

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

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## Small PHA Plan Update

**Rio Arriba County Housing Authority**

**Annual Plan for Fiscal Year 2003**

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

## PHA Plan Agency Identification

**PHAName:** Rio Arriba County Housing Authority

**PHANumber:** NM039

**PHA Fiscal Year Beginning:**(mm/yyyy ) 07/2003

### PHA Plan Contact Information:

Name: Cy Martinez  
Phone: (505) 753-7870  
TDD:  
Email(if available): racha@zianet.com

### 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

### 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
- Main administrative office of the local, county or 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)

### PHA Programs Administered :

- Public Housing and Section 8       Section 8 Only       Public Housing Only

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

**i. Table of Contents**

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

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<input type="checkbox"/> Other (List below, provide in each attachment name)	

**ii. Executive Summary**

[24CFR Part 903.79(r)]

At PHA option, provide a brief overview of the information in the Annual Plan

The continuation of the homeownership program of 12 Units at the Tierra Amarilla due to high vacancy. No job market available in the area.

### 1. Summary of Policy or Program Changes for the Upcoming Year

In this section, briefly describe changes in policies or programs discussed in last year's PHA Plan that are not covered in other sections of this Update.

**None**  
No major changes from the Prior Annual Plan

### 2. Capital Improvement Needs

[24CFR Part 903.79(g)]

Exemptions: Section 8 only PHAs are not required to complete this component.

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

B. What is the amount of the PHA's **estimated** or actual (if known) Capital Fund Program grant for the upcoming year? **\$143,958**

C.  Yes  No Does the PHA plan to participate in the Capital Fund Program in the upcoming year? If yes, complete the rest of Component 7. If no, skip to next component.

D. Capital Fund Program Grant Submissions

#### (1) Capital Fund Program 5 - Year Action Plan

The Capital Fund Program 5 - Year Action Plan is provided as Attachment **-H**

#### (2) Capital Fund Program Annual Statement

The Capital Fund Program Annual Statement is provided as Attachment **-B**

### 3.D Demolition and Disposition

[24CFR Part 903.79(h)]

Applicability: 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 next component; if "yes", complete one activity description for each development.)

**4. Voucher Homeownership Program**

[24CFR Part 903.79(k)]

A.  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 24CFR part 982? (If "No", skip to next component; if "yes", describe each program using the table below (copy and complete questions for each program identified.)

**5. Safety and Crime Prevention: PHDEP Plan**

[24CFR Part 903.7(m)]

Exemptions Section 8 Only PHAs may skip to the next component PHA eligible for PHDEP funds must provide a PHDEP Plan meeting specified requirements prior to receipt of PHDEP funds.

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

B. What is the amount of the PHA's estimated or actual (if known) PHDEP grant for the upcoming year? \$ \_\_\_\_\_

C.  Yes  No Does the PHA plan to participate in the PHDEP in the upcoming year? If yes, answer question D. If no, skip to next component.

D.  Yes  No: The PHDEP Plan is attached at Attachment \_\_\_\_\_

**6. Other Information**

[24CFR Part 903.79(r)]

**A. Resident Advisory Board (RAB) Recommendations and PHA Response**

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 attached at Attachment (Filename) \_\_\_\_\_

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

The PHA changed portions of the PHA Plan in response to comments. A list of these changes is included

Yes  No: below or

Yes  No: at the end of the RAB Comments in Attachment \_\_\_\_\_.

Considered comments, but determined that no changes to the PHA Plan were necessary. An explanation of the PHA's consideration is included at the end of the RAB Comments in Attachment \_\_\_\_\_.

Other: (list below)

**B. 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)

New Mexico State Consolidated Plan through New Mexico Mortgage Finance Authority & Rio Arriba County.

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 specific initiatives contained in the Consolidated Plan. (list such initiatives below)
- Other: (list below)

3. PHA Requests for support from the Consolidated Plan Agency

- Yes  No: Does the PHA request financial or other support from the State or local government agency in order to meet the needs of its public housing residents or inventory? If yes, please list the 5 most important requests below:

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

Affordable housing is still a concern in Rio Arriba County as a whole.

