

PHAPLans

5 Year Plan for Fiscal Years 2003 - 2007
Annual Plan for Fiscal Year 2003

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

PHA Plan Agency Identification

PHAName: NorthAdamsHousingAuthority

PHANumber: MA034

PHAFiscalYearBeginning:(10/2003)

Public Access to Information

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

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

Display Locations For PHA Plans and Supporting Documents

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

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

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

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

5-YEAR PLAN
PHAF ISCAL YEARS 2003 -2007
[24CFRPart903.5]

A.Mission

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

B.Goals

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

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

Objectives:

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

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

- PHA Goal: Provide an improved living environment

Objectives:

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

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

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

Objectives:

- Increase the number and percentage of employed persons in assisted families:
- Provide or attract support services to improve assistance recipients' employability:
- Provide or attract support services to increase independence for the elderly or families with disabilities.
- Other:(list below)

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

- PHA Goal: Ensure equal opportunity and affirmatively further fair housing

Objectives:

- Undertakeaffirmativemeasurestoensureaccesstoassistedhousing regardless of race, color, religion national origin, sex, familial status, and disability:
- Undertakeaffirmativemeasurestoprovideasuitablelivingenvironment for families living in assisted housing, regardless of race, color, religion national origin, sex, familial status, and disability:
- Undertakeaffirmativemeasurestoensureaccessiblehousingtopersons with all varieties of disabilities regardless of unit size required:
- Other:(listbelow)

OtherPHAGoalsandObjectives:(listbelow)

Annual PHA Plan
PHA Fiscal Year 2003

[24CFR Part 903.7]

i. Annual Plan Type:

Standard Plan

Streamlined Plan:

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

Troubled Agency Plan

ii. Annual Plan Table of Contents

[24CFR Part 903.79(r)]

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

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Attachments

Required Attachments:

- D Admissions Policy for Deconcentration (ma034d01)
- A FY2003 Capital Fund Program Annual Statement (ma034a01)
- Most recent board -approved operating budget (Required Attachment for PHAs that are troubled or at risk of being designated troubled ONLY)
- C, K & LCGPP & E's '00, '01 and '02 (ma034c01, ma034k01, ma034l01)
- E Implementation of Community Service Program (ma034e01)
- F The Resident Membership of the PHA Governing Board (ma034f01)
- G Statement of Progress -5 Year Goals (ma034g01)
- H Pet Policy Summary (ma034h01)
- M Voluntary Conversion Requirement Initial Assessment (ma034m01)

Optional Attachments:

- PHA Management Organization al Chart (ma034b01)
- FY2003 Capital Fund Program 5 Year Action Plan (ma034a01)
- 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)
- Grievance Procedure (ma034j01)

Supporting Documents Available for Review

List of Supporting Documents Available for Review		
Applicable & On Display	Supporting Document	Applicable Plan Component
X	PHA Plan Certification of Compliance with the PHA Plans and Related Regulations	5 Year and Annual Plans
X	State/Local Government Certification of Consistency with the Consolidated Plan	5 Year and Annual Plans
	Fair Housing Documentation: Records reflecting that the PHA has examined its programs or proposed programs, identified any impediments to fair housing choice in those programs, addressed or is addressing those impediments in a reasonable fashion in view of the resources available, and worked or is working with local jurisdiction to implement any of the jurisdictions' initiatives to affirmatively further fair housing that require the PHA's involvement.	5 Year and Annual Plans
	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&O), which includes the Tenant Selection and Assignment Plan [TSAP]	Annual Plan: Eligibility, Selection, and Admissions Policies
X	Section 8 Administrative Plan	Annual Plan: Eligibility, Selection, and Admissions Policies
	Public Housing Deconcentration and Income Mixing Documentation: 1. PHA Board certification of compliance with deconcentration requirements (section 16(a) of the US Housing Act of 1937, as implemented in the 2/18/99 <i>Quality Housing and Work Responsibility Act Initial Guidance; Notice</i> and any further HUD guidance) and 2. Documentation of the required deconcentration and income mix in 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 A&O Policy	Annual Plan: Rent Determination
X	Schedule of flat rents offered at each public housing development <input checked="" type="checkbox"/> check here if included in the public housing A&O Policy	Annual Plan: Rent Determination
X	Section 8 rent determination (payment standard) policies <input checked="" type="checkbox"/> check here if included in Section 8 Administrative Plan	Annual Plan: Rent Determination
X	Public housing management and maintenance policy documents, including policies for the prevention or eradication of pest infestation (including cockroach infestation)	Annual Plan: Operations and Maintenance
X	Public housing grievance procedures <input checked="" type="checkbox"/> check here if included in the public housing A&O Policy	Annual Plan: Grievance Procedures
X	Section 8 informal review and hearing procedures <input checked="" type="checkbox"/> check here if included in Section 8 Administrative Plan	Annual Plan: Grievance Procedures
	The HUD - approved Capital Fund/Comprehensive Grant Program Annual Statement (HUD 52837) for the active grant year	Annual Plan: Capital Needs
	Most recent CIAP Budget/Progress Report (HUD 52825) for any active CIAP grant	Annual Plan: Capital Needs
	Most recent, approved 5 Year Action Plan for the Capital Fund/Comprehensive Grant Program, if not included as an attachment (provided at PHA option)	Annual Plan: Capital Needs
	Approved HOPE VI applications or, if more recent, approved or submitted HOPE VI Revitalization Plans or any other approved proposal for development of public housing	Annual Plan: Capital Needs
	Approved or submitted applications for demolition and/or disposition of public housing	Annual Plan: Demolition and Disposition

List of Supporting Documents Available for Review		
Applicable & On Display	Supporting Document	Applicable Plan Component
	Approved or submitted applications for designation of public housing (Designated Housing Plans)	Annual Plan: Designation of Public Housing
	Approved or submitted assessments of reasonable revitalization of public housing and approved or submitted conversion plans prepared pursuant to section 202 of the 1996 HUD Appropriations Act	Annual Plan: Conversion of Public Housing
	Approved or submitted public housing home ownership programs/plans	Annual Plan: Homeownership
	Policies governing any Section 8 Homeownership program <input type="checkbox"/> check here if included in the Section 8 Administrative Plan	Annual Plan: Homeownership
	Any cooperative agreement between the PHA and the TANF agency	Annual Plan: Community Service & Self-Sufficiency
	FSS Action Plan/s for public housing and/or Section 8	Annual Plan: Community Service & Self-Sufficiency
	Most recent self-sufficiency (ED/SS, TOP or ROSS or other resident services grant) grant program reports	Annual Plan: Community Service & Self-Sufficiency
	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
	Troubled PHAs: MOA/Recovery Plan	Troubled PHAs
	Other supporting documents (optional) (list individually; use as many lines as necessary)	(specify as needed)

1. Statement of Housing Needs

[24 CFR Part 903.79(a)]

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

Housing Needs of Families in the Jurisdiction by Family Type							
Family Type	Overall	Affordability	Supply	Quality	Accessibility	Size	Location
Income ≤ 30% of AMI	693	5	1	2	1	2	1
Income > 30% but ≤ 50% of AMI	382	5	1	2	1	2	1
Income > 50% but < 80% of AMI	143	5	1	1	1	2	1
Elderly	382	5	1	1	1	2	1

HousingNeedsofFamiliesintheJurisdiction byFamilyType							
FamilyType	Overall	Afford-ability	Supply	Quality	Access-ibility	Size	Loca-tion
Familieswith Disabilities							
WhiteNon Hispanic	1177	N/A	N/A	N/A	N/A	N/A	N/A
Hispanic	7	N/A	N/A	N/A	N/A	N/A	N/A

WhatsourcesofinformationdidthePHAusetoconductthisanalysis?(Checkallthat apply;allmaterials mustbemadepubliclyavailableforpublicinspection.)

