

U.S.DepartmentofHousingandUrbanDevelopment
OfficeofPublicandIndianHousing

PHA Plans

5 Year Plan for Fiscal Years 200	3 - 200 8
Annual Plan for Fiscal Year 200	3

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

**PHA Plan
Agency Identification**

PHAName: EastHartfordHousingAuthority

PHANumber: CT013

PHAFiscalYearBeginning:(mm/yyyy) 10/2003

Public Access to Information

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

- Main administrative office of the PHA
 - **546 Burnside Avenue**
East Hartford, CT 06108
860.290.8301
- 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
 - **546 Burnside Avenue**
East Hartford, CT 06108
860.290.8301
- 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
 - **546 Burnside Avenue**
East Hartford, CT 06108
860.290.8301
- PHA development management offices
- Other (list below)

5-YEAR PLAN
PHAF ISCAL YEARS 2003 -200 8
[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 East Hartford Housing Authority is to serve the citizen of East Hartford by:

- **Providing affordable housing opportunities in a safe environment.**
- **Revitalizing and maintaining neighborhoods and a strong urban core.**
- **Forming effective partnerships to maximize social and economic opportunities.**

The missions shall be accomplished by a fiscally responsible, creative organization committed to excellence in public service.

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 ENCOURAGED 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 affordable housing
- Objectives:
- Apply for additional rental vouchers:
 - Reduce public housing vacancies:

- Leverage private or other public funds to create additional housing opportunities:
- Acquire or build units or developments
- Other (list below)

PHA Goal: Improve the quality of assisted housing

Objectives:

- Improve public housing management: (PHAS score) 85
- Improve voucher management: (SEMAP score) 83
- Increase customer satisfaction:
- Concentrate on efforts to improve specific management functions: (list; e.g., public housing finance; voucher unit inspections)
- Renovate or modernize public housing units:
- Demolish or dispose of obsolete public housing:
- Provide replacement public housing:
- Provide replacement vouchers:
- Other: (list below)

Create new housing opportunities for frail elderly

PHA Goal: Increase assisted housing choices

Objectives:

- Provide voucher mobility counseling:
- Conduct outreach efforts to potential voucher landlords
- Increase voucher payment standards
- Implement voucher homeownership program:
- Implement public housing or other home ownership 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:
- Designated developments or buildings for particular resident groups (elderly, persons with disabilities)
- Other: (list below)

1) Increase Resident Associations and Block Watch Programs

**2) Promote afterschoolprogramsforchildrenand Continued
Ed ucation foradults providedfundingisavailable.**

**HUDStrategicGoal:Promoteself -sufficiencyandassetdevelopmentoffamilies
andindividuals**

PHAGoal:Promoteself -sufficiencyandassetdevelopmentofassisted
households

Objectives:

- Increasethenumberandpercentageofemployedpersonsinassisted
families:
- Provideorattractsupportiveservicestoimproveassistancerecipients'
employability:
- Provideorattractsupportiveservices toincreaseindependenceforthe
elderlyorfamilieswithdisabilities.
- Other:(listbelow)
 - **Provideresidenttraining**

HUDStrategicGoal:EnsureEqualOpportunityinHousingforallAmericans

PHAGoal:Ensureequal opportunityandaffirmativelyfurtherfairhousing

Objectives:

- Undertakeaffirmativemeasurestoensureaccesstoassistedhousing
regardlessfrace,color,religionnationalorigin,sex,familialstatus,and
disability:
- Undertakeaffirmativemeasurestoprovideasuitablelivingenvironment
forfamilieslivinginassistedhousing,regardlessfrace,color,religion
nationalorigin,sex,familialstatus,anddisability:
- Undertakeaffirmativemeasures toensureaccessiblehousingtopersons
withallvarietiesofdisabilitiesregardlessfunitsizerequired:
- Other:(listbelow)

OtherPHAGoalsandObjectives:(listbelow)

- **ContinuetorecognizeresidentsandparticipantsastheAuthor ity'sultimate
customers.**
- **Developproblem solvingpartnershipswiththeprivatesector,HUD,State
andLocalGovernmentsandthecommunityatlarge.**
- **Improvemanagementandservicedeliveryeffortsthroughprudentasset
management,riskmanagementandimple mentationbywelltrainedand
resultsorientedstaff.**
- **Implementresidentinitiativeprogramsthatofferopportunitiesuchasskill
andeducationaltraining,thepossibilityofhomeownershipandsubstance
abuseprograms.**
- **DevelopmentofaSection8Homeown ershipPrograminaccordancewith**

24CFRPart982.

- **Aggressively pursue funding sources in order to further promote self - sufficiency among residents, provide a greater sense of safety and security, and continue to improve neighborhood appearance through “ curb-appeal” efforts.**
- **Provide annual training in fair housing requirements.**

**AnnualPHAPlan
PHAFiscalYear200 3
[24CFRPart903.7]**

i. AnnualPlanType:

SelectwhichtypeofAnnualPlanthePHAwillsubmit.

StandardPlan

StreamlinePlan:

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

TroubledAgencyPlan

ii. ExecutiveSummaryoftheAnnualPHAPlan

[24CFRPart903. 79(r)]

ProvideabriefoverviewoftheinformationintheAnnualPlan,includinghighlights of majorinitiativesanddiscretionarypolicies thePHAhasincludedintheAnnualPlan.

TheEastHartfordHousingAuthorityhaspreparedthisAgencyPlanin compliancewithSection511oftheQualityHousingandWorkResponsibilityAct of1998andtheensuingHUDrequirements.

Wehaveadoptedthefollowingmissionstatementtoguidetheactivitiesofthe EastHartfordHousingAuthority.

ThemissionoftheEast HartfordHousingAuthorityistoattempttorelievethe shortageofsafe,decentandaffordablehousingavailabletolowandmoderate incomepersons,toassurefiscalintegrityinallprogramsitadministersandto carryoutthepowersoftheAuthorityenumeratedinSection8 -44ofthe ConnecticutGeneralStatutes,andanyotherpowersgrantedbyStateand/or FederalLaw.

Wehavealsoadoptedthefollowinggoalsandobjectivesforthenextfiveyears.

- 1) Recognizetheresidentsasitsultimatecustomers.**
- 2) Developproblem solvingpartnershipswiththeprivatesector, HUD,stateandlocalgovernmentsandthecommunity.**
- 3) Improvemanagementandservicedeliveryeffortsthroughasset management,riskassessmentandimplementationbytrained, diagnosticandresult -orientedstaff.**

- 4) **Implement resident initiative programs that offer opportunities such as skill and educational training, the possibility of home ownership and substance abuse programs.**
- 5) **Research and develop a Section 8 Homeownership program in accordance with 24 CFR Part 982.**

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

The plans, statements, budget summary, policies, etc. set forth in the Annual Plan all lead toward the accomplishment of our goals and objectives. Taken as a whole, they outline a comprehensive approach toward our goals and objectives and are consistent with the Consolidated Plan.

To summarize, the East Hartford Housing Authority will continue to develop and implement those strategies necessary in support of its mission, continue to maintain overall fiscal integrity and compliance with all Federal, State and Local regulations and remain on course to improve the condition of affordable housing in the Town of East Hartford.

iii. Annual Plan Table of Contents

[24CFR Part 903.79(r)]

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

Table of Contents

	<u>Page#</u>
Annual Plan	
i. Executive Summary	
ii. Table of Contents	
1. Housing Needs	8
2. Financial Resources	14
3. Policies on Eligibility, Selection and Admissions	16
4. Rent Determination Policies	25
5. Operations and Management Policies	30
6. Grievance Procedures	31
7. Capital Improvement Needs	32
8. Demolition and Disposition	34
9. Designation of Housing	35
10. Conversions of Public Housing	37
11. Homeownership	38
12. Community Service Programs	40
13. Crime and Safety	44
14. Pets (Inactive for January 1 PHAs)	46
15. Civil Rights Certifications (included with PHA Plan Certifications)	50
16. Audit	51
17. Asset Management	51
18. Other Information	52

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 Deconcentration

- The Admissions Policy for the East Hartford Housing Authority does not impose specific quotas for the Authority's one (1) family development. Therefore, the Authority will not use quotas in its admissions, but will continue to utilize appropriate affirmative marketing practices, specifically, the use of certain worker preferences, in order to further maintain deconcentration and income mixing goals.*

- 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)
- Other (List below, providing each attachment name)

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 Certifications of Compliance with the PHA Plans and Related Regulations	5 Year and Annual Plans
X	State/Local Government Certification of Consistency with the Consolidated Plan	5 Year and Annual Plans
X	Fair Housing Documentation: Records reflecting that the PHA has examined its programs or proposed programs, identified any impediments to fair housing choice in those programs, addressed or is addressing those impediments in a reasonable fashion in view of the resources available, and worked or is working with local 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 includes the Analysis of Impediments to Fair Housing Choice (AI)) and any additional backup data to support statement of housing needs in the jurisdiction	Annual Plan: Housing Needs
X	Most recent board - approved operating budget for the public housing program	Annual Plan: Financial Resources;

