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

PHA Plans

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

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

HUD 50075
OMB Approval No: 2577-0226
Expires: 03/31/2002

PHA Plan
Agency Identification

PHA Name: Housing Authority of Billings

PHA Number: MT06P001

PHA Fiscal Year Beginning: 07/2003

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)

HUD 50075
OMB Approval No: 2577-0226
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5-YEAR PLAN
PHA FISCAL YEARS 2003 - 2007
[24 CFR Part 903.5]

A. Mission

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

☐ The mission of the PHA is the same as that of the Department of Housing and Urban Development: To promote adequate and affordable housing, economic opportunity and a suitable living environment free from discrimination.

☒ The PHA's mission is: (state mission here)

The Housing Authority of Billings helps families and individuals with low incomes to achieve greater stability and self-reliance by providing safe, affordable, quality housing and links to community services.

B. Goals

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

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

☒ PHA Goal: Expand the supply of assisted housing
Objectives:
- ☒ Apply for additional rental vouchers:
- ☒ Reduce public housing vacancies:
- ☒ Leverage private or other public funds to create additional housing opportunities:
- ☒ Acquire or build units or developments: The Housing Authority of Billings will provide 5 – 30 additional rental units
- ☐ Other (list below)

☒ PHA Goal: Improve the quality of assisted housing
Objectives:

HUD 50075
OMB Approval No: 2577-0226
Expires: 03/31/2002

- ☒ Improve public housing management: (PHAS score) 98 Continue High Performer Status
- ☒ Improve voucher management: (SEMAP score) 100 Maintain High Performer Status
- ☒ Increase customer satisfaction: receive and maintain high scores on the resident satisfaction survey
- ☒ Concentrate on efforts to improve specific management functions: spend some reserves, construct housing project
- ☒ Renovate or modernize public housing units: spend effectively and efficiently GAP fund dollars with resident input
- ☐ Demolish or dispose of obsolete public housing:
- ☐ Provide replacement public housing:
- ☒ Provide replacement vouchers: (if needed for Section 8 New Construction conversions)
- ☐ Other: (list below)

☒ PHA Goal: Increase assisted housing choices
Objectives:

- ☒ Provide voucher mobility counseling: through briefings and annual re-exams the PHA will explain the clients' voucher mobility options
- ☒ Conduct outreach efforts to potential voucher landlords: every six months the PHA will advertise city-wide for new prospective landlords and supply briefing packets upon request.
- ☒ Increase voucher payment standards: for 3-5 families
- ☒ Implement voucher homeownership program: may assist 3-5 families with down payment assistance up to $5,000 per family
- ☐ Implement public housing or other homeownership programs: may assist 3-5 families with down payment assistance
- ☐ 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: monitor and develop program where needed
- ☒ Implement measures to promote income mixing in public housing by assuring access for lower income families into higher income developments: continue top of the list-first choice policy

- ☒ Implement public housing security improvements: continue PHDEP, lighting, drug awareness education
- ☐ 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 educational and economic counseling: 1) FSS; 2) home ownership budget, credit counseling; 3) family after-school program and Family Investment Center; 4) Family Investment Center; 5) interviewing job readiness
- ☒ Provide or attract supportive services to improve assistance recipients' employability: continue FSS and WtW Voucher programs and provide links for all client employment opportunities and agencies
- ☒ Provide or attract supportive services to increase independence for the elderly or families with disabilities.
- ☐ Other: (list below)

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

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

Objectives:

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

Other PHA Goals and Objectives: (list below)

Attachment A, PHA Strategic Plan, lists expanded HUD and PHA goals and objectives. Please review Attachment MT001a03

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

i. Annual Plan Type:
Select which type of Annual Plan the PHA will submit.

☐ **Standard Plan**

Streamlined Plan:

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

☐ **Troubled Agency Plan**

ii. Executive Summary of the Annual PHA Plan
[24 CFR Part 903.7 9 (r)]

The Annual Plan encompasses the Housing Authority of Billings' major programs and activities. The Authority plans to continue to deliver services to clients in the same excellent fashion it has over the past two decades. The Authority will continue to achieve its High Performer status for both the Public Housing and Section 8 programs.

Modernization efforts will focus on long-term maintenance-free systems, energy conservation measures. The Authority has continued its maintenance-free siding and energy components such as windows, doors, water heaters and sprinkler systems via the Capital Fund program and has continued to assess HUD's new energy performance goals in assessing various energy issues.

The Authority will deliver programs that attempt to provide drug-free and safe environments for families. The Authority will involve resident participation in the development of policies and programs. The Authority will assist in providing services that will assist both youth and adults in becoming positive, drug-free, self-sufficient members of our society.

The Housing Authority will attempt to construct more housing for the very-low income in the Billings community and assist others in these endeavors. The Housing Authority will continue to apply for Section 8 vouchers when appropriate and voucher-type programs that may assist clients with special needs.

iii. Annual Plan Table of Contents
[24 CFR Part 903.7 9 (r)]
Provide a table of contents for the Annual Plan, including attachments, and a list of supporting documents available for public inspection.

Table of Contents

Page #

Annual Plan

i Annual Plan 1

HUD 50075
OMB Approval No: 2577-0226
Expires: 03/31/2002

i. Executive Summary 1
ii. Table of Contents 2
1. Housing Needs 5
2. Financial Resources 11
3. Policies on Eligibility, Selection and Admissions 12
4. Rent Determination Policies 22
5. Operations and Management Policies 26
6. Grievance Procedures 27
7. Capital Improvement Needs 28
8. Demolition and Disposition 30
9. Designation of Housing 31
10. Conversions of Public Housing 32
11. Homeownership 34
12. Community Service Programs 36
13. Crime and Safety 39
14. Pets (Inactive for January 1 PHAs) 41
15. Civil Rights Certifications (included with PHA Plan Certifications) 41
16. Audit 41
17. Asset Management 41
18. Other Information 42

Attachments

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

Required Attachments:

A PHA Goals & Objectives – Strategic Plan (MT001a03)
B Admissions Policy for Deconcentration (MT001b03)
C FY 2003 Capital Fund Program Annual Statement (MT001c03)
☐ Most recent board-approved operating budget (Required Attachment for PHAs that are troubled or at risk of being designated troubled ONLY)

Optional Attachments:

D PHA Management Organizational Chart (MT001d03)
E FY 2003 Capital Fund Program 5 Year Action Plan (MT001e03)
F Comments of Resident Advisory Board or Boards (must be attached if not included in PHA Plan text) (MT001f03)
G Pet Policy (MT001g0103)
Auxiliary Aide Policy (MT001h0203)
H FY 2001 Capital Fund Performance and Evaluation Report (MT001h0103)
FY 2002 Capital Fund Performance and Evaluation Report (MT001h0203)
I Housing Needs Information Part I (MT001i0103)
Housing Needs Information Part II (MT001i0203)
Housing Needs Information Part III (MT002i0303)

HUD 50075
OMB Approval No: 2577-0226
Expires: 03/31/2002

J Section 8 Homeownership Plan (MT001j03)
K Maintenance Operation Plan (MT001k03)

Supporting Documents Available for Review

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

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

HUD 50075
OMB Approval No: 2577-0226
Expires: 03/31/2002

List of Supporting Documents Available for Review		
Applicable & On Display	**Supporting Document**	**Applicable Plan Component**
	☒ check here if included in the public housing A & O Policy	PHA Office
X	Schedule of flat rents offered at each public housing development ☒ check here if included in the public housing A & O Policy	Annual Plan: Rent Determination PHA Office
X	Section 8 rent determination (payment standard) policies ☒ check here if included in Section 8 Administrative Plan	Annual Plan: Rent Determination PHA Office
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 PHA Office
X	Public housing grievance procedures ☒ check here if included in the public housing A & O Policy	Annual Plan: Grievance Procedures PHA Office
X	Section 8 informal review and hearing procedures ☒ check here if included in Section 8 Administrative Plan	Annual Plan: Grievance Procedures PHA Office
X	The HUD-approved Capital Fund/Comprehensive Grant Program Annual Statement (HUD 52837) for the active grant year	Annual Plan: Capital Needs PHA Office
N/A	Most recent CIAP Budget/Progress Report (HUD 52825) for any active CIAP grant	Annual Plan: Capital Needs
X	Most recent, approved 5 Year Action Plan for the Capital Fund/Comprehensive Grant Program, if not included as an attachment (provided at PHA option)	Annual Plan: Capital Needs Included in Plan
N/A	Approved HOPE VI applications or, if more recent, approved or submitted HOPE VI Revitalization Plans or any other approved proposal for development of public housing	Annual Plan: Capital Needs
N/A	Approved or submitted applications for demolition and/or disposition of public housing	Annual Plan: Demolition and Disposition
N/A	Approved or submitted applications for designation of public housing (Designated Housing Plans)	Annual Plan: Designation of Public Housing
N/A	Approved or submitted assessments of reasonable revitalization of public housing and approved or submitted conversion plans prepared pursuant to section 202 of the 1996 HUD Appropriations Act	Annual Plan: Conversion of Public Housing
N/A	Approved or submitted public housing homeownership programs/plans	Annual Plan: Homeownership
X	Policies governing any Section 8 Homeownership program ☒ check here if included in the Section 8 Administrative Plan	Annual Plan: Homeownership
X	Any cooperative agreement between the PHA and the TANF agency	Annual Plan: Community Service & Self-Sufficiency PHA Office
X	FSS Action Plan/s for public housing and/or Section 8	Annual Plan: Community

HUD 50075
OMB Approval No: 2577-0226
Expires: 03/31/2002

List of Supporting Documents Available for Review		
Applicable & On Display	**Supporting Document**	**Applicable Plan Component**
		Service & Self-Sufficiency {JA Pffoce
N/A	Most recent self-sufficiency (ED/SS, TOP or ROSS or other resident services grant) grant program reports	Annual Plan: Community Service & Self-Sufficiency
X	The most recent Public Housing Drug Elimination Program (PHEDEP) semi-annual performance report for any open grant and most recently submitted PHDEP application (PHDEP Plan)	Annual Plan: Safety and Crime Prevention PHA Office
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 PHA Office
N/A	Troubled PHAs: MOA/Recovery Plan	Troubled PHAs
N/A	Other supporting documents (optional) (list individually; use as many lines as necessary)	(specify as needed)

1. Statement of Housing Needs

[24 CFR Part 903.7 9 (a)]

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

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

Housing Needs of Families in the Jurisdiction by Family Type							
Family Type	Overall	Afford-ability	Supply	Quality	Access-ibility	Size	Loca-tion
Income <= 30% of AMI	2665	5	5	5	4	5	5
Income >30% but <=50% of AMI	1855	5	5	5	N/A	5	5
Income >50% but <80% of AMI	1090	5	2	4	4	4	3
Elderly	1285	N/A	N/A	N/A	N/A	N/A	N/A
Families with Disabilities	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Race/Ethnicity 2	75	N/A	N/A	N/A	N/A	N/A	N/A
Race/Ethnicity 3	***	N/A	N/A	N/A	N/A	N/A	N/A

Housing Needs of Families in the Jurisdiction by Family Type							
Family Type	Overall	Afford-ability	Supply	Quality	Access-ibility	Size	Loca-tion
Race/Ethnicity 1	265	N/A	N/A	N/A	N/A	N/A	N/A
Race/Ethnicity							

***These numbers are from waiting list and program expertise. We have no actual data to base this on.

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

☒ Consolidated Plan of the Jurisdiction/s
Indicate year: 1999

☒ U.S. Census data: the Comprehensive Housing Affordability Strategy ("CHAS") dataset

☐ American Housing Survey data
Indicate year:

☐ Other housing market study
Indicate year:

☒ Other sources: (list and indicate year of information)
MT001i0103, MT001i0203, MT00i0303

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

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

Housing Needs of Families on the Waiting List			
Waiting list type: (select one) ☒ Section 8 tenant-based assistance ☐ Public Housing ☐ Combined Section 8 and Public Housing ☐ Public Housing Site-Based or sub-jurisdictional waiting list (optional) If used, identify which development/subjurisdiction:			
	# of families	% of total families	Annual Turnover
Waiting list total	1655		
Extremely low income <=30% AMI	1307	79%	

HUD 50075
OMB Approval No: 2577-0226
Expires: 03/31/2002

Housing Needs of Families on the Waiting List			
Very low income (>30% but <=50% AMI)	297	18%	
Low income (>50% but <80% AMI)	51	3%	
Families with children	1308	79%	
Elderly families	347	21%	
Families with Disabilities	275	16%	
Race/ethnicity 1	1131	68.7%	
Race/ethnicity 2	15	0.90%	
Race/ethnicity 3	377	22.72%	
Race/ethnicity 4	8	0.48%	
Hispanic	124	7.47%	

Housing Needs of Families on the Waiting List			
Waiting list type: (select one) ☐ Section 8 tenant-based assistance ☒ Public Housing ☐ Combined Section 8 and Public Housing ☐ Public Housing Site-Based or sub-jurisdictional waiting list (optional) If used, identify which development/subjurisdiction:			
	# of families	% of total families	Annual Turnover
Waiting list total	907		
Extremely low income <=30% AMI	727	80%	
Very low income (>30% but <=50% AMI)	155	17%	
Low income (>50% but <80% AMI)	27	3%	
Families with children	592	65%	
Elderly families	175	19%	

HUD 50075
OMB Approval No: 2577-0226
Expires: 03/31/2002

Housing Needs of Families on the Waiting List			
Families with Disabilities	140	15%	
Race/ethnicity 1	565	73.57%	
Race/ethnicity 2	4	0.52%	
Race/ethnicity 3	156	20.31%	
Race/ethnicity 4	4	0.13%	
Hispanic	41	5.24%	
Characteristics by Bedroom Size (Public Housing Only)			
1BR	466	51.3%	
2 BR	284	31.3%	
3 BR	147	16.2%	
4 BR	10	1.2%	
5 BR	N/A	N/A	
5+ BR			

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

If yes:

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

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

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

C. Strategy for Addressing Needs

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

(1) Strategies

Need: Shortage of affordable housing for all eligible populations

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

Select all that apply

☒ Employ effective maintenance and management policies to minimize the number of public housing units off-line

☐ Reduce turnover time for vacated public housing units

☐ Reduce time to renovate public housing units

☐ Seek replacement of public housing units lost to the inventory through mixed finance development

HUD 50075
OMB Approval No: 2577-0226
Expires: 03/31/2002

☐ Seek replacement of public housing units lost to the inventory through section 8 replacement housing resources
☒ Maintain or increase section 8 lease-up rates by establishing payment standards that will enable families to rent throughout the jurisdiction
☒ Undertake measures to ensure access to affordable housing among families assisted by the PHA, regardless of unit size required
☒ Maintain or increase section 8 lease-up rates by marketing the program to owners, particularly those outside of areas of minority and poverty concentration
☒ Maintain or increase section 8 lease-up rates by effectively screening Section 8 applicants to increase owner acceptance of program
☒ Participate in the Consolidated Plan development process to ensure coordination with broader community strategies
☐ Other (list below)

Strategy 2: Increase the number of affordable housing units by:
Select all that apply

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

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

Strategy 1: Target available assistance to families at or below 30 % of AMI
Select all that apply

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

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

Strategy 1: Target available assistance to families at or below 50% of AMI
Select all that apply

☐ Employ admissions preferences aimed at families who are working

HUD 50075
OMB Approval No: 2577-0226
Expires: 03/31/2002

☐ Adopt rent policies to support and encourage work
☐ Other: (list below)

Need: Specific Family Types: The Elderly

Strategy 1: Target available assistance to the elderly:
Select all that apply

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

Need: Specific Family Types: Families with Disabilities

Strategy 1: Target available assistance to Families with Disabilities:
Select all that apply

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

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

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

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

Strategy 2: Conduct activities to affirmatively further fair housing
Select all that apply

☒ Counsel section 8 tenants as to location of units outside of areas of poverty or minority concentration and assist them to locate those units

HUD 50075
OMB Approval No: 2577-0226
Expires: 03/31/2002

☒ 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

[24 CFR Part 903.7 9 (b)]
List the financial resources that are anticipated to be available to the PHA for the support of Federal public housing and tenant-based Section 8 assistance programs administered by the PHA during the Plan year. Note: the table assumes that Federal public housing or tenant based Section 8 assistance grant funds are expended on eligible purposes; therefore, uses of these funds need not be stated. For other funds, indicate the use for those funds as one of the following categories: public housing operations, public housing capital improvements, public housing safety/security, public housing supportive services, Section 8 tenant-based assistance, Section 8 supportive services or other.

Financial Resources: Planned Sources and Uses		
Sources	**Planned $**	**Planned Uses**
1. **Federal Grants (FY 2003 grants)**		
a) Public Housing Operating Fund	485,000 estimated	Operations
b) Public Housing Capital Fund	539,000 estimated	Modernization & Operations
c) HOPE VI Revitalization		
d) HOPE VI Demolition		

HUD 50075
OMB Approval No: 2577-0226
Expires: 03/31/2002

Financial Resources: Planned Sources and Uses		
Sources	**Planned $**	**Planned Uses**
e) Annual Contributions for Section 8 Tenant-Based Assistance	2,536,236 estimated	HAP & Admin Fee
f) Public Housing Drug Elimination Program (including any Technical Assistance funds)	31,000 estimated	Police Officer
g) Resident Opportunity and Self-Sufficiency Grants	39,000 estimated	FSS
h) Community Development Block Grant		
i) HOME		
Other Federal Grants (list below)	335,000	Section 8 New Construction Subsidy
2. Prior Year Federal Grants (unobligated funds only) (list below)		
3. Public Housing Dwelling Rental Income	450,000	PHA Operations
4. Other income (list below)	63,000	HOME Rents
	200,000	New Construction Rents
4. Non-federal sources (list below)		
Total resources	4,678,236	HAP and Operations Modernization

3. PHA Policies Governing Eligibility, Selection, and Admissions

[24 CFR Part 903.7 9 (c)]

A. Public Housing

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

(1) Eligibility

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

☒ When families are within a certain number of being offered a unit: (state number)
☒ When families are within a certain time of being offered a unit: (state time)
☒ Other: (describe)

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)

HUD 50075
OMB Approval No: 2577-0226
Expires: 03/31/2002

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

1. How many site-based waiting lists will the PHA operate in the coming year? 0

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

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

4. Where can interested persons obtain more information about and sign up to be on the site-based waiting lists (select all that apply)?
☐ PHA main administrative office
☐ All PHA development management offices
☐ Management offices at developments with site-based waiting lists
☐ At the development to which they would like to apply
☐ Other (list below)

(3) Assignment

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

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

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

HUD 50075
OMB Approval No: 2577-0226
Expires: 03/31/2002

In what circumstances will transfers 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

HUD 50075
OMB Approval No: 2577-0226
Expires: 03/31/2002

through an absolute hierarchy or through a point system), place the same number next to each. That means you can use "1" more than once, "2" more than once, etc.

Date and Time

Former Federal preferences:

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

Other preferences (select all that apply)

☐ 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)

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: Resident Handbook

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

☒ At an annual reexamination and lease renewal
☒ Any time family composition changes
☒ At family request for revision
☐ Other (list)

(6) Deconcentration and Income Mixing

a. ☐ Yes ☒ No: Did the PHA's analysis of its family (general occupancy) developments to determine concentrations of poverty indicate the need for measures to promote deconcentration of poverty or income mixing?

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

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

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

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

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

☐ Other (list policies and developments targeted below)

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

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

☐ Additional affirmative marketing
☐ Actions to improve the marketability of certain developments
☐ Adoption or adjustment of ceiling rents for certain developments

☐ Adoption of rent incentives to encourage deconcentration of poverty and income-mixing
☐ Other (list below)

f. Based on the results of the required analysis, in which developments will the PHA make special efforts to attract or retain higher-income families? (select all that apply)
☐ Not applicable: results of analysis did not indicate a need for such efforts
☐ List (any applicable) developments below:

g. Based on the results of the required analysis, in which developments will the PHA make special efforts to assure access for lower-income families? (select all that apply)
☐ Not applicable: results of analysis did not indicate a need for such efforts
☐ List (any applicable) developments below:

B. Section 8

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

(1) Eligibility

a. What is the extent of screening conducted by the PHA? (select all that apply)
☒ Criminal or drug-related activity only to the extent required by law or regulation
☐ Criminal and drug-related activity, more extensively than required by law or regulation
☐ More general screening than criminal and drug-related activity (list factors below)
☐ Other (list below)

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

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

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

HUD 50075
OMB Approval No: 2577-0226
Expires: 03/31/2002

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:

1. When there are mitigating circumstances, and
2. The client can show that they have been searching, and
3. There is a likelihood that they will successfully lease up

(4) Admissions Preferences

a. Income targeting

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

b. Preferences

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

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

Former Federal preferences

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

Other preferences (select all that apply)

- ☐ Working families and those unable to work because of age or disability
- ☐ Veterans and veterans' families
- ☐ Residents who live and/or work in your jurisdiction
- ☐ Those enrolled currently in educational, training, or upward mobility programs
- ☐ 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 point system), place the same number next to each. That means you can use "1" more than once, "2" more than once, etc.