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

**B. HousingNeedsofFamiliesonthePublicHousingandSection8
Tenant-BasedAssistanceWaitingLists**

HousingNeedsofFamiliesontheWaitingList			
Waitinglisttype:(selectone)			
<input checked="" type="checkbox"/> Section8tenant -basedassistance			
<input type="checkbox"/> PublicHousing			
<input type="checkbox"/> CombinedSection8andPublicHousing			
<input type="checkbox"/> PublicHousingSite -Basedorsub -jurisdictionalwaitinglist(optional)			
Ifused,identifywhichdevelopment/subjurisdiction:			
	#offamilies	%oftotalfamilies	AnnualTurnover
Waitinglisttotal	365		50
Extremelylow income<=30%AMI	287	79%	

HousingNeedsofFamiliesontheWaitingList			
Verylowincome (>30%but<=50% AMI)	77	21%	
Lowincome (>50%but<80% AMI)	1	-	
Familieswith children	202	55%	
Elderlyfamilies	2	-	
Familieswith Disabilities	134	37%	
WhiteNonHispanic	130	36%	
BlackNonHispanic	32	9%	
Hispanic	191	52%	
Characteristicsby BedroomSize (PublicHousing Only)			
1BR			
2BR			
3BR			
4BR			
5BR			
5+BR			
Isthewaitinglistclosed(selectone)? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes			
Ifyes:			
Howlonghasitbeenclosed(#ofmonths)?9months			
DoesthePHAexpectreopentheListinthePHAPlanyear? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
DoesthePHApermitspecificcategoriesoffamiliesontothewaitinglist,evenif generallyclosed? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			

HousingNeedsofFamiliesontheWaitingList			
Waitinglisttype:(selectone)			
<input type="checkbox"/> Section8tenant -basedassistance			
<input checked="" type="checkbox"/> PublicHousing			
<input type="checkbox"/> CombinedSection8andPublicHousing			
<input type="checkbox"/> PublicHousingSite -Basedorsub -jurisdictionalwaitinglist(optional)			
Ifused,identifywhichdevelopment/subjurisdiction:			
	#offamilies	%oftotalfamilies	AnnualTurnover
Waitinglisttotal	89		50

Housing Needs of Families on the Waiting List			
Extremely low income <=30% AMI	62	70%	
Very low income (>30% but <=50% AMI)	23	26%	
Low income (>50% but <80% AMI)	4	5%	
Families with children	34	38%	
Elderly families	16	18%	
Families with Disabilities	30	34%	
White NonHispanic	87	98%	
Black NonHispanic	1	1%	
Hispanic	1	1%	
Characteristics by Bedroom Size (Public Housing Only)			
1BR	48	54%	
2BR	27	30%	
3BR	13	15%	
4BR	1	1%	
5BR			
5+BR			
Is the waiting list closed (select one)? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes If yes: How long has it been closed (#of months)? Does the PHA expect to reopen the list in the PHA Plan year? <input type="checkbox"/> No <input type="checkbox"/> Yes Does the PHA permit specific categories of families onto the waiting list, even if generally closed? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			

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

- Employ effective maintenance and management policies to minimize the number of public housing units off-line
- Reduce turnover time for vacated public housing units
- Reduce time to renovate public housing units
- Seek replacement of public housing units lost to the inventory through mixed financed development

- Seek replacement of public housing units lost to the inventory through section 8 replacement housing resources
- Maintain or increase section 8 lease -uprates established 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 the 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:

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

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

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

- 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

- 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:

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

Need: Specific Family Types: Families with Disabilities

Strategy 1: Target available assistance to Families with Disabilities:

- 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:

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

Strategy 2: Conduct activities to affirmatively further fair housing

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

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

(2) Reasons for Selecting Strategies

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

- Funding constraints
- Staffing constraints
- Limited availability of sites for assisted housing
- Extent to which particular housing needs are met by other organizations in the community
- Evidence of housing needs as demonstrated in the Consolidated Plan and other information available to the PHA
- Influence of the housing market on PHA programs
- Community priorities regarding housing assistance
- Results of consultation with local or state government
- Results of consultation with residents and the Resident Advisory Board
- Results of consultation with advocacy groups
- Other: (list below)

2. Statement of Financial Resources

[24CFR Part 903.79(b)]

Financial Resources: Planned Sources and Uses		
Sources	Planned \$	Planned Uses
1. Federal Grants (FY 2002 grants)		
a) Public Housing Operating Fund	590,716	
b) Public Housing Capital Fund	518,095	
c) HOPE VI Revitalization		
d) HOPE VI Demolition		
e) Annual Contributions for Section 8 Tenant -Based Assistance	1,440,000	
f) Public Housing Drug Elimination Program (including any Technical Assistance funds)	-	
g) Resident Opportunity and Self - Sufficiency Grants	-	
h) Community Development Block Grant	-	
i) HOME	-	
Other Federal Grants (list below)	-	
2. Prior Year Federal Grants (unobligated funds only) (list below)		
	-	
MA06P034501-01	437,337	Capital Improvement
MA06P034501-00	20,627	Capital Improvement
MA06P034501-02	433,755	Capital Improvement

Financial Resources: Planned Sources and Uses		
Sources	Planned \$	Planned Uses
3. Public Housing Dwelling Rental Income	733,390	NAHA Operations
4. Other income (list below)		
Washer/Dryer & Excess Utilities	6,900	PHA Operations &
Investment Income	19,500	Supportive Services
5. Non -federal sources (list below)		
MASS Rental Voucher Program	2,700	NAHA Operation
Community Residence Rent Income	16,029	NAHA Operation
Total resources	4,219,049	

3. PHA Policies Governing Eligibility, Selection, and Admissions

[24CFR Part 903.79(c)]

A. Public Housing

(1) Eligibility

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

- When families are within a certain number of being offered a unit: (state number)
- When families are within a certain time of being offered a unit: (state time)
- Other: Eligibility verification at time of initial application

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

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

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

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

(2) Waiting List Organization

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

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

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

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

(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. Income targeting:

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

b. Transfer policies:

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

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

c. Preferences

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

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

Former Federal preferences:

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

Other preferences: (select below)

- Working families and those unable to work because of age or disability
- Veterans and veterans' families
- Residents who live and/or work in the jurisdiction
- Those enrolled currently in educational, training, or upward mobility programs
- Households 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 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.

7 Date and Time

Former Federal preferences:

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

4. Relationship of preferences to income targeting requirements:

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

(5) Occupancy

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

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

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

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

B. Section 8

(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)

(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:

An extension is granted if the family documents their housing search efforts and demonstrate that an additional time can be reasonably expected to result in success.

(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 of 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
- Households 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 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.