List of Supporting Documents Available for Review		
Applicable & On Display	Supporting Document	Applicable Plan Component
X	Public Housing Admissions and (Continued) Occupancy Policy (A COP), which includes the Tenant Selection and Assignment Plan [TSAP]	Annual Plan: Eligibility, Selection, and Admissions Policies
X	Section 8 Administrative Plan	Annual Plan: Eligibility, Selection, and Admissions Policies
	Public Housing Deconcentration and Income Mixing Documentation: 1. PHA board certifications of compliance with deconcentration requirements (section 16(a) of the US Housing Act of 1937, as implemented in the 2/18/99 <i>Quality Housing and Work Responsibility Act Initial Guidance; Notice</i> and any further HUD guidance) and 2. Documentation of the required deconcentration and income mixing analysis	Annual Plan: Eligibility, Selection, and Admissions Policies
X	Public housing rent determination policies, including the methodology for setting public housing flat rents <input checked="" type="checkbox"/> check here if included in the public housing ACOP Policy	Annual Plan: Rent Determination
X	Schedule of flat rents offered at each public housing development <input checked="" type="checkbox"/> check here if included in the public housing ACOP 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	Annual Plan: Grievance Procedures

List of Supporting Documents Available for Review		
Applicable & On Display	Supporting Document	Applicable Plan Component
	housing ACOP Policy	
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 include 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 homeownership 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
N/A	FSS Action Plan/s for public housing and/or Section 8	Annual Plan: Community Service &

List of Supporting Documents Available for Review		
Applicable & On Display	Supporting Document	Applicable Plan Component
		Self-Sufficiency
X	Most recent self-sufficiency (ED/SS, TOP or ROSS or other residents services grant) grant program reports	Annual Plan: Community Service & Self-Sufficiency
X	The most recent Public Housing Drug Elimination Program (PHDEP) semi-annual performance report for any open grant and most recently submitted PHDEP application (PHDEP Plan)	Annual Plan: Safety and Crime Prevention
X	The most recent fiscal year audit of the PHA conducted under section 5(h)(2) of the U.S. Housing Act of 1937 (42 U.S.C. 1437c(h)), the 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
X	The most recently submitted Consolidated Plan for the Town of East Hartford	Consolidated Plan

1.StatementofHousingNeeds

[24CFRPart903.79(a)]

A.HousingNeedsofFamiliesintheJurisdiction/sServedbythePHA

BasedupontheinformationcontainedintheConsolidatedPlan/sapplicabletothe jurisdiction,and/orotherdataavailab letothePHA,provideastatementofthehousing needsinthejurisdictionbycompletingthefollowingtable.Inthe“Overall”Needs column,providetheestimatednumberofrenterfamiliesthathavehousingneeds.For theremainingcharacteristics,ra tetheimpactofthatfactoronthehousingneedsfor eachfamilytype,from1to5,with1being“noimpact”and5being“severeimpact.” UseN/AtoindicatehatnoinformationisavailableuponwhichthePHAcanmake thisassessment.

HousingNeedsof FamiliesintheJurisdiction byFamilyType							
FamilyType	Overall	Afford-ability	Supply	Quality	Access-ibility	Size	Loca-tion
Income<=30% ofAMI	1055	N/A	N/A	N/A	N/A	N/A	N/A
Income>30%but <=50%ofAMI	852	N/A	N/A	N/A	N/A	N/A	N/A
Income>50%but <80%ofAMI	722	N/A	N/A	N/A	N/A	N/A	N/A
Elderly	747	N/A	N/A	N/A	N/A	N/A	N/A
Familieswith Disabilities	N/A	N/A	N/A	N/A	N/A	N/A	N/A
WHITE	2287	N/A	N/A	N/A	N/A	N/A	N/A
BLACK	184	N/A	N/A	N/A	N/A	N/A	N/A
HISPANIC	105	N/A	N/A	N/A	N/A	N/A	N/A
ALLOTHERS	52	N/A	N/A	N/A	N/A	N/A	N/A

WhatsourcesofinformationdidthePHAusetoconductthisanalysis?(Checkallthat apply;allmaterialsmustbemadeavailableforpublicinspection.)

- ConsolidatedPlanoftheJurisdiction/s
Indicateyear:
- U.S.Censusdata:theComprehensiveHousingAffordabilityStrategy (“CHAS”)dataset
- AmericanHousingSurveydata
Indicateyear:
- Otherhousingmarketstudy
Indicateyear:
- Othersources:(listandindicateyearofinformation)

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 - wide waiting 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 checked="" type="checkbox"/> Section 8 tenant based assistance			
<input 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:			
	# of families	% of total families	Annual Turnover
Waiting list total	146		
Extremely low income <= 30% AMI	114	78%	
Very low income (> 30% but <= 50% AMI)	32	22%	
Low income (> 50% but < 80% AMI)	0	0	
Families with children	124	85%	
Elderly families	2	1%	
Families with Disabilities	20	14%	
Minority Code 1	76	51%	
Minority Code 2	68	47%	
Minority Code 3	1	1%	
Minority Code 4	1	1%	
Characteristics by Bedroom Size (Public Housing Only)			
0BR			
1BR	26	18%	

Housing Needs of Families on the Waiting List			
2BR	77	53%	
3BR	38	26%	
4BR	5	3%	
5BR			
Is the waiting list closed (select one)? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes			
If yes:			
How long has it been closed (# of months)? 9 months			
Does the PHA expect to open the list in the PHA Plan year? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
Does the PHA permit specific categories of families onto the waiting list, even if generally closed? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes			

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:			
	# of families	% of total families	Annual Turnover
Waiting list total	686		
Extremely low income <= 30% AMI	568	83%	
Very low income (> 30% but <= 50% AMI)	103	15%	
Low income (> 50% but < 80% AMI)	15	2%	
Families with children	452	66%	
Elderly families	75	11%	
Families with Disabilities	159	23%	
Minority Code 1	391	57%	
Minority Code 2	282	41%	
Minority Code 3	0	0%	
Minority Code 4	13	2%	

Housing Needs of Families on the Waiting List			
Characteristics by Bedroom Size (Public Housing Only)			
0BR	7	1%	
1BR	308	45%	
2BR	192	28%	
3BR	158	23%	
4BR	21	3%	
5BR			
Is the waiting list closed (select one)? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes			
If yes:			
How long has it been closed (# of months)? 4 months			
Does the PHA expect to open the list in the PHA Plan year? <input checked="" 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 checked="" type="checkbox"/> Yes			

C. Strategy for Addressing Needs

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

(1) Strategies

Need: Shortage of affordable housing for all eligible populations

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

Select all that apply

- Employ effective maintenance and management policies to minimize the number of public housing units off -line
- Reduce turnover time for vacated public housing units
- Reduce time to renovate public housing units
- Seek replacement of public housing units lost to the inventory through mixed financed development
- Seek replacement of public housing units lost to the inventory through section 8 replacement housing resources
- Maintain or increase section 8 lease -up rates 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)
 - *Coordinate more broadly with the local CDBG Office for the purpose of securing HOME Funds or other available resources.*

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

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

Select all that apply

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

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

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

Select all that apply

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

Need: Specific Family Types: The Elderly

Strategy 1: Target available assistance to the elderly:

Select all that apply

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

Need: Specific Family Types: Families with Disabilities

Strategy 1: Target available assistance to Families with Disabilities:

Select all that apply

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

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

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

Select if applicable

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

Strategy 2: Conduct activities to affirmatively further fair housing

Select all that apply

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

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

[24 CFR 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 supportive services, Section 8 tenant-based assistance, Section 8 supportive services or other.

Financial Resources: Planned Sources and Uses		
Sources	Planned \$	Planned Uses
1. Federal Grants (FY 2000 grants)		
a) Public Housing Operating Fund	\$1,568,753	Annual Operations
b) Public Housing Capital Fund	\$862,244	Capital Expenditures
c) HOPEVI Revitalization		
d) HOPEVI Demolition		
e) Annual Contributions for Section 8 Tenant -Based Assistance	\$1,980,248	Annual Operations
f) Public Housing Drug Elimination Program (including any Technical Assistance funds)		
g) Resident Opportunity and Self - Sufficiency Grants	\$45,000	Elderly Services
h) Community Development Block Grant		
i) HOME		
Other Federal Grants (list below)		
2. Prior Year Federal Grants (unobligated funds only) (list below)		
3. Public Housing Dwelling Rental Income	\$1,430,455	
4. Other income (list below)	\$54,372	
4. Non -federal sources (list below) (INTEREST)	\$20,897	
Total resources		

3.PHAPoliciesGoverningEligibility,Selection,andAdmissions

[24CFRPart903.79(c)]

A.PublicHousing

Exemptions:PHAsthatdonotadministerpublichousingarenotrequiredtocomplete subcomponent3A.

(1)Eligibility

a.WhendoessthePHAverifyeligibilityforadmissiontopublichousing?(selectall thatapply)

- Whenfamiliesarewithinacertainnumberofbeingofferedaunit:(state number)
- Whenfamiliesarewithinacertaintimeofbeingofferedaunit:(30DAYS)
- Other:(describe)

b.Whichnon-income(screening)factorsdoesthePHAusetoestablisheligibilityfor admissiontopublichousing(selectallthatapply)?

