVI Revitalization		
d) HOPEVI Demolition		
e) Annual Contributions for Section 8 Tenant-Based Assistance	8,124,258	
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>2. Prior Year Federal Grants (unobligated funds only) (list below)</b>		
<b>3. Public Housing Dwelling Rental Income</b>	1,028,495	Operations
<b>4. Other income (list below)</b>		
Interest Income	80,872	Operations
Misc. Charges	36,899	
<b>5. Non-federal sources (list below)</b>		
<b>Total resources</b>	<b>\$10,348,531</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: **3 months**
- Other: (describe)

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

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

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

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

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

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

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

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

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

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

c. If the PHA plans 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?

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

### **(4) Admissions Preferences**

a. Income targeting:

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

b. Transfer policies:

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

- Emergencies
- Overhoused
- Underhoused
- Medical justification

- Administrativereasons 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 admission 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. within ranking categories: Date and Time

Former Federal preferences:

- 1 Involuntary Displacement (Disaster, Government Action, Action of Housing Owner, Inaccessibility, Property Disposition) **Given equal weight**
- Victims of domestic violence
- Substandard housing
- Homelessness

Highrentburden

Other preferences (select all that apply)

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

4. Relationship of preferences to income targeting requirements:

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

**(5) Occupancy**

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

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

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

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

**(6) Deconcentration and Income Mixing**

a.  Yes  No: Did the PHA's analysis of its family (general occupancy) development studies 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:
- 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)  
**Prior landlord name and address and telephone number if available**

### (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)  
**PHA local office**

**(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:

**As reasonable accommodation and to households actively 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 admission 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) **given equal weight**
- Victims of domestic violence
- Substandard housing
- Homelessness
- High rent burden

Other preferences (select all that apply)

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

4. Among applicants on the waiting list with 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 ensure that the PHA will meet income targeting requirements

**(5)SpecialPurposeSection8AssistancePrograms**

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 program to the public?

- Through published notices
- Other (list below)

## **4.PHARentDeterminationPolicies**

[24CFRPart903.79(d)]

### **A.PublicHousing**

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

#### **(1)IncomeBasedRentPolicies**

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 :

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 amount/s and circumstances below:
- Fixed percentage (other than general rent -setting policy)  
If yes, state percentage/s and circumstances below:
- For household heads
- For other family members
- For transportation expenses
- For the non-reimbursed medical expenses of non-disabled or non-elderly families
- Other (describe below)

e. Ceiling rents

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

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

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

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

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

- Market comparability study
- Fair market rents (FMR)
- 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. Rentre -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.)

- This 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 in to 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)  
**As needed to ensure continued leasing capability — approximately every 6 months**

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

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

## **(2) Minimum Rent**

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

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

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)]

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)

### N/A High Performing PHA

#### 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	345	35
Section 8 Vouchers	1,846	400
Section 8 Certificates	0	
Section 8 Mod Rehab	0	
Special Purpose Section 8 Certificates/Vouchers (list individually)	0	
Public Housing Drug Elimination Program (PHDEP)	0	
Other Federal Programs (list individually)	0	

#### 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) **N/A**

(2) Section 8 Management: (list below) **N/A**

## 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.

### N/A High Performing PHA

#### 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 addition to federal requirements below:

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

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

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

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

If yes, list addition to federal requirements below:

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

- PHA main administrative office  
 Other (list below)

## 7. Capital Improvement Needs

[24CFR Part 903.79(g)]

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

### **A. Capital Fund Activities**

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

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

Using parts I, II, and III of the Annual Statement for the Capital Fund Program (CFP), identify capital activities the PHA is proposing for the upcoming year to ensure long -term physical and social viability of its public housing developments. This statement can be completed by using the CFP Annual Statement tables provided in the table library at the end of the PHA 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 PHA Plan at Attachment (state name) **Capital Fund**

-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 7 B)

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) **Capital Fund**

-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 there)

## B. HOPEVI and Public Housing Development and Replacement Activities (Non -Capital Fund)

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

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

1. Development name:

2. Development (project) number:

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

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

- Yes  No: c) Does the PHA plan to apply for a HOPEVI Revitalization grant in the Plan year?  
If yes, list development name/s below:

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

**The HACB has used mixed financing, such as tax credits in the past and will look for opportunities in the next 5 years.**

- 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 —N/A

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

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

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

[24CFR Part 903.79(i)]

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

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

2. Activity Description — **N/A**

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: Winston Gardens 1b. Development (project) number: 043 -010
2. Designation type: Occupancy by only the elderly <input checked="" 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 checked="" type="checkbox"/> Submitted, pending approval <input type="checkbox"/> Planned application <input type="checkbox"/>
4. Date this designation approved, submitted, or planned for submission: <u>8/1/1982</u>
5. If approved, will this designation constitute a (select one) N/A <input type="checkbox"/> New Designation Plan <input type="checkbox"/> Revision of a previously -approved Designation Plan? <b>N/A</b>
6. Number of units affected: 62 7. Coverage of action (select one) <input type="checkbox"/> Part of the development <input checked="" type="checkbox"/> Total development

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

[24CFR Part 903.79(j)]

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

### A. Assessment of Reasonable Revitalization Pursuant to Section 202 of the HUD FY1996 HUD Appropriations Act

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

#### 2. Activity Description —N/A

- Yes  No: Has the PHA provided all required activity description information for this component in the **optional** Public Housing Assessment 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 reassessment? <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) <input type="checkbox"/> Conversion Plan in development <input type="checkbox"/> Conversion Plan submitted to HUD on: (DD/MM/YYYY) <input type="checkbox"/> Conversion Plan approved by HUD on: (DD/MM/YYYY) <input type="checkbox"/> 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) <input type="checkbox"/> Units addressed in a pending or approved demolition application (date submitted or approved: ) <input type="checkbox"/> Units addressed in a pending or approved HOPEVI demolition application (date submitted or approved: ) <input type="checkbox"/> Units addressed in a pending or approved HOPEVI Revitalization Plan (date submitted or approved: ) <input type="checkbox"/> Requirements no longer applicable: vacancy rates are less than 10 percent <input type="checkbox"/> Requirements no longer applicable: site now has less than 300 units <input type="checkbox"/> Other: (describe below)

**B.ReservedforConversionspursuanttoSection2 2oftheU.S.HousingActof  
1937**

**C.ReservedforConversionspursuanttoSection33oftheU.S.HousingActof  
1937**

# 11. Homeownership Programs Administered by the PHA

[24CFR Part 903.79(k)]

## A. Public Housing

Exemptions from Component 11 A: 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 — **N/A**

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 Homeownership Activity Description (Complete one for each development affected)</b>
1a. Development name: 1b. Development (project) number:
2. Federal Program authority: <input type="checkbox"/> HOPE I <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: <u>DD/MM/YYYY</u>
5. Number of units affected: 6. Coverage fraction: (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**

[24CFR Part 903.79(l)]

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.

**N/A—High Performing PHA, See Attachments**

### **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 support 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 homeownership option participation
- Preference/eligibility for section 8 homeownership option participation
- Other policies (list below)

b. Economic and Social Self -sufficiency programs

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

Services and Programs				
Program Name & Description (including location, if appropriate)	Estimated Size	Allocation Method (waiting list/random selection/specific criteria/other)	Access (development office / PHA main office/ other provider name)	Eligibility (public housing or section 8 participants or both)
Section 3 Program (Chico, Oroville, Gridley, Biggs )	10	Residents	PHA Main Office	Public Housing
Tenant Based Rental Assistance (TBRA)	23	Referrals	Various Social Services	Section 8
Rehabilitation of four Friends (ROOF)	10	Referrals	Butte Behavioral Health	Section 8
Adult System of Care (ASOC)	19	Specific criteria	CA Department of Mental Health/ Department of Behavioral Health	Both
Partnership with Behavioral Health (FOREST)	3	Specific criteria	CA Department of Mental Health/ Department of Behavioral Health	Both
After school homework and tutoring program for persons in Farm Labor Housing	30-40	Specific criteria	PHA	Both

**(2) Family Self Sufficiency program/s**

a. Participation Description

Family Self Sufficiency (FSS) Participation		
Program	Required Number of Participants (start of FY2002 Estimate)	Actual Number of Participants (As of: DD/MM/YY)
Public Housing	0	0
Section 8	32	29 (01/01/03)

b.  Yes  No: If the PHA is not maintaining the minimum program size required by HUD, does the most recent FSS Action Plan address the steps the PHA plan to take to achieve at least the minimum program size? If no, list steps the PHA will take below:

**As of April 2002, there are approximately 11 graduates from the FSS programs, which will bring the number of required participants down to 39.**

## C. Welfare Benefit Reductions

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

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

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

[24CFR960.603, et seq]

### INTRODUCTION

In order to be eligible for continued occupancy, each adult family member must either (1) contribute eight (8) hours per month of community service (not including political activities), or (2) participate in an economic self-sufficiency program unless they are exempt from this requirement.