**C. Criteria for Substantial Deviation and Significant Amendments**

**1. Amendment and Deviation Definitions**

24 CFR Part 903.7(r)

PHAs are required to define and adopt their own standards of substantial deviation from the 5-year Plan and Significant Amendment to the Annual Plan. The definition of significant amendment is important because it defines when the PHA will subject a change to the policies or activities described in the Annual Plan to full public hearing and HUD review before implementation.

**A. Substantial Deviation from the 5-year Plan:**

Any major change that reflects HUD's regulation requirements.

**B. Significant Amendment or Modification to the Annual Plan:**

Any changes to the PHA's mission and Capital Funding needs.

**Attachment - A**

**Supporting Documents Available for Review**

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

<b>List of Supporting Documents Available for Review</b>		
<b>Applicable &amp; On Display</b>	<b>Supporting Document</b>	<b>Related Plan Component</b>
<input checked="" type="checkbox"/>	PHA Plan Certifications of Compliance with the PHA Plans and Related Regulations	5 Year and Annual Plans
<input type="checkbox"/>	State/Local Government Certification of Consistency with the Consolidated Plan (not required for this update)	5 Year and Annual Plans
<input checked="" type="checkbox"/>	Fair Housing Documentation Supporting Fair Housing Certifications: Records reflecting that the PHA has examined its programs or proposed programs, identified any impediments to fair housing choice in those programs, addressed or is addressing those impediments in a reasonable fashion in view of the resources available, and worked or is working with local jurisdiction to implement any of the jurisdictions’ initiatives to affirmatively further fair housing that require the PHA’s involvement.	5 Year and Annual Plans
<input checked="" type="checkbox"/>	Housing Needs Statement of the Consolidated Plan for the jurisdiction/s in which the PHA is located and any additional backup data to support statement of housing needs in the jurisdiction	Annual Plan: Housing Needs
<input checked="" type="checkbox"/>	Most recent board -approved operating budget for the public housing program	Annual Plan: Financial Resources
<input checked="" type="checkbox"/>	Public Housing Admissions and (Continued) Occupancy Policy (A&O/ACOP), which includes the Tenant Selection and Assignment Plan [TSAP]	Annual Plan: Eligibility, Selection, and Admissions Policies
<input checked="" type="checkbox"/>	Any policy governing occupancy of Police Officers in Public Housing <input checked="" type="checkbox"/> check here if included in the public housing A&O Policy	Annual Plan: Eligibility, Selection, and Admissions Policies
<input checked="" type="checkbox"/>	Section 8 Administrative Plan	Annual Plan: Eligibility, Selection, and Admissions Policies
<input checked="" type="checkbox"/>	Public housing rent determination policies, including the method for setting public housing flat rents <input checked="" type="checkbox"/> check here if included in the public housing A&O Policy	Annual Plan: Rent Determination
<input checked="" type="checkbox"/>	Schedule of flat rents offered at each public housing development <input checked="" type="checkbox"/> check here if included in the public housing A&O Policy	Annual Plan: Rent Determination
<input checked="" type="checkbox"/>	Section 8 rent determination (payment standard) policies <input checked="" type="checkbox"/> check here if included in Section 8 Administrative Plan	Annual Plan: Rent Determination