- CriminalorDrug-relatedactivity
- Rentalhistory
- Housekeeping
- Other(describe)
 - ***ResearchofpastfilestodetermineifapplicantisformerProgram Participant***

c. Yes No:DoesthePHArequestcriminalrecordsfromlocallaw enforcementagenciesforscreeningpurposes?

d. Yes No:DoesthePHArequestcriminalrecordsfromState law enforcementagenciesforscreeningpurposes?

e. Yes No:DoesthePHAaccessFBIcriminalrecordsfromtheFBIfor screeningpurposes?(eitherdirectlyorthroughanNCIC - authorizedsource)

(2)WaitingListOrganization

a.WhichmethodsdoesthePHAplantousetoorganizeit'spublichousingwaitinglist (selectallthatapply)

- Community-widelist
- Sub-jurisdictionallists
- Site-basedwaitinglists
- Other(describe)

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

PHA main administrative office

- **546 Burnside Avenue**
East Hartford, CT 06108
860.290.8301

PHA development site management office

Other (list below)

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 approved site-based waiting list plan)?
If yes, how many lists?

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

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

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

(3) Assignment

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

- One
- Two
- Three or More

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

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

(4) Admissions Preferences

a. Incometargeting:

- Yes No: DoesthePHAplantoexceedthefederaltargetingrequirements by targetingmorethan40%ofallnewadmissionstopublichousing tofamiliesatorbelow30%ofmedianareaincome?

b. Transferpolicies:

Inwhatcircumstanceswilltransferstakeprecedenceovernewadmissions?(list below)

- Emergencies
- Overhoused
- Underhoused
- Medicaljustification
- AdministrativereasonsdeterminedbythePHA(e.g.,topermitmodernization work)
- Residentchoice:(statecircums tancesbelow)
- Other:(listbelow)

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)

- Households 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 the 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:

- 0 Involuntary Displacement (Disaster, Government Action, Action of Housing Owner, Inaccessibility, Property Disposition)
- 0 Victims of domestic violence
- 0 Substandard housing
- 0 Homelessness
- 0 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 the jurisdiction
- Those enrolled currently in educational, training, or upward mobility programs
- Household that contribute to meeting income goals (broad range of incomes)
- Household that contribute to meeting income requirements (targeting)
- Those previously enrolled in educational, training, or upward mobility programs
- Victims of reprisals or hate crimes
- Other preference(s) (list below)

4. Relationship of preferences to income targeting requirements:

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

(5) Occupancy

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

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

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 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: PHA 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)

- ***Upon written request from prospective landlords, the EHH shall provide such landlord the participation family's current address and the name and address of the family's current Landlord, and any prior landlord's address, if known.***

(2) Waiting List Organization

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

None

Federal public housing

Federal moderate rehabilitation

Federal project -based certificate program

Other federal or local program (list below)

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

PHA main administrative office

Other (list below)

(3) Search Time

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

If yes, state circumstances below:

- ***Extenuating circumstances such as hospitalization or family emergency, which effects the family's ability to research and find a unit, if the family can provide evidence of a consistent effort to locate a unit, and request support***

services from the Housing Authority throughout the 60 -Day period. In addition, the Authority will allow for a "Suspension of Time" in the last 60 Day term, provided the family has submitted a "Request for Tenancy Approval" and the unit has passed HQS Inspection.

- *As a reasonable accommodation, extension given beyond the 1 20-day limitation if family documents need for an extension to make the program accessible for a person with a disability.*

(4) Admissions Preferences

a. Income targeting

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

b. Preferences

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

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

Former Federal preferences

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

Other preferences (select all that apply)

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

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

Date and Time

Former Federal preferences

- 0 Involuntary Displacement (Disaster, Government Action, Action of Housing Owner, Inaccessibility, Property Disposition)
- 0 Victims of domestic violence
- 0 Substandard housing
- 0 Homelessness
- 0 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
- Households that contribute to meeting income goals (broad range of incomes)
- Household that contribute to meeting income requirements (targeting)
- Those previously enrolled in educational, training, or upward mobility programs
- Victims of reprisals or hate crimes
- Other preference(s) (list below)

4. Among applicants on the waiting list with 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 plan to employ preferences for “residents who live and/or work in the jurisdiction” (select one)

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

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

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

(5) Special Purpose Section 8 Assistance Programs

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

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

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

- Through published notices
- Other (list below)

4. PHA Rent Determination Policies

[24CFR Part 903.79(d)]

A. Public Housing

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

(1) Income Based Rent Policies

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

a. Use of discretionary policies: (select one)

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

---or---

- ThePHAemploysdiscretionarypoliciesfordeterminingincomebasedrent(If selected,continuetoquestionb.)

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 :

- **Hardship in paying the Minimum Rent**

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)
- 95th percentile rents
- 75 percent of operating costs
- 100 percent of operating costs for general occupancy (family) developments
- Operating costs plus debt service
- The "rental value" of the unit
- Other (list below)

f. Rent redetermination:

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)

- ***Loss or addition in overall Family Composition***

- 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)

- ***The East Hartford Housing Authority has set a Flat Rent for each Public Housing unit. In considering unit size and type as well as unit condition, amenities, services and location, along with applicable utility allowances, administrative costs and operating expenses, the East Hartford Housing Authority has determined the Flat Rent to be 100% of the Fair Market Rent as published by the Department of Housing and Urban Development for the Metropolitan Statistical Area in which the unit is located. The amount of the Flat Rent will be adjusted annually and adjustments applied accordingly. All families opting for the Flat Rent will be provided with a thirty (30) day notice of any change to the Flat Rent. The East Hartford Housing Authority will post the Flat Rent, in dollar amounts, at the Administrative Office.***

B. Section 8 Tenant -Based Assistance

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

(1) Payment Standards

Describe the voucher payment standards and policies.

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

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

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

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

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

- FMRs are not adequate to ensure success among assisted families in the PHA's segment of the FMR area
- Reflects market or submarket
- To increase housing options for families
- Other (list below)
 - ***To assist with the 40% cap for Families***

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

- Annually
- Other (list below)

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

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

(2) 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)

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	591	N/A
Section 8 Vouchers	312	N/A
Section 8 Certificates	N/A	N/A
Section 8 Mod Rehab	N/A	N/A
Special Purpose Section 8 Certificates/Vouchers (list individually)	N/A	N/A
Public Housing Drug Elimination Program (PHDEP)	N/A	N/A
Other Federal Programs (list individually)	N/A	N/A
ROSS/RSC	491	N/A
CFP	591	N/A

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)

- *East Hartford Housing Authority's Policies & Procedures*
- *East Hartford Housing Authority's Maintenance Policy*

(2) Section 8 Management: (list below)

- *East Hartford Housing Authority Policies & Procedures*

6. PHA Grievance Procedures

[24 CFR 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.

A. Public Housing

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

If yes, list additions to federal requirements below:

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

- PHA main administrative office
 - *546 Burnside Avenue*
East Hartford, CT 06108
860.290.8301
- 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 24 CFR 982?

If yes, list additions to federal requirements below:

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

PHA main administrative office

- **546 Burnside Avenue**
East Hartford, CT 06108
860.290.8301

Other (list below)

7. Capital Improvement Needs

[24 CFR 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 as Attachment (state name)

-or-

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

(2) Optional 5 -Year Action Plan

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

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

b. If yes to question a, select one:

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

-or-

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

B. 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:

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

8. Demolition and Disposition

[24CFR Part 903.79(h)]

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

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

2. Activity Description

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

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

- 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.

Designation of Public Housing Activity Description	
1a. Development name: Shea Gardens & Heritage Gardens	
1b. Development (project) number: 13 -2 & 13 -6A	
2. Designation type:	
Occupancy by only the elderly	<input type="checkbox"/>
Occupancy by families with disabilities	<input type="checkbox"/>
Occupancy by only elderly families and families with disabilities	<input checked="" 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>(01/19/95)</u>	
5. If approved, will this designation constitute a (select one)	
<input type="checkbox"/> New Designation Plan	
<input checked="" type="checkbox"/> Revision of a previously -approved Designation Plan?	
6. Number of units affected: 96	
7. Coverage of action (select one)	
<input type="checkbox"/> Part of the development	
<input checked="" type="checkbox"/> Total development	

Designation of Public Housing Activity Description	
1a. Development name: Rochambeau, Meadow Hill, Elms Village, The Highlands & Miller Gardens	
1b. Development (project) number: 13 -3, 13- 4, 13- 5, 13- 6 & 13 -7	
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>(02/01/95)</u>	
5. If approved, will this designation constitute a (select one)	
<input type="checkbox"/> New Designation Plan	
<input checked="" type="checkbox"/> Revision of a previously -approved Designation Plan?	
6. Number of units affected: 395	
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 as streamlined submission. PHAs completing streamlined submissions may skip to component 11.)