7 Date and Time

Former Federal preferences

1. Involuntary Displacement (Disaster, Government Action, Action of Housing Owner, Inaccessibility, Property Disposition)
2. Victims of domestic violence
3. Substandard housing
3. Homelessness
4. 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)
- 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)

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

- Date and time of application
- Drawing (lottery) or other random choice technique

5. If the PHA 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 preference to income targeting requirements: (select one)

- ThePHAappliespreferenceswithinincometiery
- Notapplicable:thepoolofapplicantfamiliesensuresthatthePHAwillme et
incometargetingrequirements

(5)SpecialPurposeSection8AssistancePrograms

a. Inwhichdocumentsorotherreferencematerialsarethepoliciesgoverning eligibility,selection,andadmissionstoanyspecial -purposesection8program administeredbythePHAcontained?(selectallthatapply)

- TheSection8AdministrativePlan
- Briefingsessionsandwrittenmaterials
- Other(listbelow)

b. HowdoesthePHAannouncetheavailabilityofanyspecial -purposesection8 programstothepublic?

- Throughpublishednotices
- Other(listbelow)

4.PHARentDeterminationPolicies

[24CFRPart903.79(d)]

A.PublicHousing

(1)IncomeBasedRentPolicies

a. Useo fdiscretionarypolicies:(selectone)

- ThePHAwillnotemployanydiscretionaryrent -settingpoliciesforincome basedrentinpublichousing.Income -basedrentsaresetatthehigherof30% ofadjustedmonthlyincome,10%ofunadjuste dmonthlyincome,thewelfare rent,orminimumrent(lessHUDmandatorydeductionsandexclusions).(If selected,skiptosub -component(2))

---or---

- ThePHAemploysdiscretionarypoliciesfordeterminingincomebasedrent(If selected,continuetoquestionb.)

b. MinimumRent

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

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

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

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

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

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

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

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

For the earned income of a previously unemployed household member

For increases in earned income

Fixed amount (other than general rent -setting policy)
If yes, state amount/s and circumstances below:

Fixed percentage (other than general rent -setting policy)
If yes, state percentage/s and circumstances below:

- For household heads
- For other family members
- For transportation expenses
- For the non-reimbursed medical expenses of non-disabled or non-elderly families
- Other (describe below)

e. Ceiling rents

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

Yes for all developments

- Yes but only for some developments
- No

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

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

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

- Market comparability study
- Fair market rents (FMR)
- 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 determination:

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
- Any time the family experiences an income increase
- Any time a family experiences an income increase above a threshold amount or percentage: (if selected, specify threshold) _____
- Other (list below)
Change in 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 a market-based flat rent, what sources of information did the PHA use to establish comparability? (select all that apply.)

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

B. Section 8 Tenant -Based Assistance

(1) Payment Standards

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

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

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

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

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

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

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

- Annually
- Other (list below)

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

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

(2) 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)]

A. PHA Management Structure

- 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

Program Name	Units or Families Served at Year Beginning	Expected Turnover
Public Housing	280	50
Section 8 Vouchers	300	40
Section 8 Certificates	0	
Section 8 Mod Rehab	N/A	
Special Purpose Section 8 Certificates/Vouchers (list individually)	N/A	
Public Housing Drug Elimination Program	N/A	

(PHDEP)		
Other Federal Programs (list individually)	N/A	

C. Management and Maintenance Policies

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

- A. Maintenance Policy
- B. Procurement Policy
- C. Ethics Policy
- D. Natural Disaster Response Guidelines
- E. Criminal, Drug Treatment, and Registered Sex Offender Classification Records Management Policy
- F. Equal Housing Opportunity Policy
- G. Hazardous Material Policy
- H. Investment Policy
- I. Funds Transfer Policy
- J. Drug-Free Workplace Policy
- K. Check Signing Authorization Policy
- L. Capitalization Policy
- M. Disposition Policy

(2) Section 8 Management: (list below)

Administrative Plan

6. PHA Grievance Procedures

[24CFR Part 903.79(f)]

A. Public Housing

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

If yes, list addition to federal requirements below:
See Attachment g

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

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

B. Section 8 Tenant -Based Assistance

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

7. Capital Improvement Needs

[24 CFR Part 903.79(g)]

A. Capital Fund Activities

(1) Capital Fund Program Annual Statement

Select one:

The Capital Fund Program Annual Statement is provided as an attachment to the PHA Plan at Attachment C

-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

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

b. If yes to question a, select one:

The Capital Fund Program 5 -Year Action Plan is provided as an attachment to the PHA Plan at Attachment A

-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)

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)]

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)]

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:	
1b. Development (project) number:	
2. Designation type:	
Occupancy by only the elderly <input type="checkbox"/>	
Occupancy by families with disabilities <input type="checkbox"/>	
Occupancy by only elderly families and families with disabilities <input type="checkbox"/>	
3. Application status (select one)	
Approved; included in the PHA's Designation Plan <input type="checkbox"/>	
Submitted, pending approval <input type="checkbox"/>	
Planned application <input type="checkbox"/>	
4. Date this designation approved, submitted, or planned for submission: (DD/MM/YY)	
5. If approved, will this designation constitute a (select one)	
<input type="checkbox"/> New Designation Plan	
<input type="checkbox"/> Revision of a previously approved Designation Plan?	
6. Number of units affected:	
7. Coverage of action (select one)	
<input type="checkbox"/> Part of the development	
<input type="checkbox"/> Total development	

10. Conversion of Public Housing to Tenant -Based Assistance

[24CFR Part 903.79(j)]

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) <input type="checkbox"/> Units addressed in a pending or approved demolition application (date submitted or approved:) <input type="checkbox"/> Units addressed in a pending or approved HOPE VI demolition application (date submitted or approved:) <input type="checkbox"/> Units addressed in a pending or approved HOPE VI Revitalization Plan (date submitted or approved:) <input type="checkbox"/> Requirements no longer applicable: vacancy rates are less than 10 percent

<input type="checkbox"/> Requirements no longer applicable: site now has less than 300 units <input type="checkbox"/> Other: (describe below)
--

B. 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

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 -established eligibility criteria

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

If yes, list criteria below:

12. PHA Community Service and Self -sufficiency Programs

[24CFR Part 903 .79(l)]

A. PHA Coordination with the Welfare (TANF) Agency

1. Cooperative agreements:

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

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

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

- Client referrals
- Information sharing regarding mutual clients (for rent determinations and otherwise)
- Coordinate the provision of specific social and self -sufficiency services and program to 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

If no, list steps the PHA will take below:

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

13. PHA Safety and Crime Prevention Measures

[24CFR Part 903.79 (m)]

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

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

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

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

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

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

Greylock Housing Development

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

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

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

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

C. Coordination between PHA and the police

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

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

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

Greylock Housing Development

D. Additional information as required by PHDEP/PHDEP Plan

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

14. RESERVED FOR PET POLICY

[24CFR Part 903.79(n)]

15. Civil Rights Certifications

[24CFR Part 903.79(o)]

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

16. Fiscal Audit

[24CFR Part 903.79(p)]

- 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.)
- Yes No: Was the most recent fiscal audit submitted to HUD?
- Yes No: Were there any findings as the result of that audit?
- Yes No: If there were any findings, do any remain unresolved? If yes, how many unresolved findings remain? _____
- Yes No: Have responses to any unresolved findings been submitted to HUD? If not, when are they due (state below)?