### EXEMPTIONS

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

- A. Family members who are 62 or older.
- B. Family members who are blind or disabled.
- C. Family members who are the primary care giver for someone who is blind or disabled.
- D. Family members engaged in work activity.
- E. Family members who are exempt from work activity under Part A Title IV of the Social Security Act or under any other State welfare program, including the welfare-to-work program.

- F. Family members receiving assistance under a State program funded under Part A Title IV of the Social Security Act or under any other State welfare program, including welfare-to-work and welfare reform in compliance with that program.

#### **NOTIFICATION OF THE REQUIREMENT**

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

The notification will advise families that their community service obligation will begin upon the effective date of their first annual reexamination on or after 10/1/03. For a family's paying a flat rent, the obligation begins on the date their annual reexamination would have been effective had an annual reexamination taken place. It will also advise them that failure to comply with the community service requirement will result in ineligibility for continued occupancy at the time of any subsequent annual reexamination.

#### **VOLUNTEER OPPORTUNITIES**

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

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

The HACB will create partnerships with public and private agencies to make opportunities available to residents. It may be necessary to contract with a third party to administer the entire community service program.

Together with the resident advisory councils, the HACB may create volunteer positions such as litter patrols, and supervising and record keeping for volunteers.

#### **THE PROCESS**

At the first annual reexamination on or after October 1, 2003, and each annual reexamination thereafter, the HACB will do the following:

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

- B. Provide information about obtaining suitable volunteer positions.
- C. Provide a volunteer time sheet to the family member. Instructions for the time sheet require the individual to complete the form and have a supervisor date and sign for each period of work.
- D. Thirty (30) days before the family's next lease anniversary date, HACB staff or the contractor volunteer coordinator will advise the HACB whether each applicable adult family member is in compliance with the community service requirement.

**NOTIFICATION OF NON-COMPLIANCE WITH COMMUNITY SERVICE REQUIREMENT**

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

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

**OPPORTUNITY FOR CURE**

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

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

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

### 13. PHA Safety and Crime Prevention Measures          N/A

[24CFR 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 level of violent and/or drug -related crime
- Other (describe below)

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

- Safety and security survey of residents
- Analysis of crime statistics over time for crimes committed "in and around" public housing authority
- Analysis of cost trends over time for repair of vandalism and removal of graffiti
- Resident reports
- PHA employee reports
- Police reports
- Demonstrable, quantifiable success with previous or ongoing anti-crime/anti-drug programs
- Other (describe below)

3. Which developments are most affected? (list below)

#### 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)

**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)

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

PHA eligible for FY2001 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 FY2001 in this PHA Plan?
- Yes  No: This PHDEP Plan is an Attachment. (Attachment Filename: \_\_\_\_)

## **14. PET POLICY**

[24CFR Part 903.79(n)]

### **EXCLUSIONS**

This policy does not apply to animals that are used to assist persons with disabilities. Assistance animals are allowed in all public housing facilities with no restrictions other than those imposed on all tenants to maintain their units and associated facilities in a decent, safe, and sanitary manner and to refrain from disturbing their neighbors.

### **PETS IN HOUSING AUTHORITY-OWNED BUILDINGS**

The HACB will allow for pet ownership upon pre-approval and completion of the Pet Agreement, Authorization for Pet Ownership form, and the tenant's compliance with the terms of the Pet Policy and Agreement, including payment of pet deposit.

### **APPROVAL**

Residents must have the prior approval of the HACB before moving a pet into their unit. Residents must request approval on the Authorization for Pet Ownership Form that must be fully completed before the HACB will approve the request.

Tenants must sign a "Pet Agreement" and will pay the required pet security deposit at the time the agreement is signed.

### **TYPES AND NUMBER OF PETS**

The HACB will allow only domesticated dogs, cats, birds, rodents and fish in aquariums in units. No exotic pets (such as snakes, iguanas, etc.) or farm-type animals (including potbelly pigs, rabbits and chickens) will be allowed.

Only one (1) cat or one (1) dog per unit allowed. Domestic birds must be caged at all times inside the dwelling unit and may not exceed two (2) in number. One aquarium, not-to-exceed 25 gallons, will be permitted. The aquarium must be well maintained to prevent an unsanitary or unsafe condition or damages.

Any animal deemed to be potentially harmful to the health or safety of others, including attack or fight-trained dogs, will not be allowed.

No animal when fully grown may exceed twenty-five (25) pounds in weight or measure more than 20" in height (floor to shoulders).

## **INOCULATIONS/NEUTEROR SPAYED**

In order to be approved, pets must be appropriately inoculated against rabies and other conditions prescribed by local ordinances. Inoculations must be kept current. (Presently 1<sup>st</sup> rabies (dog or cat) is good for 1 year. Thereafter, every 3 years.) All dogs and cats must be spayed or neutered.

## **PET DEPOSIT**

A pet deposit is required at the time of pre-approval for and signing of pet agreement. The pet deposit will be \$300 for cinder block construction housing and \$600 for all other family housing. The deposit is refundable when the pet or the family vacate the unit, less any amounts owed due to damage beyond normal wear and tear.

## **FINANCIAL OBLIGATION OF RESIDENTS**

Any resident who owns or keeps a pet in their dwelling unit will be required to pay for any damages caused by the pet both during occupancy and upon vacating. Also, any pet-related insect infestation in the pet owner's unit will be the financial responsibility of the pet owner and the HACB reserves the right to exterminate and charge the resident.

## **NUISANCE OR THREAT TO HEALTH OR SAFETY**

The pet and its living quarters must be maintained in a manner to prevent odors and any other unsanitary conditions in the owner's unit and surrounding areas.

Repeated substantiated complaints by neighbors or HACB personnel regarding pets disturbing the peace of neighbors through noise, odor, animal waste, or other nuisance will result in the owner having to remove the pet or move him/herself.

## **DESIGNATION OF PET AREAS**

Pets must be kept in the owner's dwelling unit or on a leash at all times when outside (no outdoor cages or tether may be used). Pets may not be allowed to run loose in yards. Pets will be allowed only in designated areas on the grounds of the projects. Pet owners must immediately clean up after their pets and are responsible for disposing of pet waste. Litter box contents may not be disposed of by depositing into toilet. Any plumbing problems resulting from such activity will be charged to the tenant. Repeated violations may result in lease termination.

## **VISITING PETS**

Pets that meet the size and type criteria outlined above may visit the projects/buildings where pets are allowed for up to two weeks without HACB approval. Tenants who have visiting pets must abide by the conditions of this policy regarding health, sanitation, nuisances, leashing, and peaceful enjoyment of others.

If visiting pets violate this policy or cause the tenant to violate the lease, the tenant will be required to remove the visiting pet.

### **DESIGNATION OF RESPONSIBLE PARTY (EMERGENCY CAREGIVER)**

Any resident seeking approval under this policy must designate an individual not living in the unit as a responsible party for the pet. Name, address, and telephone number of this emergency caregiver must be on file with the Housing Authority. This person must assume responsibility for the pet in the absence of the pet owner. A signed certification on file with the Housing Authority from the emergency caregiver is required indicating their willingness and acceptance of the responsibilities as an emergency caregiver. Any changes in emergency caregiver must be reported by the pet owner and kept current at all times.

### **REMOVAL OF PETS**

The HACB, or an appropriate community authority, shall require the removal of any pet from a project if the pet's conduct or condition is determined by the HACB or community authority to be a nuisance or threat to the health and/or safety of other occupants of the project, of other persons in the community where the project is located, or any other violation of this policy.

In the event of illness or death of a pet owner, or in the case of an emergency which would prevent the pet owner from properly caring for the pet, the Housing Authority will contact the emergency caregiver designated by the resident or the local pet law enforcement agency to take the pet and care for it until the family or friends would claim the pet and assume responsibility for it. If the authorized caregiver is not available or is unable or unwilling to take responsibility of the pet, the Housing Authority will contact the local pet law enforcement agency to take the pet pursuant to State law. Any expenses incurred will be the responsibility of the pet owner.

## **15.CivilRightsCertifications**

[24CFRPart903.79(o)]

CivilrightscertificationsareincludedinthePHAPlan  
thePHAPlansandRelatedRegulations.

CertificationsofCompliancewith

## **16.Fiscal Audit**

[24CFRPart903.79(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.PHAAssetManagement**

[24CFRPart903.79(q)]

Exemptionsfromcomponent17:Section8OnlyPHAsarenotrequiredtocompletethiscomponent.  
HighperformingandsmallPHAsarenot requiredtocompletethiscomponent.

### **N/A—HighPerformingPHA**

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

## **18. Other Information**

[24CFR Part 903.79(r)]

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

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

2. If yes, the comments are: (if comments were received, the PHA **MUST** select one)

Attached as Attachment (Filename) **Resident Comments**

Provided below:

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:

**HACB provided greater level of detail regarding accomplishments from FY2003**

Other: (list below)

### **B. Description of Election process for Residents on the PHA Board**

1.  Yes  No: Does the PHA meet the exemption criteria provided section 2(b)(2) of the U.S. Housing Act of 1937? (If no, continue to question 2; if yes, skip to sub-component C.)

2.  Yes  No: Was the resident who serves on the PHA Board elected by the residents? (If yes, continue to question 3; if no, skip to sub-component C.)

3. Description of Resident Election Process

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

Candidates were nominated by resident and assisted family organizations

Candidates could be nominated by any adult recipient of PHA assistance

Self-nomination: Candidates registered with the PHA and requested a place on ballot

Other: (describe)

b. Eligible candidates: (select one)

Any recipient of PHA assistance

Any head of household receiving PHA assistance

Any adult recipient of PHA assistance

Any adult member of a resident or assisted family organization

Other (list)

c. Eligible voters: (select all that apply)

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

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

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

1. Consolidated Plan jurisdiction: **State of California, City of Chico**

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

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

3. The Consolidated Plan of the jurisdiction supports the PHA Plan with the following actions and commitments: (describe below)

**The State Department of Housing and Community Development (HCD) encourages the HACB to submit suggestions, improvements, and additional objectives for consideration in the State Consolidated Plan updates. HCD also solicits information and feedback from PHA's such as public responses to the PHA plans. This collaboration of housing needs of HACB provides HCD with a means of sharing solutions to similar problems among the agencies in its jurisdictions.**

**The HACB assists in meeting the goals of the Consolidated Plan of Chico through both its input into the Consolidated Plan process, as well as in the following:**

- 1. Operating a family self-sufficiency program**
- 2. Working with the City in preserving at-risk affordable housing developments where possible**

### D. Other Information Required by HUD

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

## Attachments

Update of Goals and Objectives and Performance to date:

<b>HUD Strategic Goal: Increase the availability of decent, safe, and affordable housing</b>		
<i>HACB Goal</i>	<i>Objectives</i>	<i>Progress to date</i>
Expand the supply of assisted housing	<ul style="list-style-type: none"> <li>• Apply for additional vouchers as they become available</li> <li>• Leverage private or other public funds to create additional housing opportunities: \$110,000</li> </ul>	<ul style="list-style-type: none"> <li>• No additional rental vouchers are available this year.</li> <li>• The Authority has entered into a contract with AHDC to construct 100+ elderly Tax Credit units.</li> <li>• The Authority has contracts with the City and County for tenant based rental assistance programs using City and County funds. The HACB is managing these programs assisting approximately 45 people.</li> <li>• The Authority is working with Butte County Community Action Agency to develop 34 units to expand an existing transitional family shelter. The City of Chico has provided funding. The HACB will provide rental assistance application to previously homeless families.</li> </ul>
Improve the quality of assisted housing	<ul style="list-style-type: none"> <li>• Renovate or modernize public housing units: 26 in Chico</li> </ul>	<ul style="list-style-type: none"> <li>• The Authority used Capital funds in public housing to improve the quality of life for 34 units by continuing rehabbing the old units in Gridley and Chico.</li> </ul>
<b>HUD Strategic Goal: Improve community quality of life and economic vitality</b>		
<i>HACB Goal</i>	<i>Objectives</i>	<i>Progress to date</i>
Provide an improved living environment	<ul style="list-style-type: none"> <li>• Implement Broad Range of Income, work with TANF and other to provide job training and opportunities for economic self-sufficiency, continue with Capital Fund program in public housing to improve quality of life.</li> </ul>	<ul style="list-style-type: none"> <li>• The Authority is selecting applicants above the HUD requirement of 40% and will continue to select to income above 30% AMI until a broad range of income is achieved.</li> <li>• The Authority will enforce lease requirements to provide safe neighborhoods.</li> </ul>

<b>HUD Strategic Goal: Promote self -sufficiency and asset development of families and individuals</b>		
<i>HACB Goal</i>	<i>Objectives</i>	<i>Progress to date</i>
Promote self - sufficiency and asset development of assisted households	<ul style="list-style-type: none"> <li>Increase the number and percentage of employed persons in assisted families: 25</li> <li>Provide or attract support services to improve assistance recipients' employability: 5 support services</li> </ul>	<ul style="list-style-type: none"> <li>61% of families in Section 8 and 59% in Public Housing, excluding elderly are working.</li> <li>22 families work with support services such as: ARC, Touchstone, Independent Living, TBRA and Catholic Social Services.</li> <li>The FSS supervisor monitors files on a monthly basis and more frequently as appropriate.</li> <li>The HACB has an internship program and PIC placements. <ul style="list-style-type: none"> <li>The Authority will continue to achieve the goals of providing job training and opportunities for economic self -sufficiency.</li> </ul> </li> </ul>
<b>HUD Strategic Goal: Ensure Equal Opportunity in Housing for all Americans</b>		
<i>HACB Goal</i>	<i>Objectives</i>	<i>Progress to date</i>
Ensure equal opportunity and affirmatively further fair housing	<ul style="list-style-type: none"> <li>Undertake affirmative measures to ensure access to assisted housing regardless of race, color, religion, national origin, sex, familial status, and disability: 5 workshops</li> <li>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: Continuing to participate with the North Valley Property Owners Association</li> </ul>	<ul style="list-style-type: none"> <li>The Authority cooperates with the City to provide assistance to individuals referred through local service agencies and has a contract with Butte County Behavioral Health to facilitate affordable housing payments.</li> <li>The City of Chico sponsors North Valley Property Owners Association and Legal Services, community -wide workshops for landlords and tenants.</li> <li>2 briefing workshops were held within the last year: 1 in August and 1 in September.</li> <li>Staff attended several North Valley Property Owners Association meetings and Fair Housing workshops to promote suitable living environments and continue to attend on a regular basis.</li> </ul>

<b>Other HACBG Goals and Objectives</b>		
<i>HACBG Goal</i>	<i>Objectives</i>	<i>Progress to date</i>
Streamline and/or conduct operations analysis for maintaining good customer service	<ul style="list-style-type: none"> <li>• Review operations to keep up with needs</li> <li>• Create an d/or revise organizational chart</li> <li>• Evaluate office space and other space issues, including community space</li> <li>• Review hardware and software computer systems to keep up with program requirements and regulation changes.</li> <li>• Implement regulatory changes as they become effective</li> </ul>	<ul style="list-style-type: none"> <li>• Staff meets 2 times per month to review operational needs and incorporate regulatory changes.</li> <li>• The Authority is reviewing organizational needs and has begun discussion for revised staffing</li> <li>• The Board of Commissioners has approved the purchase of a nd to move to a larger building designed for needs of HA</li> <li>• Review of computer systems will progress as office moves forward</li> </ul>
Implement and maintain quality affordable housing	<ul style="list-style-type: none"> <li>• Maintain program integrity in public housing and Section 8</li> <li>• Overcome negative perceptions of assisted housing</li> <li>• Develop self - sufficiency opportunities for participants</li> <li>• Maintain lease up in Farm Labor Housing</li> <li>• Look at opportunities for acquisition of non -HUD properties</li> <li>• Process incremental and special Voucher allocations</li> <li>• Develop resident groups for strong neighborhoods</li> </ul>	<ul style="list-style-type: none"> <li>• FLH has maintained a wait list all year and filled vacancies with qualified families.</li> <li>• Vouchers were released at 100%.</li> <li>• Authority has began a joint project to provide vouchers for project based units for homeless families in Chico</li> </ul>