2. Activity Description

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

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

Units addressed in a pending or approved demolition application (date submitted or approved: _____)

Units addressed in a pending or approved HOPE VI demolition application (date submitted or approved: _____)

Units addressed in a pending or approved HOPE VI Revitalization Plan (date submitted or approved: _____)

Requirements no longer applicable: vacancy rates are _____ less than 10 percent

Requirements no longer applicable: site now has less than 300 units

Other: (describe below)

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

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

11. Homeownership Programs Administered by the PHA
 [24CFR Part 903.79(k)]

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

1. Yes No: Does the PHA administer any homeownership programs administered by the PHA under an approved section 5(h) homeownership program (42 U.S.C. 1437c(h)), or an approved HOPE I program (42 U.S.C. 1437aaa) or has the PHA applied or plan to apply to administer any homeownership programs under section 5(h), the HOPE I program, or section 32 of the U.S. Housing Act of 1937 (42 U.S.C. 1437z -4). (If "No", skip to component 11B; if "yes", complete one activity description for each applicable program/plan, unless eligible to complete a streamlined submission due to **small PHA** or **high performing PHA** status. PHAs completing streamlined submissions may skip to component 11B.)

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

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

B. Section 8 Tenant Based Assistance

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

2. Program Description:

a. Size of Program

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

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

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

b.PHA -establishedeligibilitycriteria

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(1)]

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

A. PHA Coordination with the Welfare (TANF) Agency

1. Cooperative agreements:

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

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

- ***The State of Connecticut Department of Social Services (DSS) has not yet developed criteria for a mutually -acceptable Cooperative Agreement.***

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

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

B. Services and programs offered to residents and participants

(1) General

a. Self-Sufficiency Policies

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

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

b. Economic and Social self-sufficiency programs

Yes No: Does the PHA coordinate, promote or provide any 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/PHAMain office/other provider name)	Eligibility (public housing or section 8 participants or both)
ROSS/RSC Grant	550 ±	Elderly and/or disabled	PHAMain Office & development office	Public Housing, Elderly and/or Disabled

(2) Family Self Sufficiency program/s

a. Participation Description

Family Self Sufficiency (FSS) Participation		
Program	Required Number of Participants (start of FY 2000 Estimate)	Actual Number of Participants (As of: DD/MM/YY)
Public Housing		
Section 8		

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 plans to take to achieve at least the minimum program size?

If no, list steps the PHA will take below:

- *The East Hartford Housing Authority is not an FSS Participant*

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

- In accordance with the 2002 HUD Appropriations Act, the East Hartford Housing Authority SUSPENDED enforcement of the Community Service Requirement by Resolution of the Board of Commissioners. The Requirement RE-INSTATED and made effective commencing at the beginning of FY 2003. Following is brief overview -view of the EHHA's Community Service Requirement.

The General Requirements of this Community Service/Self-Sufficiency Programs areas follows:

- Each adult resident (18 years and older) of a public housing development shall contribute eight (8) hours per month of community service (not including political activity), or participate in an economic self-sufficiency program for 8 hours per month.

There are exemptions to the above as determined by the Public Housing Reform Act. These exemptions apply to all adults who are:

- 1) 62 years or older
- 2) Persons with vision impairment or other disability in accordance with accepted EHHA definitions of such, or is the primary caregiver of such person
- 3) Is engaged in employment and has reported same to the EHHA
- 4) Exempt from having to engage in work activity under the STATE TANF Rules consistent with part A of title IV of the Social Security Act {42 U.S.C 601 *et seq.*} or any other welfare program of the State of Connecticut, including State administered welfare-to-work programs or is a member of a family receiving assistance, benefits or services under a State program funded under part A of title IV of the Social Security Act {42 U.S.C 601 *et seq.*} or under any other welfare program of the State, including a welfare-to-work program, and has not been found to be in non-compliance with such program.

All individual claims for the above exemptions shall be verified by the EHHA prior to the final determination of such exemption and shall be monitored annually at recertification time all in accordance with the regulation.

13.PHASafetyandCrimePreventionMeasures

[24CFRPart903.79(m)]

ExemptionsfromComponent13: HighperformingandsmallPHAsnotparticipating inPHDEPandSection8OnlyPHAsmayskiptocomponent15.HighPerformingand smallPHAs thatareparticipatinginPHDEPandaresubmittingaPHDEPPlanwith thisPHAPlanmayskiptosub -componentD.

A.Needformeasurestoensurethesafetyofpublichousingresidents

1.Describetheneedformeasurestoensurethesafetyofpublichousingresidents

(selectallthatapply)

- Highincidenceofviolentand/or drug -relatedcrimeinsomeorall ofthePHA's developments
- Highincidenceofviolentand/or drug -relatedcrimeintheareassurroundingor adjacenttothePHA'sdevelopments
- Residentsfearfulfortheirsafetyand/orthesafetyoftheirchildren
- Observedlower -levelcrime,vandalismand/orgraffiti
- Peopleonwaitinglistunwillingtomoveintooneormoredevelopmentsdueto perceivedand/oractuallevelsofviolentand/or drug -relatedcrime
- Other(describellow)

2.WhatinformationordatadidthePHAusedtodeterminetheneedforPHAactions toimprovesafetyofresidents(selectallthatapply).

- Safetyandsecuritysurveyofresidents
- Analysisofcrimestatisticsovertimeforcrimescommitted“inandaround” publichousingauthority
- Analysisofcosttrendsovertimeforrepairofvandalismandremovalofgraffiti
- Residentreports
- PHAemployeereports
- Policereports
- Demonstrable,quantifiablesuccesswithpreviousorongoinganticrime/anti drugprograms
- Other(describellow)

3.Whichdevelopmentsaremostaffected?(listbelow)

- 1)HockanumPark(13 -1)
- 2)SheaGardens(13 -2)
- 3)ElmsVillage(13 -5)
- 4)MillerGardens(13 -7)
- 5)HeritageGardens(13 -6)

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)
 - *A Working Agreement with the East Hartford Police Department for the purpose of sharing information regarding specific incidents of crime or criminal activity in general.*
 - *Coordination with the East Hartford Branch of the Greater Hartford YMCA to provide an After -School Activities Program for these hool-aged youth living in Hockanum Park.*

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

- 1) Hockanum Park (13 -1)
- 2) Shea Gardens (13 -2)
- 3) Elms Village (13 -5)
- 4) Miller Gardens (13 -7)
- 5) Heritage Gardens (13 -6)

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)
 - *Since the elimination of the Public Housing Drug Elimination Program (PHDEP), coordination between the East Hartford Housing Authority and the East Hartford Police Department has been minimal and sporadic at best.*

- Formerly, and with the backing of PHDEP Funds, ALL of the above measures were well in place and inter -agency coordination was strong.*
2. Which developments are most affected? (list below)
- *All Developments*

D. Additional information as required by PHDEP/PHDEP Plan

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

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

Yes No: Has the PHA included the PHDEP Plan for FY2000 in this PHA Plan?

- *Not applicable at this time.*

Yes No: This PHDEP Plan is an Attachment. (Attachment Filename: _____)

- *Not applicable at this time.*

14. RESERVED FOR PET POLICY

[24 CFR Part 903.79(n)]

PET POLICY

PURPOSE:

The purpose of the policy is to allow individual residents and families to keep a pet, while at the same time, ensure that pet ownership does not interfere with the rights of all residents to enjoy a clean, peaceful, and safe surrounding(s).

The East Hartford Housing Authority will allow for pet ownership in developments with written pre-approval of the Housing Authority. Residents are responsible for any damage caused by their pets, including costs of fumigating, or cleaning their units. In exchange for this right, residents assume full responsibility and liability for the pet and agree to hold the East Hartford Housing Authority harmless from any claims caused by action or inaction of the pet.

EXCLUSIONS:

This policy does not apply to animals that are used to assist persons with disabilities. Assistive animals are allowed in all public housing facilities with written Doctor's verification and 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. However, an Application for Pet Permit

must be filled out and picture provided as the Application form contains pertinent information in case of an emergency. Assisted dog(s) must still be licensed, neutered, and have all necessary inoculations.

The East Hartford Housing Authority will meet Section 504 ADA requirements.

PETS IN EAST HARTFORD HOUSING AUTHORITY PROPERTIES

The East Hartford Housing Authority will allow for dogs, cats, birds, hamsters, gerbils, and fish in aquariums in all of its housing properties that have exterior, individual, private entryway to the unit. However, due to tenant density and lack of open space for designated area for animal waste and pet exercise, the following developments are EXCLUDED from having dog(s):

MEADOW HILL APARTMENTS	-13-4
HIGHLANDS APARTMENTS	-13-6
HERITAGE GARDENS	-13-6
RAYMOND MILLER GARDENS	-13-7

APPLICATION FOR PET PERMIT:

Residents must have the prior approval of the Housing Authority before moving a pet into their unit. Residents must request a Pet Permit form for Pet Ownership that must be fully completed before the Housing Authority will approve the request.

Residents shall provide written proof of the following before a pet will be permitted into the premises: (Specifically cats and dogs)

1. Current dog license
2. Current inoculation against rabies, distemper, parvovirus and other conditions prescribed by local ordinances. Proof of annual physical examination performed by a licensed veterinarian.
3. Evidence/verification that the cat or dog has been spayed or neutered.