Date and Time

Former Federal preferences

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

Other preferences (select all that apply)

- ☐ 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 equal preference status, how are applicants selected? (select one)
☐ Date and time of application
☐ Drawing (lottery) or other random choice technique

5. If the PHA plans to employ preferences for "residents who live and/or work in the jurisdiction" (select one)
☐ This preference has previously been reviewed and approved by HUD
☐ The PHA requests approval for this preference through this PHA Plan

6. Relationship of preferences to income targeting requirements: (select one)
☐ The PHA applies preferences within income tiers
☐ Not applicable: the pool of applicant families ensures that the PHA will meet income targeting requirements

(5) Special Purpose Section 8 Assistance Programs

a. In which documents or other reference materials are the policies governing eligibility, selection, and admissions to any special-purpose section 8 program administered by the PHA contained? (select all that apply)
☒ The Section 8 Administrative Plan: (Welfare to Work and Homeownership)
☒ Briefing sessions and written materials
☐ Other (list below)

b. How does the PHA announce the availability of any special-purpose section 8 programs to the public?
☒ Through published notices
☒ Other (list below) Inter-Agency and Public Meetings

4. PHA Rent Determination Policies

[24 CFR Part 903.7 9 (d)]

A. Public Housing

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

(1) Income Based Rent Policies

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

a. Use of discretionary policies: (select one)

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

---or---

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

b. Minimum Rent

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

☐ $0
☒ $1-$25
☐ $26-$50

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

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

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

HUD 50075
OMB Approval No: 2577-0226
Expires: 03/31/2002

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

HUD 50075
OMB Approval No: 2577-0226
Expires: 03/31/2002

☐ 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 re-determinations:

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

☐ Never
☐ At family option
☐ 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 $50.00
☒ Other (list below) Anytime the family experiences an income decrease

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

(2) Flat Rents

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

☒ The section 8 rent reasonableness study of comparable housing
☐ Survey of rents listed in local newspaper
☐ Survey of similar unassisted units in the neighborhood

☒ Other (list/describe below): FMR – The Housing Authority of Billings uses rent reasonableness if it is lower than the FMR, and uses the FMR if it is lower than the rent reasonableness.

B. Section 8 Tenant-Based Assistance

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

(1) Payment Standards

Describe the voucher payment standards and policies.

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

☐ At or above 90% but below100% 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

[24 CFR Part 903.7 9 (e)]

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

A. PHA Management Structure

Describe the PHA's management structure and organization.

(select one)

☒ An organization chart showing the PHA's management structure and organization is attached (MT001d03).
☐ A brief description of the management structure and organization of the PHA follows:

B. HUD Programs Under PHA Management

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

Program Name	Units or Families Served at Year Beginning	Expected Turnover
Public Housing	274	49%
Section 8 Vouchers	419	35%

HUD 50075
OMB Approval No: 2577-0226
Expires: 03/31/2002

Section 8 Certificates	N/A	N/A
Section 8 Mod Rehab	46	10%
Special Purpose Section 8 Certificates/Vouchers (list individually)	85 WtW	35%
Public Housing Drug Elimination Program (PHDEP)	N/A	N/A
Other Federal Programs(list individually)	Shelter + Care 15 S8 New Const. 102 HOME 24 DOC Sect 8 489	5% 20% 40% 40%

C. Management and Maintenance Policies

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

(1) Public Housing Maintenance and Management: (MT001k03)
(2) Section 8 Management: (list below)

6. PHA Grievance Procedures

[24 CFR Part 903.7 9 (f)]

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

A. Public Housing

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

If yes, list additions to federal requirements below:

HUD 50075
OMB Approval No: 2577-0226
Expires: 03/31/2002

2. Which PHA office 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 office 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 903.7 9 (g)]

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

A. Capital Fund Activities

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

(1) Capital Fund Program Annual Statement

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

Select one:

☒ The Capital Fund Program Annual Statement is provided as an attachment to the PHA Plan at Attachment: MT001c03

HUD 50075
OMB Approval No: 2577-0226
Expires: 03/31/2002

-or-

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

(2) Optional 5-Year Action Plan

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

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

b. If yes to question a, select one:

☒ The Capital Fund Program 5-Year Action Plan is provided as an attachment to the PHA Plan at Attachment: MT001e03

-or-

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

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

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

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

b) Status of HOPE VI revitalization grant (complete one set of questions for each grant)

1. Development name:
2. Development (project) number:
3. Status of grant: (select the statement that best describes the current status)
   - ☐ Revitalization Plan under development
   - ☐ Revitalization Plan submitted, pending approval

HUD 50075
OMB Approval No: 2577-0226
Expires: 03/31/2002

☐ Revitalization Plan approved
☐ Activities pursuant to an approved Revitalization Plan underway

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

☐ Yes ☒ No: d) Will the PHA be engaging in any mixed-finance 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

[24 CFR Part 903.7 9 (h)]

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

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

2. Activity Description

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

Demolition/Disposition Activity Description
1a. Development name: 1b. Development (project) number:
2. Activity type: Demolition ☐ Disposition ☐
3. Application status (select one) Approved ☐ Submitted, pending approval ☐

HUD 50075
OMB Approval No: 2577-0226
Expires: 03/31/2002

Planned application ☐
4. Date application approved, submitted, or planned for submission: (DD/MM/YY)
5. Number of units affected: 6. Coverage of action (select one) ☐ Part of the development ☐ 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

[24 CFR Part 903.7 9 (i)]

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

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

2. Activity Description

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

Designation of Public Housing Activity Description
1a. Development name: 1b. Development (project) number:
2. Designation type: Occupancy by only the elderly ☐ Occupancy by families with disabilities ☐

HUD 50075
OMB Approval No: 2577-0226
Expires: 03/31/2002

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

10. Conversion of Public Housing to Tenant-Based Assistance

[24 CFR Part 903.7 9 (j)]

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

A. Assessments of Reasonable Revitalization Pursuant to section 202 of the HUD FY 1996 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 FY 1996 HUD Appropriations Act? (If "No", skip to component 11; if "yes", complete one activity description for each identified development, unless eligible to complete a streamlined submission. PHAs completing streamlined submissions may skip to component 11.)

2. Activity Description

☐ 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? ☐ Assessment underway ☐ Assessment results submitted to HUD

HUD 50075
OMB Approval No: 2577-0226
Expires: 03/31/2002

☐ Assessment results approved by HUD (if marked, proceed to next question) ☐ Other (explain below)
3. ☐ Yes ☐ No: Is a Conversion Plan required? (If yes, go to block 4; if no, go to block 5.)
4. Status of Conversion Plan (select the statement that best describes the current status) ☐ Conversion Plan in development ☐ Conversion Plan submitted to HUD on: (DD/MM/YYYY) ☐ Conversion Plan approved by HUD on: (DD/MM/YYYY) ☐ Activities pursuant to HUD-approved Conversion Plan underway
5. Description of how requirements of Section 202 are being satisfied by means other than conversion (select one) ☐ Units addressed in a pending or approved demolition application (date submitted or approved: ☐ Units addressed in a pending or approved HOPE VI demolition application (date submitted or approved:) ☐ Units addressed in a pending or approved HOPE VI Revitalization Plan (date submitted or approved:) ☐ Requirements no longer applicable: vacancy rates are less than 10 percent ☐ Requirements no longer applicable: site now has less than 300 units ☐ Other: (describe below)

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

VOLUNTARY CONVERSION INITIAL ASSESSMENTS

a. How many of the PHA's developments are subject to the Required Initial Assessments? 11

b. How many of the PHA's developments are not subject to the Required Initial Assessments based on the exemptions (e.g. elderly and/or disabled developments not general occupancy projects? 0

c. How many assessments were conducted for the PHA's covered developments? 11

d. Identify PHA developments that may be appropriate for conversion based on the Required Initial Assessments: 0

e. If the PHA has not completed the Required Initial Assessments, describe the status of these assessments: The Assessments for the covered developments have been completed.

The Housing Authority has reviewed the operations as public housing and considering the implications of converting public housing to tenant-based assistance has concluded that the conversion would be inappropriate because the removal of the below developments would not meet

the necessary conditions for voluntary conversion. **Conversion of these developments would adversely affect the availability of affordable housing in the community.**

Development Name	Number of Units
MT 1-2	40
MT 1-3	36
MT 1-4	20
MT 1-5	40
MT 1-6	36
MT 1-7	30
MT 1-8	14
MT 1-13	20
MT 1-15	25
MT 1-19	5
MT 1-22	6

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

11. Homeownership Programs Administered by the PHA

[24 CFR Part 903.7 9 (k)]

A. Public Housing

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

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

2. Activity Description

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

Public Housing Homeownership Activity Description (Complete one for each development affected)
1a. Development name: 1b. Development (project) number:
2. Federal Program authority: ☐ HOPE I ☐ 5(h) ☐ Turnkey III ☐ Section 32 of the USHA of 1937 (effective 10/1/99)
3. Application status: (select one) ☐ Approved; included in the PHA's Homeownership Plan/Program ☐ Submitted, pending approval ☐ 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) ☐ Part of the development ☐ 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

HUD 50075
OMB Approval No: 2577-0226
Expires: 03/31/2002

☐ more than 100 participants

b. PHA-established eligibility criteria
☐ Yes ☐ No: Will the PHA's program have eligibility criteria for participation in its Section 8 Homeownership Option program in addition to HUD criteria?
If yes, list criteria below:

12. PHA Community Service and Self-sufficiency Programs

[24 CFR Part 903.7 9 (l)]

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

A. PHA Coordination with the Welfare (TANF) Agency

1. Cooperative agreements:
☒ Yes ☐ No: Has the PHA has 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? 02/03/1999
05/14/1999
04/14/1999

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 programs 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

HUD 50075
OMB Approval No: 2577-0226
Expires: 03/31/2002

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

☐ Public housing rent determination policies
☐ Public housing admissions policies
☒ Section 8 admissions policies
☐ Preference in admission to section 8 for certain public housing families
☐ Preferences for families working or engaging in training or education programs for non-housing programs operated or coordinated by the PHA
☐ Preference/eligibility for public housing homeownership option participation
☐ Preference/eligibility for section 8 homeownership option participation
☒ Other policies (list below)
The PHA will be providing assistance for down payment/writedown for between 2 and 5 families to assist with homeownership opportunities using Section 8 Reserves.

b. Economic and Social self-sufficiency programs

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

Services and Programs				
Program Name & Description (including location, if appropriate)	Estimated Size	Allocation Method (waiting list/random selection/specific criteria/other)	Access (development office / PHA main office / other provider name)	Eligibility (public housing or section 8 participants or both)
Housing Counseling	200	Other	PHA Main Office	Both
Budget Workshops	30	Other	PHA Main Office	Both
Credit Workshops	30	Other	PHA Main Office	Both
Resume Workshops	60	Other	PHA Main Office	Both
Nutrition Workshops	15	Other	PHA Main Office	Both
Homeownership Workshop	60	Other	PHA Main Office/City of Billings/Homeword	Both

HUD 50075
OMB Approval No: 2577-0226
Expires: 03/31/2002

Welfare to Work	75	Waiting List	PHA Main Office/Office of Public Assistance	Section 8

(2) Family Self Sufficiency program/s

a. Participation Description

Family Self Sufficiency (FSS) Participation		
Program	Required Number of Participants (start of FY 2003 Estimate)	Actual Number of Participants (As of: 02/02/2002)
Public Housing	2	13
Section 8	11	HAB 39 DOC 30

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

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

[24 CFR Part 903.7 9 (m)]

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

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

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

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

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

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

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

All

HUD 50075
OMB Approval No: 2577-0226
Expires: 03/31/2002

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

1. List the crime prevention activities the PHA has undertaken or plans 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)
Through pre-application screening (NCIC) background checks

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

All

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)

All

D. Additional information as required by PHDEP/PHDEP Plan

PHAs eligible for FY 2000 PHDEP funds must provide a PHDEP Plan meeting specified requirements prior to receipt of PHDEP funds.

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

☐ Yes ☐ No: Has the PHA included the PHDEP Plan for FY 2000 in this PHA Plan?

HUD 50075
OMB Approval No: 2577-0226
Expires: 03/31/2002

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

14. RESERVED FOR PET POLICY

[24 CFR Part 903.7 9 (n)]

15. Civil Rights Certifications

[24 CFR Part 903.7 9 (o)]

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

16. Fiscal Audit

[24 CFR Part 903.7 9 (p)]

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

17. PHA Asset Management

[24 CFR Part 903.7 9 (q)]

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

1. ☐ Yes ☒ No: Is the PHA engaging in any activities that will contribute to the long-term asset management of its public housing stock , including how the Agency will plan for long-term operating, capital investment, rehabilitation, modernization, disposition, and other needs that have **not** been addressed elsewhere in this PHA Plan?

2. What types of asset management activities will the PHA undertake? (select all that apply)

☐ Not applicable
☐ Private management

HUD 50075
OMB Approval No: 2577-0226
Expires: 03/31/2002

☐ 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 903.7 9 (r)]

A. Resident Advisory Board Recommendations

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

2. If yes, the comments are: (if comments were received, the PHA **MUST** select one)
☒ Attached at Attachment (File name) MT001h02
☐ Provided below:

3. In what manner did the PHA address those comments? (select all that apply)
☐ Considered comments, but determined that no changes to the PHA Plan were necessary.
☐ The PHA changed portions of the PHA Plan in response to comments
List changes below:

☒ Other: (list below): Consider what was appropriate to plan and what wasn't. Staff discussed with residents.

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.) Erica Limberhand, Resident Board Member

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

HUD 50075
OMB Approval No: 2577-0226
Expires: 03/31/2002

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

b. Eligible candidates: (select one)
☐ Any recipient of PHA assistance
☐ Any head of household receiving PHA assistance
☐ Any adult recipient of PHA assistance
☐ Any adult member of a resident or assisted family organization
☐ Other (list)

c. Eligible voters: (select all that apply)
☐ All adult recipients of PHA assistance (public housing and section 8 tenant-based assistance)
☐ Representatives of all PHA resident and assisted family organizations
☐ Other (list)

C. Statement of Consistency with the Consolidated Plan

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

1. Consolidated Plan jurisdiction: (provide name here): City of Billings

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)

HUD 50075
OMB Approval No: 2577-0226
Expires: 03/31/2002

D. Other Information Required by HUD

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

HUD 50075
OMB Approval No: 2577-0226
Expires: 03/31/2002

Attachments

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

ATTACHMENT	FILE NAME	DESCRIPTION
A	MT001a03	PHA Goals & Objectives – Strategic Plan
B	MT001b03	Admissions Policy for Deconcentration
C	MT001c03	FY2003 Capital Fund Program Annual Statement
D	MT001d03	FY2003 Organizational Chart
E	MT001e03	FY2003 Capital Fund Program 5 Year Action Plan
F	MT001f03	Resident Advisory Board Comments
G	MT001g0103	Pet Policy
	MT001g0203	Auxiliary Aide Policy
H	MT001h0103	FY2001 Performance & Evaluation Report
	MT001h0203	FY2002 Performance & Evaluation Report
I	MT001i0103	Housing Needs Information Part I
	MT001i0203	Housing Needs Information Part II
	MT001i0303	Housing Needs Information Part III
J	MT001j03	Section 8 Homeownership Plan
K	MT001k03	Maintenance Operation Plan

Submitted with Certifications PHA Admissions & Occupancy Policy
Section 8 Administrative Plan

HUD 50075
OMB Approval No: 2577-0226
Expires: 03/31/2002

PHA Plan
Table Library

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

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

Annual Statement
Capital Fund Program (CFP) Part III: Implementation Schedule

Development Number/Name HA-Wide Activities	All Funds Obligated (Quarter Ending Date)	All Funds Expended (Quarter Ending Date)

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		

Table Library

Optional Public Housing Asset Management Table

See Technical Guidance for instructions on the use of this table, including information to be provided.

Public Housing Asset Management								
Development Identification		**Activity Description**						
Name, Number, and Location	Number and Type of units	Capital Fund Program Parts II and III *Component 7a*	Development Activities *Component 7b*	Demolition / disposition *Component 8*	Designated housing *Component 9*	Conversion *Component 10*	Home-ownership *Component 11a*	Other (describe) *Component 17*

STRATEGIC GOALS (FY 2003)

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

PHA Goal: Expand the supply of assisted housing Objectives:
Apply for additional rental vouchers:
Maintain a low vacancy rate
Leverage private or other public funds to create additional housing opportunities:
Acquire or build units or development: The Housing Authority of Billings will provide 5-20 additional rental units for the low to very very-low income, either through acquisition or new construction.

PHA Goal: Improve the quality of assisted housing Objectives:
Improve public housing management:
Achieve and maintain high performer status on the PHAS score
Improve voucher utilization.
Maintain high performer status on the SEMAP score
Increase customer satisfaction:
Receive and maintain high scores on the resident satisfaction survey
Concentrate on efforts to improve management functions:
Successful operation of the GAAP accounting system.
If needed to maintain high performer status on financial management portion spend down Section 8 new construction reserves on affordable housing.
Renovate or modernize public housing units:
Spend effectively and efficiently Capital fund dollars with resident input

PHA Goal: Increase assisted housing choices:
Provide voucher mobility counseling through briefings and annual re-exams the PHA will explain the clients voucher mobility options.
Conduct outreach efforts to potential landlords:
Every six months the PHA will advertise city wide for new prospective landlords and supply briefing packets upon request.
Increase voucher payment standards as needed.
As indicated in the Section 8 Admissions and Occupancy policy the Board will adjust the payment standards annually to allow for maximum client usage.
Implement Section 8 DOC and HAB or other homeownership programs:
Create a program that will allow between 2-5 public housing and Section 8 clients to be assisted up to $5,000 each for down payment or write down assistance, to assist with homeownership opportunities, if able to augment City of Billings program.

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:
Monitor and develop programs where needed via the PIC statistical database.
Implement measures to promote income mixing in public housing by assuring access for lower income families into higher income developments:
Continue top of the waiting list first come first serve only one offer system unless economic data indicates a change needs to be made.
Implement public housing security improvements
Continue with the administration of the drug grant for the next two years, then fund out of operating if financially feasible.
Continue to address security lighting needs, drug awareness for youth, positive alternative programs etc.

HUD Strategic Goal: Promote self-sufficiency and asset developments 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:
Providing educational and economic improvement counseling and links with the community. If needed to assist with deconcentration a working preference may be needed. Provide or attract supportive services to improve assistance recipients' employability
Continue FSS and WtW voucher programs and provide links for all clients with employment opportunities and agencies.
Provide or attract supportive services to increase independence for the elderly or families with disabilities.
Apply for voucher program and coordinate with local agencies to assist with making housing opportunities for the disabled and elderly population.

HUD Strategic Goal: Ensure Equal Opportunity for all Americans
PHA Goal: Ensure equal opportunity and affirmatively further fair housing
Objectives:
Undertake affirmative measures to ensure access to assisted housing regardless of race, color, religion, national origin, sex, familial status and disability
Advertise and promote programs with outreach to effected classes.
Undertake affirmative measures to provide suitable living environment for families living in assisted housing, regardless of race, color, religion, national origin, sex, or familial status and disability:
Review policies pertaining to the 504 Act and update when needed.
Ensure reasonable accommodations are met whenever possible and that policy allow maximum flexibility in assisting the disable to find suitable housing,
Undertake affirmative measures to ensure accessible housing to persons with all varieties

of disabilities regardless of unit size:
Same as above.

PHA Strategic Goal: Employee Training and Education

Objectives:

The Housing Authority will provide appropriate staff training, for management skills, facilities, maintenance, finance, and occupancy, while adhering to its affirmative action policies.
The PHA will keep staff informed of all HUD regulation changes.
Management will keep open lines of communication via staff meeting to ensure staff education and training needs are being met, so the staff is able to effectively serve the PHA client base.

Deconcentration Plan
Taken from pg. 6 of
Public Housing Admissions & Occupancy Policy

C. Deconcentration Plan – (Rev 2/00)

The Housing Authority of Billings follows a deconcentration plan in admitting families to public housing:

1. All Federal Preferences have been removed from our Wait List. This allows families of all income ranges to move into various projects, and units within those projects, as units become available.

2. The Housing Authority of Billings owns 274 scattered site public housing units, which are located in eleven (11) different projects; 58 of those units are single-family homes.

3. The Housing Authority of Billings is currently within, and will continue to adhere to, all income targeting guidelines established by HUD which states; at least 40 percent of families admitted to public housing by a PHA must have incomes that do not exceed 30 percent of area median income.

4. The Housing Authority of Billings will continue to use a total project wait list versus a site-based wait list. The total project wait list provides more housing choices for applicants, allowing applicants to choose what available unit best suits their housing needs when their name reaches the top of the wait list.

5. The Housing Authority of Billings will annually survey, determine and compare the relative tenant incomes of each development and the incomes of census tracts in which the developments are located. The Housing Authority of Billings will determine what, if any, additional policies, measures, or incentives are necessary to bring higher income families into lower income developments.