<b>OtherHACBGoalsandObjectives</b>		
<i>HACBGoal</i>	<i>Objectives</i>	<i>Progresstodate</i>
Improveand maintaininter - agency cooperation	<ul style="list-style-type: none"> <li>• Continuetoworkwith agencies to provide services</li> <li>• Seektostrengthen linksbetweenHACB and theCounty</li> <li>• Lookatopportunities toincreas e participation betweenagenciesforself - sufficiencyactivities, includingchildcareand youthactivities</li> </ul>	<ul style="list-style-type: none"> <li>• Seestrategicgoal regardingserving25families throughsocialservices</li> <li>• Seestrategicgoals regardingequalopportunity</li> </ul>
Improve Communication withResidents	<ul style="list-style-type: none"> <li>• Providetenantswith informationabout maintenance,repairand modernizationactivities.</li> <li>• Providedetailed informationaboutlocation ofgas,watershutoffs,air filters,dangersofand procedrestoprohibit and/oreliminatemoldand mildew.</li> <li>• Decreaselanguage andculturalbarrierswith southeastAsianresidents (predominatelyHmong) whocountfor15%of residentsinPublic Housing.</li> </ul>	<ul style="list-style-type: none"> <li>• Increasedstafftime meetingwithresidents.</li> <li>• Providewritten housekeepingtipstoprohibit and/oreliminatemold and mildew.</li> <li>• Schedulemeetingwith HmongCounselandclan leaders.</li> <li>• Providetrainingto employeestoimprove professionalskills.</li> </ul>

## De-concentration Analysis

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

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

If yes, list these developments as follows:

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

## Resident Comments

Residents had the following comments regarding the Agency Plan:

Under Goals and Objectives, residents were concerned about the length of the waiting list for Section 8. *Unfortunately there are no new Vouchers available this year for the Agency to apply for.*

Under Capital Fund, residents had no additional comments. *The Agency will address already identified issues, as funds become available.*

Under Public Housing Continued Occupancy and Community Service, residents had mixed opinions regarding the community service requirement and its feasibility. *The Community Service is a mandated requirement and as such will be implemented by the Agency.*

In addition to the Resident Advisory Board (RAB), the HACB held meetings regarding the Capital Fund. Three meetings were held at three different on-site locations.

### *OROVILLEPUBLICMEETING*

There were no substantive comments regarding this year's use of funds. Residents stated that, in the future, they were interested in expansion of the washer/dryer room, new roofs, replacement of the HVAC units, interior and exterior lighting, replacement of refrigerators, elimination of tripping hazards, upgrade on exterior windows, phone lines in all the rooms, and addition of tenant parking signs.

### *GRIDLEYANDBIGGSMEETING*

There were no substantive comments regarding this year's use of funds. Residents stated that, in the future, they were interested in playground equipment, basketball courts, additional off street parking, landscaping, community building and larger storage buildings. Removal of pantry walls and new HVAC units, along with exterior stucco were also discussed.

### *CHICOMEETING*

There were no substantive comments regarding this year's use of funds. Residents stated that, in the future, they were interested in a community/day care building in Chico and playground equipment at older cinder block homes. Also discussed: barriers to protect the playground, fencing around front yards, screen doors, window replacement and washers/dryers inside homes at Rhodes Terrace; speed limit signs posted at playgrounds; and speed bumps at the entrance of La Lieta Court and Natoma Court. Also discussed, was new flooring and exterior lighting.

## **Criteria for Substantial Deviation and Significant Amendment to the Agency Plan**

### *SUBSTANTIAL DEVIATION FROM 5 -YEAR PLAN:*

A substantial deviation from the 5 -Year Plan is defined as a reduction of more than 25% in the goals and objectives over the 5 -Year period, or a change of 2 or more indicators (needs and/or strategies), or a change to, addition or elimination of, one of the Agency's goals

### *SIGNIFICANT AMENDMENT OR MODIFICATION TO THE ANNUAL PLAN:*

A significant amendment or modification to the Annual Plan is defined as an amendment that would require the approval of the Housing Commission in order to implement, i.e. a change to Eligibility and/or Occupancy requirements, a change in goals or strategy, a substantial change (more than 25%) in the goals and objectives.

**CAPITALFUNDTABLESSTARTONTHEEXTPAGE**



**Annual Statement/Performance and Evaluation Report**

Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHA)

**Part 1: Summary**

PHAName <b>Housing Authority of the County of Butte</b>		Grant Type and Number: Capital Fund Program Grant No: CA30PO4350101 Replacement Housing Factor Grant No:		Federal FY of Grant: <b>2001</b>	
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input checked="" type="checkbox"/> Revised Annual Statement/Revision Number_1_ <input type="checkbox"/> Performance and Evaluation Report for Program Year Ending 2001 <input type="checkbox"/> Final Performance and Evaluation Report					
Line No.	Summary by Development Account	Total Estimate Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total Non-CGP Funds				
2	1406 Operations				
3	1408 Management Improvements	137,000	48,770	48,770	\$28,769.66
4	1410 Administration	85,456	79,070	79,070	\$61,893.74
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	32,800	128,703	128,703	\$17,141.00
8	1440 Site Acquisition				
9	1450 Site Improvement	20,000	1,900	1,900	\$1,900.00
10	1460 Dwelling Structures	570,248	577,082	577,082	\$577,082.00
11	1465.1 Dwelling Equipment-Nonexpendable	7,000	15,237	15,237	\$15,237.00
12	1470 Nondwelling Structures				
13	1475 Nondwelling Equipment	0			
14	1485 Demolition				
15	1490 Replacement Reserve	0			
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs	2,056	3,798	3,798	\$3,798.14
18	1499 Development Activities				
19	1502 Contingency	0			
20	<b>Amount of Annual Grant (Sum of lines 2-18)</b>	<b>854,560</b>	<b>854,560</b>	<b>854,560</b>	<b>\$705,821.54</b>
21	Amount of line 20 Related to LBP Activities	58,056	58,056	58,056	58,056
22	Amount of line 19 Related to Section 504 Compliance				
23	Amount of line 20 Related to Security-Soft Cost				
24	Amount of line 20 Related to Security-Hard Cost				
25	Amount of line 20 Related to Energy Conservation Measures	178,562	178,562	178,562	178,562
26	Collateralization Expenses or Debt Service				
Signature of Executive Director & Date:		Signature of Public Housing Director & Date:			

**Annual Statement/Performance and Evaluation Report**

Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHA)

**Part 11: Supporting Pages**

PHAN Name Housing Authority of the County of Butte				Grant Type and Number: Capital Fund Program Grant No: CA30PO4350201 Replacement Housing Factor Grant No:				Federal FY of Grant: 2001
Development Number/Name Ha-Wide Activities	General Description of Major Work Categories	Development Account Number	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
CA43-1A, 1B&4	A. Roof & soffit replacement	1460	6	65,293	65,293	65,293	65,293	
	B. Kitchen remodel	1460	6	89,810	89,810	89,810	89,810	
	C. Bathroom remodel	1460	6	4,471	4,471	4,471	4,471	
	D. Appliance/HVAC Replacement	1465.1	6	47,489	47,489	47,489	47,489	
	E. Window Replacement	1460	6	5,777	5,777	5,777	5,777	
	F. Ceiling/Wall Repaint (LBP)	1460	6	19,563	19,563	19,563	19,563	
	G. Electrical Upgrade	1460	6	14,750	14,750	14,750	14,750	
	H. Water heater replacement, etc.	1460	6	728	728	728	728	
	I. Interior Door/Closets repair	1460	6	4,847	4,847	4,847	4,847	
	J. Utility room renovation/addition	1460	6	728	728	728	728	
	K. Sitework, etc.	1450	6	13,335	13,335	13,335	13,335	
	L. Gutters, etc.	1460	6	2,436	2,436	2,436	2,436	
				<b>Total</b>	<b>269,227</b>	<b>269,227</b>	<b>269,227</b>	

**Annual Statement/Performance and Evaluation Report**

Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHA)