17. PHA Asset Management

[24CFR Part 903.79(q)]

- 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

[24 CFR Part 903.79(r)]

A. Resident Advisory Board Recommendations

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

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

- Attached as Attachment (Filename)
- Provided below:
Total Agreement

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: Substantial deviations or significant amendments or modifications are defined as discretionary changes in the plans or policies of the housing authority that fundamentally change the mission, goals, objectives, or plans of the agency and which require formal approval of the Board of Commissioners

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

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

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

3. Description of Resident Election Process

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

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

b. Eligible candidates: (select one)

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

c. Eligible voters: (select all that apply)

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

C. Statement of Consistency with the Consolidated Plan

1. Consolidated Plan jurisdiction: (provide name here)

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)

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	AllFundsObligated (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)
Total estimated cost over next 5 years				

CAPITAL FUND PROGRAM TABLES START HERE

AttachmentAma034a01

Annual Statement/Performance and Evaluation Report					
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I: Summary					
PHA Name: Housing Authority of the City of North Adams, Massachusetts		Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant No:			Federal FY of Grant: 2003
<input checked="" type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) <input type="checkbox"/> Performance and Evaluation Report for Period Ending: <input type="checkbox"/> Final Performance and Evaluation Report					
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total Non -CFP Funds				
2	1406 Operations				
3	1408 Management Improvements				
4	1410 Administration	47,340			
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	37,000			
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	354,680			
11	1465.1 Dwelling Equipment — Nonexpendable				
12	1470 Nondwelling Structures	7,000			
13	1475 Nondwelling Equipment	36,000			
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1499 Development Activities				
19	1501 Collateralization or Debt Service				
20	1502 Contingency	36,075			

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

PHA Name: Housing Authority of the City of North Adams, Massachusetts	Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant No:	Federal FY of Grant: 2003
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Original Annual Statement
 Reserve for Disasters/Emergencies
 Revised Annual Statement (revision no:)

Performance and Evaluation Report for Period Ending: Final Performance and Evaluation Report

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
21	Amount of Annual Grant: (sum of lines 2 – 20)	518,095			
22	Amount of line 21 Related to LBP Activities				
23	Amount of line 21 Related to Section 504 compliance				
24	Amount of line 21 Related to Security – Soft Costs				
25	Amount of Line 21 Related to Security – Hard Costs				
26	Amount of line 21 Related to Energy Conservation Measures				

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

PHAName: Housing Authority of the City of North Adams, Massachusetts		Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant No:				Federal FY of Grant: 2003		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
PHA-Wide	Administrative Salaries	1410	9%	47,340				
	Subtotal 1410			47,340				
PHA-Wide	A&E Fees	1430	LS	31,000				
	Capital Fund Update	1430	LS	6,000				
	Subtotal 1430			37,000				
PHA-Wide	Purchase Lawn Tractor	1475	LS	6,000				
	Computer Equipment Upgrade	1475	LS	25,000				
	Subtotal 1475			31,000				
PHA-Wide	Contingency for Construction	1502	8%	36,075				
	Subtotal 1502			36,075				

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

PHAName: Housing Authority of the City of North Adams, Massachusetts		Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant No:			Federal FY of Grant: 2003			
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
MA34 -1Site2	Install rubber tread on stairwells	1460	360	8,910				
Riverview Apts.	Install hardwired smoke detectors in all bedrooms	1460	30	3,300				
	Replace existing roof	1460	30	54,000				
	Subtotal 1460			66,210				
	Install new roof on laundry and community room	1470	L/S	2,000				
	Paint interior of boiler room	1470	L/S	<u>5,000</u>				
	Subtotal 1470			7,000				
	Purchase Outdoor Furniture	1475	L/S	<u>2,500</u>				
	Subtotal 1475			2,500				
	Total MA34 -1Site2			75,710				

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

PHAName: Housing Authority of the City of North Adams, Massachusetts		Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant No:			Federal FY of Grant: 2003			
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
MA34 -6	Install new seamless rubber roof	1460	LS	90,000				
Spring Park Apts.	Subtotal 1460			90,000				
	Total MA34 -6			90,000				

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part II: Supporting Pages								
PHAName: Housing Authority of the City of North Adams, Massachusetts			Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant No:			Federal FY of Grant: 2003		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part III: Implementation Schedule							
PHAName: Housing Authority of the City of North Adams, Massachusetts		Grant Type and Number Capital Fund Program No: Replacement Housing Factor No:			Federal FY of Grant: 2003		
Development Number Name/HA-Wide Activities	All Funds Obligated (Quarter Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates
	Original	Revised	Actual	Original	Revised	Actual	
1410	9/30/2005		9/30/2007				
1430	9/30/2005		9/30/2007				
1475	9/30/2005		9/30/2007				

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

PHA Name: Housing Authority of the City of North Adams, Massachusetts	Grant Type and Number Capital Fund Program No: Replacement Housing Factor No:	Federal FY of Grant: 2003
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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	
1502	9/30/2005		9/30/2007				
MA34 -1 Site 1	9/30/2005		9/30/2007				
MA34 -1 Site 2	9/30/2005		9/30/2007				
MA34 -2	9/30/2005		9/30/2007				
MA34 -6	9/30/2005		9/30/2007				

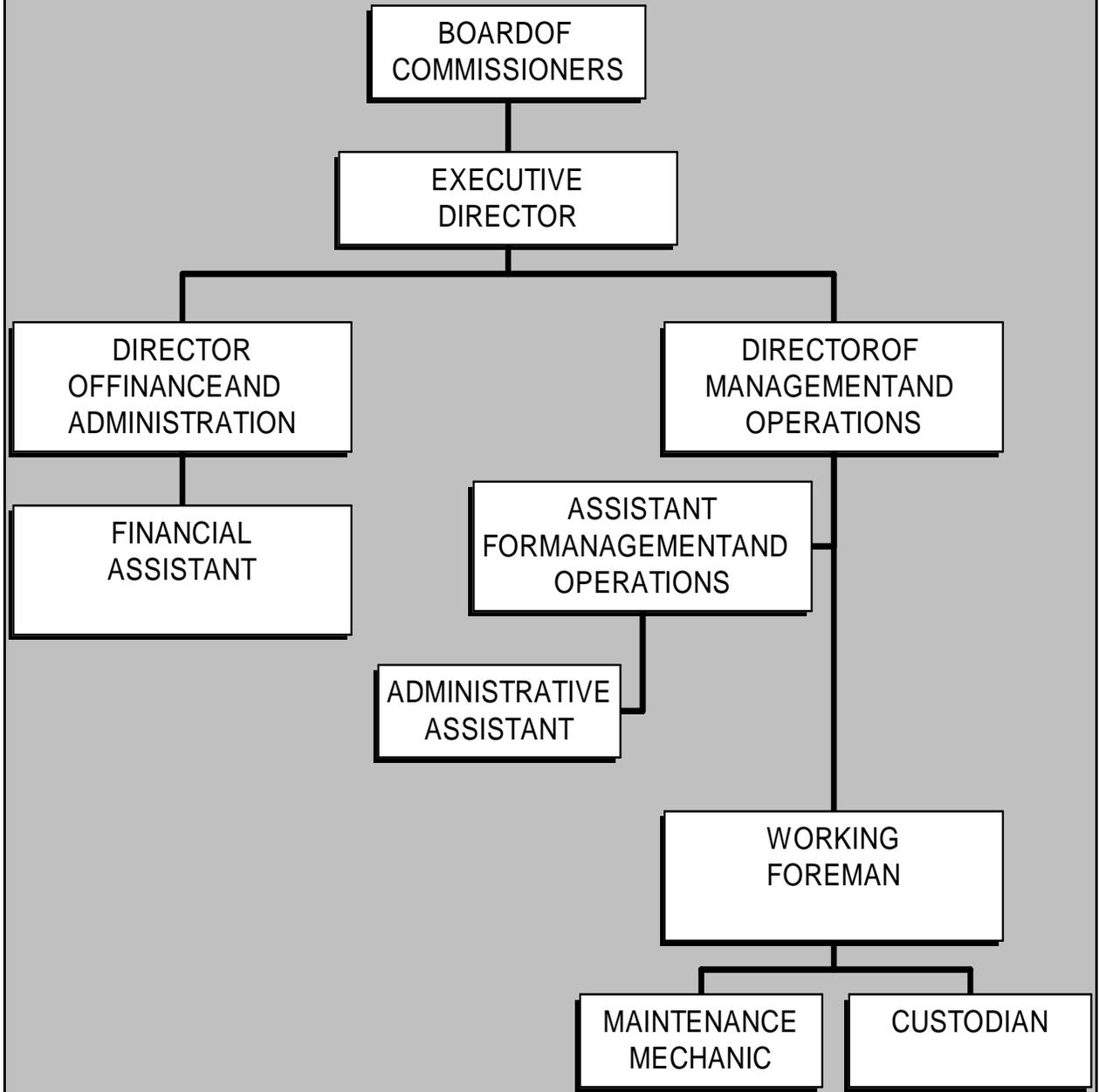
CapitalFundProgramFive -YearActionPlan
PartI:Summary