CAPITAL FUND PROGRAM TABLES START HERE

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

PHA Name Housing Authority of Billings	Grant Type and Number Capital Fund Program Grant No: MT06P00150103 Replacement Housing Factor Grant No:	Federal FY of Grant: 2003

☒ **Original Annual Statement** ☐ **Reserve for Disasters/ Emergencies** ☐ **Revised Annual Statement (revision no:)**
☐ **Performance and Evaluation Report for Period Ending:** **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	47000			
3	1408 Management Improvements Soft Costs				
	Management Improvements Hard Costs				
4	1410 Administration	65000			
5	1411 Audit	3000			
6	1415 Liquidated Damages				
7	1430 Fees and Costs	10,000			
8	1440 Site Acquisition				
9	1450 Site Improvement	159500			
10	1460 Dwelling Structures	79000			
11	1465.1 Dwelling Equipment—Nonexpendable	8000			
12	1470 Nondwelling Structures	150000			
13	1475 Nondwelling Equipment	5000			
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1499 Development Activities				

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

PHA Name Housing Authority of Billings	Grant Type and Number Capital Fund Program Grant No: MT06P00150103 Replacement Housing Factor Grant No:	Federal FY of Grant: 2003

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

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
19	1502 Contingency				
	Amount of Annual Grant: (sum of lines…..)	526500			
	Amount of line XX Related to LBP Activities				
	Amount of line XX Related to Section 504 compliance				
	Amount of line XX Related to Security –Soft Costs				
	Amount of Line XX related to Security-- Hard Costs				
	Amount of line XX Related to Energy Conservation Measures	115000			
	Collateralization Expenses or Debt Service				

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

PHA Name: Housing Authority of Billings		**Grant Type and Number** Capital Fund Program Grant No: MT06P00150103 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
MT06P0010103 -All	Operations		1406		47000				
-All	Administration		1410		65000				
-All	Audit		1411		3000				
-2, -5	A&E Services		1430		10000				
-3, -13, -15, -19	Playground Matting		1470	90	150000				
-3	Concrete Replacement		1450		80000				
-15	Roof Drain System		1460	36	10000				
-13, -15, -19, -22	Siding, etct. Replacement, Relay & Sargeant at Arms		1460	2	32000				
-8	Flooring		1460		20000				
-13, -15, -19, -22	Alley Lighting		1475		5000				
-13, -15, -22	Furnace Replacement		1465.1		8000				
-15	Cabinets & Countertops		1460	4	15000				
-3, -6	Fence Replacement		1450	1	4500				
-2	Sprinkler System		1450	76	75000				
-All	Screens		1460	50	2000				
	Reserves		1490		0				

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 Billings	**Grant Type and Number** Capital Fund Program No: 2003 Replacement Housing Factor No:	**Federal FY of Grant:** 2003

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	
MT06P0010103-All	12/31/2004			12/31/2005			
-All	12/31/2004			12/31/2005			
-All	12/31/2004			12/31/2005			
-2, -5	12/31/2004			12/31/2005			
1-3, -13, -15, -19	12/31/2004			12/31/2005			
1-3	12/31/2004			12/31/2005			
1-15	12/31/2004			12/31/2005			
-13, -15, -19, -22	12/31/2004			12/31/2005			
-8	12/31/2004			12/31/2005			
-13, -15, -19, -22	12/31/2004			12/31/2005			
-13, -15, -22	12/31/2004			12/31/2005			
-15	12/31/2004			12/31/2005			
-2	12/31/2004			12/31/2005			

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

PHA Name Housing Authority of Billings				☒ **Original 5-Year Plan** ☐ **Revision No:**	
Development Number/Name/HA-Wide	Year 1	Work Statement for Year 2 FFY Grant: 2004 PHA FY: 2005	Work Statement for Year 3 FFY Grant: 2005 PHA FY: 2006	Work Statement for Year 4 FFY Grant: 2006 PHA FY: 2007	Work Statement for Year 5 FFY Grant: 2007 PHA FY: 2008
Administration	Annual Statement	65000	68000	68000	65000
Audit		1300	3000	3000	3000
A&E Services		17000	30000	0	0
Site Improvement		61000	99700	47300	0
Dwelling Structures		287300	258700	294000	408250
Dwelling Equipment		8000	10000	70500	0
Non-Dwelling Structures		31000			
Reserves		67332	60223	56832	63382
Total CFP Funds (Est.)		539632	539632	539632	539632
Total Replacement Housing Factor Funds					

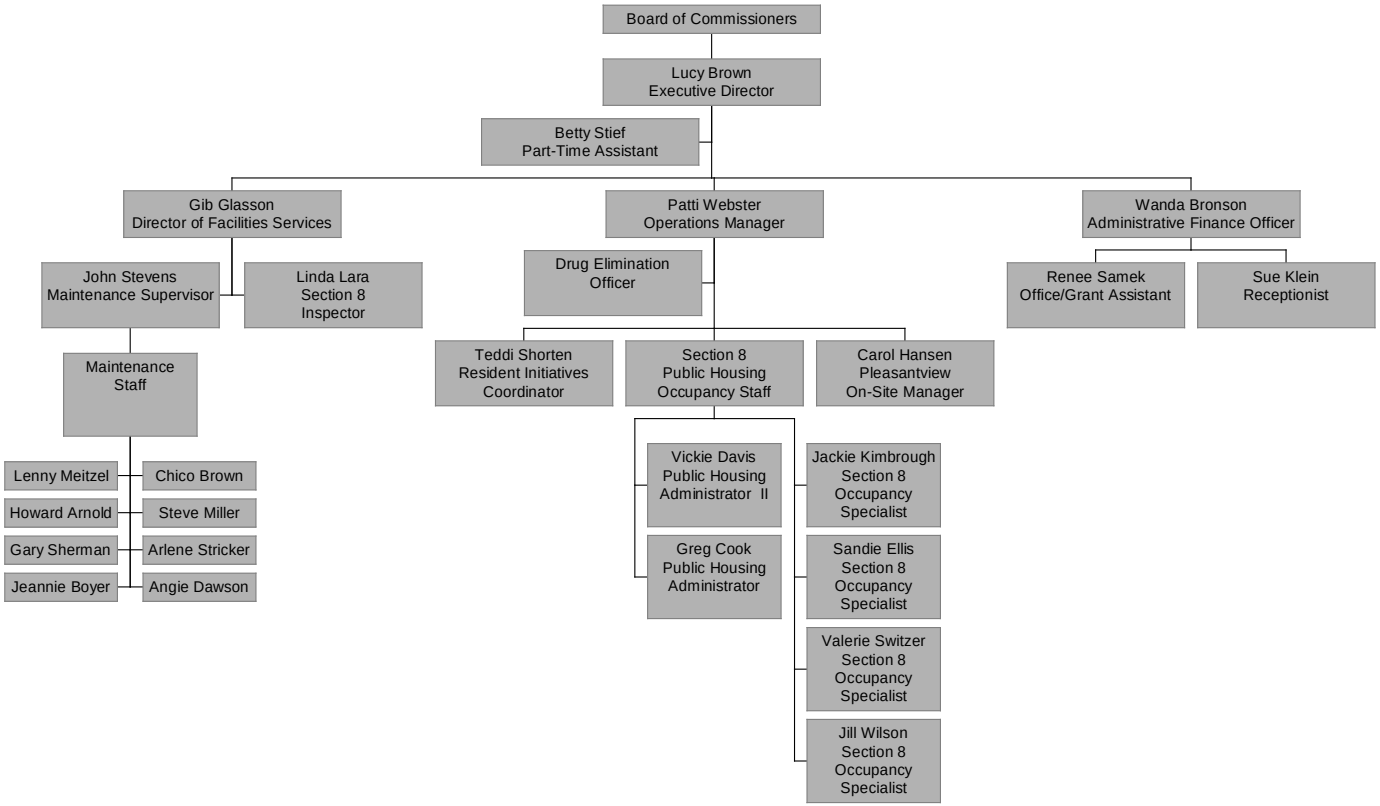
Capital Fund Program Five-Year Action Plan
Part II: Supporting Pages—Work Activities

Activities for Year 1	Activities for Year : 2 FFY Grant: 2004 PHA FY: 2005			Activities for Year: 3 FFY Grant: 2005 PHA FY: 2006		
	Administration	All	65000	Administration	All	68000
	Audit	All	3000	Audit	All	3000
	A&E	All	17000	A&E Services	All	30000
	Parking Lot Resurface	-3, -4, -6, -7, -8	31000	Picnic Tables1	-7	2000
	Interior Doors & Trim	-2	90000	Landscaping	-7	20000
	Replace Windows	-2	101300	Flooring	-6	134000
	Furnace	-13, -15, -19, -22	8000	Sprinkler System	-2, -8	72500
	Deck Replacement	-13	6500	Garage Door & Windows	-13, -15-,-22	11000
	Flooring	-13, -15, -19, -22 & apartment baths	50000	Windows	-4	48000
	Cabinets & Countertops	-=15, -19, -22	39500	Siding & Gables	-4	35000
	Sprinkler Systems	-4, -5	61000	Flooring	-13, -15, -19, -22	20000
	Reserves	All	67332	Parking Blocks	-2, -3	2700
				Insulate Crawlspace	-7	5000
				Medicine Cabinets	-3, -5	5700
				Fence	-13	2500
				Furnace	-13, -15, -19, -22	10000
				Reserves	All	60232

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

Activities for Year 1	Activities for Year : 4 FFY Grant: 2006 PHA FY: 2007			Activities for Year: 5 FFY Grant: 2007 PHA FY: 2008		
	Administration	All	68000	Administration	All	65000
	Audit	All	3000	Audit	All	3000
	Low Flow Shower Heads	All	22450	Roofs	-8, -13, -19, -22	46500
	Concrete Work	-6	20000	Cabinets & Countertops	-15	38000
	Windows	-6, -7	100050	Flooring	-13, -15, -19, 22	20000
	Appliance Replacement	-7	24000	Flooring	-2, -3, -5	303750
	ADA Washers & Dryers	-7	8000	Reserves	All	63382
	Cabinets & Countertops	-13	25000			
	Appliances	-13, -15	31500			
	Fence	-13, -15	15500			
	Walk of Mats	-4	40000			
	Washers & Dryers	-4	7000			
	Privacy Fence	-5	11800			
	Flooring	-4, -8	75000			
	Hallway Flooring	-7	6500			
	Flooring	-13, -15, -19, -22	25000			
	Reserves	All	56832			

HOUSING AUTHORITY OF BILLINGS



CAPITAL FUND PROGRAM TABLES START HERE

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

PHA Name Housing Authority of Billings	Grant Type and Number Capital Fund Program Grant No: MT06P00150103 Replacement Housing Factor Grant No:	Federal FY of Grant: 2003

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☐ **Performance and Evaluation Report for Period Ending:** **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	47000			
3	1408 Management Improvements Soft Costs				
	Management Improvements Hard Costs				
4	1410 Administration	65000			
5	1411 Audit	3000			
6	1415 Liquidated Damages				
7	1430 Fees and Costs	10,000			
8	1440 Site Acquisition				
9	1450 Site Improvement	159500			
10	1460 Dwelling Structures	79000			
11	1465.1 Dwelling Equipment—Nonexpendable	8000			
12	1470 Nondwelling Structures	150000			
13	1475 Nondwelling Equipment	5000			
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1499 Development Activities				

Annual Statement/Performance and Evaluation Report
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Capital Fund Program Five-Year Action Plan
Part II: Supporting Pages—Work Activities

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	Washers & Dryers	-4	7000			
	Privacy Fence	-5	11800			
	Flooring	-4, -8	75000			
	Hallway Flooring	-7	6500			
	Flooring	-13, -15, -19, -22	25000			
	Reserves	All	56832			

INTEROFFICE MEMORANDUM

TO: AGENCY PLAN FILE

SUBJECT: RESIDENT ADVISORY BOARD MEETING

DATE: DECEMBER 17, 2002

ATTENDEES: Phyllis Crawford, MT1-2 PHA Resident
Lili Johnson, MT1-7 PHA Resident
Adel Sather, MT1-5 PHA Resident
Elizabeth Sather, MT1-5 PHA Resident
Erica Kindsfather, Section 8 Client
Connie Bargar, Section 8 Client
Teddi Shorten, Resident Initiatives Coordinator
Vickie Davis, PHA Administrator
Greg Cook, PHA Administrator
Wanda Bronson, Admin Finance Officer
Gib Glasson, Director of Facilities
Lucy Brown, Executive Director
Betty Stief, Admin Finance Officer
Patti Miller-Webster, Operations Manager

Brown welcomed all attendees and requested they sign in. She passed out copies of the Agency Plan for FY 2003, taking last year's plan and marking it up. Brown said that we would also discuss the Capital Fund Plan as part of the Annual Plan.

Brown went over the Mission Statement and Strategic Goals that the Board of Commissioners has established. She advised that the Housing Authority has been designated a "High Performer" and explained what makes up this designation.

Brown said that the HA has submitted a Home Ownership Plan to the State.

Brown then asked for input from the attendees.

Crawford: It helps a lot having Patti Berkivits down at the Family Investment Center. There are less vandalism problems.

Brown: We have seen an increase of income in some PHA complexes in the last several years.

Bargar: It is easier for parents utilizing childcare.

Crawford: Requested additional educational sessions on the computers.

Webster: HAB is thinking of upgrading programs on the computer. The key to the Center can be checked out in the evenings.

Shorten: HAB offers interviewing classes, job readiness classes. The Boy Scouts, Girl Scouts also use the Center. We need more parent involvement and supervision of children. We do equal opportunity education in the newsletter.

Being no further comments, the meeting was adjourned.

Brown went through the marked-up Agency Plan. Attention was called to page 3 listing the supporting documents. The Housing Need Chart for this year's numbers will be the same as last years. Under Financial Resources, the only update required is the special preference given to Section 8 Welfare-to-Work. We will do a run on the effect of minimum rents and may change depending on the findings.

Brown stated that HAB would be reviewing the Payment Standards, Rent Reasonableness and possibly Eviction. The Grievance Policy requires change, as states with due process don't have to have hearings. It is possible that we will take this procedure out of the office. We will also be reviewing In-house income determination and charges and criminal background/sex offender. Section 8 is starting a new homeownership programs and HAB will be doing mass mailings for eligibility. We will continue to do outreach to landlords. Section 8 has 950 units and is adding more in January 2003.

Brown said that all residents and clients would be notified when the draft plan is ready.

Brown asked if the Section 8 attendees wanted to add anything at this point as the balance of the meeting would be a discussion of Capital Fund 2003. They had no additional input.

Glasson said HUD had cut $100,000 last year from the budget. Capital Fund 2003 is based on receiving the same funding at CF 2002. He stated that:

1st Priority is Energy Conservation
2nd Priority is Safety
3rd Priority is Cosmetic

Glasson explained that any item inn the 5 Year Plan could be used in earlier years thru fungibility.

FFY 2003: HAB has added sprinkler systems for MT 1-3 and 1-6. Hoses and sprinklers are expensive to replace year after year and it should cut down on our watering expenses.

FFY 2004: We are having problems with the flooring at MT 1-4 and since the existing flooring in has been discontinued, we plan to replace flooring in the apartment bathrooms.

FFY 2005: Our goal is to replace windows in all the units, as we cannot get repair parts. The replacement windows are more energy efficient and maintenance free. Crawford suggested dowels be furnished so windows can be kept open but no one could get into the units through the windows at Bunting. Glasson responded that new lighting in the alley is included in FFY 2003. Continuing, Glasson said the new windows are vinyl clad and reduce condensation and are cosmetically appealing. The REAC inspector saw these windows at MT 1-5 and was impressed.

HAB is continuing to replace cabinets, countertops and siding. HAB has eliminated additional parking at MT 1-7 to concentrate on energy efficient improvements.

Johnson again requested picnic tables at MT 1-7 and Glasson responded that they were in FFY 2005.

Crawford said 3 trees dies at the Family Investment Center over the last couple of years and requested they be replaced.

Sather: At MT 1-5 the faucets spray and are noise. Glasson said currently Maintenance is putting Y's on the faucets to cut down on the water pressure and eliminate the problem.

Glasson said that HUD looks at keeping utility costs down. HUD prefers each unit has its own meters. Energy conservation is a big thing for HUD.

Johnson requested that the hallway carpet be cleaned, and Crawford requested carpet cleaning at the Family Investment Center.

PET POLICY

[24 CFR 5.309]

PET POLICY

[24 CFR 5.309]

INTRODUCTION

The purpose of this policy is to establish the Authority's (Housing Authority of Billings) policy and procedures for ownership of pets in Public Housing units and to ensure that no applicant or resident is discriminated against regarding admission or continued occupancy because of ownership of pets. It also establishes reasonable rules governing the keeping of common household pets.

Nothing in this policy or the dwelling lease limits or impairs the right of persons with disabilities to own animals that are used to assist them. The Addendum Pet Policy governs the method and reasonable rules for keeping common household pets.

A. GENERAL STATEMENT:

Residents of the Authority will be allowed to maintain the reasonable ownership of certain types of pets under the policies and regulations contained herein.

B. MISSION STATEMENT:

It is the intent of the Authority to abide by the new Federal regulations as set forth by the Department of Housing and Urban Development as it relates to Pets in Public Housing. As such, this revised Pet Policy strives to invite reasonable current and potential residents to keep, shelter and maintain pets within designated developments of the Authority. It is also intended to discourage the unlawful introduction of those pets, herein outlined, which are dangerous or vicious and which otherwise are deemed a menace to our Community.

The Authority believes that through vigorous oversight, a sense of responsibility and community involvement will enable this Policy to be implemented successfully.

C. DEFINITION OF A COMMON HOUSEHOLD PET:

A Common Household Pet **(CHOP)** is defined as any domesticated dog, cat, bird, turtle and fish. (Fish aquariums must be approved by the Authority and not be over ten (10) gallons and cannot be used for commercial purposes.)

D. SPAYING AND NEUTERING OF COMMON HOUSEHOLD PETS:

All CHOPS (except fish and turtles) **must be spayed or neutered** before the pet can be registered with the Authority.

E. PET POLICY

1. Animals that Assist the Handicapped/Disabled

The provisions of the Authority's PP (Pet Policy) shall not be applied in a manner which would prohibit companion/service dogs used to assist a disabled or handicapped person. The Housing Authority of Billings is committed to improving the lives of its handicapped or disabled residents through the PP. The following qualifications must be met in order for a resident to fall under the Handicap/Disabled provisions of the PP:

Article 1. Verification of Handicapped/Disabled Exemptions: To qualify for this exemption, an acceptable verification establishing the disability must be provided.

Article 2. Verification of Pet/Animal Training: All residents utilizing the PP Handicapped/Disabled exemption must provide written verification in the form of a training certificate that the animal has been trained to assist a person with that specific handicap. In the case of a companion animal, verification from the resident's doctor stating the need of such animal must be provided.

Article 3. Pet Assists Person with Handicap/Disability: For a resident to be allowed a pet under the Handicap/Disabled Exemption of PP, the pet/animal must actually assist that person with the Handicap/Disability.

2. Number of Common Household Pets per Residency

Only one (1) Common Household Pet (CHOP) will be allowed per unit. (Fish are excluded from this provision of the PP.)

3. Abiding by Federal, State, and Municipal Laws and Ordinances

All residents must abide by all applicable Federal, State and Municipal laws and ordinances concerning the care/treatment of animals.

4. Types of Allowable Pets

The following lists the types of pets allowed under the Authority's PP. (The Authority reserves the right to use discretion in the allowable weight and height of each pet.)

Article1. Dogs and Cats must not weigh over **40** pounds when fully grown. The pet owner must be able to carry his/her pet.

Article 2. Only pets with a gentle disposition will be allowed.

Article 3. No dog shall be more than **20** inches in height at the shoulder at maturity.

5. Pets Not Allowed

The following lists the types of pets not allowed to reside within the Authority's residential units.

Article 1. Vicious or dangerous pets such as, but not limited to Pit Bulls, Doberman Pinchers, German Shepherds, Huskies, Rotweillers, Chow Chows, reptiles, rodents (with the exception of hamsters and gerbils), and arachnoids.

Article 2. Pets over the weight and/or height limits.

Article 3. Only birds that can be held in a reasonable-sized cage (as determined by the Authority) will be allowed. Farm animals including rabbits, ferrets and fowl are prohibited under any circumstances.

6. Conduct of Pets

The Authority reserves the right to require the removal of a pet if the conduct or condition is determined under the provisions of State and/or local law, in the discretion of the Authority to constitute a nuisance and/or threat to other residents, staff and the general public.

7. Designation of Pet/No-Pet Type of Pet Areas

The Authority reserves the right to designate buildings, floors of buildings, or sections of buildings as pet and no-pet areas. Authority management may direct such initial moves as may be necessary to establish pet and no-pet areas. The Authority will post signs and send notice to the residents concerning the designated pet/no-pet areas.

Article 1. The Authority can establish what type or breed of pets is allowed in the pet areas.

Article 2. No dogs of any type, size or breed are allowed in the Authority's apartment and townhouse units—only at houses that have enclosed fenced yards.

8. Unit Care and Inspections

The animal owner agrees to maintain the unit in a sanitary and odorless manner. No alterations may be made to the premises.

The Authority can conduct inspections of units under the following articles:

Article 1. The Authority may enter and inspect the unit and premises, after reasonable notice, during reasonable hours for compliance with the PP and other lease obligations.

Article 2. The Authority may also enter and inspect the unit if a written complaint is received alleging that the conduct or condition of the pet in the unit constitutes a nuisance or threat to the health and/or safety of the other occupants or other persons in the community.

9. Responsible Parties

The resident/pet owner will be required to designate at least one responsible party for the care of the pet if the health or safety of the pet is threatened by the death or incapacity of the pet owner, or by other factors that render the pet owner unable to care for the pet.

10. Pet Care & Conduct Regulations

The Authority reserves the right to establish Pet Care and Conduct Regulations (PCCR). PCCRs are established in order to maintain a high quality of life for all of the residents and to ensure the safety of the staff and general public.

Article 1. No pet (excluding fish) will be left unattended in any unit for a period of twelve (12) hours.

Article 2. No sick or injured animal will be accepted for occupancy without consultation and written acknowledgment of a veterinarian as to the condition of the animal's ability to live in an apartment situation. Acceptance regardless of documentation and consultation is the prerogative of Management. Admitted animals which suffer illnesses or injury must be immediately taken for veterinarian care at the animal owner's expense.

Article 3. All residents/pet owners must recognize that the other residents may be chemically sensitive or have allergies related to pets or may be easily frightened or disoriented by animals.

Article 4. Birds and turtles must be caged at all times.

Article 5. Dogs and cats shall remain inside the resident's unit. No animals shall be permitted to be loose in hallways, lobby areas, Laundromats, yards, community rooms or other common areas.

Article 6. When taken outside, dogs and cats must be kept on a leash at all times and controlled by an adult. Roaming of dogs and cats is strictly prohibited in all Authority developments.

Article 7. Residents shall not allow their pet to disturb, interfere or diminish the peaceful enjoyment of other residents. The terms "disturb, diminish and interfere" shall include, without limitation to barking, urinating in hallways, common areas or doorways, howling, chirping, biting, scratching; producing an Odor that infringes on other peaceful enjoyment and other like activities.