**Part 11: Supporting Pages**

PHAName Housing Authority of the County of Butte				Grant Type and Number: Capital Fund Program Grant No: CA30PO4350201 Replacement Housing Factor Grant No:				Federal FY of Grant: 2001
Development Number/Name Ha-Wide Activities	General Description of Major Work Categories	Development Account Number	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
CA43-3,	A. Roof & soffit replacement	1460	8	73,001	73,001	73,001	73,001	
	B. Kitchen remodel	1460	8	102,690	102,690	102,690	102,690	
	C. Bathroom remodel	1460	8	5,697	5,697	5,697	5,697	
	D. Appliance/HVAC Replacement	1465.1	8	67,520	64,491	64,491	64,491	
	E. Window Replacement	1460	8	7,361	7,361	7,361	7,361	
	F. Ceiling/Wall Repaint (LBP)	1460	8	24,931	24,931	24,931	24,931	
	G. Electrical Upgrade	1460	8	18,690	18,690	18,690	18,690	
	H. Water heater replacement, etc.	1460	8	928	928	928	928	
	I. Interior Door/Closets repair	1460	8	6,176	6,176	6,176	6,176	
	J. Utility room renovation/addition	1460	8	928	928	928	928	
	K. Sitework, etc.	1450	8	16,994	16,994	16,994	16,994	
	L. Gutters, etc.	1460	8	3,105	3,105	3,105	3,105	
			<b>Total</b>	<b>328,021</b>	<b>324,992</b>	<b>324,992</b>	<b>324,992</b>	

**Annual Statement/Performance and Evaluation Report**

Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHA)

**Part 11: Supporting Pages**

PHAName Housing Authority of the County of Butte				Grant Type and Number: Capital Fund Program Grant No: CA30PO4350201 Replacement Housing Factor Grant No:				Federal FY of Grant: 2001
Development Number/Name Ha-Wide Activities	General Description of Major Work Categories	Development Account Number	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
CA43-2A &2B	A. Roof & soffit replacement	1460	0		0		0	
	B. Kitchen remodel	1460	0		0		0	
	C. Bathroom remodel	1460	0		0		0	
	D. Appliance/HVAC Replacement	1465.1	0		0		0	
	E. Window Replacement	1460	0		0		0	
	F. Ceiling/Wall Repaint (LBP)	1460	0		0		0	
	G. Electrical Upgrade	1460	0		0		0	
	H. Water heater replacement, etc.	1460	0		0		0	
	I. Interior Door/Closets repair	1460	0		0		0	
	J. Utility room renovation/addition	1460	0		0		0	
	K. Sitework, etc.	1450	0		0		0	
	L. Gutters, etc.	1460	0		0		0	
		<b>Total</b>			<b>0</b>	<b>0</b>	<b>0</b>	

**Annual Statement/Performance and Evaluation Report**

Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHA)

**Part 11: Supporting Pages**

PHAName Housing Authority of the County of Butte				Grant Type and Number: Capital Fund Program Grant No: CA30PO4350201 Replacement Housing Factor Grant No:				Federal FY of Grant: 2001
Development Number/Name Ha-Wide Activities	General Description of Major Work Categories	Development Account Number	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
CA43, AUTH. WIDE	M. Management Improvements	1408	1	137,000	48,770	48,770	\$28,769.66	
	Computer/Office Equip							
	N. Administration	1410	1	85,456	79,070	79,070	\$61,893.74	
	O. Fees/Permits Architect, LBPTesting	1430	1	32,800	128,703	128,703	\$17,141.00	
	P. Resident Relocation	1495.1	0	2,056	3,798	3,798	\$3,798.00	
	Q. Nondwelling Equipment	1475	0	0	0	0	\$0.00	
	R. Replacement Reserve	1490	0	0	0	0	\$0.00	
S. Contingency	1502	0	0	0	0	\$0.00		
			<b>Total</b>	<b>257,312</b>	<b>260,341</b>	<b>260,341</b>	<b>111,602</b>	



**Annual Statement/Performance and Evaluation Report**

Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHA)

**Part 1: Summary**

PHA Name <b>Housing Authority of the County of Butte</b>		<b>Grant Type and Number:</b> Capital Fund Program Grant No: CA 30 PO 4350102 Replacement Housing Factor Grant No:		Federal FY of Grant: 2002	
<input checked="" type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement/Revision Number ___ <input type="checkbox"/> Performance and Evaluation Report for Program Year Ending 2001 <input type="checkbox"/> Final Performance and Evaluation Report					
Line No.	Summary by Development Account	Total Estimate Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total Non-CGP Funds				
2	1406 Operations				
3	1408 Management Improvements - Soft Cost	15,000			
	Management Improvements - Hard Cost	13,000			
4	1410 Administration	75,000			
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	114,979			
8	1440 Site Acquisition	0			
9	1450 Site Improvement				
10	1460 Dwelling Structures	616,500			
11	1465.1 Dwelling Equipment - Nonexpendable				
12	1470 Nondwelling Structures				
13	1475 Nondwelling Equipment				
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs	5,500			
18	1499 Development Activities				
19	1502 Contingency				
20	<b>Amount of Annual Grant (Sum of lines 2-18)</b>	<b>839,979</b>	<b>0</b>	<b>0</b>	<b>0</b>
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 19 Related to Section 504 Compliance				
23	Amount of line 20 Related to Security - Soft Cost				
24	Amount of line 20 Related to Security - Hard Cost				
25	Amount of line 20 Related to Energy Conservation Measures				
26	Collateralization Expenses or Debt Service				
Signature of Executive Director & Date:		Signature of Public Housing Director & Date:			

**Annual Statement/Performance and Evaluation Report**

Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHA)

**Part 11: Supporting Pages**

PHAName Housing Authority of the County of Butte				Grant Type and Number: Capital Fund Program Grant No: CA30PO4350102 Replacement Housing Factor Grant No:				Federal FY of Grant: 2002
Development Number/Name Ha-Wide Activities	General Description of Major Work Categories	Development Account Number	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
CA43-1A, 1B&4	A. Roof & soffit replacement	1460			0		0	
	B. Kitchen remodel	1460			0		0	
	C. Bathroom remodel	1460			0		0	
	D. Appliance/HVAC Replacement	1465.1			0		0	
	E. Window Replacement	1460			0		0	
	F. Ceiling/Wall Repaint (LBP)	1460			0		0	
	G. Electrical Upgrade	1460			0		0	
	H. Water heater replacement, etc.	1460			0		0	
	I. Interior Door/Closets repair	1460			0		0	
	J. Utility room renovation/addition	1460			0		0	
	K. Sitework, etc.	1450			0		0	
	L. Gutters, etc.	1460			0		0	
			<b>Total</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	

**Annual Statement/Performance and Evaluation Report**

Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHA)

**Part 11: Supporting Pages**

PHAName Housing Authority of the County of Butte				Grant Type and Number: Capital Fund Program Grant No: CA30PO4350102 Replacement Housing Factor Grant No:			Federal FY of Grant: 2002	
Development Number/Name Ha-Wide Activities	General Description of Major Work Categories	Development Account Number	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
CA43-3,	A. Roof & soffit replacement	1460	10	105,437				
	B. Kitchen remodel	1460	10	298,815				
	C. Bathroom remodel	1460	10	23,249				
	D. Appliance/HVAC Replacement	1465.1	10	8,588				
	E. Window Replacement	1460	10	34,039				
	F. Ceiling/Wall Repaint (LBP)	1460	10	13,532				
	G. Electrical Upgrade	1460	10	50,007				
	H. Water heater replacement, etc.	1460	10	5,292				
	I. Interior Door/Closets repair	1460	10	8,810				
	J. Utility room renovation/addition	1460	10	45,245				
	K. Sitework, etc.	1450	10	16,436				
	L. Gutters, etc.	1460	10	7,050				
			<b>Total</b>	<b>616,500</b>	<b>0</b>	<b>0</b>	<b>0</b>	

**Annual Statement/Performance and Evaluation Report**

Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHA)

**Part 11: Supporting Pages**

PHAName Housing Authority of the County of Butte				Grant Type and Number: Capital Fund Program Grant No: CA30PO4350102 Replacement Housing Factor Grant No:				Federal FY of Grant: 2002
Development Number/Name Ha-Wide Activities	General Description of Major Work Categories	Development Account Number	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
CA43-2A & 2B	A. Roof & soffit replacement	1460	0		0		0	
	B. Kitchen remodel	1460	0		0		0	
	C. Bathroom remodel	1460	0		0		0	
	D. Appliance/HVAC Replacement	1465.1	0		0		0	
	E. Window Replacement	1460	0		0		0	
	F. Ceiling/Wall Repaint (LBP)	1460	0		0		0	
	G. Electrical Upgrade	1460	0		0		0	
	H. Water heater replacement, etc.	1460	0		0		0	
	I. Interior Door/Closets repair	1460	0		0		0	
	J. Utility room renovation/addition	1460	0		0		0	
	K. Sitework, etc.	1450	0		0		0	
	L. Gutters, etc.	1460	0		0		0	
	<b>Total</b>			<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	