TYPES AND NUMBER OF PETS:

The East Hartford Housing Authority will allow only domesticated dogs, cats, birds, hamster, gerbils, and fish in aquariums in units. All dogs and cats must be spayed/neutered.

No more than two (2) pets **are allowed in the unit.**

The Residents shall provide a written description of the pet and a color photo prior to moving in or obtaining the pet.

No animal may exceed thirty (30) pounds in adult weight.

Pit bulls or any other animal deemed to be potentially harmful to the health or safety of others will not be allowed regardless of weight requirement compliance.

Aquariums may not exceed thirty (30) gallons .

Liability insurance will be required on certain types/breeds of dogs. Regarding any animal that may pose as a safety concern to other residents and/or staff, the Housing Authority will contact the local authorities before allowing occupancy. Proof of liability insurance will be required prior to animal occupancy.

PET FEE:

A \$100 non-refundable pet fee per pet will be required upon entering a pet agreement for cats and dogs specifically. This does not include the regular security deposit.

Service or assistance animals will be exempt from the pet fee upon written verification from a doctor that such a pet is imperative to the resident's health and well-being.

FINANCIAL OBLIGATION OF RESIDENTS:

Residents shall pay for the costs of repairs for any and all damages caused by the pet or assistance animal to the building, grounds, flooring, trim, finish, tiles, carpeting, screens, and other appurtenances. If damage is in the nature of stains or chemical requiring the removal of stains and such damage cannot be restored to the original condition, residents shall pay the full cost and expense of replacing the item.

NUISANCE OR THREAT TO HEALTH OR SAFETY:

Pet owners should use every consideration to protect the safety and well-being of other tenants by keeping the animal under control, quiet, and healthy.

Repeated, substantiated complaints by neighbors or East Hartford Housing Authority 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.

The privilege of owning a pet may be revoked at any time subject to the Housing Authority's Grievance Procedure if the animal becomes destructive, a nuisance, or a safety/health hazard to the tenant or if the tenant fails to comply with the Housing Authority's Policy/Agreement governing pets.

RULES AND REGULATIONS:

1. Pets must be kept in the owner's apartment or on a leash at all times when outside (no outdoor cages/doghouses may be constructed). Owner must be able to control dogs on a leash at all times. The dogs/cats cannot be tied outside without constant supervision. Dogs must be housebroken/trained. No outside animals will be permitted.
2. 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.
3. The pet owner must feed, bathe and care for his/her pet in accordance with established anti-cruelty laws.
4. Pets shall not be allowed out of the apartment unless in the custody of an adult resident and on a leash. If the pet is a bird, it shall be caged at all times.
5. Pets will be allowed only in designated areas on the grounds of the developments.
6. Pets shall under no circumstances be permitted on the playgrounds, wading areas, recreational facilities, community rooms, building hallways, waiting room, or tied outside. Residents must not alter the patio or yard in any way to accommodate pet(s). (i.e. doghouses, fences, or other barriers).
7. Pet owners must clean up after their pets and are responsible for disposing of pet waste. Cat litter should be disposed of properly by putting the soiled litter in a bag and placing it in the dumpster or garbage can. Residents with dogs are encouraged to purchase a poop-scooper and to use it to remove animal waste immediately. Solid waste should be placed in a bag and put in the dumpster or garbage can.
8. Residents must take appropriate action to protect their pets from fleas and ticks.
9. All dogs and cats must wear identity collars bearing the resident's name, phone number and date of the latest rabies inoculation.
10. Pets cannot be bred or used for a commercial purpose.
11. A pet owner must physically control or confine his/her pet during the times when Housing Authority personnel, agents or the Housing Authority, or others must enter the pet owner's apartment to conduct business, provide services, enforce lease terms, etc.

12. Residents owning cats shall maintain waterproof litter boxes for cat waste. Refuse from litter boxes shall not accumulate or become unsightly or unsanitary. Litter shall be disposed of in an appropriate manner by putting the soiled litter in a bag and placing it in the dumpster or garbage can. **At no time shall litter be disposed of through plumbing fixtures or flushed down the toilet. Litter boxes cannot be stored in the bathtub/shower.**
13. Residents may not sit pets belonging to nonresidents, nor shall other pets visit the development.
14. Residents shall not feed strays. Feeding strays shall be considered having a pet without proper authorization.
15. If a pet causes harm to any person, the pet's owners shall be required to permanently remove the pet from the East Hartford Housing Authority property within twenty-four (24) hours of written notice from the Housing Authority. The pet owner may be subject to termination of his/her dwelling lease.
16. A pet owner who violates any other condition of this policy may be required to remove his/her pet from the development within ten (10) days of written notice from the East Hartford Housing Authority. The pet owner may also be subject to termination of his/her dwelling lease.

REMOVAL OF PETS:

In the event of illness, death of pet owner, or in case of emergency, which would prevent the pet owner from properly caring for the pet or any situation in which the animal may be left unattended for 24 hours or more, the East Hartford Housing Authority reserves the right to remove a pet to the proper authorities. The Housing Authority accepts no responsibility for pets so removed. The pet owner assumes all responsibility for all expenses incurred.

Management and Resident agree to utilize the Grievance Procedure described in the lease to resolve any dispute between the resident and management regarding a pet.

Any willful repeated violation of the Housing Authority pet rules may constitute the removal of the pet and/or eviction of resident.

15. Civil Rights Certifications

[24C FR Part 903.79(o)]

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

16.Fiscal Audit

[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.PHA Asset Management

[24CFRPart903.79(q)]

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

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

18. Other Information

[24CFR Part 903.79(r)]

A. Resident Advisory Board Recommendations

1. Yes No: Did the PHA receive any comments on the PHA Plan from the Resident Advisory Board/s?
2. If yes, the comments are: (if comments were received, the PHA **MUST** select one)
- Attached at Attachment (Filename)
- Provided below:

SHEAGARDENS

1. **Install Plumbing (there's plenty of room) for 2nd Washer in Community Room & get Contractor to provide 2nd Washing Machine.**
ANSWER: Will investigate .
2. **Security Camera w/secure VCR hook -up w/tape possibly in Maintenance Building adjoining Community Room which will cut down on theft, vandalism & (make washing machine contractor feel more secure) and show who is dumping garbage & cigarette butts on floor & burning holes in tables.**
ANSWER: Will look into cost may be prohibitive possible CFPI item.
3. **More Garbage Pails - at 25% more. (Add 1 for every 4 presently, at a minimum).**
ANSWER: Added dumpster at Holmes Street
4. **Parking - We need some type of stickers. We also need some type of VISITOR PARKING OR VISITOR TAGS (SIMILAR TO MOBILE DISABILITY PARKING TAGS that hang from rear -view mirror. I have a separate plan for added parking that I'll turn by Friday, April 11, 2003.**
ANSWER: Parking Policy will be adopted in near future.
5. **Post "No Trespassing" signs on buildings which empowers Police to stop & question anyone lurking around or behind our buildings.**
ANSWER: Will review current lease/p olicy
6. **Post (Stencil or Signs) "No Smoking" in Public Areas & ENFORCE it w/fines.**
ANSWER: Community Rooms & Hallways will be reviewed for stenciling.

7. **Post(StencilorSigns)“NoLittering”&ENFORCEit.Ifanarealooks likeadump,people treatitlikead ump.Justasmallpercentageof tenantsareactuallylittering.(AlargernumberCASUALLYlitter,which wouldSTOPif&whentheyknewthatTICKETSorCOMMUNITY SERVICE(Whichcouldbe monitoredbythe AssociationPresident ofthe areawherethelitt ering tookplace .SteveZaremba&Ipick -uplitter,but that’salosingbattle.
ANSWER: Trashisbeingpickeduponaregularbasis.**
8. **Drapes.(Somethinglight&see -through)forourCommunityRoom windows.Thiswillmakeitlookmorelikea roomt hana basementor barracks.
ANSWER: Willdo.**
9. **Flagw/hardwareforourCommunityAreaFlagPole.
ANSWER:Done**
10. **Safe,securebikestorage.Abouthalfadozenofourtenantshavebicycles anditisaseriousproblemforthemtocarrybicycles in&outoftheir apartments.Bicyclesprovidecheap,viabletransportationandempowers ourtenants.
ANSWER: Willresearchneed&cost.**

ROCHAMBEAU

1. **Betterstreet lightingwithinthecomplex.Weaveanumberofstreet lampsthateitherflicker, ordonotlightatall.Asareult,areasofthe complexaredarkanditisunsafe.Wealsoneedbrighterbulbsinthe streetlamps.Thiswasreportedtomaintenanceawhileback.
ANSWER:Lights thatneedrepairswillbeidentifiedandcalledin.**
2. **Sidewalksneedtoberedone.
ANSWER: Sidewalksarei nCFPfor2003;worktobedoneinsummer 2004.**
3. **Weneedtemporariespeedbumps.
ANSWER:Willlookintothis.**
4. **Aspeedlimitsign.
ANSWER: Willlookintothis.**
5. **Asignthatsays“NOTH ROUGHTRAFFIC.”
ANSWER: Willlookintothis.**
6. **A“NOSMOKING”signfortheCommunityRoom.
ANSWER:Willbedone.**

7. **Attach the Apartment Directory to the flagpoles so that it can be viewed by anyone entering the complex. Unless one knows where it is, people will knock on resident's door to find an apartment.**
ANSWER: Will take under consideration.
8. **Two dumpsters placed at front corners of the complex. One trash can just will not do it.**
ANSWER: Will review on site.
9. **More clothes washing machines and dryers.**
ANSWER: Will investigate.
10. **Somewindows are very drafty and need to be looked at.**
ANSWER: Call into maintenance department for repairs .
11. **A light over the Rochambeau sign on Silver Lane. We had one there until the new bus shelter was put in.**
ANSWER: Light removed, wire cut by Town. Will contact Town for repair.