Article 8. Cats are required to be litter-box trained. The animal owner agrees to dispose of cat feces daily by putting it in a bag, closing it securely and placing it in the dumpster. The animal owner agrees that the full contents of the litter box will be disposed of in the same manner and will never be flushed down the toilet, put down the trash chute, or into the garbage disposal.

Article 9. If pets are left for more than twelve (12) hours unattended, the Authority may enter the dwelling unit, remove the pet and transfer it to the proper authorities. The Authority accepts no responsibility for the animal under such circumstances and the resident will be responsible for any costs that the Authority incurs as a result of the removal of such pet.

Article 10. Residents are prohibited from feeding or harboring stray animals. The feeding of stray animals shall consist of having a pet without written permission by the Authority.

Article 11. Pets not owned or registered by the resident with the Authority shall not be kept by the resident for any length of time or under any circumstances.

Article 12. No pet under any circumstance shall be chained or leashed to Authority property and/or grounds regardless of whether resident/pet owner is present.

Article 13. All leashes shall not exceed six (6) feet in length. Furthermore, the use of quick-release leashes are forbidden.

Article 14. Pets/animals not owned by the resident shall not be kept on a temporary basis for any length of time or under any circumstance.

Article 15. Should a resident's pet give birth to a litter, all of the pets must be removed immediately.

11. Licensing, Insurance & Registration of Pets

The Authority reserves the right to establish reasonable guidelines for the registration and licensing of pets on Authority property. Furthermore, copies of documents including but not limited to Licensing, Registration, Insurance and Training must be provided to the Authority at the time of pet registration.

Article 1. Prior written Authority approval, evidenced by a signed lease addendum, must be obtained prior to a resident owning or keeping a CHOP in a dwelling unit. (See Occupancy Lease)

Article 2. All residents/pet owners must register their pet with the City of Billings prior to bringing such pet to the Authority.

Article 3. Residents must show written proof, at the time the pet is registered, from a licensed veterinarian of annual rabies, distemper, and all other inoculations required by the State and local law and that the animal has been spayed or neutered. This information must be provided at each annual examination.

Article 4. All pets maintained by the residents must be registered with the Authority. This will include photos of dogs or cats.

Article 5. All residents/pet owners will be required to have appropriate renters/liability insurance to cover unanticipated costs of their pet.

Article 6. All registered canine owners must have appropriate insurance that covers at a minimum $6,000 in property damage and $100,000 in general liability. In addition, the Authority must be named as the additional insurer in order for the Authority to be notified if the insurance is canceled. Proof of insurance must be provided at time of pet registration. A qualified handicapped/disabled pet owner is required to have renter's/liability insurance.

12. Pet Fees and Charges

The Authority reserves the right to establish reasonable fees and charges (in accordance with federal, state and municipal laws and ordinances) in order to enforce the PP.

Article 1. Monthly Pet Charge: All dog and cat owners will pay a $35.00 monthly pet rental fee. This rental amount will not be refunded at the end of the tenancy. A qualified handicapped/disabled pet owner will not have an additional rental fee assessed.

Article 2. Verification of Canine Training: If the owner of a canine can show verification of an AKA sanctioned canine training class, the $35.00 Monthly Pet Fee will be reduced to $20.00.

Article 3. Pet Deposit: All residents/pet owners must pay a one-time refundable Pet Deposit (PD). The PD shall pay for reasonable expenses directly attributed to the presence of the pet in the unit/development, including, but not limited to, the cost of repairs, replacement, fumigation of the unit, etc. The PD for dogs is $250.00 and $100.00 for cats. The PD will be put into an escrow account and be refunded to the resident upon his/her termination of residency, reduced by the amount of damage, if any, to the premises caused by the pet. A qualified handicapped/disabled individual will not have a pet deposit charge.

Article 4. Pet Registration Charge: All residents registering a pet for the first time must pay a one-time Pet Registration Charge of approximately $15.00.

Article 5. Pet Waste Removal Charge (PWRC): Residents/pet owners that do not pick up their pet's droppings will be fined a PWRC of approximately $5.00 per occurrence.

Article 6. Violation of PP Charges: The Authority shall establish a schedule for fees and/or charges to be assessed against the resident/pet owner who violates the Authority's PP. These charges and reasonable expenses directly attributable to the presence of the pet in the developments shall be billed to the resident/pet owner, and thirty (30) days after will be due in full if a repayment agreement is not approved and set up by the Authority.

Article 7. Other Fees and Charges: The resident shall pay for the costs of repairs, any and all damages caused by the pet to the buildings, grounds, flooring, trim, finish, tiles, carpeting and other appurtenances. If damage is in the nature of stains or chemicals requiring the removal of stains and such damage cannot be restored to the original condition, residents shall pay the full cost and expense of replacing the item.

13. Notice for Pet Removal & Termination of Tenancy

If the resident/pet owner and the Authority are unable to resolve a violation of the PP or the pet owner fails to correct the violation within ten (10) days, or such time as allowed by Federal and/or State law or fails to make a written request for a meeting to discuss the violation, the Authority may serve notice to remove the pet and/or terminate resident's tenancy.

The notice shall contain:

1. A brief statement of the factual basis for the Authority's determination of the PP rule that has been violated.

2. The requirements that the resident/pet owner must remove the pet within ten (10) days, or such time as allowed by Federal and/or State law, of the effective date of the notice of pet removal.

3. The pet owner's failure to correct the violation, to request a meeting or to appear at the requested meeting may result in initiation of procedures to terminate the pet owner's tenancy.

DEFINITIONS

Authority……Housing Authority of Billings

PP……..Pet Policy

CHOP……Common Household Pet

PCCR……Pet Care and Conduct Regulations

PD……Pet Deposit

PWRC……..Pet Waste Removal Charge

Public Housing Lease Addendum
for Pets

THE LEASE AGREEMENT between the Housing Authority of Billings (Landlord) and _____ (Tenant) is amended for the rental and occupancy of the Dwelling (Home) located at _____ Billings, MT. This is Addendum to the Lease Agreement dated _____.

This Amendment is presented in accordance with the terms and conditions of the Lease Agreement and shall be attached to and made a part of that Lease Agreement. All other covenants, terms, and conditions of that Lease Agreement remain the same.

This Amendment will be effective on _____ to allow the keeping of a common household pet in the Home. The tenant family understands keeping a pet is a privilege and this privilege may be revoked if the pet becomes a nuisance or the owner is unable to control or care for the pet. Trained animals used to assist the handicapped are subject to the conditions of the Pet Policy and Pet Rules.

Except for trained animals used to assist the disabled, the Housing Authority requires a Pet Deposit of$250 for dogs and $100.00 for cats.

The Pet Deposit will be refunded in whole or in part within thirty (30) days of the termination of tenancy. The Housing Authority will inspect for damages and will deduct costs for cleaning and repair of damages attributable to the pet.

BY: _____ _____
Head of Tenant Family Signature and Date Telephone Number

BY: _____ _____
Other Tenant Family Adult Signature(s) Date(s)

BY: _____ _____
Housing Authority Agent Signature Date Prepared

PET REGISTRATION

Pet owners must register their pets with the Housing Authority and update this registration annually.

Type/Breed_____Color_____

Sex_____ Date Neutered_____Age_____

Name of Pet_____

Veterinarian's certification of the pet's inoculation:

_____ Date inoculated _____
Signature

_____
Print Name Telephone

_____
Address City, State, Zip

In case of an emergency, these individuals will take responsibility for the Pet if the pet owner is unable to care for the pet:

Signature	Signature
Print Name	Print Name
Telephone	Telephone
Address	Address
City, State, Zip	City, State, Zip

The head of the Tenant Family certifies to have read, understands, and agrees to abide by the Pet Rules.

BY:_____ _____
Head of Tenant Family Signature and Date Telephone Number

BY:_____ _____
Public Housing Administrator Signature Date Accepted

PUBLIC HOUSING
SERVICE AND COMPANION ANIMAL POLICY
(AUXILIARY AIDES)

Purpose: The purpose of this policy is to ensure uniformity in application of Service Animal/Companion Animal requirements and to ensure the welfare of all residents and the sanitation of properties.

All properties under Housing Authority of Billings management must allow persons with disabilities the use of a service and/or companion animal. Therefore, the Housing Authority of Billings pet deposit does not apply

Companion animals or comfort animals become service animals when a provider verifies that a person has a disability as defined by fair housing law and needs the animal for treatment and/or to live in the community as ably as someone without a disability

REGISTRATION: All animals must be registered upon admission, and registration must be renewed annually on the anniversary of admission date.

The following documentation must be completed before admission of an animal:

Service/Companion Animal requirements

- Request for a reasonable accommodation
- Owner will submit a copy of the animal's license or certification
- Dog tag immunization information
- References on where animal is to be taken in case of an emergency or how his or her animal should be taken care of in an emergency
- Verification of status as a Person with a Disability

DAMAGES:

Any damage to the unit, building, grounds, flooring, walls, trim, finish, tiles, carpeting, etc. will be the full responsibility of the animal owner, and the animal owner shall agree to pay costs involved in restoring any damage to original new conditions as well as any costs required for cleaning, defleaing, and deodorizing required because of such an animal. If, because of any such stains or chemicals to remove same, damage is such that it cannot be removed, animal owner hereby agrees to pay full cost and expense of replacing such materials.

SICK OR INJURED ANIMALS:

No sick or injured animal will be accepted for occupancy without consultation and written acknowledgment of a veterinarian as to the condition of the animal's ability to live in an apartment situation. Acceptance regardless of documentation and consultation is the prerogative of Management. Admitted animals which suffer illnesses or injury must be immediately taken for veterinarian care at the animal owner's expense.

INOCULATIONS:

Cats must have current inoculations as appropriate to the species, including but not limited to: feline distemper short. Dogs shall have certificates or appropriate inoculations for heart worm, parvo, and rabies. Such tests, vaccines or shots shall be maintained on an annual basis unless otherwise specified by a veterinarian. Both Service/Companion Animals must be wearing dog tags for immunization information. Every dog shall wear a valid rabies tag and all animals shall wear a tag containing animal owner's name, address and phone number.

WASTE DISPOSAL:

Cats are required to be litter-box trained. The animal owner agrees to dispose of cat feces daily by putting it in a bag, closing it securely and placing it in the dumpster. The Animal owner agrees that the full contents of the litter box will be disposed of in the same manner and will never be flushed down the toilet, put down the trash chute, or into the garbage disposal.

Proper disposal of dog feces is also required. Dog feces must be picked up when possible when the dog eliminates, put in a bag, closing it securely and placing it in the dumpster.

PUBLIC ACCESS:

Animals may not be tied up outside and left unattended and must be on a leash outside your housing unit at all times.

UNIT CARE AND INSPECTIONS:

The animal owner agrees to maintain the unit in a sanitary and odorless manner. No alterations may be made to the premises. The animal owner agrees that Management has the right to inspect the owner's unit as frequently as necessary. Entry of unit will be done according to the terms of the lease, bi-annually, as part of Management Policy and Procedures.

OWNER ABSENCE:

The Service/Companion Animal owner agrees that if for any reason the animal is left unattended for more than 12 hours, the owner will provide information on how his or her auxiliary aide should be cared for. The Management may call the designated alternative care providers if the Service/Companion Animal owner is unable to do care for the auxiliary aide. That person will then be permitted to enter the apartment and be required to remove the animal from the premises

In the event the animal owner can no longer care for the animal due to health deterioration, the animal owner agrees to remove the animal from the premises.

ANIMAL BEHAVIOR AND VIOLATION OF POLICY:

The companion animal's owner shall not permit the animal to cause any noise, damage, discomfort, nuisance or in any way inconvenience or cause complaints from other residents. After receipt of each verified animal complaint, Management will) issue a written warning. Three verified complaints constitute violation of this Auxiliary Aide policy, and after private conference, the owner may be required to remove the animal from the premises. The owner must then sign an affidavit stating that the animal is no longer on the premises and will not return in the future. Misrepresentation of this affidavit or refusal to remove the animal will be grounds for eviction of the animal owner. Management exercises the right to act immediately in animal removal in situations deemed an emergency. Service animals are excluded from this action.

CARE OF THE ANIMAL:

The animal owner agrees to humanely care for the animal by providing it with sufficient food and water and veterinary treatment when need. Resident agrees that abuse of the animal will result in Management contact with the Humane Society.

LIABILITY:

The animal owner shall be strictly liable for the entire amount of any injury to the person or property of other residents, staff or visitors of the Housing Authority of Billings caused by their animal and shall indemnify the Housing Authority for all costs of litigation and attorney's fees resulting from such damage. The animal owner should carry Renter's Insurance.

OTHER:

Tenants are prohibited from feeding stray animals

Tenant agrees to abide by all Rules and Policies regarding Auxiliary Aides established by the Authority now and in the future.

GENERAL INFORMATION

Requests for Reasonable Accommodations and/or Modifications

A reasonable accommodation is some exception or change that a housing provider makes to rules, policies, services, or regulations that will assist a resident or applicant with a disability in taking advantage of a housing program and/or dwelling. A reasonable modification is an alteration to the physical premises allowing a person with a disability to overcome obstacles that interfere with his/her use of the dwelling and/or common areas. The accommodation and/or modification must be necessary for the individual with the disability to enjoy and/or fully use services offered to other residents and/or the individual dwelling unit.

Reasonable accommodations can include but are not limited to:

- A change in the rules or policies or how a housing provider does things that would make it easier for you to live in the dwelling;
- Permitting a seeing eye dog for a household in a community where pets are not allowed, or not charging a deposit for a service animal though the housing provider charges deposits for pets;
- Permitting an outside agency to assist a disabled resident to meet the terms of the lease;
- Permitting a live-in Personal Care Attendant to live with a disabled resident who might need 24 hour assistance;
- A change in the way a housing provider communicates with or gives information, such as increasing the font size of typed documents to a person with a visual impairment.

Reasonable modifications can include, but are not limited to:

- A structural change or repair in your apartment or another part of the apartment complex that would make it easier for you to live in the dwelling;
- Altering your apartment so that the unit can be accessed and used by a person in a wheelchair.

NOTE: The individual requesting the modification may be responsible for the costs incurred in providing a reasonable modification to the premises. This individual may also be responsible for costs incurred in restoring the modification to original condition. The housing provider may request that a licensed contractor be obtained to make the modifications and/or restorations. If you and/or your housing provider have any questions regarding these provisions, please do not hesitate to contact our office.

A resident or applicant is entitled by law to a reasonable accommodation and/or modification when needed because of a disability of the resident, applicant, and/or a person associated with a resident or applicant, such as a guest. Housing providers must grant all requests for reasonable accommodations and/or modifications that are needed as a result of a disability if the request is not unduly burdensome or a fundamental alteration of the housing program. If a request is denied, you have the right to know the reasons in writing.

There must be a verifiable disability involved in order for the household to qualify for a reasonable accommodation and/or modification. The housing provider is required by law to keep all information about the disability confidential. A person has a disability if he/she has a physical or mental impairment that substantially limits one or more major life activities, has a record of such impairment, or is regarded as having such an impairment. Most serious medically treated conditions are considered to be a disability. A disabled resident must still be able to meet essential obligations of tenancy – they must be able to pay rent, to care for the apartment, to report required information to the manager, avoid disturbing their neighbors, etc., but there is no requirement that they be able to do these things without assistance.

Using the attached forms will help you and your housing provider to better formulate the request and implement any follow up necessary. The attached forms include:

- A Request for a Reasonable Accommodation and a Release that the housing provider can send to your medical provider. This form verifies your request and authorizes your medical provider to certify your status as a person with a disability and your need for the accommodation. (For you to complete)

- A Request for a Reasonable Modification and a Release that the housing provider can send to your medical provider. This form verifies your request and authorizes your medical provider to certify your status as a person with a disability and your need for the accommodation. (For you to complete)

- Verification of the need for an Accommodation and/or Modification (For your health care provider, such as a doctor, nurse, therapist, or social worker, to complete)

- Approval or Denial of a Request for a Reasonable Accommodation and/or Modification. (For your housing provider to complete)

REQUEST FOR A REASONABLE ACCOMMODATION

If you, a member of your household, or someone associated with you has a disability, and feel that there is a need for a reasonable accommodation for that person to have equal use and access to the community, please complete this form and give the form to your housing provider. Check all items that apply and explain fully. Use the other side of this form if you need more space. If you cannot fill out this form yourself, you may have someone assist you. Please keep copies of all documents that you submit to your housing provider.

Name of Tenant or Applicant: _____ Date: _____

1. The person(s) who has a disability requiring a reasonable accommodation is:

   ☐ Myself

   ☐ A person associated with me (such as a household member or guest).

   Name of person with disability: _____

   Phone#: _____

   Address: _____

2. I am requesting the following change or changes in a policy, procedure, service or regulation so that my household members, guests, and I can live here as easily as others and enjoy and participate equally in housing:

   _____

   _____

   _____

   OPTIONAL: If you know a company, organization, or individual that might be able to help or advise on the changes, please provide:

   Name: _____

   Address: _____

   Phone Number: _____

3. I need this reasonable accommodation because:

_____

_____

_____

Please notify me within ten working days on the attached Approval or Denial of Reasonable Accommodation and/or Reasonable Modification Request form.

Signature of Tenant, Applicant, or Guest: _____

Address:_____

REQUEST FOR A REASONABLE MODIFICATION

If you, a member of your household, or someone associated with you has a disability, and feel that there is a need for a reasonable modification for that person to have equal use and access to the community, please complete this form and submit the form to your housing provider. Check all items that apply and explain fully. Use the other side or this form if you need more space. If you cannot fill out this form yourself, you may have someone assist you. Please keep copies of all documents that you submit to your housing provider.

Name of Tenant or Applicant: _____ Date: _____

4. The person(s) who has a disability requiring a reasonable modification is:

   ☐ Myself

   ☐ A person associated with me (such as a household member or guest).

   Name of person with disability: _____

   Phone#: _____

   Address: _____

5. I am requesting the following modification/s so that my household members, guests, and I can live here as easily as others and enjoy and participate equally in housing:

   _____

   _____

   _____

   ***NOTE: The individual requesting the modification may be responsible for the costs incurred in providing a reasonable modification to the premises. This individual may also be responsible for costs incurred in restoring the modification to original condition. The housing provider may request that a licensed contractor be obtained to make the modifications and/or restorations. If you and/or your housing provider have any questions regarding these provisions, please do note hesitate to contact our office.**

   OPTIONAL: If you know a company, organization, or individual that might be able to help or advise on the changes, please provide:

Name: _____

Address: _____

Phone Number: _____

6. I need this reasonable modification because:

_____

_____

_____

Please notify me within ten working days on the attached Approval or Denial of Reasonable Accommodation and/or Reasonable Modification Request form.

Signature of Tenant, Applicant, or Guest: _____

Address:_____

VERIFICATION OF STATUS AS A PERSON WITH A DISABILITY

TO: _____

_____

_____

RE: Name of resident, applicant, or guest: _____

Address: _____

The tenant, guest, or applicant for tenancy listed above has sought the reasonable accommodation and/or modification described in the attached Request for a Reasonable Accommodation and/or Modification Request form. State and federal laws require housing providers to make reasonable modifications and/or accommodations to either the dwelling or other parts of the housing community and/or to policies, procedures, services or regulations when such changes are not unduly burdensome and are necessary because of a disability of a tenant, an applicant, a household member, or a guest of a tenant in order that the tenant, applicant, household member or guest can have equal opportunity to use and enjoy the housing and/or facilities.

Federal regulations under the Fair Housing Amendments Act, Section 504 of the Rehabilitation Act of 1973, and the Americans with Disabilities Act, define "disability" as:

1. a physical or mental impairment that substantially limits one or more major life activities;
2. a record of such an impairment;
3. being regarded as having such an impairment.

A physical or mental impairment includes:

1. any physiological disorder or condition;
2. cosmetic disfigurement;
3. anatomical loss affecting one or more of the following body systems: neurological, musculoskeletal, special sense organs, respiratory, speech organs, cardiovascular, reproductive, digestive, genito-urinary, hemic and lymphatic, skin, and endochrine.
4. Any mental or psychological disorder, such as cognitive delays, organic brain syndrome, emotional or mental illness, and/or learning disabilities.

Drug addiction (other than addiction caused by **current** illegal use of a controlled substance) and alcoholism (other than addiction caused by **current** use) are covered by these provisions as are, for example, cancer, heart disease, HIV, AIDS, and temporary disabilities (such as broken limbs or pregnancy).

IMPORTANT: The medical/social service professional certifying the disability and need for an accommodation and/or modification **IS NOT** required to reveal the specific nature and/or severity of the individual's disability.

As a medical/social service professional with the knowledge necessary to make a determination, I am able to advise that

_____

(name of client)

qualifies as an individual with a disability as defined above and that the following accommodation and/or modification is consistent with the needs associated with his/her disability.

Accommodation/Modification:

_____

_____

_____

Signature of Medical Professional

_____

Printed Name and Title

_____

Date

APPROVAL OR DENIAL OF REASONABLE ACCOMMODATION AND/OR REASONABLE MODIFICATION REQUEST

To: _____

_____

_____

On _____ (date) you requested the following reasonable accommodation and/or modification:

_____

_____

We have:

☐ approved your request. We will provide the following accommodation and/or modification:

_____

_____

☐ The change is effective immediately.

☐ We will provide the accommodation by: _____

☐ To make the change you requested, we must have bids and then arrange installation or we must order certain equipment. We anticipate that the change will be made by: _____ (date), and we will notify you if we discover that there will be a delay.

If you have questions or think this accommodation and/or modification will not meet your needs or will take too long to provide, please contact me immediately.

☐ denied your request. We have denied your request because (check all that apply):

☐ You are not a person with a disability or your guest or household member or person associated with you does not have a disability, as defined by federal and/or state law, and we are not required to give you an accommodation and/or modification.

☐ The accommodation and/or modification you requested is not reasonable because:

☐ you do not need this accommodation and/or modification to live here as easily as others without disabilities or to enjoy or participate equally in this housing as easily as others without disabilities.

☐ it will cost (fill in amount) $_____ and/or _____ hours of staff time to make the change you requested and this is an undue burden on our operations.

☐ it will fundamentally change the nature of our housing.

We used these facts to deny your request (list): _____
_____

To make this decision, we spoke with the following people, reviewed the following documents, and performed the following investigation:
_____

_____

_____

_____

If you disagree with this decision or have more information to provide to us, you may contact me at the following address and/or phone number.

Sincerely,

Signature: _____ Date: _____

Name: _____ Title: _____

Address: _____

_____

Phone Number: _____

SERVICE & COMPANION ANIMAL
REGISTRATION

Owners must register their service/companion animals with the Housing Authority and update this registration annually.

Type/Breed_____Color_____

Sex_____ Age_____

Name of Service/Companion Animal_____

Veterinarian's certification of the pet's inoculation:

_____ Date inoculated _____
Signature

_____
Print Name Telephone

_____
Address City, State, Zip

In case of an emergency, these individuals will take responsibility for the service/companion animal if the owner is unable to care for the service/companion animal:

Signature	Signature
Print Name	Print Name
Telephone	Telephone
Address	Address
City, State, Zip	City, State, Zip

The head of the Tenant Family certifies to have read, understands, and agrees to abide by the Service & Companion Animal Rules.

BY:_____ _____
Head of Tenant Family Signature and Date Telephone Number

BY:_____ _____
Public Housing Administrator Signature Date Accepted

CAPITAL FUND PROGRAM TABLES START HERE

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

PHA Name:	**Grant Type and Number**	**Federal FY of Grant:**
Housing Authority of Billings	Capital Fund Program Grant No: MT06P00150101 Replacement Housing Factor Grant No:	**2001**

Original Annual Statement ☐ **Reserve for Disasters/ Emergencies** ☐ **Revised Annual Statement (revision no: 3)**
☒ **Performance and Evaluation Report for Period Ending: 01/31/2003** ☐ **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	45,519.72	45,519.72	45,519.72	45,519.72
3	1408 Management Improvements Soft Costs				
	Management Improvements Hard Costs	7,115.96	7,115.96	7,115.96	7,115.96
4	1410 Administration	48,106.30	47,980.49	47,980.49	47,980.49
5	1411 Audit	1,370.00	1,370.00	1,370.00	1,370.00
6	1415 Liquidated Damages				
7	1430 Fees and Costs	3,500.00	6,100.00	6,100.00	6,100.00
8	1440 Site Acquisition				
9	1450 Site Improvement	33,238.50	31,268.10	31,268.10	31,268.10
10	1460 Dwelling Structures	426,687.52	426,183.73	426,183.73	397,684.08
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Nondwelling Structures				
13	1475 Nondwelling Equipment				
14	1485 Demolition				
15	1490 Replacement Reserve	0	0		
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1499 Development Activities				

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

PHA Name:	**Grant Type and Number**	**Federal FY of Grant:**
Housing Authority of Billings	Capital Fund Program Grant No: MT06P00150101 Replacement Housing Factor Grant No:	**2001**

Original Annual Statement ☐ **Reserve for Disasters/ Emergencies** ☐ **Revised Annual Statement (revision no: 3)**
☒ **Performance and Evaluation Report for Period Ending: 01/31/2003** ☐ **Final Performance and Evaluation Report**

Line No.	**Summary by Development Account**	**Total Estimated Cost**		**Total Actual Cost**	
19	1502 Contingency				
	Amount of Annual Grant: (sum of lines…..)	565,538.00	565,538.00	565,538.00	537,038.35
	Amount of line XX Related to LBP Activities				
	Amount of line XX Related to Section 504 compliance				
	Amount of line XX Related to Security –Soft Costs				
	Amount of Line XX related to Security-- Hard Costs				
	Amount of line XX Related to Energy Conservation Measures	298,747.55	251,905.41	251,905.41	251,905.41
	Collateralization Expenses or Debt Service				

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

PHA Name: Housing Authority of Billings

Grant Type and Number
Capital Fund Program Grant No: MT06P00150101
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
	Operations		1406		45519.72	45519.72	45519.72	45519.72	Complete
	Administration		1410		48106.30	47980.49	47523.24	47980.49	Complete
	Audit		1411		1370.00	1370.00	1,370.00	1370.00	Complete
	A&E Services		1430		3500.00	6100.00	0	6100.00	Complete
	Handheld Computer		1408	1	7115.96	7115.96	7115.96	7115.96	Complete
MT06P001003	Windows		1460	36	110,000.00	58632.00	0	58632.00	Complete
MT06P001004	Roofs		1460	20	21251.00	21251.00	18169.65	21251.00	In Process
MT06P001005	Fence		1450	40	23763.00	23763.00	23,763.00	23763.00	Complete
MT06P001007	Cabinets & Countertops		1460	30	73785.00	73785.00	0	73785.00	Complete
MT06P001008	Rebuild Patio Area		1460	14	23,278.00	54286.00	0	51571.70	In Process
MT06P001013	Furnace Replacement		1460	1	1819.17	1819.17	1,819.17	1819.17	Complete
	Flooring		1460	2	6023.71	6223.71	6023.41	6223.71	Complete
	Roof Replacement		1460	3	5512.00	5512.00	5512.00	5512.00	Complete
	Concrete Replacement		1450	20	6475.50	6475.50	6475.50	6475.50	Complete
	Siding		1460	1	16474.00	16474.00	10550.00	16474.00	Complete
	Cabinets		1460	1	0	2913.00	0	0	Added
	Fence - Claimjumper		1450	1	1029.60	1029.60	0	1029.60	Complete
	Cabinets & Countertops – Yellowstone		1460	5	0	22667.00	0	0	In Process
MT06P001015	Furnace Replacement		1460	1	2374.14	0	0	0	Deleted
	Flooring		1460	2	4340.00	4340.00	4340.00	4340.00	Complete
	Siding		1460	7	110312.76	1111112.76	80810.76	111112.76	Complete
	Replace Windows		1460	1	4450.00	4450.00	4450.00	4450.00	Complete

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

PHA Name: Housing Authority of Billings		**Grant Type and Number** Capital Fund Program Grant No: MT06P00150101 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
	Cabinets		1460	2	8500.00	8109.00	4071.00	8109.00	Complete
	Accordion Doors		1460	26	3734.00	3939.35	3734.00	3939.35	Complete
MT06P001019	Furnace Replacement		1460	1	568.48	568.48	568.48	568.48	Complete
	Flooring		1460	1	1548.65	1548.65	1,548.65	1548.65	Complete
	Siding		1460	1	14443.00	14443.00	14443.00	14443.00	Complete
MT06P001022	Flooring		1460	1	2230.61	2566.61	2230.61	2230.61	Complete
	Siding		1460	1	7768.00	7768.00	7768.00	7768.00	Complete
	Roofs		1460	1	3775.00	3775.00	3775.00	3775.00	Complete
MT06P001	Replacement Reserves		1490	1	0	0	0	0	

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 Billings	**Grant Type and Number** Capital Fund Program No: MT06P00150101 Replacement Housing Factor No:	**Federal FY of Grant:** 2001

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	
MT06P001	12/31/2002		12/31/02	12/31/2003		12/31/02	
MT06P001003	12/31/2002		09/30/02	12/31/2003		12/31/02	
MT06P001004	12/31/2002		3/31/02	12/31/2003		12/31/02	
MT06P001005	12/31/2002		12/31/01	12/31/2003		12/31/01	
MT06P001007	12/31/2002		3/31/02	12/31/2003		09/30/02	
MT06P001008	12/31/2002		12/31/02	12/31/2003			
MT06P001013	12/31/2002		12/31/02	12/31/2003			
MT06P001015	12/31/2002		12/31/02	12/31/2003			
MT06P001019	12/31/2002		12/31/01	12/31/2003		03/31/02	
MT06P001022	12/31/2002		12/31/01	12/31/2003		09/30/02	

CAPITAL FUND PROGRAM TABLES START HERE

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

PHA Name: Housing Authority of Billings	Grant Type and Number Capital Fund Program Grant No: MT06P00150102 Replacement Housing Factor Grant No:	Federal FY of Grant: 2002

Original Annual Statement ☐ **Reserve for Disasters/ Emergencies** ☐ **Revised Annual Statement (revision no:)**
☒ **Performance and Evaluation Report for Period Ending:03/15/03** ☐ **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	0			
3	1408 Management Improvements Soft Costs				
	Management Improvements Hard Costs				
4	1410 Administration	60,000	60,000	37542.85	37542.85
5	1411 Audit	3,000	3,000	3,000	3,000
6	1415 Liquidated Damages				
7	1430 Fees and Costs	16,000	16,000	0	0
8	1440 Site Acquisition				
9	1450 Site Improvement	21,000	53,424.41	13424.41	1,674.41
10	1460 Dwelling Structures	333,950	325,503	266509.71	123472.67
11	1465.1 Dwelling Equipment—Nonexpendable	81,300	80,300	73968	60430.50
12	1470 Nondwelling Structures				
13	1475 Nondwelling Equipment				
14	1485 Demolition				
15	1490 Replacement Reserve	24,382	1,404.59	0	0
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1499 Development Activities				

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

PHA Name: Housing Authority of Billings	Grant Type and Number Capital Fund Program Grant No: MT06P00150102 Replacement Housing Factor Grant No:	Federal FY of Grant: 2002

Original Annual Statement ☐ **Reserve for Disasters/ Emergencies** ☐ **Revised Annual Statement (revision no:)**
☒ **Performance and Evaluation Report for Period Ending:03/15/03** ☐ **Final Performance and Evaluation Report**

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
19	1502 Contingency				
	Amount of Annual Grant: (sum of lines…..)	539,632	539,632	394444.97	226120.43
	Amount of line XX Related to LBP Activities				
	Amount of line XX Related to Section 504 compliance				
	Amount of line XX Related to Security –Soft Costs				
	Amount of Line XX related to Security-- Hard Costs				
	Amount of line XX Related to Energy Conservation Measures	233,742	233,742	216410	118830.50
	Collateralization Expenses or Debt Service				

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

PHA Name: Housing Authority of Billings

Grant Type and Number
Capital Fund Program Grant No: MT06P00150102
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
MT06P001	Operations		1406		0	0		0	
	Administration		1410		60,000	60,000		37,542.85	In process
	Audit		1411		3,000	3,000		3,000	Complete
	A&E Services		1430		16,000	16,000		0	
MT06P001002	Roof Drains		1460	12	5,000	5,000		0	
	Gutters		1460	40	15,000	38,292		0	
	Refrigerators		1465	40	16,000	15,000		14,250	In Process
MT06P001003	Closet Shelving		1460	36	5,000	5,000		2,142	In Process
	Water Heater Replacement		1460	36	34,200	18,700		18,500	In Process
	Landing & Stairs		1460	36	0	26,500		438.16	In Process
	Concrete Replacement		1450	36	0	40,000			
	Roof Drain System		1460	36	0	10,000			
MT06P001005	Refrigerators		1465	40	16,000	16,000		14,250	In Process
	Parking Lot Resurface		1450	40	0	11,750		0	
MT06P001006	Stoves		1465	36	10,000	10,000		7,837.61	In Process
	Refrigerators		1465	36	18,800	18,800		12,825	In Process
MT06P001008	Refrigerators		1465	14	5,600	5,600		4,987.50	In Process
	Cabinets & Countertops		1460	14	63,000	41,254		39,386.05	In Process
	Stoves		1465	12	4,900	4,900		2,612.39	In Process
	Windows, Soffit, Facia		1460	14	0	50,200		39,900	In Process
MT06P001013	Cabinets & Countertops-Cambridge		1460	1	4,200	3,992		3,802.25	In Process
	Cabinets & Countertops-Yellowstone		1460	1	800	800		0	

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

PHA Name: Housing Authority of Billings		Grant Type and Number Capital Fund Program Grant No: MT06P00150102 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
	Flooring		1460	5	10,000	10,000		5,284.11	In Process
	Furnace		1465	5	3,000	3,000		2,402	In Process
	Windows-Cambridge, Jansma		1460	2	8,500	8,500		0	
	Fence-Santa Fe		1450	1	6,000	1,674.41		1,674.41	Complete
MT06P001015	Flooring		1460	5	10,000	10,000		2,115.45	In Process
	Furnace		1465	2	3,000	3,000		1266	In Process
	Cabinets-Lewis, Phillip		1460	2	7,000	8,223		7,905.70	In Process
	Windows-Rehberg		1460	1	2,500	2,500		0	
	Siding-Relay, Coliseum		1460	2	47,000	36,743		0	
MT06P001019	Flooring		1460	2	5,000	5,000		1,281.60	In Process
	Furnace		1465	1	2,000	2,000		0	
	Siding-Ahoy		1460	1	15,000	21,650		0	
MT06P001022	Replace Deck-Torch		1460	1	5,000	5,000		0	
	Flooring		1460	1	3,000	3,000		2,717.35	In Process
	Furnace		1465	1	2,000	2,000		0	
	Siding-Golden Blvd		1460	1	20,000	15,149		0	
	Replacement Reserves		1490		24,382	1,404.59		0	

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 Billings	**Grant Type and Number** Capital Fund Program No: MT06P00150102 Replacement Housing Factor No:	**Federal FY of Grant:** 2002

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	
MT06P001	12/31/2003			12/31/2004			
MT06P001002	12/31/3002			12/31/2004			
MT06P001003	12/31/2003			12/31/2004			
MT06P001005	12/31/2003			12/31/2004			
MT06P001006	12/31/2003			12/31/2004			
MT06P001008	12/31/2003			12/31/2004			
MT06P001013	12/31/2003			12/31/2004			
MT06P001015	12/31/2003			12/31/2004			
MT06P001019	12/31/2003			12/31/2004			
MT06P001022	12/31/2003			12/31/2004			

Section IV.

Rental Needs

In order to assess rental needs in Billings and the surrounding areas, the study team conducted in-person interviews with real estate brokers, developers, property managers, neighborhood representatives and government officials. We administered a mail survey that was completed by more than 600 area households. The study team also collected quantitative data regarding the area's rental housing stock from the City of Billings, the U.S. Census Bureau and Howard Sumner, a local Realtor who maintains an extensive database regarding the local real estate market. BBC used these data to prepare an assessment of current rental needs and a projection of future needs.

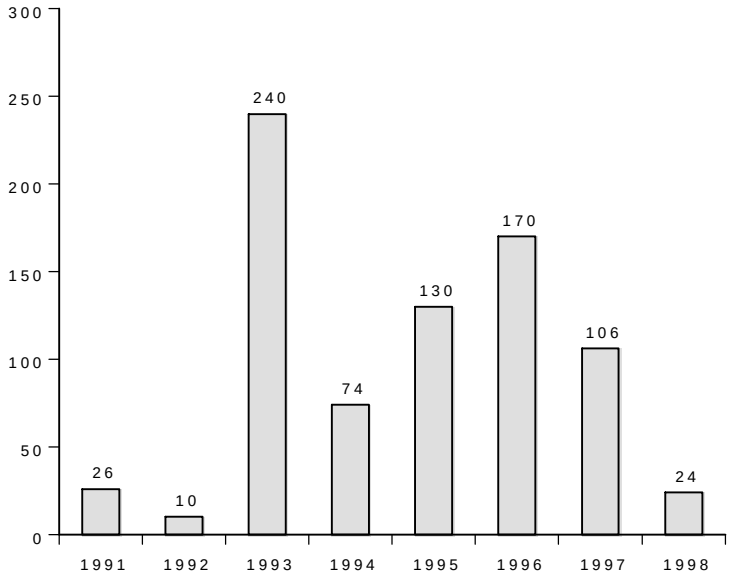
This section first summarizes existing data regarding the city's rental housing supply and the affordability of those units. Next, it presents local perceptions of rental housing needs as reflected in the in-person interviews and survey responses. It concludes with the results of BBC's quantitative analysis of current and future needs.

Rental Housing Supply

At the end of 1998, there were approximately 39,320 single family homes and multifamily units in the City of Billings. We estimate that approximately 40 percent of these units were in the rental market and 60 percent were owner occupied. Very few new rental units were built in the early 1990s. Multi-family construction activity increased during the mid-1990s, although some of these projects were built as condominiums, not rental units. Several of these projects, including Shiloh Glen and Brush Meadow, were subsidized by low income housing tax credits. Exhibit IV-1 shows multi-family units built in the area administered by the Billings Building Division, which includes the City of Billings and everything within a 4.5 mile perimeter from the city limits.

Exhibit IV-1.
Multi-Family Construction, Billings Area
1991-1998

Source:
City of Billings Building Division.



Section IV.

Rental Needs

Billings' rental housing supply includes single family homes and mobile homes as well as apartments. Using data compiled by Howard Sumner regarding all types of rental housing, BBC prepared analyses of rent trends in Billings. Exhibit IV-2 compares median advertised rents from the past four years to the median rent reported in the 1990 Census. It appears that rents rose sharply during the early 1990s when little new multi-family housing was constructed. It is notable that rents have remained stable as additional supply has been added.

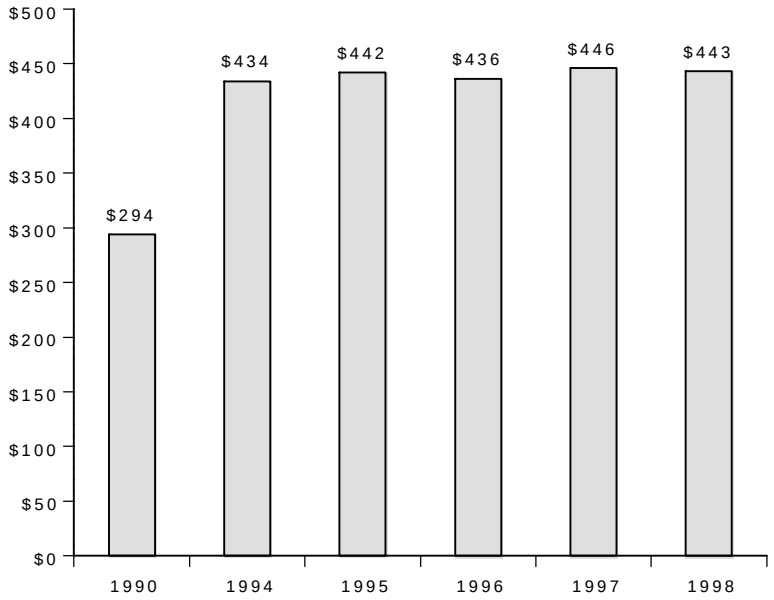
Exhibit IV-2.
Median Advertised Rents

Note:

1990 median presented for comparison.

Source:

BBC Research and Consulting
from U.S. Census data and data compiled
by Howard Sumner.



Rental Needs

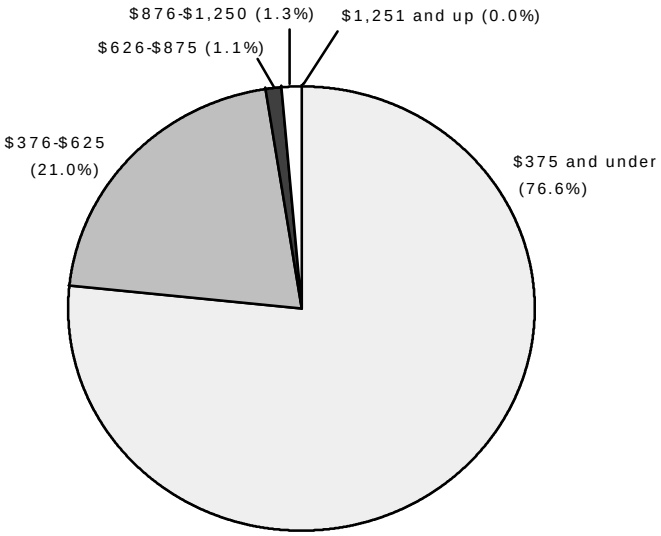
Exhibit IV-3 compares the distribution of rental rates in 1990 with those in 1998. In 1990, three-quarters of Billings apartments rented for $375 or less. By 1998, less than a third of advertised rents were in that range. Exhibit IV-4 shows median rental rates broken down by unit size.

Exhibit IV-3.
Rent Distribution,
1990 and 1998

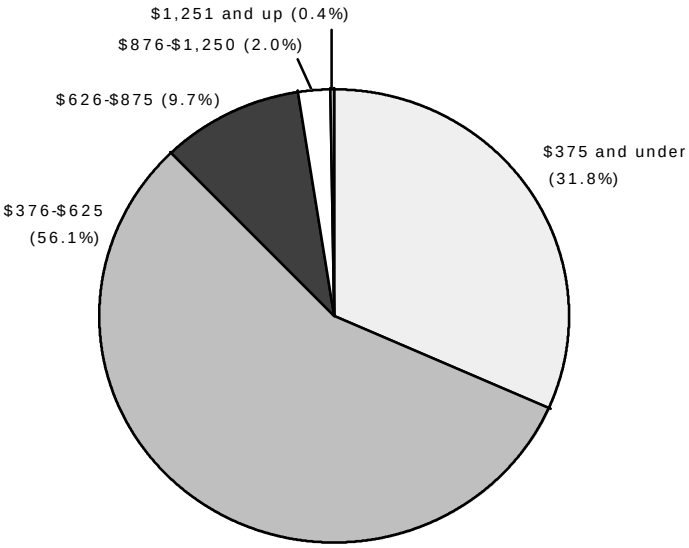
Source:

1998 data compiled by Howard Sumner;
1990 data from U.S. Census.

1990



1998



Rental Needs

Exhibit IV-4. Median Rents by Unit Size, 1990 and 1998

Source:
BBC Research & Consulting
from data compiled by Howard Sumner.

	Efficiency	1 Bedroom	2 Bedroom	3 Bedroom	4 Bedroom
1998	$250	$336	$458	$598	$700
1997	$225	$333	$469	$590	$800
1996	$233	$335	$442	$559	$663
1995	$238	$331	$453	$588	$725
1994	$218	$313	$461	$619	$800

The fact that rental rates have remained stable as new supply has been added to the market indicates that Billings has a low vacancy rate. While some local property management companies track this information, it is proprietary. There is no publicly available source for this information in Billings. We did ask interviewees who are familiar with the local rental market for their estimates. They estimated the current vacancy rate to be 4 to 5 percent.

Rental Housing Affordability

Before examining more detailed comparisons of Billings renters and the units available for rent, there is a basic measurement that indicates the relative affordability of Billings' rental housing supply.

1998 median rent for Billings apartments was approximately $443. Rent levels should not exceed 30 percent of monthly income; otherwise, households will be cost-burdened. Therefore, an annual household income of $17,720 is required to afford the median apartment. $17,720 is 48 percent of Billings' estimated 1998 median household income.

The 1998 median rent of $443 is a 51 percent increases over Billings 1990 median rent of $294. Over the same period median household income in Billings increased 40 percent. As with home prices, rental rates are increasing faster than incomes.

Perceptions of Rental Housing Needs

Personal interviews and survey responses allowed us to gather more information about rental housing needs in Billings and other parts of Yellowstone County. A list of interviewees is presented in Appendix A. Appendix B includes the survey instruments and results. The interviewees identified two major concerns regarding rental housing:

- Affordability
- Condition

Section IV.

Rental Needs

Affordability. Several of our interviewees voiced concern about the affordability of rental housing in the Billings area. There was particular concern about the amount of housing available for very low income households. Most of the affordable rental projects developed over the past ten years have been subsidized by Low Income Housing Tax Credits. Some or all of the units in these projects are reserved for households with incomes of 60 percent of area median or less. Individuals and families earning less than 30 percent of area median income often are not served by these developments.

For a city of less than 100,000 residents, Billings has a substantial number of public housing and income-restricted rental units. The Housing Authority of Billings (HAB) also has 760 Section 8 vouchers and certificates to assist individuals and families in renting market-rate units. With almost 40 percent of households earning less than $25,000 per year, however, the supply of lower cost housing does not meet the demand.

One indication of the unmet need for affordable rental housing is the length of the HAB's waiting list. There are currently almost 1,300 households on the waiting list for Section 8 assistance. Applicants now receiving vouchers and certificates have spent more than a year on the waiting list.

In the Authority's public housing, the smaller units (1 and 2 bedrooms) are in the most demand. Households needing a three or four-bedroom units generally currently wait about three months before they are placed in an HAB unit, while individuals and families requesting a one or two-bedroom unit generally wait for a year or more before a unit becomes available.

Interviewees also pointed out that many of Billings' income-restricted units were built during the 1970s. When these properties were built with federal subsidies, their owners agreed to restrict rents for 20 years. These original contracts have now expired and are being renewed by the federal government on a year-by-year basis. There are about 700 units in Billings that may not remain income-restricted. Either the federal government may not renew the contracts or the individual property owners may choose not to participate in the program any more. This would make the shortage of affordable rental housing even more acute.

A significant number of survey respondents also identified a need for more affordable rental housing. Approximately 28 percent of survey respondents from the Billings area said that the need for affordable rental housing in their community was poorly met or not met. In the outlying areas, 42 percent of respondents thought there was an inadequate supply of affordable rental housing.

Of the renters in the Billings area that responded to our survey, 61 percent were cost-burdened (i.e., paid more than 30 percent of their monthly income for rent.) In the outlying areas, that proportion was 46 percent. Because of the small number of responses received from renters (53 in Billings-Lockwood, 13 in the outlying areas), it is unclear whether their replies reflect the situation of all renters. It is interesting to note, however, that in the Census Bureau's Comprehensive Housing Affordability Strategy (CHAS) database, which is based on the 1990 census, 58 percent of Billings low and moderate income households were cost-burdened and 47

percent of low and moderate income households in the remainder of the county were. Among survey respondents (and perhaps among all renters), the burden of high rents has not decreased over the past eight years.

Condition. Another issue that is related to the affordability of rental housing is the condition of rental housing. When affordable housing is in short supply, some renters will be forced to settle for units in poor condition.

Several of our interviewees expressed concern about the condition of rental properties in Billings, especially rental houses and mobile homes. One representative of a local non-profit explained that many of these houses are not professionally managed. The amount of maintenance performed by individuals owners varies widely. Another person familiar with the local rental market said, "There is a lot of substandard housing in Billings that people are living in. When I say substandard, I mean electrical, sewer and water problems."

Units occupied by households receiving Section 8 assistance must pass Housing Quality Standards inspections. Other rental units are not inspected regularly. The only government agency that can inspect an existing rental unit without the owner's permission is the Yellowstone County Health Department.

Some single family houses have been illegally subdivided into apartments. These can be dangerous for egress in fires and for other reasons. Code enforcement officers cannot enter these units without the owner's permission. They learn about them through complaints from neighbors about parking violations or by the number of mailboxes on the home's exterior. One non-profit agency representative told us that many of her clients live in illegal basement and garage apartments.

One quarter of the Billings area renters that responded to our survey said that their landlord does not make repairs promptly when asked. Six of the 13 renters responding from outlying areas (46 percent) stated that their landlords do not make requested repairs.

BBC's Quantitative Analysis

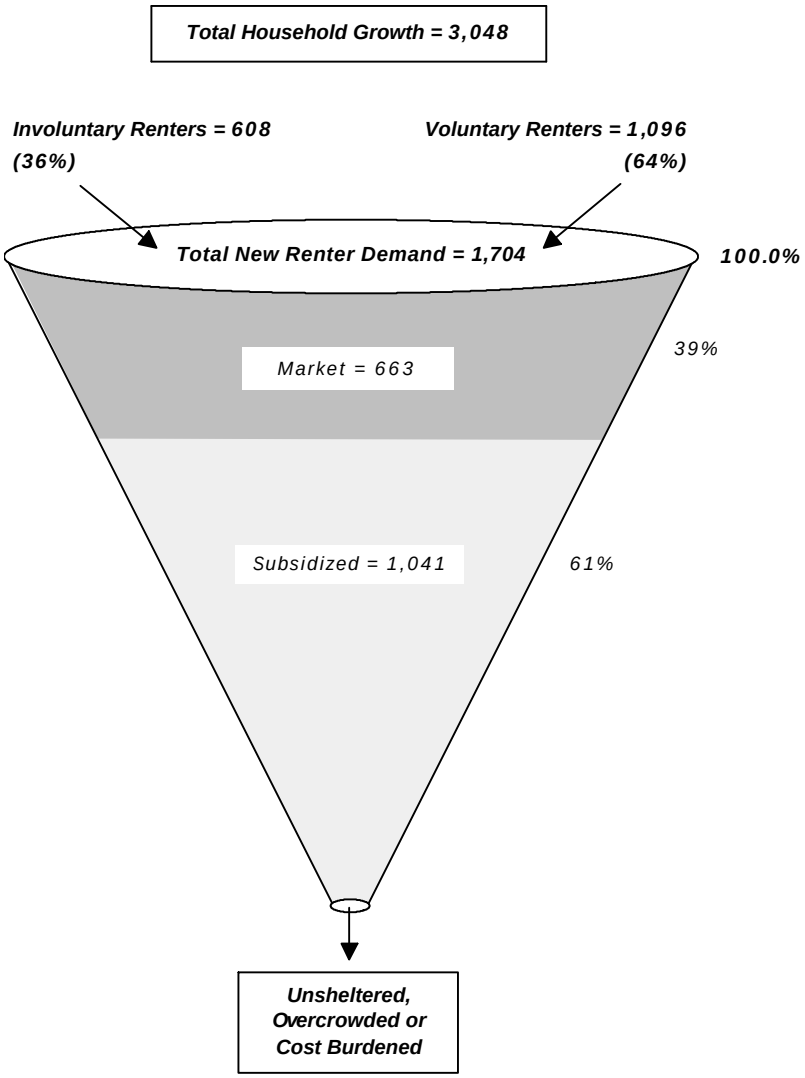
A comparison of current supply and demand for both single family and multi-family housing was presented in Section III.

Future needs for rental housing can be projected based on the same household income and tenure (i.e., ownership vs. rental) information that was used to forecast the number of new home buyers. Of the 3,048 net new households projected for Billings in 2003, 1,096 are expected to choose to rent. In addition, 608 households that wish to own will become involuntary renters because they will not be able to afford to buy. Income distribution projections indicate that 39 percent of renter households will have adequate income to pay market rents; the other 61 percent will need rental assistance or will be cost-burdened without it. The rental market calculations are summarized in Exhibit IV-5.

Rental Needs

Exhibit IV-5.
Anticipated Changes in Billings Rental Housing Market, 1999-2003

Source:
BBC Research & Consulting.



Summary

Survey respondents and interviewees identified two major concerns regarding rental housing in the Billings area: affordability and condition.

Affordability. Rental rates are rising faster than incomes. From 1990 to 1998, the median rent in Billings rose 51 percent from $294 to $443. Over the same period median household income in Billings increased 40 percent. As with home prices, rental rates are increasing faster than incomes.

Section IV.

Rental Needs

The current supply of public housing, privately owned income-restricted housing, and housing vouchers and certificates does not meet the demand of Billings low-income households. There are currently almost 1,300 households on the waiting list for Section 8 assistance.

Condition. Several interviewees who are familiar with the Billings rental market expressed concern about the condition of many lower priced units, especially older houses and mobile homes. Many of these are not professionally managed and the level of maintenance provided by individual landlords varies greatly. Only public housing and units in the Section 8 program receive regular inspections.

This is an issue that goes hand in hand with affordability. When affordable housing is in short supply, some renters will be forced to settle for units in poor condition.

BBC's quantitative analysis provided a current estimate and future projection of rental needs in Billings.

Current Needs. As explained in Section III, there is a shortage of for-sale and rental housing for households earning less than $15,000. That gap is ameliorated by Section 8 vouchers and certificates but not eliminated. We estimate that the current shortfall is more than 700 units. These 700 households with incomes of less than $15,000 a year are cost-burdened in their current apartments or houses.

Future Needs. Using PCensus projections of income distribution within Billings in 2003, BBC estimated that about 1,040 new households (34 percent of the projected 3,050 net new households) will be low income renters who need rental assistance. Over the five-year period, 208 new households a year will need assistance. Without assistance, these renters are likely to spend more than 30 percent of their income on rent or to double-up with other families in overcrowded conditions.

Section V.

Special Needs

Groups with special needs for housing include the elderly, severely mentally ill persons, developmentally disabled, physically disabled, persons addicted to alcohol/drugs and persons with AIDS/HIV. In general, they have special needs because of low incomes, because structural adaptations are necessary or because on-site services are required.

Background Information about Special Needs Populations

BBC obtained data from several sources in order to arrive at estimates of Billings residents in various special needs categories.

Elderly. The fastest growing age cohorts in Billings are residents aged 45 to 54 and residents over 75. These trends reflect the aging of baby boomers and increasing life expectancies nationwide. They also mean that over the next decade, the elderly population in Billings will grow.

There is no current data source that provides income information for elderly households. However, if the number of low and moderate-income, elderly households increased at the same rate as the overall number of elderly residents since 1990, Billings would have had about 5,400 low and moderate-income, elderly households in 1998.

Severe mental illness. The National Institute for Mental Health (NIMH) estimates that 3 percent of the population, nationwide, experience severe and persistent disorders. With a county population of 126,000, this suggests that approximately 3,800 Yellowstone County residents are severely mentally ill. Approximately 2,800 of those residents live in the City of Billings.

The South Central Mental Health Center estimates that there are between 2,500 and 3,000 individuals who experience severe mental illness in Yellowstone County. This number is based on estimates of the percentage of the population that the Mental Health Center serves and the percentage of those served who reside in Yellowstone County.

Physically disabled. Study team representatives obtained two estimates of persons with physical disabilities. A nationwide survey conducted in 1994-95 by the Census Bureau indicated that 9.9 percent of Americans have severe disabilities. The definition of severe disability was fairly broad and included people with developmental disabilities. Given this proportion, 9,100 people in the city and 12,500 people in the county would have physical or developmental disabilities.

The most relevant data for Billings comes from the 1990 Census, which provided the proportion of people with mobility and self-care limitations in each metropolitan statistical area. In the Billings MSA, 1.09 percent of people aged 16 to 64 and 1.46 percent of people aged 65 and over had a mobility or self-care limitation.

Applying these incidence rates to Billings' 1998 population produces the following estimates:

- 998 people aged 16 to 64 with mobility or self-care limitations
- 1,364 people aged 65 and over with mobility or self-care limitations

Developmentally disabled. A representative from the State of Montana's Department of Public Health and Human Services stated that they provide services to nearly all developmentally disabled individuals in Yellowstone County. Their *Montana Developmental Disabilities Database* has active records for 534 individuals in Yellowstone County. If the proportion of developmentally disabled residents matches the overall proportion of population, about 390 of these residents live in the City of Billings.

Substance abuse. The State of Montana's Department of Public Health and Human Services surveyed substance abuse statewide in 1998. Their report estimates that 1.1 percent of Montana residents suffer from substance abuse or dependence. If this percentage holds true in the Billings area, 1,000 city residents and 1,400 county residents abuse or are dependent on alcohol or illegal drugs.

AIDS/HIV. The State of Montana's Department of Public Health and Human Services surveyed the AIDS population in Montana in 1999. They report that Yellowstone County has 61 to 85 AIDS cases.

Elderly Residents

As Billings residents age, they will need a variety of housing options that provide different levels of social support and personal care. Interviewees noted that there is substantial market-rate development for the elderly in Billings, but that there is a need for more affordable housing with a variety of services.

Privately owned facilities for low-income elderly residents include Prairie Tower (108 subsidized units), Guadalupe Gardens (20 subsidized units) South Forty (100 subsidized units), Sage Tower (111 subsidized units) and Pleasant View (102 subsidized units). The new tax credit project in West Billings will provide 75 additional units for moderate income, elderly residents. Low income, elderly residents can also receive Section 8 assistance. Three hundred of the Housing Authority's 760 certificates and vouchers are currently designated for the elderly

According to our interviewees, vacancy rates at all of the developments for low income elderly residents are very low. South Forty has a long waiting list. Only Sage Tower has a substantial number of vacancies. Past problems in the building are being resolved under new management and occupancy is expected to rise. We were also told that there are a large number of elderly residents on the waiting list for Section 8 assistance.

The ongoing demand for low-income, elderly housing is due, in part, to the fact that Billings attracts elderly residents from other parts of Yellowstone County and other parts of eastern Montana. While most elderly people would rather remain in their homes (or at least their home towns), they need the medical services provided in Billings.

Some of the housekeeping and personal care services that are provided in market-rate assisted living facilities are provided to residents of low-income complexes by outside agencies. If new complexes are developed, they should be designed to facilitate these services by including space for congregate meals, a large laundry room and an office for an on-site social worker.

For long-time Billings residents, remaining in their own homes is often the lowest cost option and the one most desired by the residents themselves. While some organizations provide home repair, winterization and installation of safety devices like bathtub grab bars, there is a greater need for these services than existing organizations can fill. Additional funding for housekeeping and personal care would allow more people to remain in their homes.

Severe Mental Illness

While there are more than 2,000 people in the city with severe mental illnesses, only a portion of those will have unmet housing needs. However, one interviewee noted that few of her organization's clients live with their families. Since families are a common housing solution for people with mental illness, this could indicate a high percentage of housing needs among the mentally ill in Billings.

Many persons with mental illness can live on their own as long as they take their medications or receive therapeutic services. Others need the level of support that can be provided in group facilities. There are currently three group homes in Billings that provide three levels of care: crisis stabilization, intensive and supportive. While the crisis stabilization home houses people for shorter stays, individuals generally live at the supportive services home for six to eight months. These three facilities stay 90 to 95 percent full.

The largest housing problem for mentally ill people in Billings is the lack of affordable housing. Much of the city's rental housing stock is out of reach of mentally ill individuals with low incomes. The situation has improved somewhat in recent years with the construction of a number of mid-priced apartment complexes. While low-income mentally ill persons are eligible for Section 8 vouchers and certificates, none of this rental assistance is specifically set aside for the mentally ill.

Billings may need another intensive or supportive group home to serve the needs of clients in the PACT (Program of Assertive Community Treatment) program. Because the new state mental hospital will be smaller than the old facility, it is necessary to reduce the number of institutionalized, mentally ill persons. In order to do that, the state is looking at the PACT treatment model. Billings and Helena will operate pilot programs. This program provides an

intensive level of services to people with severe mental illness who are living in the community. A group-home setting will be appropriate for some of the participants in this program. Because the existing group homes in Billings are already operating close to capacity, an additional facility may be necessary to meet the increased demand.

Disabled Persons

Low-income, disabled persons in Billings need affordable and accessible housing. While there are some community resources available, they are too limited to meet the existing needs.

There is some accessible public housing available in Billings, but it is generally full. Disabled people on the Section 8 waiting list face the same year-long wait as other applicants. Housing authority staff characterize persons on the waiting list with disabilities that do not necessitate accessible units but do limit their ability to earn money as the group with the most pressing housing needs.

Accessible Space, Inc. (ASI) built a 25-unit, accessible multifamily development in Billings two years ago. That project filled in three months. ASI estimates that individuals currently on the waiting list for these units will spend eight years waiting for an apartment. ASI staff estimate the unmet need for accessible apartments to be approximately 125 units. While ASI would like to build another accessible project in Billings, funding cuts in the federal Section 811 Program of Supportive Housing for Persons with Disabilities will make that difficult.

The City of Billings provides $10,000 in CDBG funds to the Living Independently for Today and Tomorrow (LIFTT) ramp-building program. This funding can cover about three ramps. Usually, the agency has a waiting list of 10 to 20 individuals who need ramps. The agency is able to assist some of these people by using donated materials or recycling used ramps.

HIV/AIDS

Low-income persons with AIDS are served by the Section 8 program, although there is no assistance set aside for them. People with AIDS often need housing close to the hospitals, which is difficult to obtain. Much of the affordable housing around the medical corridor is occupied by students because MSU-Billings is also located nearby.

Summary

The most recent estimates of special needs populations are presented below:

- 5,400 low and moderate-income elderly households in Billings
- 2,500 to 2,800 persons with severe mental illness in Billings
- 1,000 people aged 16 to 64 with mobility or self-care limitations in Billings

Section V.

Special Needs

- 1,360 people aged 65 and over with mobility or self-care limitations in Billings
- 534 developmentally disabled persons in Yellowstone County
- 1,000 persons with substance abuse/addiction problems in Billings
- 60 to 85 persons with HIV/AIDS in Yellowstone County

The categories above overlap to some extent. For example, some of the people over 65 with mobility limitations are in low or moderate income households and some of the people with severe mental illness may also have substance abuse problems.

While it is difficult to obtain precise data on the number of people in these special needs categories who currently require housing assistance, human service agencies recognize that there are a number of needs that are currently unmet or inadequately met within the City of Billings.

Additional Affordable Rental Housing. Just as additional income-restricted housing developments or additional rental assistance certificates and vouchers would help the overall low-income population in Billings, these resources would also assist low-income renters with special needs.

Elderly Housing and Services. The existing low-income, elderly housing developments in Billings are generally full. Although the supply will increase with the addition of the new 75-unit tax credit project in West Billings, demand also continues to increase. Elderly residents throughout eastern Montana are attracted to Billings by its medical facilities. An expansion of in-home personal care and housekeeping services would allow residents to remain in their homes or apartments longer, rather than entering assisted living facilities or nursing homes.

Additional Group Home for the Mentally Ill. With the PACT program being pilot-tested in Billings (and possibly being adopted on a permanent basis), there will be a need for an additional group home with a moderate level of care.

Accessibility and Safety. There is insufficient funding in Billings for wheelchair ramps and other modifications needed by low-income, disabled residents. Increased funding for these services would increase the supply of housing for people with disabilities and provide increased safety for independent elderly and disabled residents.

Given the estimated number of persons with disabilities in Billings and the waiting list for units at ASI's accessible development, there appears to be a need for additional accessible apartment units.

Section VI.

Homeless Needs

There is some overlap between the special needs populations reviewed in Section V and the homeless. The counts of homeless persons presented below include some with mental illness or substance abuse problems.

Homeless Population

The Yellowstone City/County Health Department's Health Care for the Homeless Project estimates that 4,000 individuals are homeless in Yellowstone County for a portion of each year. This estimate is based upon the agency's experience serving the homeless.

Some families have a brief period of homelessness, others may be homeless for the entire year. Data from local shelters can help us estimate how many people are homeless at any one time.

The Montana Rescue Mission operates two shelters, one for women and families and one for single men. From July 1998 to June 1999, they provided more than 49,100 nights of shelter. On the average night 135 men, women and children were lodged by the Montana Rescue Mission.

When the beds for battered women at the YMCA's Gateway Center's and households being provided with emergency housing assistance by Family Services are taken into account, BBC estimates that an average of 170 homeless people are receiving assistance in Yellowstone County each day.

Shelters

The Montana Rescue Mission provides the bulk of services to the homeless in Billings through its two shelters. Other services for the homeless in Billings are provided by YMCA's Gateway House, which offers 38 beds for battered spouses and their children, and District 7 HRDC and Family Services who offer emergency housing assistance.

The Rescue Mission functions as both emergency shelter and transitional housing. It offers education and literacy programs, work programs and drug and alcohol treatment. The men's shelter has 52 emergency shelter beds, 30 beds for its six-month substance abuse recovery program and 10 beds for its transitional New Life program.

The women's and children's shelter has 92 beds in 32 private rooms for families and dormitory rooms for single women. While the Rescue Mission's two shelters serve an average of 134 people per night in 184 beds, that does not mean the shelters have capacity for additional clients. The women's and children's shelter can be full with less than 92 occupants because of the way the private, family rooms are configured. Not all of the families need all the available beds in their rooms.

There are many nights when 52 emergency shelter beds in the men's shelter are full. The Rescue Mission does not turn individuals away. They put mattresses on the floor and accommodate everyone.

In order to offer services to more people, the Rescue Mission has acquired a building adjacent to the existing men's shelter. This building will be used for transitional housing and for handicapped accessible emergency shelter. More emergency shelter beds will then be available in the existing men's building. They hope to double their capacity with this expansion.

In addition to the services available at the local shelters, homeless people also receive assistance from the Community Partnership Program administered by the District 7 HRDC. This case management program, which is funded by a HUD Continuum of Care grant, provides supportive services to help shelter residents obtain and maintain permanent housing and achieve self sufficiency. In 1998, this program served about 480 people.

Needs

Interviewees identified a number of housing needs for the homeless population in Billings. These include transitional housing (which will be significantly increased when the Rescue Mission completes its expansion) and additional emergency shelter beds. One interviewee noted that shelters are full now in a good economy. A downturn could force people into shelters that do not have space to accommodate them.

Summary

On any given night, about 170 homeless people are housed in emergency shelter or transitional housing units in Billings. The Montana Rescue Mission has two shelters that serve women, families and single men. The YWCA's Gateway Center serves battered women and their children.

Transitional Housing. The Montana Rescue Mission has identified increased needs for the transitional housing services they provide. In order to serve more people, the Rescue Mission has acquired a building adjacent to its existing men's shelter.

Additional Emergency Shelter Beds. The emergency shelter beds at the Rescue Mission's men's shelter are often full; the Rescue Mission plans to double this capacity once it has moved its transitional housing programs to the adjacent building.

P. SPECIAL HOUSING NEEDS (24 CFR 982.600 SERIES).

1. ALLOWABLE SPECIAL HOUSING TYPES: To insure maximum tenant choice in selection of rental units in the HAB tenant based vouchers program, tenants will be allowed to choose among the following types of special housing:

Congregate Housing
Group Home Residence,
Shared Housing,
Cooperative housing
Manufactured Home Rental Space Housing, and
Homeownership.

SRO housing will not be allowed, *as it requires HUD and local government as well as documentation of need for the units, and certification that the local government has inspected the properties and they meet local health and safety codes, which are more stringent then HQS. It is not in the best interest of the program to have competing inspection requirements. There are no HUD approved SRO facilities in the state at this time.*
Rental of manufactured homes is a primary type of housing, so it is allowable and not considered as a special housing type.

2. HOMEOWNERSHIP OPTION (24CFR 982.625)

Intent of the Program:

Housing Authority of Billings will permit members of eligible families in the Housing Choice Vouchers Program the option of purchasing and owning a home using their Section 8 assistance, rather than using the assistance for renting.

A. General Information and Requirements:

1. The HAB Homeownership program will be operated in a manner consistent with the state plan.
2. A family assisted under the homeownership option must be a qualified existing program participant who has been receiving Section 8 housing assistance from HAB for a minimum of one year.
3. The number of home ownership vouchers available is limited to 5 per year.
4. HAB must approve a live-in aide if needed as a reasonable accommodation so that the program is readily accessible to and useable by persons with disabilities (see Section 982.316 concerning occupancy by a live-in aide.)

B. General Homeownership Requirements (24 CFR 982.625(d)):

1. HAB will require a minimum homeowner down payment requirement of at least 3% of the purchase price for participation in the homeownership option. Of this 3%, at least 1% of the purchase price must come from the family's personal resources. Purchase price will include closing costs, so amounts put toward closing costs by the family will be included in the 1% and 3% calculations. This may include the cost of appraisals and earnest money. It may not include the cost of the independent home inspection required in Eligibility Requirements for the Home, Section E

2. HAB requires that financing for purchase of a home under its Section 8 home ownership program:

- **a.** Be provided, insured, or guaranteed by the state or federal government
- **b.** Comply with secondary mortgage market underwriting requirements: or
- **c.** Comply with generally accepted private sector underwriting standards.

C. Initial Requirements for Families (24 CFR 982.626):

1. List of Initial requirements (24 CFR 982.626(a)) Before commencing homeownership assistance for a family**,** HAB must determine if the family meets all the following initial requirements in 24 CFR 982.627, 629, and 630.

- **a.** The family is qualified to receive home ownership assistance (see **Additional requirements)**
- **b.** The unit is eligible (see **Eligibility Criteria for Home);**

2. Additional requirements (982.626(b)):

- **a.** Applicant families are not eligible for homeownership assistance.
- **b.** A participant family in the Voucher program must have completed at least 1 year of participation in good standing to be eligible for the Homeownership Program.
- **c.** Participants porting in from another PHA interested in participating in Homeownership must have completed at least 1 year in good standing in the other PHA jurisdiction. The participant family porting in does not have to meet another 1-year period.
- **d.** Voucher participants are not eligible for participation in the Homeownership Program, if any debt is owed to HAB, MDOC, or any other PHA or housing agency. Voucher participants who have owed HAB, MDOC or another PHA or housing agency money, and have fully repaid the debt prior to entering any portion of the homeownership program (including the long term housing counseling program) are eligible, if they meet all other eligibility requirements for homeownership.
- **e.** In selecting participant families for the limited slots in the homeownership counseling program, preference will be given to elderly and handicapped families, as well as to those families participating in the Family Self-Sufficiency program or

the Individual Development Account program, all other factors being equal.

f. In selecting participant families for the Homeownership Program, HAB will develop a first come-first served list of those families who have successfully completed the homeownership-counseling program in their local jurisdictional area, and draw from this list in order to enroll families in the program.

3. Environmental Requirements (Sec. 982.626(c)) **-.** HAB is responsible for ensuring compliance and documentation with the authorities listed in Sec. 58.6 of this title requiring the purchaser to obtain and maintain flood insurance for units in special flood hazard areas and requiring notification to the purchaser of units in airport runway clear zones and airfield clear zones.

D. Eligibility requirements for families (24 CFR 982.627)

1. First-time Homeowner Requirement (Sec. 982.627 (b)) The family must qualify as one of the following:

a. A first-time homeowner, defined as a family of which no member owned any "present ownership interest" in a residence of any family member during the three years before commencement of homeownership assistance for the family. The term " first-time homeowner" includes a single parent or displaced homemaker (as defined in 12 U.S.C. 12713) who, while married, owned a home with his or her spouse, or resided in a home owned by his or her spouse.

b. A cooperative member, defined as a family of which one or more members owns membership shares in a cooperative (housing owned by a corporation or association, where a member has the right to reside in a particular unit, and to participate in management of the housing).

c. A family of which a family member is a person with disabilities, and use of the homeownership option is needed as a reasonable accommodation so that the program is readily accessible to and usable by such person.

2. Minimum Income requirement (Sec. 982.627 (c))

a. At commencement of the homeownership assistance for the family, the family must demonstrate that the annual income (gross income), as determined by the HAB in accordance with sec. 5.609 of this title, of the adult family members who will own the home at commencement of the homeownership assistance is not less than the Federal minimum hourly wage multiplied by 2,000 hours. (In year 2002, $5.15/hour X 2000 or $10,300).

b. Except in the case of an elderly family or a disabled family, the HAB shall not count any welfare assistance received by the family in determining annual income under this section.

1. Welfare assistance is defined as welfare or other payments to families

or individuals, based on need, that are made under programs funded, separately or jointly, by Federal, State or local governments.

2. The disregard of welfare assistance income only affects the determination of minimum annual income used to determine if a family initially qualifies for commencement of homeownership assistance, but does not affect;

i. The determination of income-eligibility for admission to the voucher program;

ii. Calculation of the amount of the family's total tenant payment (gross family contribution);

iii. Calculation of the amount of homeownership assistance payments on behalf of the family.

c. In the case of an elderly or disabled family, the HAB shall count welfare assistance in determining annual income.

d. HAB may establish a minimum income requirement in addition to the minimum income standard established by this paragraph.

3. Employment requirements (Sec. 982.627 (d)).

a. Except as provided in paragraph (6)(b) of this section, the family must demonstrate that one or more adult members of the family who will own the home at commencement of homeownership assistance:

1. Is currently employed on a full-time basis (the term "full-time employment" means not less than an average of 30 hours per week); and

2. Has been continuously so employed during the year before commencement of homeownership assistance for the family.

b. The HAB Executive Director may also consider to what extent temporary and seasonal work and an employment interruption is considered permissible in satisfying the employment requirement. (e.g. considering what constitutes successive employment during a one-year period and self-employment in a business). The HAB reserves the right to make a final determination on any contested cases that are covered by this requirement.

c. The employment requirement does not apply to an elderly family or a disabled family. Furthermore, if a family other than an elderly family or a disabled family, includes a person with disabilities, the HAB shall grant an exemption from the employment requirement if the HAB determines that an exemption is needed as a reasonable accommodation so that the program is readily accessible to and usable by person with disabilities in accordance with part 8 of this title. The HAB may not

establish an employment requirement in addition to the employment standard established by this paragraph.

4. The family has not defaulted on a mortgage securing debt to purchase a home under the homeownership option as described in Denial or Termination of Assistance.

5. Except for cooperative members who have acquired cooperative membership shares prior to commencement of homeownership assistance, no family member has a present ownership interest in a residence at the commencement of homeownership assistance for the purchase of any home.

6. Except for cooperative members who have acquired cooperative membership shares prior to the commencement of homeownership assistance, the family has entered a contract of sale in accordance with Sec. 982.631 (c).

E. Eligible units (24 CFR 982.628)

1. Initial requirements applicable to the unit. The HAB must determine that the unit satisfies all of the following requirements:

a. In order to be eligible for assistance, the unit cannot be:

1. A public housing unit (except a public housing unit slated for sale through the sale and replacement plan is eligible) or Indian housing unit:

2. A unit receiving project-based assistance under section 8 of the 1937 Act (42 U.S.C. 1437F):

3. In a nursing home, board and care home, or facility providing continual psychiatric, medical, or nursing services;

4. College or other school dormitory;

5. Unit on the grounds of penal, reformatory medical, mental, or similar public or private institution.

6. A mobile or manufactured home unless:

i. The home is located on a permanent foundation; **and**

ii. The family has the right to occupy the home site for at least forty years.

b. The unit must be within HAB's jurisdiction (Billings City limits plus 10 miles) or be ported to a jurisdiction that is administering a homeownership voucher program.

c. The unit was either under construction or already existing at the time the family entered into a contract of sale.

d. The unit is either a one-unit property (including a manufactured home) or a single dwelling unit in a cooperative or condominium

e. The unit has been inspected by a HAB inspector and by an independent inspector designated by the family

f. The unit satisfies the HQS.

2. Any seller of property to a homeownership participant, and the homeownership participant as well, must be checked by the HAB to ensure that they are not listed on the HUD Debarment list under 24CFR part 24, and HAB must sign a certification to that effect.

F. Additional requirements for family search and purchase (24 CFR 982.629(a))

1. The family must submit a sales agreement containing specific components to the HAB for approval within one year of their acceptance into the homeownership program (acceptance occurs at the time of successful completion of homeownership counseling). The HAB will require that the family provide quarterly reports to monitor the family's progress in finding and purchasing a home.

2. If the family is unable to purchase a home within the maximum time established by the HAB, the HAB may issue the family a voucher to lease a unit.

Application Procedure for Homeownership Option

To apply for a homeownership voucher, the family must complete a Homeownership Option Application. The application will be reviewed by the Resident Initiatives Coordinator (RIC) to determine initial eligibility. Information provided in the application must be verified according to the verification procedures as outlined in this Administrative Plan (agency acceptable verification procedure is 3rd party verification). The applicant will be notified in writing when a determination of initial eligibility is made. If the family is determined to be eligible, an appointment will be scheduled with the RIC to review the information provided in the application and determine final eligibility.

Upon determination of final eligibility, the RIC will refer the family for an approved homebuyer readiness education class.

If the family disagrees with the determination of eligibility made by HAB, the family has the right to request in writing, an informal hearing as described in the Administrative Plan.

G. Homeownership Counseling (24 CFR 982.630)

Prior to purchase of a home, the family must complete a comprehensive homeownership education program of not less than 9 hours of classroom training. HAB will provide a schedule of approved education sources.

1. Families may be required to participate in approved homeownership counseling programs on a continuing basis at the discretion of the HAB, based on the performance of the homeownership participant. (Sec. 982.630(d)).

2. The counseling agency providing the counseling program shall either be approved by HUD or the program shall be consistent with the home ownership counseling provided under HUD's Housing counseling program. The program must contain the suggested topics listed in 982.630(b). HAB may require additional topics at their discretion based on participant need. (Sec. 982.630(e)).

H. Home inspections and contract of sale (24 CFR 982.631)

The HAB may not commence homeownership assistance for a family until the HAB has inspected the unit and has determined that the unit passes HQS.

1. The unit must be inspected by an independent inspector selected by and paid for by the family. Cost of this inspection may not be included as part of the down payment requirement described in the Section on General Homeownership Requirements.

> **a.** The independent inspection must cover major building systems and components, including foundation and structure, housing interior and exterior, and the roofing, plumbing, electrical, and heating systems. The inspector must be qualified to report on property conditions, including major building systems and components.
>
> **b.** HAB may not require the family to use an inspector selected by HAB. The independent inspector may not be an HAB employee or contractor, or other person under control of HAB.
>
> **c.** The independent inspector must be a certified member of the American Society of Home Inspectors (ASHI), and must inspect at ASHI standards.
>
> **d.** The inspector must provide a copy of the inspection report to both the family and HAB. Homeownership assistance may not begin until HAB has reviewed the report. Even if the unit otherwise complies with HQS, HAB shall have the discretion to disapprove the unit for assistance because of information in the inspection report.

I. Financing purchase of home; affordability of purchase (24 CFR 982.632)

First mortgage lenders and families financing homes using voucher payments are advised of the following procedures and limitations of the voucher program:

1. Use of a voucher is restricted to families who meet all applicable program eligibility requirements. Review and approval for a family to use a voucher for mortgage payment

purposes requires an application and review process through HAB that takes up to one month to process.

2. Voucher payments will be paid to the bank or to the purchasing family, as agreed between the lending institution and the purchaser.

3. Voucher payments are not guaranteed. Payment may be terminated because of insufficient funds from HUD to continue the program. Voucher payments may also be terminated for failure to meet HUD regulations (See: Ongoing Procedures for Review of Voucher and Amount).

4. The amount of the payment may fluctuate. The voucher payment amount is directly related to family income and household composition. A change in income or household composition will cause the amount of subsidy to increase or decrease. (See: Continued Assistance requirements)

J. Continued assistance requirements; (24 CFR 982.633)

Homeownership assistance may only be paid while the family is residing in the home. If the family moves out of the home, HAB may not continue assistance after the month the family moves out. The family is not required to refund to HAB the homeownership assistance for the month when the family moves out.

1. Family Obligations;

a. The family must comply with the terms of any mortgage securing debt incurred to purchase the home (or any refinancing of the debt.)

1. The family must notify the HAB within 10 days of missing a mortgage payment.

2. The family must attend foreclosure counseling within 30 days of missing a mortgage payment or homeownership assistance may terminate.

b. The family must reside in the unit, and must be the family's only residence. The family must provide any information or certification requested by HAB to verify that the family is living in the unit, and must notify HAB promptly, in writing, of any absence from the unit longer than 30 days. The family must cooperate with HAB for the purpose of verifying that the family resides in the unit.

c. The family must supply required information necessary in the administration of the program to the HAB, including social security numbers, release of information forms, and evidence of citizenship or eligible immigration status. The family must comply with requirements for annual or interim reexamination of family income or family composition and provide any information required for verification.

d. In addition, the family must supply any information necessary in the administration of the program to the HAB concerning:

1. Any mortgage or other debt incurred to purchase the home, and any refinancing of debt (including information needed to determine whether the family has defaulted on the debt, and the nature of the default), and information on any satisfaction or payment of the mortgage debt:

2. Any sale or other transfer of any interest in the house; or

3. The family's homeownership expenses.

e. All information supplied by the family must be true and complete.

f. The composition of the assisted family residing in the unit must be approved by the HAB. The family must promptly inform the HAB of the birth, adoption or court awarded custody of a child. The family must request HAB approval to add any other family member as an occupant of the unit. No other person may reside in the unit (except for a foster child or live-in aide.) The family must promptly notify the HAB if any family member no longer resides in the unit within 10 days of the change.

g. If the HAB has given approval, a foster child or a live-in aide may reside in the unit. If the family does not request approval or if HAB approval is denied, the family may not allow a foster child or live-in aide to reside with the assisted family.

h. Members of the household may engage in legal profit-making activities in the unit, but only if such activities are incidental to primary use of the unit as a residence by members of the family.

i. The family must not sublease or let the unit.

j. The family must not assign or transfer the unit.

k. The members of the family must not commit fraud bribery or any other corrupt or criminal act in connection with the programs.

l. The members of the family may not engage in drug-related criminal activity or violent criminal activity.

m. An assisted family, or members of the family, may not receive Section 8 tenant-based assistance while receiving another housing subsidy, for the same unit or for a different unit, under any duplicative (as determined by HUD or in accordance with HUD requirements) federal, State or local housing assistance program.

n. The family must notify HAB before moving out of the house.

o. During the time the family receives homeownership assistance; no family member may have any ownership interest in any other residential property.

p. Although the homeownership program does not require annual Housing Quality Standards (HQS) inspections, the local agency may request that a family permit an HQS inspection, with appropriate notice, not more than once a year with the intent of referring the family to programs that may be able to assist them with the cost of repairs and maintenance of the home. Since HQS inspections are not a HUD requirement, results of these HQS inspections will not affect participation in the Homeownership program by the family, or continuation of HAP payment.

q. Before commencement of homeownership assistance, the family must execute a statement of family obligations agreeing to comply with all family obligations under this option.

K. Maximum term of homeownership assistance. (24 CFR 982.634)

1. Maximum term of assistance. Except in the case of a family that qualifies as an elderly or disabled family (see number 3 below), the family members described in number 2 below shall not receive homeownership assistance for more than:

a. Fifteen years, if the initial mortgage incurred to finance purchase of the home has a term of 20 years or longer; or

b. Ten years, in all other cases.

2. Applicability of maximum term. The maximum term described in number 1 of this section applies to any member of the family who:

a. Has an ownership interest in the unit during the time that homeownership payments are made; or

b. Is the spouse of any member of the household who has an ownership interest in the unit during the time homeownership payments are made.

3. Exception for elderly and disabled families.

a. As noted in number one of this section, the maximum term of assistance does not apply to elderly and disabled families.

b. In the case of an elderly family, the exception only applies if the family qualifies as an elderly family at the start of homeownership assistance. In the case of a disabled family, the exception applies if at any time during receipt of homeownership assistance the family qualifies as a disabled family.

c. If, during the course of homeownership assistance, the family ceases to qualify as a disabled or elderly family, the maximum term becomes applicable from the date homeownership assistance commenced. However, such a family must be provided at least 6 months of homeownership assistance after the maximum term becomes applicable (provided the family is otherwise eligible to receive homeownership assistance in accordance with this part).

4. Assistance for different homes or PHAs. If the family has received such assistance for different homes, or from different PHAs, the total of such assistance terms is subject to the maximum term described above.

L. Amount and distribution of monthly homeownership assistance payment (24 CFR 982.635) HAB will determine if these requirements are met, including;

1. After the homeownership housing assistance payments begin, HAB will perform annual and interim reexaminations and make appropriate adjustments to the amount of the monthly assistance payment.

2. When determining income at reexaminations, the definition of "net family assets" excludes the value of a home currently being purchased with Section 8 homeownership assistance for the first 10 years after the purchase date.

3. The amount of the monthly homeownership assistance payment (HAP) on behalf of the family shall be the **lower of:**

a. The payment standard minus the total tenant payment: or

b. The family's monthly homeownership expenses minus the total tenant payment. (see number 8 below)

4. The payment standard shall be the **lower of:**

a. The payment standard for the family unit size: or

b. The payment standard for the size of the home

5. The payment standard shall be the **greater of:**

a. The payment standard, as determined in the above paragraph, at the commencement of homeownership assistance: or

b. The payment standard, as determined in the above paragraph, at the most recent regular reexamination of family income and composition since commencement of homeownership assistance.

6. HAB will use the same payment standard schedule, payment standard amounts, and subsidy standards for the homeownership option as for the rental voucher program.

7. HAB will use the same utility allowance schedule for the homeownership option as for the rental voucher program.

8. Homeownership expenses will include:

a. Principal and interest on initial mortgage debt, any refinancing of such debt, and any mortgage insurance premium incurred to finance purchase of the home:

b. Real estate property taxes and public assessments on the home;

c. Home insurance;

d. HAB utility allowance; and

e. Principal and interest on mortgage debt incurred to finance costs for major repairs, replacements or improvements for the home. If a member of the family is a person with disabilities, such debt may include debt incurred by the family to make the home accessible for the person, if HAB determines that allowance of such costs is needed as a reasonable accommodation so that the homeownership option is readily accessible to and usable by such person.

9. The HAB will provide the lender with notice of the amount of the housing assistance payment prior to close or escrow. At the discretion of the lender, the HAB contribution towards the family's homeowner expense will be paid directly to the family or to the lender. If paid to the family, the family will be responsible to submit the entire mortgage payment to the lender. Participants are required to have an escrow account at a financial institution where HAB sends HAP payments using direct deposit, and the mortgage holder sweeps funds to pay principal, interest, taxes and insurance. The participant family is required to deposit the family contribution to the account each month. The participant family is required to report account balances to the HAB at the time of annual income verification. (24 CFR 982.635(d.))