<b>List of Supporting Documents Available for Review</b>		
<b>Applicable &amp; On Display</b>	<b>Supporting Document</b>	<b>Related Plan Component</b>
<b>X</b>	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
<b>X</b>	Results of latest binding Public Housing Assessment System (PHAS) Assessment	Annual Plan: Management and Operations
<b>N/A</b>	Follow-up Plan to Results of the PHAS Resident Satisfaction Survey (if necessary)	Annual Plan: Operations and Maintenance and Community Service & Self-Sufficiency
<b>X</b>	Results of latest Section 8 Management Assessment System (SEMAP)	Annual Plan: Management and Operations
<b>N/A</b>	Any required policies governing any Section 8 special housing types <input type="checkbox"/> check here if included in Section 8 Administrative Plan	Annual Plan: Operations and Maintenance
<b>X</b>	Public housing grievance procedures <input checked="" type="checkbox"/> check here if included in the public housing A&O Policy	Annual Plan: Grievance Procedures
<b>X</b>	Section 8 informal review and hearing procedures <input checked="" type="checkbox"/> check here if included in Section 8 Administrative Plan	Annual Plan: Grievance Procedures
<b>N/A</b>	The HUD -approved Capital Fund/Comprehensive Grant Program Annual Statement (HUD 52837) for any active grant year	Annual Plan: Capital Needs
<b>N/A</b>	Most recent CIAP Budget/Progress Report (HUD 52825) for any active CIAP grants	Annual Plan: Capital Needs
<b>N/A</b>	Approved HOPEVI applications or, if more recent, approved or submitted HOPEVI Revitalization Plans, or any other approved proposal for development of public housing	Annual Plan: Capital Needs
<b>X</b>	Self-evaluation, Needs Assessment and Transition Plan required by regulations implementing § 504 of the Rehabilitation Act and the Americans with Disabilities Act. See, PIH 99 -52 (HA).	Annual Plan: Capital Needs
<b>N/A</b>	Approved or submitted applications for demolition and/or disposition of public housing	Annual Plan: Demolition and Disposition
<b>N/A</b>	Approved or submitted applications for designation of public housing (Designated Housing Plans)	Annual Plan: Designation of Public Housing
<b>X</b>	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, Section 22 of the US Housing Act of 1937, or Section 33 of the US Housing Act of 1937	Annual Plan: Conversion of Public Housing
<b>N/A</b>	Approved or submitted public housing homeownership programs/plans	Annual Plan: Homeownership

<b>List of Supporting Documents Available for Review</b>		
<b>Applicable &amp; On Display</b>	<b>Supporting Document</b>	<b>Related Plan Component</b>
<b>N/A</b>	Policies governing any Section 8 Homeownership program (section _____ of the Section 8 Administrative Plan)	Annual Plan: Homeownership
<b>X</b>	Cooperation agreement between the PHA and the TANF agency and between the PHA and local employment and training service agencies	Annual Plan: Community Service & Self-Sufficiency
<b>X</b>	FSS Action Plan/s for public housing and/or Section 8	Annual Plan: Community Service & Self-Sufficiency
<b>X</b>	Section 3 documentation required by 24 CFR Part 135, Subpart E	Annual Plan: Community Service & Self-Sufficiency
<b>N/A</b>	Most recent self-sufficiency (ED/SS, TOP or ROSS or other resident services grant) grant program reports	Annual Plan: Community Service & Self-Sufficiency
<b>N/A</b>	The most recent Public Housing Drug Elimination Program (PHDEP) semi-annual performance report	Annual Plan: Safety and Crime Prevention
<b>N/A</b>	PHDEP-related documentation: <ul style="list-style-type: none"> <li>· Baseline law enforcement services for public housing developments assisted under the PHDEP plan;</li> <li>· Consortium agreement/s between the PHA participating in the consortium and a copy of the payment agreement between the consortium and HUD (applicable only to PHA participating in a consortium as specified under 24 CFR 761.15);</li> <li>· Partnership agreements (indicating specific leveraged support) with agencies/organizations providing funding, services or other in-kind resources for PHDEP-funded activities;</li> <li>· Coordination with the law enforcement efforts;</li> <li>· Written agreement(s) with local law enforcement agencies (receiving any PHDEP funds); and</li> <li>· All crime statistics and other relevant data (including Part I and specified Part II crimes) that establish need for the public housing sites assisted under the PHDEP plan.</li> </ul>	Annual Plan: Safety and Crime Prevention
<b>X</b>	Policy on Ownership of Pets in Public Housing Family Developments (as required by regulation at 24 CFR Part 960, Subpart G) <input checked="" type="checkbox"/> check here if included in the public housing A&O Policy	Pet Policy
<b>X</b>	The results of 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
<b>N/A</b>	Troubled PHAs: MOA/Recovery Plan	Troubled PHAs
<b>N/A</b>	Other supporting documents (optional) (list individually; use as many lines as necessary)	(specify as needed)