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

- Considered comments, but determined that no changes to the PHA Plan were necessary.
- The PHA changed portions of the PHA Plan in response to comments
List changes below:
- Other: (list below)

All comments are of a maintenance nature and will be reviewed for completion with a combination of operating and capital fund dollars.

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.)
 - ***The East Hartford Housing Authority does NOT meet the exemption provided above. However, the Authority DOES adhere to Connecticut General Statutes, specifically Sec. 8-41 which states in part: "At least one of such commissioners of an authority have five members... shall be a tenant or tenants who live in housing owned or managed by such authority..."***

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

3. Description of Resident Election Process

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

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

b. Eligible candidates: (select one)

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

c. Eligible voters: (select all that apply)

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

C. Statement of Consistency with the Consolidated Plan

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

1. Consolidated Plan jurisdiction: (provide name here)

- ***The Town of East Hartford, CT***

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)

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

D. Other Information Required by HUD

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

Attachments

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

**PHA Plan
Table Library**

**Component 7
Capital Fund Program Annual Statement
Parts I, II, and III**

**Annual Statement
Capital Fund Program (CFP) Part I: Summary**

Capital Fund Grant Number FFY of Grant Approval: (MM/YYYY)

Original Annual Statement

Line No.	Summary by Development Account	Total Estimated Cost
1	Total Non - CGP Funds	
2	1406 Operations	
3	1408 Management Improvements	
4	1410 Administration	
5	1411 Audit	
6	1415 Liquidated Damages	
7	1430 Fees and Costs	
8	1440 Site Acquisition	
9	1450 Site Improvement	
10	1460 Dwelling Structures	
11	1465.1 Dwelling Equipment - Nonexpendable	
12	1470 Nondwelling Structures	
13	1475 Nondwelling Equipment	
14	1485 Demolition	
15	1490 Replacement Reserve	
16	1492 Moving to Work Demonstration	
17	1495.1 Relocation Costs	
18	1498 Mod Used for Development	
19	1502 Contingency	
20	Amount of Annual Grant (Sum of lines 2 - 19)	
21	Amount of line 20 Related to LBP Activities	
22	Amount of line 20 Related to Section 504 Compliance	
23	Amount of line 20 Related to Security	
24	Amount of line 20 Related to Energy Conservation Measures	

Annual Statement
Capital Fund Program (CFP) Part II: Supporting Table

Development Number/Name HA-Wide Activities	General Description of Major Work Categories	Development Account Number	Total Estimated Cost

AnnualStatement
CapitalFundProgram(CFP)PartIII:ImplementationSchedule

Development Number/Name HA-WideActivities	AllFundsOb ligated (QuarterEndingDate)	AllFundsExpended (QuarterEndingDate)

Optional Table for 5 -Year Action Plan for Capital Fund (Component 7)

Complete one table for each development in which work is planned in the next 5 PHA fiscal years. Complete a table for any PHA-wide physical or management improvements planned in the next 5 PHA fiscal year. Copy this table as many times as necessary. Note: PHAs need not include information from Year One of the 5 -Year cycle, because this information is included in the Capital Fund Program Annual Statement.

Optional 5 -Year Action Plan Tables				
Development Number	Development Name (or indicate PHA wide)	Number Vacant Units	% Vacancies in Development	
Description of Needed Physical Improvements or Management Improvements			Estimated Cost	Planned Start Date (HA Fiscal Year)
Totalestimatedcostovernext5years				

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

PHAName: East Hartford Housing Authority	Grant Type and Number Capital Fund Program Grant No: CT26P01350100 Replacement Housing Factor Grant No:	Federal FY of Grant: 2000
--	---	------------------------------

Original Annual Statement Reserve for Disasters/Emergencies Revised Annual Statement (revision no: 1)
 Performance and Evaluation Report for Period Ending: Final Performance and Evaluation Report

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total Non -CFP Funds				
2	1406 Operations	20,174	48,192	48,192	48,192
3	1408 Management Improvements Soft Costs				
	Management Improvements Hard Costs	90,237	90,237	90,237	90,237
4	1410 Administration	90,237	90,237	90,237	90,237
5	1411 Audit	300	300	300	300
6	1415 Liquidated Damages				
7	1430 Fees and Costs	56,730	101,307	101,307	88,393
8	1440 Site Acquisition				
9	1450 Site Improvement	80,000	0	0	0
10	1460 Dwelling Structures	300,000	519,397	519,397	484,397
11	1465.1 Dwelling Equipment — Nonexpendable				
12	1470 Nondwelling Structures	250,000	0	0	0
13	1475 Nondwelling Equipment				
14	1485 Demolition	20,000	52,701	52,701	47,432
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1499 Development Activities				
19	1502 Contingency	24,125	14,840	0	0
	Amount of Annual Grant: (sum of lines.....)	922,627	902,371	902,371	849,188
	Amount of line XX Related to LBP Activities				

Annual Statement/Performance and Evaluation Report					
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary					
PHAName: East Hartford Housing Authority		Grant Type and Number Capital Fund Program Grant No: CT26P01350100 Replacement Housing Factor Grant No:		Federal FY of Grant: 2000	
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no: 1)					
<input type="checkbox"/> Performance and Evaluation Report for Period Ending: <input type="checkbox"/> Final Performance and Evaluation Report					
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
	Amount of line XX Related to Section 504 compliance				
	Amount of line XX Related to Security --Soft Costs				
	Amount of Line XX related to Security --Hard Costs				
	Amount of line XX Related to Energy Conservation Measures				
	Collateralization Expenses or Debt Service				

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

PHAName: EastHartfordHousingAuthority		GrantTypeandNumber CapitalFundProgramGrantNo: CT26P01350100 ReplacementHousingFactorGrantNo:				FederalFYofGrant: 2000			
Development Number Name/HA-Wide Activities	GeneralDescriptionofMajorWork Categories		Dev. Acct No.	Quantity	TotalEstimatedCost		TotalActualCost		Statusof Work

Annual Statement/Performance and Evaluation Report
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)
Part III: Implementation Schedule

PHAName:			Grant Type and Number Capital Fund Program No: Replacement Housing Factor No:			Federal FY of Grant:	
Development Number Name/HA-Wide Activities	All Fund Obligated (Quarter Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates
	Original	Revised	Actual	Original	Revised	Actual	
Hockanum Park	09/30/2002	09/30/2002		09/30/2003	09/30/2003		
Shea Gardens	09/30/2002	09/30/2002		09/30/2003	09/30/2003		
Meadow Hill	09/30/2002	09/30/2002		09/30/2003	09/30/2003		
Elms Village	09/30/2002	09/30/2002		09/30/2003	09/30/2003		
The Highlands	09/30/2002	09/30/2002		09/30/2003	09/30/2003		
Heritage Gardens	09/30/2002	09/30/2002		09/30/2003	09/30/2003		

CapitalFundProgramFive -YearActionPlan
PartI:Summary

PHAName		<input type="checkbox"/> Original5 -YearPlan <input type="checkbox"/> RevisionNo:			
Development Number/Name/HA-Wide	Year1	WorkStatementforYear2 FFYGrant: PHAFY:	WorkStatementforYear3 FFYGrant: PHAFY:	WorkStatementforYear4 FFYGrant: PHAFY:	Work StatementforYear5 FFYGrant: PHAFY:
	Annual Statement				
TotalCFPFunds (Est.)					
TotalReplacement HousingFactorFunds					

CAPITAL FUND PROGRAM TABLES START HERE

Annual Statement/Performance and Evaluation Report					
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary					
PHA Name: East Hartford Housing Authority		Grant Type and Number Capital Fund Program Grant No: CT26P01350103 Replacement Housing Factor Grant No:			Federal FY of Grant: 2003
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:)					
<input type="checkbox"/> Performance and Evaluation Report for Period Ending: <input type="checkbox"/> Final Performance and Evaluation Report					
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total Non -CFP Funds				
2	1406 Operations	86,227			
3	1408 Management Improvements Soft Costs				
	Management Improvements Hard Costs	172,454			
4	1410 Administration	86,227			
5	1411 Audit	1,000			
6	1415 Liquidated Damages				
7	1430 Fees and Costs	65,000			
8	1440 Site Acquisition				
9	1450 Site Improvement	420,000			
10	1460 Dwelling Structures				
11	1465.1 Dwelling Equipment — Nonexpendable				
12	1470 Nondwelling Structures				
13	1475 Nondwelling Equipment				
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1499 Development Activities				