PHAN ame		<input checked="" type="checkbox"/> Original5 -YearPlan <input type="checkbox"/> RevisionNo:			
Development Number/Name/HA-Wide	Year1	WorkStatementforYear2 FFYGrant:2004 PHAFY:2005	WorkStatementforYear3 FFYGrant:2005 PHAFY:2006	WorkSt atementforYear4 FFYGrant:2006 PHAFY:2007	WorkStatementforYear5 FFYGrant:2007 PHAFY:2008
	Annual Statement				
MA34 -1Site1		234,635	133,950		
MA34 -1Site2		54,600	12,000		
MA34 -2		105,000	100,400		
Ma34 -6			21,200		
PHAWide		123,860	125,740	125,740	125,740
1490Replacement Reserve			124,805	392,355	392,355
CFPFundsListedfor 5-yearplanning		518,095	518,095	518,095	518,095
ReplacementHousing FactorFunds					

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

Activities for Year 1	Activities for Year: <u>2</u> FFY Grant: 2004 PHAFY: 2005			Activities for Year: <u>3</u> FFY Grant: 2005 PHAFY: 2006		
	Development Name/Number	Major Work Categories	Estimated Cost	Development Name/Number	Major Work Categories	Estimated Cost
See	1410	Administrative Salaries	47,340	1410	Administrative Salaries	47,340
Annual	1430	A&E Fees	31,000	1430	A&E Fees	31,000
Statement	1430	CFP Update	6,000	1430	CFP Update	6,000
	1502	Contingency	39,520	1502	Contingency	41,400
		Total PHA Wide	123,860	Total PHA Wide		125,740
	MA034-1Site1	Replace floor tile in all units	232,135	MA34 -1Site1	Replace refrigerators	33,950
		Replace maintenance bldg roof	2,500		Repair stounerground heat distribution system	100,000
		Total MA34 -1Site1	234,635	Total MA34 -1Site1		133,950
	MA34 -1Site2	Replace floor tile in all units	54,600	MA34 -1Site2	Replace refrigerators	12,000
	MA34 -2	Replace roof	105,000	MA34 -2	Replace Generator	50,000
					Replace refrigerators	50,400
				Total MA34 -2		100,400
				MA34 -6	Replace refrigerators	21,200
				1490		124,805
		Total CFPEstimated Cost	\$518,095			\$518,095

NORTHADAMSHOUSINGAUTHORITY
ORGANIZATIONALCHART



Attachment C Part 1 (ma034c01)

Annual Statement/Performance and Evaluation Report						
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I: Summary						
PHA Name: Housing Authority of the City of North Adams, Massachusetts		Grant Type and Number Capital Fund Program Grant No: MA06P034-50100 Replacement Housing Factor Grant No:			Federal FY of Grant: 2000	
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Em ergencies <input type="checkbox"/> Revised Annual Statement (revision no:)						
<input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 03/31/2003 <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					
3	1408 Management Improvements	5,029	5,029	5,029	5,029	
4	1410 Administration	47,340	47,340	47,340	47,340	
5	1411 Audit					
6	1415 Liquidated Damages					
7	1430 Fees and Costs	37,703	37,703	37,703	37,703	
8	1440 Site Acquisition					
9	1450 Site Improvement	47,872	47,872	47,872	47,824	
10	1460 Dwelling Structures	375,910	376,160	355,533	324,117	
11	1465.1 Dwelling Equipment — Nonexpendable					
12	1470 Nondwelling Structures					
13	1475 Nondwelling Equipment	1,500	1,250	1,250	1,250	
14	1485 Demolition					
15	1490 Replacement Reserve					
16	1492 Moving to Work Demonstration					
17	1495.1 Relocation Costs					
18	1499 Development Activities					
19	1501 Collateralization or Debt Service					

Annual Statement/Performance and Evaluation Report					
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I: Summary					
PHA Name: Housing Authority of the City of North Adams, Massachusetts		Grant Type and Number Capital Fund Program Grant No: MA06P034-50100 Replacement Housing Factor Grant No:		Federal FY of Grant: 2000	
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Em ergencies <input type="checkbox"/> Revised Annual Statement (revision no:)					
<input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 03/31/2003 <input type="checkbox"/> Final Performance and Evaluation Report					
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
20	1502 Contingency				
21	Amount of Annual Grant: (sum of lines 20-26)	515,354	515,354	494,727	463,263
22	Amount of line 21 Related to LBP Activities				
23	Amount of line 21 Related to Section 504 compliance				
24	Amount of line 21 Related to Security – Soft Costs				
25	Amount of Line 21 Related to Security – Hard Costs				
26	Amount of line 21 Related to Energy Conservation Measures				

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

PHAName: Housing Authority of the City of North Adams, Massachusetts		Grant Type and Number Capital Fund Program Grant No: MA06P034-50100 Replacement Housing Factor Grant No:				Federal FY of Grant: 2000		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
PHAWide Management Improvements	Upgrade Communication System	1408	L/S	5,029	5,029	5,029	5,029	Complete
	Subtotal 1408			5,029	5,029	5,029	5,029	
PHAWide Administration	Executive Director (30%)	1410	L/S	16,500	16,500	16,500	16,500	Complete
	Finance Director (30%)	1410	L/S	12,540	12,540	12,540	12,540	Complete
	Housing Director (25%)	1410	L/S	12,540	12,540	12,540	12,540	Complete
	Administrative Assistant (25%)	1410	L/S	2,880	2,880	2,880	2,880	Complete
	Financial Assistant (25%)	1410	L/S	<u>2,880</u>	<u>2,880</u>	<u>2,880</u>	<u>2,880</u>	Complete
	Subtotal 1410			47,340	47,340	47,340	47,340	
PHAWide Fees and Costs	A&E Fees	1430	L/S	32,203	32,203	32,203	32,203	Complete
	CFP Grant Update	1430	L/S	<u>5,500</u>	<u>5,500</u>	<u>5,500</u>	<u>5,500</u>	Complete
	Subtotal 1430			37,703	37,703	37,703	37,703	
PHAWide Non-dwelling Equipment	Upgrade Computer Printers	1475	L/S	<u>1,500</u>	<u>1,250</u>	<u>1,250</u>	<u>1,250</u>	Complete
	Subtotal 1475			1,500	1,250	1,250	1,250	