**Annual Statement/Performance and Evaluation Report**

Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHA)

**Part 11: Supporting Pages**

PHAName Housing Authority of the County of Butte				Grant Type and Number: Capital Fund Program Grant No: CA30PO4350102 Replacement Housing Factor Grant No:				Federal FY of Grant: 2002
Development Number/Name Ha-Wide Activities	General Description of Major Work Categories	Development Account Number	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
CA43, AUTH.	M. Management Improvements Computer/Office Equip	1408		15,000 13,000				
WIDE	N. Administration	1410		75,000				
	O. Fees/Permits Architect, LBPTesting	1430		114,979				
	P. Resident Relocation	1495.1		5,500			0	
	Q. Nondwelling Equipment	1475					0	
	R. Replacement Reserve	1490				0	0	
	S. Contingency	1502				0	0	
			Total	223,479	0	0	0	

**Annual Statement/Performance and Evaluation Report**

Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHA)

**Part 1: Summary**

PHAName <b>Housing Authority of the County of Butte</b>		Grant Type and Number: Capital Fund Program Grant No: CA30PO43501-03 Replacement Housing Factor Grant No:		Federal FY of Grant: <b>2003</b>	
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input checked="" type="checkbox"/> Revised Annual Statement/Revision Number_1_					
<input type="checkbox"/> Performance and Evaluation Report for Program Year Ending 2001 <input type="checkbox"/> Final Performance and Evaluation Report					
Line No.	Summary by Development Account	Total Estimate Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total Non-CGPF Funds				
2	1406 Operations				
3	1408 Management Improvements-Soft Cost	7,000			
4	1410 Administration	67,000			
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs				
8	1440 Site Acquisition				
9	1450 Site Improvement	10,000			
10	1460 Dwelling Structures	454,995			
11	1465.1 Dwelling Equipment-Nonexpendable				
12	1470 Nondwelling Structures				
13	1475 Nondwelling Equipment	132,000			
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				
20	<b>Amount of Annual Grant (Sum of lines 2-18)</b>	<b>670,995</b>	<b>0</b>	<b>0</b>	<b>0</b>
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 19 Related to Section 504 Compliance				
23	Amount of line 20 Related to Security-Soft Cost				
24	Amount of line 20 Related to Security-Hard Cost				
25	Amount of line 20 Related to Energy Conservation Measures				
26	Collateralization Expenses or Debt Service				
Signature of Executive Director & Date:		Signature of Public Housing Director & Date:			

**Annual Statement/Performance and Evaluation Report**

Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHA)

**Part 11: Supporting Pages**

PHAName Housing Authority of the County of Butte				Grant Type and Number: Capital Fund Program Grant No: CA30PO43501-03 Replacement Housing Factor Grant No:				Federal FY of Grant: 2003
Development Number/Name Ha-Wide Activities	General Description of Major Work Categories	Development Account Number	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
CA43-1A, 1B&4	A. Roof & soffit replacement	1460			0		0	
	B. Kitchen remodel	1460			0		0	
	C. Bathroom remodel	1460			0		0	
	D. Appliance/HVAC Replacement	1465.1			0		0	
	E. Window Replacement	1460			0		0	
	F. Ceiling/Wall Repaint (LBP)	1460			0		0	
	G. Electrical Upgrade	1460			0		0	
	H. Water heater replacement, etc.	1460			0		0	
	I. Interior Door/Closets repair	1460			0		0	
	J. Utility room renovation/addition	1460			0		0	
	K. Sitework, etc.	1450			0		0	
	L. Gutters, etc.	1460			0		0	
	<b>Total</b>			<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	

**Annual Statement/Performance and Evaluation Report**

Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHA)

**Part 11: Supporting Pages**

PHAName Housing Authority of the County of Butte				Grant Type and Number: Capital Fund Program Grant No: CA30PO43501-03 Replacement Housing Factor Grant No:				Federal FY of Grant: 2003
Development Number/Name Ha-Wide Activities	General Description of Major Work Categories	Development Account Number	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
CA43-3,	A. Roof & soffit replacement	1460	6	80,433				
	B. Kitchen remodel	1460	6	201,501				
	C. Bathroom remodel	1460	6	17,040				
	D. Appliance/HVAC Replacement	1465.1	6	6,543				
	E. Window Replacement	1460	6	29,201				
	F. Ceiling/Wall Repaint (LBP)	1460	6	8,590				
	G. Electrical Upgrade	1460	6	49,882				
	H. Water heater replacement, etc.	1460	6	3,467				
	I. Interior Door/Closets repair	1460	6	6,077				
	J. Utility room renovation/addition	1460	6	37,049				
	K. Sitework, etc.	1450	6	23,711				
	L. Gutters, etc.	1460	6	1,500				
			<b>Total</b>	<b>464,995</b>	<b>0</b>	<b>0</b>	<b>0</b>	

Annual Statement/Performance and Evaluation Report

Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHA)

Part 11: Supporting Pages

PHAName Housing Authority of the County of Butte				Grant Type and Number: Capital Fund Program Grant No: CA30PO43501-03 Replacement Housing Factor Grant No:				Federal FY of Grant: 2003
Development Number/Name Ha-Wide Activities	General Description of Major Work Categories	Development Account Number	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
CA43-2A & 2B	A. Roof & soffit replacement	1460	0		0		0	
	B. Kitchen remodel	1460	0		0		0	
	C. Bathroom remodel	1460	0		0		0	
	D. Appliance/HVAC Replacement	1465.1	0		0		0	
	E. Window Replacement	1460	0		0		0	
	F. Ceiling/Wall Repaint (LBP)	1460	0		0		0	
	G. Electrical Upgrade	1460	0		0		0	
	H. Water heater replacement, etc.	1460	0		0		0	
	I. Interior Door/Closets repair	1460	0		0		0	
	J. Utility room renovation/addition	1460	0		0		0	
	K. Sitework, etc.	1450	0		0		0	
	L. Gutters, etc.	1460	0		0		0	
			<b>Total</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	

**Annual Statement/Performance and Evaluation Report**

Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHA)

**Part 11: Supporting Pages**

PHAName Housing Authority of the County of Butte				Grant Type and Number: Capital Fund Program Grant No: CA30PO43501-03 Replacement Housing Factor Grant No:				Federal FY of Grant: 2003
Development Number/Name Ha-Wide Activities	General Description of Major Work Categories	Development Account Number	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
	M. Operations	1406						
CA43, AUTH.	M. Management Improvements	1408		7,000				
WIDE	N. Administration	1410		67,000				
	O. Fees/Permits Architect, LBPTesting	1430						
	P. Resident Relocation	1495.1		0			0	
	Q. Nondwelling Equipment	1475		132,000			0	
	R. Replacement Reserve	1490				0	0	
	S. Contingency	1502				0	0	
			Total	206,000	0	0	0	

HAName: HousingAuthorityoftheCountyofButte		<input type="checkbox"/> Original5-YearPlan <input checked="" type="checkbox"/> RevisionNo:1			
A: DevelopmentNumber/Name	Year1	WorkStatementforYear2 FFYGrant:501-04 PHAFY:2004	WorkStatementforYear3 FFYGrant:501-05 PHAFY:2005	WorkStatementforYear4 FFYGrant:501-06 PHAFY:2006	WorkStatementforYear5 FFYGrant:501-07 PHAFY:2007
CA043-1A,1B,4	<b>See Annual Statement</b>	235,168	235,247	195,000	277,562
CA043-2A,2B		0	0	0	67,000
CA043-3		371,584	384,980	310,099	308,000
CA043-10		0	0	126,000	382,500
CA043-13		36,000	0	153,250	93,000
CA043-14		0	15,000	0	24,500
CA043-15		0	0	0	92,000
HA-WIDE		288,824	236,600	86,022	49,522
<b>TotalCFPFundsEst.</b>		931,576	871,827	870,371	1,294,084
<b>TotalReplacement</b>		84,520	86,230	58,771	72,642
<b>HousingFactorFunds</b>					

Activitiesfor Year1	ActivitiesforYear2 FFYGrant:CA30PO43501-04 PHAFY:2004			ActivitiesforYear3 FFYGrant:CA30PO43501-05 PHAFY:2005		
	DevelopmentNumber/Name/GeneralDescriptionof MajorWorkCategories	Quantity	EstimatedCost	DevelopmentNumber/Name/GeneralDescriptionof MajorWorkCategories	Quantity	EstimatedCost
See Annual Statement	<b>CA043-1A,1B,4</b>			<b>CA043-1A,1B,4</b>		
	<b>A:Roof&amp;SoffitReplacement</b>	5	53,660	<b>A:Roof&amp;SoffitReplacement</b>	5	53,660
	<b>B:KitchenRemodel</b>	5	74,762	<b>B:KitchenRemodel</b>	5	74,762
	<b>C:BathroomRemodel</b>	5	4,187	<b>C:BathroomRemodel</b>	5	4,187
	<b>D:HVACReplacement</b>	5	44,485	<b>D:HVACReplacement</b>	5	44,485
	<b>E:WindowReplacement</b>	5	5,411	<b>E:WindowReplacement</b>	5	5,411
	<b>F:Ceiling/WallRepair(LBP)</b>	5	18,326	<b>F:Ceiling/WallRepair(LBP)</b>	5	18,326
	<b>G:ElectricalUpgrade</b>	5	13,738	<b>G:ElectricalUpgrade</b>	5	13,738
	<b>H:WaterheaterReplacement,etc.</b>	5	682	<b>H:WaterheaterReplacement,etc.</b>	5	682
	<b>I:InteriorDoors/Closets</b>	5	4,540	<b>I:InteriorDoors/Closets</b>	5	4,540
	<b>J:UtilityRoomRenovation/Addition</b>	5	682	<b>J:UtilityRoomRenovation/Addition</b>	5	682
	<b>K:Sitework,etc.</b>	5	12,492	<b>K:Sitework,etc.</b>	5	12,492
<b>L:Gutter,etc.</b>	5	2,203	<b>L:Gutter,etc.</b>	5	2,282	
	<b>SubTotalofEstimatedCost</b>		<b>235,168</b>	<b>SubTotalofEstimatedCost</b>		<b>235,247</b>

Activitiesfor Year1	ActivitiesforYear4 FFYGrant:CA30PO43501-06 PHAFY:2006			ActivitiesforYear5 FFYGrant:CA30PO43501-07 PHAFY:2007		
	DevelopmentNumber/Name/GeneralDescriptionof MajorWorkCategories	Quantity	EstimatedCost	DevelopmentNumber/Name/GeneralDescriptionof MajorWorkCategories	Quantity	EstimatedCost
<b>See Annual Statement</b>	<b>CA043-1A,1B,4</b>			<b>CA043-1A,1B,4</b>		
	<b>A:PlaygroundEquipment</b>	1	75,000	<b>A:EnlargeCommunityBuilding</b>	1	189,562
	<b>B:Landscaping</b>	1	45,000	<b>B:Landscaping</b>	1	50,000
	<b>C:OffStreetParking</b>	37	75,000	<b>C:ExteriorLighting</b>	1	38,000
	<b>SubTotalofEstimatedCost</b>		<b>195,000</b>	<b>SubTotalofEstimatedCost</b>		<b>277,562</b>

Activitiesfor Year1	ActivitiesforYear2 FFYGrant:CA30PO43501-04 PHAFY:2004			ActivitiesforYear3 FFYGrant:CA30PO43501-05 PHAFY:2005		
	DevelopmentNumber/Name/GeneralDescriptionof MajorWorkCategories	Quantity	EstimatedCost	DevelopmentNumber/Name/GeneralDescriptionof MajorWorkCategories	Quantity	EstimatedCost
<b>See Annual Statement</b>	<b>CA043-2A&amp;2B</b>			<b>CA043-2A&amp;2B</b>		
	<b>NOWORK</b>			<b>NOWORK</b>		
	<b>SubTotalofEstimatedCost</b>		<b>0</b>	<b>SubTotalofEstimatedCost</b>		<b>0</b>

Activitiesfor Year1	ActivitiesforYear4 FFYGrant:CA30PO43501-06 PHAFY:2006			ActivitiesforYear5 FFYGrant:CA30PO43501-07 PHAFY:2007		
	DevelopmentNumber/Name/GeneralDescriptionof MajorWorkCategories	Quantity	EstimatedCost	DevelopmentNumber/Name/GeneralDescriptionof MajorWorkCategories	Quantity	EstimatedCost
See Annual Statement	<b>CA043-2A&amp;2B</b>			<b>CA043-2A&amp;2B</b>		
	<b>NOWORK</b>			<b>A:Landscaping</b>	1	20,000
				<b>B:PlaygroundEquipment</b>	1	35,000
				<b>C:ExteriorLighting</b>	1	12,000
	SubTotalofEstimatedCost		0	SubTotalofEstimatedCost		67,000

Activitiesfor Year1	ActivitiesforYear2 FFYGrant:CA30PO43501-04 PHAFY:2004			ActivitiesforYear3 FFYGrant:CA30PO43501-05 PHAFY:2005		
	DevelopmentNumber/Name/GeneralDescriptionof MajorWorkCategories	Quantity	EstimatedCost	DevelopmentNumber/Name/GeneralDescriptionof MajorWorkCategories	Quantity	EstimatedCost
See Annual Statement	<b>CA043-3</b>			<b>CA043-3</b>		
	<b>A:UpgradeHVACsystems</b>	39	163,800	<b>A;UpgradeHVACSystems</b>	20	126,000
	<b>B:MaintenanceShop(Phase1)</b>	23	65,000	<b>B:OffSteetParking</b>		210,980
	<b>C:PlaygroundArea</b>	1	55,000	<b>C:SecurityLighing</b>	25	48,000
	<b>D:Fencing</b>	23	55,000			
	<b>E:PlayAreas</b>	3	32,784			
	<b>SubTotalofEstimatedCost</b>		<b>371,584</b>	<b>SubTotalofEstimatedCost</b>		<b>384,980</b>

Activitiesfor Year1	ActivitiesforYear4 FFYGrant:CA30PO43501-06 PHAFY:2006			ActivitiesforYear5 FFYGrant:CA30PO43501-07 PHAFY:2007		
	DevelopmentNumber/Name/GeneralDescriptionof MajorWorkCategories	Quantity	EstimatedCost	DevelopmentNumber/Name/GeneralDescriptionof MajorWorkCategories	Quantity	EstimatedCost
<b>See Annual Statement</b>	<b>CA043-3</b>			<b>CA043-3</b>		
	<b>A:CommunityCenter</b>	1	310,099	<b>A:PlaygroundEquipment</b>	3	156,000
				<b>B:LightingExterior</b>	1	79,000
				<b>C:SpeedBumps</b>	5	25,000
				<b>D:MaintenanceShop(Phase2)</b>	1	48,000
	<b>SubTotalofEstimatedCost</b>		310,099	<b>SubTotalofEstimatedCost</b>		308,000

Activitiesfor Year1	ActivitiesforYear2 FFYGrant:CA30PO43501-04 PHAFY:2004			ActivitiesforYear3 FFYGrant:CA30PO43501-05 PHAFY:2005		
	DevelopmentNumber/Name/GeneralDescriptionof MajorWorkCategories	Quantity	EstimatedCost	DevelopmentNumber/Name/GeneralDescriptionof MajorWorkCategories	Quantity	EstimatedCost
<b>See Annual Statement</b>	<b>CA043-10</b>			<b>CA043-10</b>		
	<b>NOWORK</b>			<b>NOWORK</b>		
	SubTotalofEstimatedCost		0	SubTotalofEstimatedCost		0

Activitiesfor Year1	ActivitiesforYear4 FFYGrant:CA30PO43501-06 PHAFY:2006			ActivitiesforYear5 FFYGrant:CA30PO43501-07 PHAFY:2007		
	DevelopmentNumber/Name/GeneralDescriptionof MajorWorkCategories	Quantity	EstimatedCost	DevelopmentNumber/Name/GeneralDescriptionof MajorWorkCategories	Quantity	EstimatedCost
See Annual Statement	<b>CA043-10</b>			<b>CA043-10</b>		
	<b>A:ReplaceRoofs</b>	30	85,000	<b>A:ReplaceRoofs</b>	30	120,000
	<b>B:ModifyKitchenLighting</b>	30	6,000	<b>B:ModifyKitchenLighting</b>	30	6,000
	<b>C:ExteriorLighting</b>	20	10,000	<b>C:RemodelLaundryandExpand</b>	1	85,000
	<b>D:FixExteriorWalls:Leaking</b>	25	25,000	<b>D:CarpetinClubhouses</b>	1	6,500
				<b>E:ReplaceHVACUnits</b>	62	165,000
	SubTotalofEstimatedCost		126,000	SubTotalofEstimatedCost		382,500

Activitiesfor Year1	ActivitiesforYear2 FFYGrant:CA30PO43501-04 PHAFY:2004			ActivitiesforYear3 FFYGrant:CA30PO43501-05 PHAFY:2005		
	DevelopmentNumber/Name/GeneralDescriptionof MajorWorkCategories	Quantity	EstimatedCost	DevelopmentNumber/Name/GeneralDescriptionof MajorWorkCategories	Quantity	EstimatedCost
<b>See Annual Statement</b>	<b>CA043-13</b> <b>A:ReplacementofFixedWindows</b>	90	36,000	<b>CA043-13</b> <b>NOWORK</b>		
	<b>SubTotalofEstimatedCost</b>		36,000	<b>SubTotalofEstimatedCost</b>		0

Activities for Year1	Activities for Year4 FFY Grant: CA30PO43501-06 PHAFY: 2006			Activities for Year5 FFY Grant: CA30PO43501-07 PHAFY: 2007		
	Development Number/Name/General Description of Major Work Categories	Quantity	Estimated Cost	Development Number/Name/General Description of Major Work Categories	Quantity	Estimated Cost
See Annual Statement	<b>CA043-13</b>			<b>CA043-13</b>		
	<b>A: Install Porches and Sidewalks</b>	30	36,000	<b>A: Install Porches and Sidewalks</b>	30	18,000
	<b>B: Landscape Rehab and Prune Trees</b>	30	3,000	<b>B: Landscape Rehab and Prune Trees</b>	30	1,500
	<b>C: Install Cloth Lines</b>	30	12,000	<b>C: Install Cloth Lines</b>	30	6,000
	<b>D: Install Ceiling Fans</b>	30	3,750	<b>D: Install Ceiling Fans</b>	30	3,000
	<b>E: Install Screen Doors</b>	45	9,500	<b>E: Install Screen Doors</b>	30	6,000
	<b>F: Install Washer/Dryer Hook-ups in Units</b>	45	89,000	<b>F: More Lighting</b>	30	30,000
				<b>G: Traffic Speed Bumps</b>	30	20,000
				<b>H: Add Extra Phone Line Upstairs</b>	45	8,500
Sub Total of Estimated Cost			153,250	Sub Total of Estimated Cost		
				93,000		

Activitiesfor Year1	ActivitiesforYear2 FFYGrant:CA30PO43501-04 PHAFY:2004			ActivitiesforYear3 FFYGrant:CA30PO43501-05 PHAFY:2005		
	DevelopmentNumber/Name/GeneralDescriptionof MajorWorkCategories	Quantity	EstimatedCost	DevelopmentNumber/Name/GeneralDescriptionof MajorWorkCategories	Quantity	EstimatedCost
<b>See Annual Statement</b>	<b>CA043-14</b>			<b>CA043-14</b>		
	<b>NOWORK</b>			<b>A:FencingBackYards</b>	20	15,000
	SubTotalofEstimatedCost		0	SubTotalofEstimatedCost		15,000

Activitiesfor Year1	ActivitiesforYear4 FFYGrant:CA30PO43501-05 PHAFY:2005			ActivitiesforYear5 FFYGrant:CA30PO43501-06 PHAFY:2006		
	DevelopmentNumber/Name/GeneralDescriptionof MajorWorkCategories	Quantity	EstimatedCost	DevelopmentNumber/Name/GeneralDescriptionof MajorWorkCategories	Quantity	EstimatedCost
See Annual Statement	CA043-14			CA043-14		
	NOWORK			A:InstallSpeedBumps	30	9,500
				B:ResurfaceRoads	1	15,000
	SubTotalofEstimatedCost		0	SubTotalofEstimatedCost		24,500

Activitiesfor Year1	ActivitiesforYear2 FFYGrant:CA30PO43501-03 PHAFY:2003			ActivitiesforYear3 FFYGrant:CA30PO43501-04 PHAFY:2004		
	DevelopmentNumber/Name/GeneralDescriptionof MajorWorkCategories	Quantity	EstimatedCost	DevelopmentNumber/Name/GeneralDescriptionof MajorWorkCategories	Quantity	EstimatedCost
<b>See Annual Statement</b>	<b>CA043-15</b>			<b>CA043-15</b>		
	<b>NOWORK</b>			<b>NOWORK</b>		
	SubTotalofEstimatedCost		0	SubTotalofEstimatedCost		0

Activitiesfor Year1	ActivitiesforYear4 FFYGrant:CA30PO43501-06 PHAFY:2006			ActivitiesforYear5 FFYGrant:CA30PO43501-07 PHAFY:2007		
	DevelopmentNumber/Name/GeneralDescriptionof MajorWorkCategories	Quantity	EstimatedCost	DevelopmentNumber/Name/GeneralDescriptionof MajorWorkCategories	Quantity	EstimatedCost
<b>See Annual Statement</b>	<b>CA043-15</b>			<b>CA043-15</b>		
	<b>NOWORK</b>			<b>A:Re-SurfaceRoads</b>	1	35,000
				<b>B:SpeedBumps</b>	1	12,000
				<b>C:Playgrounds</b>	1	45,000
	<b>SubTotalofEstimatedCost</b>		0	<b>SubTotalofEstimatedCost</b>		92,000

Activitiesfor Year1	ActivitiesforYear2 FFYGrant:CA30PO43501-04 PHAFY:2004			ActivitiesforYear3 FFYGrant:CA30PO43501-05 PHAFY:2005			
	DevelopmentNumber/Name/GeneralDescriptionof MajorWorkCategories	Quantity	EstimatedCost	DevelopmentNumber/Name/GeneralDescriptionof MajorWorkCategories	Quantity	EstimatedCost	
See Annual Statement	<b>HA-WIDE</b>			<b>HA-WIDE</b>			
	<b>A:AutomaticWorkOrders/Computer</b>	1	5,824	<b>A:AutomaticWorkOrders/Computer</b>	1	1,200	
	<b>B:AutomaticInventorySystem</b>	1	3,000	<b>B:AutomaticInventorySystem</b>	1	900	
	<b>C:ComputerUpgradeHardware</b>	1	80,000	<b>C:DevelopmentCommunications</b>	1	15,000	
	<b>D:ComputerUpgradeSoftware</b>	1	50,000	<b>D:Dev.PreventativeMaintenance</b>	1	5,000	
	<b>E:StaffProf.DevelopmentMaint.</b>	1	5,000	<b>E:SecurityforHousing:Lighting</b>	1	58,000	
	<b>F:SecurityforHousing:Lighting</b>	5	10,500	<b>F:ResidentInitiatives/Needsetc.</b>	1	2,500	
	<b>G.ResidentInitiatives/Needs,etc.</b>	1	9,500	<b>G:ComputerUpgradeSoftware</b>	1	59,000	
	<b>H:OfficeFurniture</b>	1	125000	<b>H:ComputerUpgradeHardware</b>	1	95,000	
	SubTotalofEstimatedCost			288,824	SubTotalofEstimatedCost		

Activitiesfor Year1	ActivitiesforYear4 FFYGrant:CA30PO43501-06 PHAFY:2006			ActivitiesforYear5 FFYGrant:CA30PO43501-07 PHAFY:2007		
	DevelopmentNumber/Name/GeneralDescriptionof MajorWorkCategories	Quantity	EstimatedCost	DevelopmentNumber/Name/GeneralDescriptionof MajorWorkCategories	Quantity	EstimatedCost
See Annual Statement	<b>HA-WIDE</b>			<b>HA-WIDE</b>		
	<b>A:DevelopmentCommunications</b>	1	15,000	<b>A:DevelopmentCommunications</b>	1	15,000
	<b>B:Dev.PreventativeMaintenance</b>	1	14,522	<b>B:Dev.PreventativeMaintenance</b>	1	14,522
	<b>C:SecurityforHousing:Lighting</b>	3	1,500	<b>C:SecurityforHousing:Lighting</b>	4	15,000
	<b>D:ResidentInitiatives/Needs,etc.</b>	1	5,000	<b>D:ResidentInitiatives/Needs,etc.</b>	1	5,000
	<b>E:Upgrades</b>	1	50,000			
	<b>SubTotalofEstimatedCost</b>		<b>86,022</b>	<b>SubTotalofEstimatedCost</b>		<b>49,522</b>