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

PHAName: EastHartfordHousingAuthority	GrantTypeand Number CapitalFundProgramGrantNo: CT26P01350103 ReplacementHousingFactorGrantNo:	FederalFYofGrant: 2003
---------------------------------------	---	-------------------------------

OriginalAnnualStatement
 ReserveforDisasters/Emergencies
 RevisedAnnualStatement(revisionno:)
 PerformanceandEvaluationReportforPeriodEnding:
 FinalPerformanceandEvaluationReport

Line No.	SummarybyDevelopmentAccount	TotalEstimatedCost		TotalActualCost	
19	1502Contingenc y	31,366			
	AmountofAnnualGrant:(sumoflines.....)	862,274			
	AmountoflineXXRelatedtoLBPActivities				
	AmountoflineXXRelatedtoSection504compliance				
	AmountoflineXXRelatedtoSecurity --SoftCosts				
	AmountofLine XXrelatedtoSecurity --HardCosts				
	AmountoflineRelatedtoEnergyConservationMeasures				
	CollateralizationExpensesorDebtService				

Capital Fund Program Five - Year Action Plan

Part I: Summary

PHANameEastHartford HousingAuthority						<input type="checkbox"/> Original5 -YearPlan
						<input type="checkbox"/> RevisionNo:
Development Number/Name/HA- Wide	Year1	WorkStatementforYear2 FFYGrant:2004 PHAFY:	WorkStatementforYear3 FFYGrant:2005 PHAFY:	WorkStatementforYear4 FFYGrant:2006 PHAFY:	WorkStatementforYear5 FFYGrant:2007 PHAFY:	
13-1HockanumPark	Annual State ment	30,000 –CommonStairUpgrades 110,000 –Comm.Bldg&Laundry -----	150,000 –DemoOldBoilers 40,000 –FireAlarm -----	100,000 –CyclePainting -----	-----	
13-2SheaGardens		20,000 –UpgradeLighting -----	150,000 -D.U.FirstFloor Tile 40,000 -UpgradeComm.Building -----	40,000 –CyclePainting -----	12,000 –commonhallpaint 90,000 –D.U.Doors -----	
13-3Rochambeau		160,000 –KitchenUpgrades -----	-----	40,000 –CyclePainting -----	-----	
13-4MeadowHill		120,000 -ClosetDoors 20,000 -UpgradeLighting -----	-----	115,000 –CyclePainting -----	30,000 –commonhallpaint 20,000 –ElectronicKeySystem -----	
13-5ElmsVillage		20,000 -UpgradeLighting -----	70,000 –ExtendStairs toroof -----	80,000 –CyclePainting -----	100,000 -B.R.Abatement 250,000 –replaceboilers -----	
13-6Highlands		20,000 -UpgradeLighting -----	70,000 - ExtendStairs -----	45,000 –CyclePainting -----	20,000 –ElectronicKeySystem -----	
13-6HeritageGarden		20,000 -UpgradeLighting -----	-----	45,000 –CyclePainting -----	-----	
13-7MillerGardens		20,000 - UpgradeLighting	20,000 –ElectronicKeyingSystem	75,000 –CyclePainting	18,000 –commonhallpaint	
1406Operations		86,227	86,227	86,227	86,227	
1408Management Improvements		86,227	86,227	86,227	86,227	
1410Administration		86,227	86,227	86,227	86,227	
1430Fees&Costs		54,000	54,000	54,000	54,000	
1411Audit		1,000	1,000	1,000	1,000	
1502Contingency		8,593	8,593	8,593	8,593	
TotalCFPFunds (Est.)		862,274	862,274	862,274	862,274	
TotalReplacement						

HousingFactorFunds				

| | | | |

CAPITAL FUND PROGRAM TABLES START HERE

Annual Statement/Performance and Evaluation Report						
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary						
PHA Name: East Hartford Housing Authority		Grant Type and Number Capital Fund Program Grant No: CT26P01350102 Replacement Housing Factor Grant No:			Federal FY of Grant: 2002	
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:)						
<input type="checkbox"/> Performance and Evaluation Report for Period Ending: <input type="checkbox"/> Final Performance and Evaluation Report						
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost		
		Original	Revised	Obligated	Expended	
1	Total Non -CFP Funds					
2	1406 Operations	86,227	86,227	86,227		
3	1408 Management Improvements Soft Costs	86,227	86,227			
	Management Improvements Hard Costs					
4	1410 Administration	86,227	86,227			
5	1411 Audit	1,000	1,000			
6	1415 Liquidated Damages					
7	1430 Fees and Costs	40,000	40,000			
8	1440 Site Acquisition					
9	1450 Site Improvement					
10	1460 Dwelling Structures	320,000	320,000			
11	1465.1 Dwelling Equipment — Nonexpendable					
12	1470 Nondwelling Structures					
13	1475 Nondwelling Equipment	190,000	190,000			
14	1485 Demolition	40,000	40,000			
15	1490 Replacement Reserve					
16	1492 Moving to Work Demonstration					
17	1495.1 Relocation Costs					
18	1499 Development Activities					

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

PHAName: EastHartfordHousingAuthority	GrantTypeandNu mber CapitalFundProgramGrantNo: CT26P01350102 ReplacementHousingFactorGrantNo:	FederalFYofGrant: 2002
---------------------------------------	---	-------------------------------

OriginalAnnualStatement
 ReserveforDisasters/Emergencies
 RevisedAnnualStatement(revisionno:)
 PerformanceandEvaluationReportforPeriodEnding:
 FinalPerformanceandEvaluationReport

Line No.	SummarybyDevelopmentAccount	TotalEstimatedCost		TotalActualCost	
19	1502Contingency	12,593	12,593		
	AmountofAnnualGrant:(sumoflines.....)	862,274	862,274		
	AmountoflineXXRelatedtoLBPAactivities				
	AmountoflineXXRelatedtoSection504compliance				
	AmountoflineXXRelatedtoSecurity --SoftCosts				
	AmountofLineXXrelatedtoSecurity --HardCosts				
	Amountofline1475RelatedtoEnergyConservation Measures	190,000	190,000		
	CollateralizationExpensesorDebtService				

Capital Fund Program Five - Year Action Plan
Part I: Summary

PHANameEastHartfordHousing Authority		<input type="checkbox"/> Original 5 - Year Plan <input type="checkbox"/> Revision No:			
Development Number/Name/HA-Wide	Year1	WorkStatementforYear2 FFYGrant:2003 PHAFY:	WorkStatementforYear3 FFYGrant:2004 PHAFY:	WorkStatementforYear4 FFY Grant:2005 PHAFY:	WorkStatementforYear5 FFYGrant:2006 PHAFY:
13-1HockanumPark	Annual Statement	30,000 -Commo nStairUpgrades	110,000 -Comm.Bldg&Laundry	100,000 -CyclePainting	350,000 -KitchenUpgrades
13-2SheaGardens		20,000 -UpgradeLighting	40,000 -FireAlarm	40,000 -CyclePainting	90,000 -D.U.Doors
13-3Rochambeau		150,000 -D.U.FirstFloorTile	-----	-----	-----
13-4MeadowHill		110,000 -SiteImprovements	160,000 -KitchenUpgrade	40,000 -CyclePainting	-----
		120,000 -ClosetDoors	-----	-----	-----
		20,000 -UpgradeLighting	80,000 -CommunityBldg	120,000 -CyclePainting	-----
		20,000 -UpgradeLighting	70,000 -ExtendStairs	85,000 -CyclePainting	100,000 -B.R.Abatement
13-5ElmsVillage		50,000 -ExtendStairs	-----	50,000 -CyclePainting	-----
13-6Highlands		20,000 -UpgradeLighting	-----	-----	-----
13-6HeritageGarden		20,000 -Upgrade Lighting	-----	50,000 -CyclePainting	40,000 -D.U.Ranges
13-7MillerGardens		20,000 -UpgradeLighting	120,000 -SiteImprovements	75,000 -CyclePainting	-----
1406Operations		92,263	92,263	92,263	92,263
1408Management Improvements		92,263	92,263	92,263	92,263
1410Administration		92,263	92,263	92,263	92,263
1430Fees&Costs		64,838	64,838	64,838	64,838
1411Audit		1,000	1,000	1,000	1,000
TotalCFPFunds (Est.)		922,627	922,627	922,627	922,627
TotalReplacement HousingFactorFunds					

| | | | |

CAPITAL FUND PROGRAM TABLES START HERE

Annual Statement/Performance and Evaluation Report					
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary					
PHA Name: East Hartford Housing Authority		Grant Type and Number Capital Fund Program Grant No: CT26P01350101 Replacement Housing Factor Grant No:			Federal FY of Grant: 2001
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:)					
<input type="checkbox"/> Performance and Evaluation Report for Period Ending: <input type="checkbox"/> Final Performance and Evaluation Report					
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total Non -CFP Funds				
2	1406 Operations	92,263	92,263	92,263	52,263
3	1408 Management Improvements Soft Costs				0
	Management Improvements Hard Costs	92,263	92,263		
4	1410 Administration	92,263	92,263	92,263	47,063
5	1411 Audit	1,000	1,000	0	0
6	1415 Liquidated Damages				
7	1430 Fees and Costs	64,838	0	0	15,500
8	1440 Site Acquisition				
9	1450 Site Improvement	230,000	368,838	0	0
10	1460 Dwelling Structures				
11	1465.1 Dwelling Equipment — Nonexpendable				
12	1470 Nondwelling Structures				
13	1475 Nondwelling Equipment	300,000	240,000	240,000	0
14	1485 Demolition	50,000	36,000	36,000	0
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1499 Development Activities				