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

PHAName: Housing Authority of the City of North Adams, Massachusetts		Grant Type and Number Capital Fund Program Grant No: MA06P034-50100 Replacement Housing Factor Grant No:				Federal FY of Grant: 2000		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
MA34 -1 Site1	Landscaping – unit allocation for trees and shrubs	1450	L/S	2,872	2,872	2,872	2,824	Under Contract
Greylock	Construct 6 new dumpster enclosures and concrete base including demo of existing	1450	6	<u>45,000</u>	<u>45,000</u>	<u>45,000</u>	<u>45,000</u>	<u>Complete</u>
	Subtotal 1450			47,872	47,872	47,872	47,824	
	Install acoustical sound proofing on party walls in all units	1460	75 units	115,000	131,834	131,834	120,000	Under Contract
	Purchase frost proof sillcocks	1460	40 EA	541	541	541	541	Complete
	Replace all gate valves in boiler room	1460	L/S	<u>33,000</u>	33,000	33,000	21,000	Under Contract
	Subtotal 1460			148,541	165,375	165,375	141,541	
	Total: MA34 -1, Site1			196,413	213,247	213,247	189,365	

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

PHAName: Housing Authority of the City of North Adams, Massachusetts		Grant Type and Number Capital Fund Program Grant No: MA06P034-50100 Replacement Housing Factor Grant No:			Federal FY of Grant: 2000			
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	

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

PHAName: Housing Authority of the City of North Adams, Massachusetts		Grant Type and Number Capital Fund Program Grant No: MA06P034-50100 Replacement Housing Factor Grant No:				Federal FY of Grant: 2000		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
MA34 -1, Site 2 Riverview	Install hard-wired smoke detectors in all bedrooms	1460	30 units	3,300	0			Moved to 2003
	Replace all medicine cabinets	1460	30 EA	3,960	0			Deleted
	Replace all faucets and showerheads	1460	30 EA	17,500	17,500	17,500	17,500	Complete
	Install new laminated panel on all wainscot areas	1460	3,150 S/F	52,000	64,000	64,000	60,395	Revised Est. Under contract
	Install tub grab bars	1460	30 EA	2,100	2,100	2,100	2,100	Complete
	Paint entrance hall and re-finish stairs	1460	8	9,557	9,557	9,557	9,557	Complete
	Upgrade smoke alarm system	1460	L/S	0	1,095	1,095	1,095	Complete
	Subtotal 1460			88,417	94,252	94,252	90,647	
	Total MA34 -1 Site 2			88,417	94,252	94,252	90,647	

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

PHA Name: Housing Authority of the City of North Adams, Massachusetts	Grant Type and Number Capital Fund Program No: MA06P03450100 Replacement Housing Factor No:	Federal FY of Grant: 2000
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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	
1408	03-31-2002			09-30-2003			
1410	03-31-2002			09-30-2003			
1430	03-31-2002			09-30-2003			
MA34 -1 Site1 Greylock Apartments	03-31-2002			09-30-2003			
MA34 -1 Site2 Riverview Apartments	03-31-2002			09-30-2003			
MA34 -2 Ashland Park Apartments	03-31-2002			09-30-2003			
MA34 -6 Spring Park Apartments	03-31-2002			09-30-2003			
1502	03-31-2002			09-30-2003			

Attachmentk(ma034k02)

Annual Statement/Performance and Evaluation Report						
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I: Summary						
PHA Name: Housing Authority of the City of North Adams, Massachusetts		Grant Type and Number Capital Fund Program Grant No: MA06P034-50101 Replacement Housing Factor Grant No:			Federal FY of Grant: 2001	
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input checked="" type="checkbox"/> Revised Annual Statement (revision no: 2)						
<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					
3	1408 Management Improvements	7,388	2,120	120	120	
4	1410 Administration	47,340	47,340	47,340	47,340	
5	1411 Audit					
6	1415 Liquidated Damages					
7	1430 Fees and Costs	42,223	42,223	42,223	29,220	
8	1440 Site Acquisition					
9	1450 Site Improvement					
10	1460 Dwelling Structures	360,000	397,530	0	0	
11	1465.1 Dwelling Equipment — Nonexpendable					
12	1470 Non-dwelling Structures	0	3,560	0	0	
13	1475 Non-dwelling Equipment	29,600	22,620	0	0	
14	1485 Demolition					
15	1490 Replacement Reserve					
16	1492 Moving to Work Demonstration					
17	1495.1 Relocation Costs					
18	1499 Development Activities					
19	1501 Collateralization or Debt Service					

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

PHAName: Housing Authority of the City of North Adams, Massachusetts	Grant Type and Number Capital Fund Program Grant No: MA06P034-50101 Replacement Housing Factor Grant No:	Federal FY of Grant: 2001
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Original Annual Statement
 Reserve for Disasters/Emergencies
 Revised Annual Statement (revision no: 2)
 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
20	1502 Contingency	40,469	11,627		
21	Amount of Annual Grant: (sum of lines 20-26)	527,020	527,020	89,683	76,680
22	Amount of line 21 Related to LBP Activities				
23	Amount of line 21 Related to Section 504 Compliance				
24	Amount of line 21 Related to Security - Soft Costs				
25	Amount of Line 21 Related to Security - Hard Costs				
26	Amount of line 21 Related to Energy Conservation Measures				

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

PHAName: Housing Authority of the City of North Adams, Massachusetts		Grant Type and Number Capital Fund Program Grant No: MA0034-50101 Replacement Housing Factor Grant No:				Federal FY of Grant: 2001		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
PHAWide	Staff Training	1408	L/S	5,000	2,000			Revised Amt
Management	Computer Software Upgrade	1408	L/S	<u>2388</u>	120	120	120	Complete
Improvements	Subtotal 1408			7388	120	120	120	
PHAWide	Administrative Salaries	1410	L/S	<u>47,340</u>	47,340	47,340	47,340	Complete
Administration	Subtotal 1410			47,340	47,340	47,340	47,340	
PHAWide	A&E Fees	1430	L/S	36,223	36,723	36,723	23,720	Under Contract
Fees and Costs	Capital Fund Update	1430	L/S	<u>6,000</u>	5,500	5,500	5,550	Complete
	Subtotal 1430			42,223	42,223	42,223	29,220	
PHAWide	Purchase 1/2 ton Pick -up Truck	1475	L/S	20,000	0			Moved to 2002
Non-dwelling	Purchase Lawn Tractor	1475	L/S	6,000	0			Moved to 2003
Equipment	Purchase Bed Mounted Self Contained Sand Spreader	1475	L/S	3,600	0			Moved to 2002
	Purchase tractor for sidewalk plowing	1475	L/S	<u>0</u>	20,000	0	0	New Item
	Subtotal 1475			29,600	20,000	0	0	

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

PHAName: Housing Authority of the City of North Adams, Massachusetts		Grant Type and Number Capital Fund Program Grant No: MA06P034-50101 Replacement Housing Factor Grant No:				Federal FY of Grant: 2001		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
MA34 -2	Install Sprinkler System	1460	L/S	360,000	299,230	0	0	Revised Estimate
Ashland Park	Replace ceilings, community room, foyer, lobby, laundry & kitchen	1460	L/S	0	16,500	0	0	New Item
	Replace lighting, community room, laundry & kitchen	1460	L/S	0	<u>18,000</u>	0	0	New Item
	Subtotal 1460			0	333,730	0	0	
	Add hydronic heating to compact and electrical room	1470	L/S	0	<u>3,560</u>	0	0	New Item
	Subtotal 1470			0	3,560	0	0	
	Purchase Patio Furniture	1475	L/S	0	<u>2,620</u>	0	0	New Item
	Subtotal 1475			0	2,620	0	0	
	Total MA34 -2				339,910	0	0	