10. If the automatic termination of homeownership assistance 180 calendar days after the last housing assistance payment on behalf of the family results in extreme hardship for the family, the local agency may request that HAB grant relief form this requirement based on a case by case determination. HAB will then make the final determination. (Sec. 982.635 (e))

M. Portability (24 CFR 982.636)

A family determined eligible for homeownership assistance by HAB may purchase a unit outside its jurisdiction if the receiving PHA is administering a voucher homeownership program and is accepting new homeownership families. All other portability procedures apply to the homeownership option, except those referring to lease or tenancy.

The family must attend the briefing and counseling sessions required by the receiving PHA. The receiving PHA will determine whether the financing for, and the physical condition of the unit are acceptable. The receiving PHA must notify HAB promptly if the family has purchased an eligible unit, or if the family is unable to purchase a home within the maximum time established by the receiving PHA.

N. Move with continued tenant-based assistance. (24 CFR 982.637)

HAB will determine that these requirements are met, including;

A. Move to a new unit

1. A family receiving homeownership assistance may move to a new unit with either voucher rental assistance or voucher homeownership assistance.

2. HAB may not commence continued tenant-based assistance for occupancy of the new unit so long as any family member owns any title or other interest in the prior home.

3. Families receiving homeownership assistance may not move more than once during any one-year period.

B. Requirements for continuation of homeownership assistance. HAB must determine that all initial requirements listed in Sec. 982.626 (General Information and Requirements) have been satisfied if the family wants to move to a new unit with continued homeownership assistance. However, the following requirements do not apply:

1. If the family moves to a new unit while receiving homeownership assistance, HAB may require that the family complete additional counseling.

2. The requirement that a family must be a first-time homeowner is not applicable.

C. When HAB may deny permission to move with continued assistance. HAB may deny permission to move to a new unit with continued voucher assistance as follows:

1. HAB may deny permission to move with continued rental or homeownership assistance if HAB determines that it does not have sufficient funding to provide continued assistance.

2. At any time, HAB may deny permission to move with continued rental or homeownership assistance in a accordance with Sec. 982.638

O. Denial or termination of assistance for family (24 CFR 982.638)

At any time, HAB may deny or terminate homeownership assistance in accordance with policies.

HAB may deny or terminate assistance for violation of family obligations as set forth in **Requirements For Continued Mortgage Assistance.**

HAB must terminate assistance for any family member receiving homeownership assistance that is dispossessed from the home pursuant to a judgment, or order of foreclosure on any mortgage (whether FHA-insured or non-FHA) securing debt incurred to purchase the home, or any refinancing of such debt. HAB, at its discretion, may permit the

family to move to a new unit with continued voucher rental assistance. However, such permission will be denied if:

1. The family defaulted on a FHA-insured mortgage; and

2. The family fails to demonstrate that it has conveyed title to the home as required by HUD, TO HUD OR HUD's designee, and moved from the home within the period established or approved by HUD.

P. Administrative fees (24 CFR 982.639)

Q. Applicability of other requirements (24 CFR 982.641)

1. HAB will file the necessary documentation to require loan servicers of these loans to inform HAB of any late payments and missed payments as soon as they occur. Lenders are also required to inform HAB of any changes in servicing institutions or purchase of loan by another institution.

2. Families must obtain specific approval for the use of a voucher for a mortgage payment based on documents submitted (See: Documents Required for Review and Approval of Home Purchase**)**. HAB will then issue a letter of intent; a copy of which will be sent to the lender to confirm that the proposed financing package has been approved.

3. Families and lenders must submit copies of specific documents to initiate the payment of homeownership vouchers to the family. (See: Documents required after Closing).

Documents Required for Review and approval of Home Purchase

Prior to final approval for use of a voucher for mortgage payments, families must submit copies of the following documents to HAB. Copies must be legible. This may be done by the family or by the first mortgage lender. Criteria used for review include: requirements for financing package; requirements for eligible families; and requirements for eligible properties. Assuming the proposed purchase meets these requirements, HAB approval will be given. HAB may require up to 10 working days for the review process, at the end of which a letter will be sent to the lender and the family with HAB 's approval or denial of the purchase.

1. Copy of signed buy-sell agreement
2. Copy of good faith estimate form first mortgage lender
3. Copy of HUD universal mortgage loan application from first mortgage lender
4. Copy of independent inspection report
5. Copy of required home inspections and verification that any deficiencies found in the home have been noted and arrangements negotiated to correct the deficiencies.

6. Copy of the appraisal
7. Copy of Disclosure Statement

Documents Required Prior to Closing

Prior to closing, families and lenders must submit to HAB legible copies of the following documents:

1. Settlement statement.
2. Copy of Title Report.
3. Written verification that deficiencies in the home have been corrected in compliance with HUD regulations, signed by contractor or person who completed the work.
4. Signed HQS inspection from HAB verifying that the home meets HQS standards.

MAINTENANCE PLAN AND POLICIES

HOUSING AUTHORITY OF BILLINGS (HAB)

06/26/2002

General Information

The Housing Authority of Billings (HAB) was formed in 1973 for the purpose of providing affordable public housing. The HAB owns and operates 6 public facilities: Phyllis Circle (30 units), Bunting Subdivision (50 units), Eagles Nest (36 units), St. Johns (20 units), Woody Subdivision (40 units), & South Park Apartments (40 units). HAB also has 58 individual houses that it owns and maintains. The mission of the HAB Board of Commissioners, and staff is to provide decent, affordable, safe, & sanitary housing for low-income individuals and families.

Goals and Objectives

The goals and objectives of the HAB's maintenance department are: to maintain all facilities and units in a condition equal to or greater than HUD Housing Quality Standards (HQS), to meet and exceed all maintenance related PHMAP (Public Housing Management Assessment Program) indicators, to properly utilize existing staff, and to compete work orders in a timely manner while staying within budget and keeping overtime to a minimum. The maintenance department will strive to keep open lines of communication between maintenance personnel and residents at all facilities.

Programs Operated by the HAB

The Housing Authority of Billings operates, the Public Housing program, Section 8 tenant based voucher program, Section 8 new construction, and a non-profit Home program, as well as Resident Initiatives, FSS, Drug Elimination, Youth programs, and a Family Investment Center (FIC).

Staffing Plan

The Executive Director (ED) is responsible for the day-to-day operations of the HAB. The ED implements policies and procedures instituted by the Board of Commissioners. All staff answers to the ED, or his/her designate, per the established organizational flow chart.

HAB's strategy for meeting day-to-day maintenance needs of the facilities is to assign maintenance staff to a specific job. The assignment of maintenance staff to a specific job will be at the discretion of the Director of Facilities Management or the Maintenance Supervisor. The maintenance supervisor will directly supervise the maintenance staff. The Director of Facilities Management will over see the entire maintenance department. See attached organizational flow chart.

Extra laborers are hired as needed and are assigned to facilities by the maintenance supervisor.

Description of Facilities

Phyllis Circle has 30 units consisting of one-bedroom apartments designated for elderly and disabled individuals. The Bunting Subdivision has 50 units consisting of two, three, and four bedroom apartments designated for families and disabled individuals. Eagles Nest has 36 units consisting of one, two, and three bedroom apartments designated for families and disabled individuals. ST. Johns has 20 units consisting of two & three bedroom apartments designated for families. Woody Subdivision has 40 units consisting of two & three bedroom apartments designated for families and disabled individuals. South Park apartments have 40 units consisting of two & three bedroom apartments designated for families and disabled individuals. HAB also owns 58 single-family homes consisting of three & four bedrooms designated for families. There are a total of 274 public housing units for which the HAB's maintenance staff is responsible.

Work Order Process

All work orders originate at the main office of the HAB or within the maintenance department. Regular work orders may be based upon information received from residents, staff, commissioners, or the general public. When information is received for a facility, the Maintenance Supervisor or office staff issues a work order. It is the responsibility of the office staff or the Maintenance Supervisor to complete a work order request form when a work order request be made by a resident or staff. It is the responsibility of the maintenance staff to carry out the completion of a work order in a competent and timely manner. All workorders are to be called out when received.

The work order time frame is based on the PHMAP grading system; however, HAB strives to complete all work orders within the shortest time possible, based on the number of work orders and move outs.

The method used to assign work orders will be based upon weekly assignments. If for some reason maintenance cannot complete the work order, he/she will immediately advise the maintenance supervisor of the problem.

Upon completion, all work orders shall be filled out completely as to time spent; materials used, and cause of damage. The Maintenance Supervisor will review the work orders and if charges to tenant are requested, he/she will send a copy of the work order to the Office Assistant for billing to the resident.

Budget Process

The budget process for the maintenance department will be the responsibility of the ED, Director of Facilities Management, and Maintenance Supervisor. The annual budget will be developed by carefully planning and looking at the past years' expenditures. The

budget is used to monitor on-going costs and allocations. The steps used to develop the annual budget are as follows: 1) define the financial need for each facility; 2) consider revenue; 3) formulate an overall budget; 4) seek board approval; 5) submit budget to HUD; 6) allocate spending authority; 7) monitor results.

Materials, Supplies, and Equipment

An inventory showing all fixed assets of $1,000.00 or more will be kept by HAB. The Director of Facilities Management and Maintenance Supervisor record the inventory of appliances and equipment under $1,000.00. An inventory of all supplies will also be maintained by the Maintenance Supervisor to help in budgeting for materials and supplies. The Maintenance Supervisor will be in charge of ordering supplies. The Maintenance Supervisor will issue a purchase order when placing an order. He/she will fill out invoice for inventory number and send it to the Director of Facilities Management for processing. The Director of Facilities Management will post received inventory in the computer and approve the invoice. It will be sent to the ED for final approval and payment.

Service Contracts

Service contracts will be procured in accordance with HUD procurement policies (CFR 85-36) and the HAB procurement policy.

Extraordinary Repairs

Extraordinary repairs will be addressed as the need arises and will be either completed by the maintenance staff or contracted out in accordance with HUD and HAB procurement policies.
Extraordinary items are part of the budget process and are the responsibility of the ED, Director of Facilities Management, and Maintenance Supervisor.

Types of Work Performed by Maintenance Staff

1. *Routine or Seasonal Work*

Maintenance staff will be designated to perform all routine and daily maintenance tasks. These will include work requests (work orders initiated by residents), emergencies and vacancy preparation. This work will be requested, prioritized, scheduled and performed through the work order system. After allowances are made for routine work requirements, seasonal work can be scheduled. Sprinkler systems are blown out in October, tested and pressurized in May or as needed. Snow removal will be conducted November through April or as needed. If these or similar work requirements exceed available resources, extra help or service contracts can be used to complete them in a timely manner.

A. Pest Infestation Policy

The Housing Authority policy on pest infestation is that the maintenance department will spray only the exteriors of the units with the exception of mice and cockroaches. Upon receiving notice from the resident, maintenance, or PHA the Director of Facilities Management or the Maintenance Supervisor will contract with a licensed, bonded, and insured pest control company. The pest control company will make arrangements with the resident to enter the residence and take appropriate actions. If the pest control company is unable to contact with the resident a representative from the Housing Authority will meet the pest control company and enter with them to complete the work. If a resident calls in for a mice problem the maintenance department will install a couple of sticky traps and remove any used traps. If more than a couple of mice are noticed then a pest control company will be called.

2. *Annual Inspections*

Living units and major system inspections will be conducted semi-annually. The Maintenance Supervisor or his/her designee, and a

Public Housing Administrator will inspect all units. The inspections will be for 1) Cleanliness, 2) Wear and tear damage, 3) Tenant abuse damage. All findings found through the inspections are documented and turned in and the Maintenance Supervisor then prioritizes and schedules the follow-up work, utilizing the work order system. All residents will be given at least 48 hours notice prior to the semi-annual inspection.

The maintenance staff will have a designated time frame to complete all work, which will be in accordance with PHMAP grading system. If additional time is needed, a notice will be sent to the residents.

Upon completion of the work, all semi-annual work orders will be given to the Maintenance Supervisor to review and assess charges. All charges will be given to the Office Assistant for billing to the resident.

3. *Vacant Units*

When a unit becomes vacant, a move out inspection is scheduled and conducted assessing what work needs to be done so that the apartment can be rented again.

Actions for move out inspections:

A. The Maintenance Supervisor or his/her designee will inspect the vacant unit, with the resident when possible. The following items will be inspected: 1) cleaning, 2) damage, and 3) general wear and tear items.
B. There will be a general staff meeting on Monday morning with the ED, Director of Facilities Management, Maintenance Supervisor, PHAs, and maintenance staff; at which time the Maintenance Supervisor will assign the apartments for the week to be completed.

C. HAB brings all units back in rentable condition by either of the following two methods: 1) Maintenance staff or 2) HAB will hire an outside firm to bring the unit back to rentable condition.
D. After an apartment is completed and before a resident takes possession, the Maintenance Supervisor or designate will re-inspect the unit to see if all work has been done satisfactorily. Apartments assigned are to be completed within PHMAP guidelines. Normal time frame is the apartments assigned on Monday are to be completed by Friday for occupancy.

A. *Frequency*
All dwellings of the HAB will be inspected semi-annually. A move out inspection will be conducted within 48 hours prior to becoming vacant. A move in inspection will be conducted with the resident at the time of the move in.

B. *Standard*
All inspections will utilize the HUD Housing Quality Standards (HQS). These are minimum standards. All conditions noted during any inspection which do not meet HQS or violate tenant lease agreements will be documented in writing and submitted to the PHA. The Maintenance Supervisor and PHA will do follow-up inspections on lease agreement violations and the maintenance department will complete all work orders.

A. Unit deficiencies which **are** HQS violations:
All HQS violations, which are identified during any inspection, will require the following actions:
a. Documentation
b. Issuance of or inclusion on a work order specifying the action needed for correction of the HQS violation. Any work order issued, which includes work to correct a HQS violation, must be unit specific that is it must only deal with one unit.

c. Date of completion. A completion date must be included on the work order form showing when the HQS violation was corrected.

B. Unit deficiencies which **are not** HQS violations:
For all unit deficiencies identified during an inspection which will require work but are not HQS violations, issuance of or inclusion on a work order specifying the action needed to correct the deficiency will be required.

4. *Preventive Maintenance (PM)*

HAB has a schedule for each facility that will enable the maintenance staff to perform (PM) as scheduled in conjunction with the normal work orders and emergencies without creating a demand for overtime.

Schedule:

A. Check smoke detector batteries semi-annually and during move in inspections. Replace once every 12 months.
B. Check fire extinguishers semi-annually.
C. Service fire extinguishers yearly.
D. Check boiler, forced air, and air conditioning units yearly.
E. Change forced air filters every 4 months.
F. Vacuum refrigerator coils yearly.
G. Vacuum toe-space heaters yearly.
H. Back-up emergency light test semi-annually.
I. Check storm sewers yearly and clean as needed.
J. Check roofing, electrical, and plumbing systems yearly.
K. Service contracts on elevators monthly.
L. Check exit lights monthly
M. Check security on screens, windows, and doors semi-annually.
N. A painting schedule will be formed from semi-annual inspections to ensure that all apartments will have been painted within the preceding five years.

5. *Emergency Situations*
HAB handles emergency situations within twenty-four (24) hours. A Maintenance I employee is on call twenty-four (24) hours a day, seven (7) days a week.

If any emergency arises, the on-call maintenance person is called and responds immediately. A work order is written, the emergency is stated, and what action was taken to handle the emergency. If the on-call maintenance person cannot handle the emergency, they contact an outside contractor. If the maintenance person cannot reach a contractor he/she are to call the Maintenance Supervisor or Director of Facilities Management to determine how to resolve the emergency. All emergency work orders are abated within twenty-four (24) hours

Classification of Maintenance Work
To be able to complete all maintenance work in a timely manner, priorities for scheduling maintenance work are established. A work order form will be issued and the work will be performed within the prescribed time frame for each priority.

A. Emergency – Within 24 hours. Since emergencies can happen at any time of the day or night, a maintenance I staff member or designated employee will be on-call at all times.
B. Routine – Within 3 days but not more than 20 days. Non-emergency maintenance repair work reported by residents or staff.
C. Vacant Units – Within 5 days but not more than 20 days. Renovation of vacated units.
D. Semi-Annual – Emergency are abated within 24 hours and non-emergency are within 20 days. Work reported from inspections with PHA and the Maintenance Supervisor.
E. Preventive Maintenance – completed within normal work orders and emergencies without creating a demand for overtime. Work reported from PM inspections by Maintenance Supervisor.

Fair Housing Code of Conduct

The Housing Authority of Billings follows all federal, state, and local fair housing laws. All members of our maintenance staff shall conduct themselves according to this Code of Conduct anytime they come in contact with residents.

A. Treat All Residents the Same Way – you may want to give better service to residents with whom you're friendly. While you may feel that you're helping HAB by giving residents special treatment, you're actually opening up HAB—and yourself—to liability for discriminating against the residents who don't get special treatment. So perform every task as if you were doing it for the same resident.
Example: A resident whom you don't know well asks you to help her with a simple problem. HAB policy requires all service requests to be in writing, so you tell her to submit her request to the maintenance supervisor. The next day another resident you often chat with in the lobby asks you to tighten a loose gasket on his sink. You do the job without asking him to submit a request. You have treated the two residents differently—and may have opened yourself up to a charge of discrimination.

B. Don't Fraternize with Residents – be friendly with all residents but don't be friends with any of them. You may not know how the resident feels about the relationship. A resident you believe to be a true friend may think of you only as a friendly maintenance technician. If you take the relationship a step too far, you might violate the housing law.
Example: You frequently see a particular female resident at the site. You often chat about the weather, music, or whatever else comes up. She seems to be interested in you, so you ask her out to lunch. If the resident feels uncomfortable because of your advance, you may have committed an act of sexual harassment for which you and HAB may be liable.

C. Don't Enter a Resident's Unit if the Resident is Home, Unless the Resident Lets You In – When you make a scheduled service call, knock loudly and call out to let the resident know you are there. If there is no answer, open the door and call out again from the doorway. Do not enter the unit until the resident lets you in or you are certain that no one is home. If the resident isn't home when you do your work, leave a not explaining that you were there, what work you did, and what time you left.
Example: You knock on the door to a unit, but there's no answer. You let yourself in a begin making a requested repair to the living room air conditioner. Suddenly, the female resident, wrapped in a towel, walks into the living room. She had been in the shower and didn't hear you knock. Although the intrusion was an accident, the resident may feel that you acted inappropriately, and start a sexual harassment lawsuit.

D. Respect Residents' Privacy – Do not touch or comment upon the items in a resident's unit. Just be polite, do your job, thank the resident, and leave.
Example: Say a piece of art in a resident's unit strikes you as odd, and you say so to the resident. If the piece of art has religious or cultural significance, you might offend the resident and inadvertently commit a fair housing violation.

E. Don't Use More Safety Equipment Than Necessary – There will be occasions when you need to wear protective equipment to work in a resident's unit. For example, you would want to wear rubber gloves when working on a commode. However, using substantially more protection than the job requires may offend the resident. Protect yourself, but don't overdo it. Base your choice of clothing on the job you have to do, not on the resident for whom you're doing it. Ask your supervisor if you're not sure what level of protection to wear.
Example: You have a service call to repair a resident's closet door. You've heard that the resident in that unit has AIDS, so you

wear rubber gloves, goggles, and a face mask to protect yourself from infection. People suffering from AIDS are considered disabled under fair housing law, but AIDS isn't contagious via casual conduct. So you have no more reason to wear protective clothing in that unit than you would in any other unit. You have discriminated against the resident based on his disability, and he may sue both you and the owner for the embarrassment and humiliation that he suffered because of your conduct.

INTEROFFICE MEMORANDUM

TO: AGENCY PLAN FILE

SUBJECT: ANNUAL PLAN PUBLIC HEARING

DATE: 4/16/2003

ATTENDEES: Lucy Brown, Executive Director

Gib Glasson-Director of Facilities

Patti Miller-Webster, Operations Manager

Teddi Shorten, Resident Initiatives Coordinator

Renee Samek, Office/Grant Assistant

Adel Sather, MT1-5 PHA Resident

Brown welcomed all attendees and requested they sign in. She passed out copies of the Agency Plan for FY 2003 and the 5 Year Plan for Fiscal Years 2003-2007.

Brown stated the goals and objectives are the same as the previous meeting that was held on December 17, 2003. The only exception would be that the Homeownership plan would be implemented. Brown went through the Statement of Housing Needs; Statement of Financial Resources; PHA Policies Governing Eligibility, Selection, and Admissions; PHA Rent Determination Policies; Operations and Management; PHA Grievance Procedures; Capital Improvement Needs; Demolition and Disposition; Designation of Public Housing for Occupancy by Elderly Families or Families with Disabilities or Elderly Families and Families with Disabilities; Conversion of Public Housing to Tenant-Based Assistance; Homeowenship Programs Administered by the PHA; PHA Community Service and Self-sufficiency Programs, PHA Safety and Crime Prevention Measures.

Brown mentioned that Congress has proposed a bill raising the minimum rent from $25 to $50. Congress is also discussing the revival of Community Service. Both of these bills are being discussed and have not been passed.

Brown asked Glasson if he had any comments on the Capital Fund. Glasson stated that the funding for the 5 Year Plan were estimates based on our previous funding and were subject to change if the funds were not as much as we received previously. Brown asked Glasson to discuss the

projects scheduled for Mt1-5 since Sather lives in that complex. Glasson mentioned that the sand in the playgrounds at Woody subdivision would be replaced with ground matting this year. Also, that the parking lot at Mt1-5 would be resurfaced sometime in June or July.

Brown asked Shorten to comment on the FSS Program. Shorten stated the she now has a waiting list for the PHA FSS program. Section 8 will have the homeownership program. Forty percent of the FSS graduates are now homeowners

Webster stated this was the last year of our grant for a PHA Police Officer. Brown asked Sather what she thought of having a police officer on staff for our PHA units. Sather said she thought it was a good idea.

Brown asked if there were any other questions or comments. There were none.