Annual Statement/Performance and Evaluation Report			ATTACHEMENT -B		
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary					
PHAName:		Grant Type and Number		Federal FY of Grant:	
Rio Arriba County Housing Authority		Capital Fund Program: NM02P039501-01		2001	
		Capital Fund Program			
		Replacement Housing Factor Grant No:			
<input type="checkbox"/> Original Annual Statement		<input type="checkbox"/> Reserve for Disasters/Emergencies		<input type="checkbox"/> Revised Annual Statement (revision no: )	
<input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 12/31/2002		<input type="checkbox"/> Final Performance and Evaluation Report			
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total Non -CFP Funds				
2	1406 Operations	13,818		13,818	13,818
3	1408 Management Improvements				
4	1410 Administration				
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	3,000		3,000	-0-
8	1440 Site Acquisition				
9	1450 Site Improvement	65,597		65,597	-0-
10	1460 Dwelling Structures	26,000		26,000	22,756.23
11	1465.1 Dwelling Equipment — Nonexpendable	4,145		4,145	3,094.75
12	1470 Nondwelling Structures				
13	1475 Nondwelling Equipment	25,624		25,624	25,624
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)	138,184		138,184	65,292.98
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 Compliance				

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

PHAName: <b>Rio Arriba County Housing Authority</b>		Grant Type and Number Capital Fund Program#: <b>NM02P039501-01</b> Capital Fund Program Replacement Housing Factor#:			Federal FY of Grant: <b>2001</b>			
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work
				Original	Revised	Funds Obligated	Funds Expended	
NM039-001	Operations	1406		13,818		13,818	13,818	Completed
NM039-001	Fees & Costs A/E Services	1430		3,000		3,000	-0-	Open
NM039-001	Site Improvement Pave Driveways in Ojo Caliente or Tile Replacement for 19 Units	1450		65,597		65,597	-0-	Open
NM039-001	Dwelling Structure According to Doors & Core Doors	1460		26,000		26,000	22,756.23	Open
NM039-001	Dwelling Equipment - Nonexpendable Ranges, Refrigerators, & Water Heaters	1465.1		4,145		4,145	3,094.75	Open
NM039-001	Non-dwelling Equipment Purchase New Truck/Maintenance, New Lab - Top & Computer PC upgrade	1475		25,624		25,624	25,624	Completed



**Required Attachment -D: Resident Member on the PHA Governing Board**

1.  Yes  No: Does the PHA governing board include at least one member who is directly assisted by the PHA this year? (if no, skip to #2)

A. Name of resident member(s) on the governing board: **Eleraldo Casias**

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

- Elected
- Appointed

C. The term of appointment is (include the date term expires): **March 10, 2003**

2. A. If the PHA governing board does not have at least one member who is directly assisted by the PHA, why not?

- the PHA is located in a State that requires the members of a governing board to be salaried and serve on a fulltime basis
- the PHA has less than 300 public housing units, has provided reasonable notice to the resident advisory board of the opportunity to serve on the governing board, and has not been notified by any resident of their interest to participate in the Board.
- Other (explain):

B. Date of next term expiration of a governing board member: **January 30, 2005**

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

**ELECTED OFFICIALS:**

**Board of Rio Arriba County Commissioners:**

- Elias Coriz, District 1, Commission Member, Elected ends 12/31/2006**
- Andrew Chavez, District 2, Commission Member, Elected ends 12/31/2006**
- Moises Morales, District 3, Commission Member, Elected ends 12/31/2004**

## Required Attachment - E: Membership of the Resident Advisory Board or Boards

List members of the Resident Advisory Board or Boards: (If the list would be unreasonably long, list organizations represented or otherwise provide a description sufficient to identify how members are chosen.)

Eleraldo Casias, President  
Beatrice Cordova, Member  
Genoveva Ulibarri, Member

### Housing Board Members:

Christina Archuleta - Mares, Chairwoman	4 year term 3/10/2007
Angela Gallegos, Vice - Chairwoman	3 year term 3/10/2006
Josephine Gallegos, Member	4 year term 3/10/2007
Benito Chavez, Member	3 year term 3/10/2006
Eleraldo Casias, Tenant Member	2 year term 3/10/2005