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

PHAName: Housing Authority of the City of North Adams, Massachusetts		Grant Type and Number Capital Fund Program Grant No: MA06P034-50101 Replacement Housing Factor Grant No:				Federal FY of Grant: 2001		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
MA34 -6	Replace counters and cooktops in HCP units	1460	9	0	16,500	0	0	New Item
Spring Park	Replace ceilings, lobby, corridor, community room, office & laundry	1460	L/S	0	17,800	0	0	New Item
	Replace lighting, lobby, corridor and community room	1460	L/S	0	<u>14,000</u>	0	0	New Item
	Subtotal 1460			0	48,300	0	0	
	Total MA34 -6			0	48,300	0	0	

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

PHAName: Housing Authority of the City of North Adams, Massachusetts	Grant Type and Number Capital Fund Program No: MA06P034-50101 Replacement Housing Factor No:	Federal FY of Grant: 2001
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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	
1408	9/30/2003			9/30/2005			
1410	9/30/2003			9/30/2005			
1430	9/30/2003			9/30/2005			
1475	9/30/2003			9/30/2005			
MA34 -1 Site1	9/30/2003			9/30/2005			
MA34 -1 Site2	9/30/2003			9/30/2005			
MA34 -2	9/30/2003			9/30/2005			
MA34 -6		9/30/2003			9/30/2005		

Attachment I (ma034102)

Annual Statement/Performance and Evaluation Report						
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I: Summary						
PHA Name: Housing Authority of the City of North Adams, Massachusetts		Grant Type and Number Capital Fund Program Grant No: MA06P034-50102 Replacement Housing Factor Grant No:			Federal FY of Grant: 2002	
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input checked="" type="checkbox"/> Revised Annual Statement (revision no: 1)						
<input 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					
3	1408 Management Improvements					
4	1410 Administration	47,340	47,340	47,340	23,670	
5	1411 Audit					
6	1415 Liquidated Damages					
7	1430 Fees and Costs	37,000	37,000	0	0	
8	1440 Site Acquisition					
9	1450 Site Improvement	128,000	86,100	0	0	
10	1460 Dwelling Structures	275,000	303,800	0	0	
11	1465.1 Dwelling Equipment — Nonexpendable					
12	1470 Nondwelling Structures					
13	1475 Nondwelling Equipment	5,000	31,100	0	0	
14	1485 Demolition					
15	1490 Replacement Reserve					
16	1492 Moving to Work Demonstration					
17	1495.1 Relocation Costs					
18	1499 Development Activities					
19	1501 Collateralization or Debt Service					

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

PHAName: Housing Authority of the City of North Adams, Massachusetts	Grant Type and Number Capital Fund Program Grant No: MA06P034-50102 Replacement Housing Factor Grant No:	Federal FY of Grant: 2002
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Original Annual Statement
 Reserve for Disasters/Emergencies
 Revised Annual Statement (revision no: 1)
 Performance and Evaluation Report for Period Ending:
 Final Performance and Evaluation Report

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
20	1502 Contingency	25,755	12,755		
21	Amount of Annual Grant: (sum of lines 20-26)	518,095	518,095	47,370	23,670
22	Amount of line 21 Related to LBP Activities				
23	Amount of line 21 Related to Section 504 compliance				
24	Amount of line 21 Related to Security - Soft Costs				
25	Amount of Line 21 Related to Security - Hard Costs				
26	Amount of line 21 Related to Energy Conservation Measures				

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

PHAName: Housing Authority of the City of North Adams, Massachusetts		Grant Type and Number Capital Fund Program Grant No: MA06P034-50102 Replacement Housing Factor Grant No:				Federal FY of Grant: 2002		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
PHAWide	Administrative Salaries	1410	L/S	<u>47,340</u>	<u>47,340</u>	<u>47,340</u>	<u>23,670</u>	
	Subtotal 1410			47,340	47,340	47,340	23,670	
PHAWide	A&E Fees	1430	L/S	31,000	31,000	0	0	
	Capital Fund Update	1430	L/S	<u>6,000</u>	<u>6,000</u>	0	0	
	Subtotal 1430			37,000	37,000	0	0	
PHAWide	Purchase 2 Snow Blowers	1475	2	5,000	5,000	0	0	
	Purchase 1/2 ton pick -up	1475	1	0	20,000	0	0	Moved from 2001
	Purchases and spreaders	1475	L/S	0	3,600	0	0	Moved from 2001
	Purchase color laser printer	1475	L/S	0	<u>2,500</u>	0	0	New Item
	Subtotal 1475				31,100	0	0	
PHAWide	Contingency	1502	L/S	<u>25,755</u>	<u>12,755</u>			
	Subtotal 1502			25,755	12,755			

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

PHAName: Housing Authority of the City of North Adams, Massachusetts	Grant Type and Number Capital Fund Program No: MA06P034-50102 Replacement Housing Factor No:	Federal FY of Grant: 2002
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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	
1410	3/31/2004			9/30/2005			
1430	3/31/2004			9/30/2005			
1475	3/31/2004			9/30/2005			
1502	3/31/2004			9/30/2005			
MA34 -1 Site1	3/31/2004			9/30/2005			
MA34 -1 Site2	3/31/2004			9/30/2005			
MA34 -2	3/31/2004			9/30/2005			
MA34 -6	3/31/2004			9/30/2005			

ATTACHMENTD
(ma034d01)

Component 3,(6) Deconcentration and Income Mixing

a.

Yes

No

Does the PHA have any general occupancy (family) public housing developments covered by the deconcentration rule? If no, this section is complete. If yes, continue to the next question.

North Adams Housing Authority MA034

Implementation of Community Service Program Attachment E (ma034e01)

The written description of our Community Service Program including service requirements is already in our Admissions and Continued Occupancy Policy. We intend to administer the program. By 07/31/2003, all residents will receive written notice about the reinstatement of the Community Service/Self-sufficiency requirement. All apparent non-exempt residents will receive:

- ◆ A description of the program.
- ◆ A list of conditions that may exempt them from this requirement with instructions on how to claim an exemption.
- ◆ A copy of the revised lease for their review.
- ◆ An 8-page booklet describing volunteer opportunities with over 15 local health and human service agencies, educational institutions and civic organizations. The booklet provides contact persons, work descriptions and time commitments for each agency.
- ◆ A timesheet for monitoring compliance.

Resident Community Service/Self-sufficiency efforts will begin by 10/01/2003 and compliance verified by 10/31/2003

An Agency Coordinator will administer the program.

ATTACHMENT F
(ma034f01)

The Resident Membership of the PHA Governing Board

Massachusetts General Laws Chapter 121B Section 5, as amended provides for the appointment to the Board of Commissioners. Specifically, the mayor shall appoint, subject to the city council confirmation a resident of the Housing Authority. Linda Bissaillon was appointed in April 2001. This term expires October 1, 2005.

Membership of the Resident Advisory Board

Membership represents each type of housing provided by the Authority. (elderly, family, Section 8 HCV) The following individuals serve on the Advisory Board.