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

PHAName: EastHartfordHousingAuthority	GrantTypeandNu mber CapitalFundProgramGrantNo: CT26P01350101 ReplacementHousingFactorGrantNo:	FederalFYofGrant: 2001
---------------------------------------	---	----------------------------------

OriginalAnnualStatement
 ReserveforDisasters/Emergencies
 RevisedAnnualStatement(revisionno:)
 PerformanceandEvaluationReportforPeriodEnding:
 FinalPerformanceandEvaluationReport

Line No.	SummarybyDevelopmentAccount	TotalEstimatedCost		TotalActualCost	
19	1502Contingency				
	AmountofAnnualGrant:(sumoflines.....)	922,627	922,627	228,014	114,826
	AmountoflineXXRelatedtoLBPAactivities				
	AmountoflineXXRelatedtoSection504compliance				
	AmountoflineXXRelatedtoSecurity --SoftCosts				
	AmountofLineXXrelatedtoSecurity --HardCosts				
	AmountoflineXXRelatedtoEnergyConservation Measures	350,000	276,000	0	0
	Collateralization ExpensesorDebtService				

Capital Fund Program Five - Year Action Plan Part I: Summary

PHANameEastHartfordHousing Authority		<input type="checkbox"/> Original 5 - Year Plan <input type="checkbox"/> Revision No:			
Development Number/Name/HA- Wide	Year1	WorkStatementforYear2 FFYGrant:2002 PHAFY:	WorkStatementforYear3 FFYGrant:2003 PHAFY:	WorkStatementforYear4 FFYGrant:2004 PHAFY:	WorkStatementforYear5 FFYGrant:2005 PHAFY:
13-1HockanumPark	Annual Statement	200,000 -SiteImprovements	30,000 -CommonStairUpgrades	100,000 -CommunityBldg	100,000 -CyclePainting
13-2SheaGardens		80,000 -BuildingExteriors	150,000 -D.U.FirstFloorTile	40,000 -FireAlarm	50,000 -CyclePainting
13-3Rochambeau		20,000 -UpgradeLighting	100,000 -Mech .RoomsAsbestos	160,000 -KitchenUpgrade	50,000 -CyclePainting
13-4MeadowHill		100,000 -SiteImprov ements	200,000 -ReplaceBoilers		
13-5ElmsVillage		20,000 -UpgradeLighting	-----	120,000 -ClosetDoors	120,000 -CyclePainting
13-6Highlands		20,000 -UpgradeLighting	-----	80,000 -CommunityBldg	85,000 -CyclePainting
13-6HeritageGarden		80,000 -BalconyRepairs	-----	50 ,000 -ExtendStairs	50,000 -CyclePainting
13-7MillerGardens	20,000 -UpgradeLighting	-----	15,000 -StorageShed	50,000 -CyclePainting	
1406Operations		20,000 -UpgradeLighting	100,000 -SiteImprovements	15,000 -StorageShed	75,000 -CyclePainting
1408Management Improvements		92,263	92,263	92,263	92,263
1410Administration		92,263	92,263	92,263	92,263
1430Fees &Costs		64,838	64,838	64,838	64,838
1411Audit		1,000	1,000	1,000	1,000
TotalCFPFunds (Est.)		922,627	922,627	922,627	922,627
TotalReplacement HousingFactorFunds					

| | | | |

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

PHAName: EastHartfordHousingAuthority	GrantTypeandNumber CapitalFundProgramGrantNo: CT26P01350100 ReplacementHousingFactorGrantNo:	FederalFYofGrant: 2000
---------------------------------------	--	---------------------------

Original Annual Statement Reserve for Disasters/Emergencies Revised Annual Statement (revision no: 1)
 Performance and Evaluation Report for Period Ending: Final Performance and Evaluation Report

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total Non -CFP Funds				
2	1406 Operations	20,174	48,192	48,192	48,192
3	1408 Management Improvements Soft Costs				
	Management Improvements Hard Costs	90,237	90,237	90,237	90,237
4	1410 Administration	90,237	90,237	90,237	90,237
5	1411 Audit	300	300	300	300
6	1415 Liquidated Damages				
7	1430 Fees and Costs	56,730	101,307	101,307	88,393
8	1440 Site Acquisition				
9	1450 Site Improvement	80,000	0	0	0
10	1460 Dwelling Structures	300,000	519,397	519,397	484,397
11	1465.1 Dwelling Equipment — Nonexpendable				
12	1470 Nondwelling Structures	250,000	0	0	0
13	1475 Nondwelling Equipment				
14	1485 Demolition	20,000	52,701	52,701	47,432
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1499 Development Activities				
19	1502 Contingency	24,125	14,840	0	0
	Amount of Annual Grant: (sum of lines.....)	922,627	902,371	902,371	849,188
	Amount of line XX Related to LBP Activities				

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

PHAName: East Hartford Housing Authority	Grant Type and Number Capital Fund Program Grant No: CT26P01350100 Replacement Housing Factor Grant No:	Federal FY of Grant: 2000
--	---	------------------------------

Original Annual Statement
 Reserve for Disasters/Emergencies
 Revised Annual Statement (revision no: 1)
 Performance and Evaluation Report for Period Ending:
 Final Performance and Evaluation Report

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

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

PHAName: EastHartfordHousingAuthority		GrantTypeandNumber CapitalFundProgramGrantNo: CT26P01350100 ReplacementHousingFactorGrantNo:				FederalFYofGrant: 2000			
Development Number Name/HA-Wide Activities	GeneralDescriptionofMajorWork Categories		Dev. Acct No.	Quantity	TotalEstimatedCost		TotalActualCost		Statusof Work

Annual Statement/Performance and Evaluation Report
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)
Part III: Implementation Schedule

PHAName:			Grant Type and Number Capital Fund Program No: Replacement Housing Factor No:			Federal FY of Grant:	
Development Number Name/HA-Wide Activities	All Fund Obligated (Quarter Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates
	Original	Revised	Actual	Original	Revised	Actual	
Hockanum Park	09/30/2002	09/30/2002		09/30/2003	09/30/2003		
Shea Gardens	09/30/2002	09/30/2002		09/30/2003	09/30/2003		
Meadow Hill	09/30/2002	09/30/2002		09/30/2003	09/30/2003		
Elms Village	09/30/2002	09/30/2002		09/30/2003	09/30/2003		
The Highlands	09/30/2002	09/30/2002		09/30/2003	09/30/2003		
Heritage Gardens	09/30/2002	09/30/2002		09/30/2003	09/30/2003		

CapitalFundProgramFive -YearActionPlan
PartI:Summary

PHAName		<input type="checkbox"/> Original5 -YearPlan <input type="checkbox"/> RevisionNo:			
Development Number/Name/HA-Wide	Year1	WorkStatementforYear2 FFYGrant: PHAFY:	WorkStatementforYear3 FFYGrant: PHAFY:	WorkStatementforYear4 FFYGrant: PHAFY:	Work StatementforYear5 FFYGrant: PHAFY:
	Annual Statement				
TotalCFPFunds (Est.)					
TotalReplacement HousingFactorFunds					

Resident Advisory Board

<u>NAME</u>	<u>ADDRESS</u>
Ms. Patricia Groskritz President, Elms Village Association	Elms Village Dr. #22, East Hartford, CT 06118
Mr. Franklin McFarlane President, Heritage Residents Association	163 School Street, East Hartford, CT 06108
Ms. Mary Ann O'Neill President, Highlands Resident Association	1403 Main Street, East Hartford, CT 06108
Mr. Freeman Sargent Treasurer, Highlands Resident Association	1403 Main Street #4F, East Hartford, CT 06108
Ms. Leola Davenport Complex Representative (No Association)	101 Connecticut Blvd. #9M, East Hartford, CT 06108
Ms. Dorothy Tierney Miller Gardens Residents Association	452 Main Street #602, East Hartford, CT 06118
Mr. Francis Booterbaugh President, Rochambeau Residents Association	68 Silver Lane #6, East Hartford, CT 06118
Mr. Steve Zaremba President, Shea Gardens Residents Association	37 Mill Road, East Hartford, CT 06118
Mr. Jason Matthews Treasurer, Shea Gardens Residents Association	24 Holmes Street, East Hartford, CT 06118