Gerald Duprea

Rose Carsten

Linda Bissaillon

Dominic Grande (deceased, searching for replacement)

ATTACHMENT G
(ma034g01)

Statement of Progress – 5 Year Goals

The North Adams Housing Authority continued its aggressive advertising/outreach campaign resulting in a 37% decrease in our vacancy rate over the last twelve months. Rental income has increased 12% over the same period.

Positive changes in management procedures have resulted in High Performance designations for the past two PHA evaluations. Similar efforts in the Housing Choice Voucher Program, particularly in the areas of utilization and HQS quality control, should substantially improve our next SEMAP score.

The Authority's policy of Income Exclusion of secondary wage earner, and Flat Rent, has provided incentive for residents to remain in public housing after attaining a level of self-sufficiency. f

The Authority is working closely with the Greylock Housing Coalition (tenant organization in family development) and has supported its various neighborhood activities and outings.

The Housing Authority has been very supportive of the City's Community Policing efforts. It has provided space in a family development for a sub-station and shared with the City the costs for certain training.

ATTACHMENTH
(ma034h01)

PetPolicySummary

Commonhouseholdpetsaredefinedasdomesticateddogs,cats,birdsandfishin
aquariumsoraturtle.Thepolicydoesnotapplytoanimalsthatareusedtoassistpersons
withdisabilities.Assistiveani malsareallowedinallpublicfacilitieswithnorestrictions
otherthanthoseimposedonalltenantstomaintaintheirunitsandassociatedfacilitiesin
adecent,safeandsanitarymannerandto refrainfromdisturbingneighbors.

ThePetPolicyad dressesthefollowingissues:

PetsinPublicHousingFinancialObligation

PetsinSeniorHousingNuisance

Approval

TypesandNumberofPetsPetDeposit

InoculationsRemovalofPets

DesignatedAreas

–HealthThreat

ATTACHMENT J
(ma034j01)

Grievance Procedure

The Massachusetts judicial system provides the elements of due process; therefore, the grievance procedure in cases involving termination of tenancy for any activity, not just a criminal activity that threatens the health, safety or right to peaceful enjoyment of the premises or any drug related criminal activity on or off the premises not just on or near such premises is not in effect. Otherwise, the grievance procedure stated below will be that which is in effect at the times such grievance or appeal arises.

The grievance procedure shall not be applicable to dispute between tenants not involving the North Adams Housing Authority or to class grievances. It is not intended as a forum for initiating or negotiating policy changes between a group or groups of tenants and the Board of Commissioners.

I. Definitions

- a. Grievance – Any dispute which a tenant may have with respect to NAHA regulations or action which adversely affect the tenant's rights, duties, welfare or status.
- b. Complaints – Any tenant whose grievance is presented to the NAHA office in accordance with the established procedure.
- c. Hearing Officer – An impartial, disinterested person selected jointly by the North Adams Housing Authority and the complainant to hear grievances and render a decision.
- d. Tenant – Any leasee or the remaining head of the household of any tenant family.

II. INFORMAL SETTLEMENT

Any grievance shall be personally presented, in writing, to the North Adams Housing Authority office, so that the grievance may be discussed informally. A summary of such discussion will be prepared within a reasonable time with one copy being given to the tenant and the other filed in the tenant's folder. The summary will specify the procedures by which a hearing may be obtained if the complainant is not satisfied.

III. PROCEDURE TO OBTAIN A HEARING:

- a. The complainant will submit a written request for a hearing to the North Adams Housing Authority within a reasonable time after receipt of the

summary referred in Section II. The request shall state the reason for the grievance and the action of a Hearing Officer.

- b. Selection of a Hearing Officer.
- c. Following complainant's compliance with Section IIIa., the hearing officer will schedule the hearing promptly for a time and place convenient to both parties. A written notice giving the time and place and procedures governing the hearing will be sent to both parties.

IV. PROCEDURES GOVERNING THE HEARING

- a. The hearing shall be held before a hearing officer.
- b. The complainant shall be afforded a fair hearing, which shall include:
 - 1. The opportunity to examine before the grievance hearing any North Adams Housing Authority documents, including records and regulations, that are directly relevant to the hearing. The tenant shall be allowed to copy any such document at the tenant's expense. If the North Adams Housing Authority does not make the document available for examination upon request by complainant, the North Adams Housing Authority may not rely on such document at the grievance hearing.
 - 2. The right to be represented by counsel or other person chosen as the tenant's representative, and to have such person make statements on the tenant's behalf;
 - 3. The right to a private hearing unless the complainant requests a public hearing;
 - 4. The right to present evidence and arguments in support of the tenant's complaint, to controvert evidence relied on by the North Adams Housing Authority, and to confront and cross-examine all witnesses upon whose testimony or information the North Adams Housing Authority relies; and
 - 5. A decision based solely and exclusively upon the facts presented at the hearing.
- c. The hearing officer may render a decision without proceeding with the hearing if the hearing officer determines that the issue has been previously decided in another proceeding.
- d. If the complainant or the North Adams Housing Authority fails to appear at a scheduled hearing, the hearing officer may make a determination to postpone the hearing for not to exceed five business days or may make a determination that the party has waived his right to a hearing. Both the complainant and the North Adams Housing Authority shall be notified of the determination by the hearing officer: Provided, that a determination that the complainant has waived his right to a hearing shall not constitute a waiver of any right the

complainant may have to contest the North Adams Housing Authority disposition of the grievance in an appropriate judicial proceeding.

- e.** At the hearing, the complainant must first make a showing of an entitlement to the relief sought and thereafter the North Adams Housing Authority must sustain the burden of justifying the North Adams Housing Authority action of failure to act against which the complaint is directed.
- f.** The hearings shall be conducted informally by the hearing officer and oral or documentary evidence pertinent to the facts and issues raised by the complaint may be received without regard to admissibility under the rules of evidence applicable to judicial proceedings. The hearing officers shall require the North Adams Housing Authority, the complainant, counsel and other participants or spectators to conduct themselves in an orderly fashion. Failure to comply with the directions of the hearing officer to obtain order may result in exclusion from the proceedings or in a decision adverse to the interests of the disorderly party and granting or denial of the relief sought as appropriate.
- g.** The complainant or the North Adams Housing Authority may arrange, in advance and at the expense of the party making the arrangement, for a transcript of the hearing. Any interested party may purchase a copy of such transcript.
- h.** Accommodation of persons with disabilities.

 1. The North Adams Housing Authority must provide reasonable accommodation for persons with disabilities to participate in the hearing. Reasonable accommodation may include qualified sign language interpreters, readers, accessible locations or attendants.
 2. If the tenant is visually impaired, any notice to the tenant which is required under the subpart must be in an accessible format.
- i.** The decision of the Hearing Officer will be binding unless the decision is contrary to applicable Federal, State or Local law or HUD regulations.

ATTACHMENTM
(ma034m01)

Component10(B)VoluntaryConversionInitialAssessments

- a. HowmanyofthePHA’sdevelopmentsaresubjecttotheRequiredInitial Assessments?None
- b. HowmanyofthePHA’sdevelopmentsarenotsubjecttotheRequiredInitial Assessmentsbasedonexemptions(e.g.,elderlyand/ordisableddevelopmentsnot generaloccupancyprojects)?All
- c. HowmanyAssessmentswereconductsforthePHA’scovereddevelopments?N/A
- d. IdentifyPHAdevelopmentsthatmaybeappropriateforconversionbase donthe RequiredInitialAssessments:N/A

DevelopmentName	NumberofUnits

- e. IfthePHAhasnotcompletedtheRequiredInitialAssessments,describethestatusof theseassessments: