

PHA Plans

5 Year Plan for Fiscal Years 2000 - 2004
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: Syracuse Housing Authority

PHANumber: NY001

PHAFiscalYearBeginning:(mm/yyyy) 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)
Section 8 Administrative Plan is available at Section 8 Office.

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

A.Mission

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

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

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 EN COURAGED TO IDENTIFY QUANTIFIABLE MEASURES OF SUCCESS IN REACHING THEIR OBJECTIVES OVER THE COURSE OF THE 5 YEARS.** (Quantifiable measures would include targetssuch as: numbers of families served or PHAS scores achieved.) PHA should identify these measures in the space to the right of or below the stated objectives.

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

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

- Renovate or modernize public housing units:
- Demolish or dispose of obsolete public housing:
- Provide replacement public housing:
- Provide replacement vouchers:
- Other: (list below)

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

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

- PHA Goal: Provide an improved living environment
Objectives:
 - Implement measures to deconcentrate poverty by bringing higher income public housing households into lower income developments:
 - Implement measures to promote income mixing in public housing by assuring access for lower income families into higher income developments:
 - Implement public housing security improvements:
 - Designate developments or buildings for particular resident groups (elderly, persons with disabilities)
 - Other: Acquire properties around housing developments for conversion to greenspace.

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

- PHA Goal: Promote self-sufficiency and asset development of assisted households
Objectives:
 - Increase the number and percentage of employed persons in assisted families:

- Provide or attract supportive services to improve assistancerecipients' employability:
- Provide or attract supportive services to increase independence for the elderly or families with disabilities.
- Other:(listbelow)

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:(listbelow)

Other PHA Goals and Objectives:(listbelow)

AnnualPHAPlan
PHAFiscalYear2003
 [24CFRPart903.7]

i. AnnualPlanType:

SelectwhichtypeofAnnualPlanthePHAwillsubmit.

StandardPlan

StreamlinedPlan:

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

TroubledAgencyPlan

ii. ExecutiveSummaryoftheAnnualPHAPlan

[24CFRPart903.79(r)]

Provideabriefoverviewoftheinformationinthe AnnualPlan,includinghighlightsofmajorinitiatives anddiscretionarypolicies,thePHAhasincludedintheAnnualPlan.

ThisAnnualPlan,isthefourthAnnualPlanunder thecurrentFive -YearPlan.As such,itcontinuestheprogressiveandresponsi veactionsoftheSyracuseHousing Authorityinregardtothepreservationofasafe,secure,andqualityenvironmentforits residents.

Thecomingyearwillinclude:thedemolitionoftheAlmondStreetbuildingsset whichwaspostponedfromtheprevious year;themajorimplementationofthe\$6 milliondollarForward -FundingBondinitiative;andacontinuedefforttokeepour levelsofserviceandprogramsthroughwhatappeartobeFederalfundingcuts. Thisplan,astheprevious AnnualPlans,setsforththepolicyinitiatives,thefiscal plans,andthecapitalimprovementswhichtheSyracuseHousingAuthoritywillcarry forthinFiscalYear2003.

iii. AnnualPlanTableofContents

[24CFRPart903.79(r)]

ProvideatableofcontentsfortheAnnualPlan ,includingattachments,andalistofsupporting documentsavailableforpublicinspection .

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Attachments

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

Required Attachments:

- Admissions Policy for Deconcentration
- FY2000 Capital Fund Program Annual Statement
- Most recent board -approved operating budget (Required Attachment for PHAs that are troubled or at risk of being designated troubled ONLY)

Optional Attachments:

- PHA Management Organizational Chart
- FY2000 Capital Fund Program 5 Year Action Plan
- Public Housing Drug Elimination Program (PHDEP) Plan
- Comments of Resident Advisory Board or Boards (must be attached if not included in PHA Plan text)
- Other (List below, providing each attachment name)

Supporting Documents Available for Review

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

List of Supporting Documents Available for Review		
Applicable & On Display	Supporting Document	Applicable Plan Component
Yes	PHA Plan Certifications of Compliance with the PHA Plans and Related Regulations	5 Year and Annual Plans
Yes	State/Local Government Certification of Consistency with the Consolidated Plan	5 Year and Annual Plans
Yes	Fair Housing Documentation: Records reflecting that the PHA has examined its programs or proposed programs, identified any impediments to fair housing choice in those programs, addressed or is addressing those impediments in a reasonable fashion in view of the resources available, and worked or is working with local jurisdiction to implement any of the jurisdictions' initiatives to affirmatively further fair housing that require the PHA's involvement.	5 Year and Annual Plans
Yes	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 or support statement of housing needs in the jurisdiction	Annual Plan: Housing Needs
Yes	Most recent board -approved operating budget for the public housing program	Annual Plan: Financial Resources;
Yes	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
Yes	Section 8 Administrative Plan	Annual Plan: Eligibility, Selection, and Admissions Policies
Yes	Public Housing Deconcentration and Income Mixing Documentation: 1. PHA Board certifications of compliance with deconcentration requirements (section 16(a) of the US Housing Act of 1937, as implemented in the 2/18/99 <i>Quality Housing and Work Responsibility Act Initial Guidance; Notice</i> and any further HUD guidance) and 2. Documentation of the required deconcentration and income mixing analysis	Annual Plan: Eligibility, Selection, and Admissions Policies
Yes	Public housing rent determination policies, including the methodology for setting public housing flat rents <input checked="" type="checkbox"/> check here if included in the public housing A&O Policy	Annual Plan: Rent Determination
Yes	Schedule of flat rents offered at each public housing development <input type="checkbox"/> check here if included in the public housing A&O Policy	Annual Plan: Rent Determination
Yes	Section 8 rent determination (payment standard) policies <input checked="" type="checkbox"/> check here if included in Section 8 Administrative Plan	Annual Plan: Rent Determination
	Public housing management and maintenance policy	Annual Plan: Operations

List of Supporting Documents Available for Review		
Applicable & On Display	Supporting Document	Applicable Plan Component
Yes	documents, including policies for the prevention or eradication of pest infestation (including cockroach infestation)	and Maintenance
Yes	Public housing grievance procedures <input checked="" type="checkbox"/> check here if included in the public housing A&O Policy	Annual Plan: Grievance Procedures
Yes	Section 8 informal review and hearing procedures <input checked="" type="checkbox"/> check here if included in Section 8 Administrative Plan	Annual Plan: Grievance Procedures
Yes	The HUD - approved Capital Fund/Comprehensive Grant Program Annual Statement (HUD 52837) for the active grant year	Annual Plan: Capital Needs
	Most recent CIAP Budget/Progress Report (HUD 52825) for any active CIAP grant	Annual Plan: Capital Needs
	Most recent, approved 5 Year Action Plan for the Capital Fund/Comprehensive Grant Program, if not included as an attachment (provided at PHA option)	Annual Plan: Capital Needs
Yes	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
Yes	Approved or submitted applications for demolition and/or disposition of public housing	Annual Plan: Demolition and Disposition
	Approved or submitted applications for designation of public housing (Designated Housing Plans)	Annual Plan: Designation of Public Housing
	Approved or submitted assessments of reasonable revitalization of public housing and approved or submitted conversion plans prepared pursuant to section 202 of the 1996 HUD Appropriations Act	Annual Plan: Conversion of Public Housing
	Approved or submitted public housing home ownership programs/plans	Annual Plan: Homeownership
Yes	Policies governing any Section 8 Homeownership program <input checked="" type="checkbox"/> check here if included in the Section 8 Administrative Plan	Annual Plan: Homeownership
	Any cooperative agreement between the PHA and the TANF agency	Annual Plan: Community Service & Self - Sufficiency
Yes	FSS Action Plan/s for public housing and/or Section 8	Annual Plan: Community Service & Self - Sufficiency
Yes	Most recent self - sufficiency (ED/SS, TOP or ROSS or other resident services grant) grant program reports	Annual Plan: Community Service & Self - Sufficiency
Yes	The most recent Public Housing Drug Elimination Program (PHDEP) semi - annual performance report for any open grant and most recently submitted PHDEP application (PHDEP Plan)	Annual Plan: Safety and Crime Prevention
Yes	The most recent fiscal year audit of the PHA conducted under section 5(h)(2) of the U.S. Housing Act of 1937 (42 U.S.C. 1437c(h)), the results of that audit and the PHA's response to any findings	Annual Plan: Annual Audit
	Troubled PHAs: MOA/Recovery Plan	Troubled PHAs

List of Supporting Documents Available for Review		
Applicable & On Display	Supporting Document	Applicable Plan Component
	Other supporting documents (optional) (list individually; use as many lines as necessary)	(specify as needed)

1. Statement of Housing Needs

[24CFR Part 903.79(a)]

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

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

Housing Needs of Families in the Jurisdiction by Family Type							
Family Type	Overall	Affordability	Supply	Quality	Accessibility	Size	Location
Income ≤ 30% of AMI	18,000	5	4	5	5	5	5
Income > 30% but ≤ 50% of AMI	10,700	4	4	5	5	5	5
Income > 50% but < 80% of AMI	11,707	4	4	5	5	5	4
Elderly	12,459	5	4	5	5	4	4
Families with Disabilities	9,500	5	5	5	5	5	4
African-American	12,600	5	4	5	5	5	5
Hispanic	1,200	5	4	5	5	5	5
Native American	700	5	4	5	5	5	5
Asian-Pacific Islander	800	5	4	5	5	5	5

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: 2001 -2002

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

**B. HousingNeedsofFamilies onthePublicHousingandSection8
Tenant-BasedAssistanceWaitingLists**

StatethehousingneedsofthefamiliesonthePHA’swaitinglist/s .Completeonetableforeachtype ofPHA -widewaitinglistadministeredbythePHA. PHAsmayprovideseperate tablesforsite -basedorsub -jurisdictionalpublichousingwaitinglistsattheiropion.

HousingNeedsofFamiliesontheWaitingList PublicHousing			
Waitinglisttype:(selectone)			
<input type="checkbox"/> Section8tenant -basedassistance			
<input checked="" type="checkbox"/> PublicHousing			
<input type="checkbox"/> CombinedSection8andPublicHousing			
<input type="checkbox"/> PublicHousingSite -Basedorsub -jurisdictionalwaitinglist(optional)			
Ifused,identifywhichdevelopment/subjurisdiction:			
	#offamilies	%of totalfamilies	AnnualTurnover
Waitinglisttotal	790		18%
Extremelylow income<=30%AMI	648	86%	
Verylowincome (>30%but<=50%AMI)	79	10%	
Lowincome (>50%but<80%AMI)	29	4%	
Familieswith children	N/A	N/A	
Elderlyfamilies	110	14%	
Familieswith Disabilities	3	1%	
Race/Caucasian	209	36%	
Race/African-American	469	59%	

Housing Needs of Families on the Waiting List Public Housing			
Race/Native-American	0	0	
Ethnicity/Hispanic	105	13%	
Characteristics by Bedroom Size (Public Housing Only)			
1BR	337	43%	N/A
2BR	337	43%	N/A
3BR	81	10%	N/A
4BR	18	2%	N/A
5BR	17	2%	N/A
5+BR	N/A	N/A	N/A
Is the waiting list closed (select one)? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
If yes:			
How long has it been closed (# of months)?			
Does the PHA expect to open the list in the PHA plan year? <input type="checkbox"/> No <input type="checkbox"/> Yes			
Does the PHA permit specific categories of families onto the waiting list, even if generally closed? <input type="checkbox"/> No <input type="checkbox"/> Yes			

Housing Needs of Families on the Waiting List Section 8			
Waiting list type: (select one)			
<input checked="" type="checkbox"/> Section 8 tenant -based assistance			
<input type="checkbox"/> Public Housing			
<input type="checkbox"/> Combined Section 8 and Public Housing			
<input type="checkbox"/> Public Housing Site -Based or sub -jurisdictional waiting list (optional)			
If used, identify which development/subjurisdiction:			
	# of families	% of total families	Annual Turnover
Waiting list total	2834		Not Available
Extremely low income <= 30% AMI	Not Available	Not Available	
Very low income (> 30% but <= 50% AMI)	Not Available	Not Available	
Low income (> 50% but < 80%)	Not Available	Not Available	

Housing Needsof FamiliesontheWaitingList			
Section8			
AMI)			
Familieswith children	NotAvailable	NotAvailable	
Elderlyfamilies	369	13%	
Familieswith Disabilities	1064	38%	
Race/Caucasian	1234	44%	
Race/African - American	1465	52%	
Race/Native-American	43	1%	
Race/Asian	20	1%	
Race/Other	-	-	
Ethnicity/Hispanic	327	12%	
Characteristicsby BedroomSize (PublicHousing Only)			
1BR	N/A	N/A	N/A
2BR	N/A	N/A	N/A
3BR	N/A	N/A	N/A
4BR	N/A	N/A	N/A
5BR	N/A	N/A	N/A
5+BR	N/A	N/A	N/A
Isthewaitinglistclosed(selectone)? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
Ifyes:			
Howlonghasitbeenclosed(#ofmonths)?			
DoesthePHAexpectreopenthelistinthePHAPlanyear? <input type="checkbox"/> No <input type="checkbox"/> Yes			
DoesthePHApermitspecificcategoriesoffamiliesontothewaitinglist,evenif generallyclosed? <input type="checkbox"/> No <input type="checkbox"/> Yes			

C.StrategyforAddressingNeeds

ProvideabriefdescriptionofthePHA'sstrategyforaddressingthehousingneedsoffamiliesinthe jurisdictionandonthewaitinglist **INTHEUPCOMINGYEAR** ,andtheAgency'sreasonsfor choosingthisstrate gy.

(1) Strategies

Need: Shortage of affordable housing for all eligible populations

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

Select all that apply

- Employ effective maintenance and management policies to minimize the number of public housing units off -line
- Reduce turnover time for vacated public housing units
- Reduce time to renovate public housing units
- Seek replacement of public housing units lost to the inventory through mixed financed development
- Seek replacement of public housing units lost to the inventory through section 8 replacement housing resources
- Maintain or increase section 8 lease -up rates by establishing payment standards that will enable families to rent throughout the jurisdiction
- Undertake measures to ensure access to affordable housing among families assisted by the PHA, regardless of unit size required
- Maintain or increase section 8 lease -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
- Adopt rent policies to support and encourage work
- Other: (list below)

Need: Specific Family Types: The Elderly

Strategy 1: Target available assistance to the elderly:

Select all that apply

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

Need: Specific Family Types: Families with Disabilities

Strategy 1: Target available assistance to Families with Disabilities:

Select all that apply

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

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

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

Select if applicable

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

Strategy 2: Conduct activities to affirmatively further fair housing

Select all that apply

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

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 need is met by other organizations in the community
- Evidence of housing needs as demonstrated in the Consolidated Plan and other information available to the PHA
- Influence of the housing market on PHA programs
- Community priorities regarding housing assistance
- Results of consultation with local or state government
- Results of consultation with residents and the Resident Advisory Board
- Results of consultation with advocacy groups
- Other: (list below)

2. Statement of Financial Resources

[24CFR Part 903.79(b)]

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

Financial Resources: Planned Sources and Uses		
Sources	Planned \$	Planned Uses
1. Federal Grants (FY 2000 grants)		
a) Public Housing Operating Fund	9,700,000	
b) Public Housing Capital Fund	6,000,000	
c) HOPEVI Revitalization		
d) HOPEVI Demolition	100,000	
e) Annual Contributions for Section 8 Tenant-Based Assistance	16,000,000	
f) Public Housing Drug Elimination Program (including any Technical Assistance funds)	0	
g) Resident Opportunity and Self-Sufficiency Grants	530,000*	
h) Community Development Block Grant	12,500 150,000	Pub. Hsg. Supp. Svs. Other
i) HOME		
Other Federal Grants (list below)		
*Made up of Capacity Building Grant, Service Coordinator Grant, Neigh. Networks, RSDM.		
2. Prior Year Federal Grants (unobligated funds only) (list below)		
3. Public Housing Dwelling Rental Income	5,500,000	Public Housing Operations
4. Other income (list below)		
Non-Dwelling Rental	250,000 100,000	Public Housing Operations

Financial Resources: Planned Sources and Uses		
Sources	Planned \$	Planned Uses
Interest	100,000	Public Housing Operations
4. Non-federal sources (list below)		
Onondaga Cty. – Office of Aging	35,000	Pub. Hsng. Supp. Svs.
Onondaga Cty. – Office of Aging	45,000	Other
Capital Forward Funding Bond	4,500,000	Property Projects
Total resources	43,022,500	

3. PHA Policies Governing Eligibility, Selection, and Admissions

[24CFR Part 903.79(c)]

A. Public Housing

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

(1) Eligibility

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

- When families are within a certain number of being offered a unit: (state number)
- When families are within a certain time of being offered a unit: (state time)
- Other: (describe) Verification done during the screening process after unit offer based on vacancy.

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) Home Visit.

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) Applications available (and then mailed to SHA) at Section 8 office, HUD Storefront, and other community agencies.

c. If the PHA plan 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?

None

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)AdmissionsPreferences

a. Income targeting:

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

b. Transfer policies:

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

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

c. Preferences

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

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

Former Federal preferences:

- Involuntary Displacement (Disaster, Government Action, Action on fHousing

- Owner, Inaccessibility, Property Disposition)
- Victims of domestic violence
- Substandard housing
- Homelessness
- High rent burden (rent is > 50 percent of income)

Other preferences: (select below)

- Working families and those unable to work because of age or disability
- Veterans and veterans' families
- Residents who live and/or work in the jurisdiction
- Those enrolled currently in educational, training, or upward mobility programs
- Household that contributes to meeting income goals (broad range of incomes)
- Household that contributes to meeting income requirements (targeting)
- Those previously enrolled in educational, training, or upward mobility programs
- Victims of reprisals or hate crimes
- Other preference(s) (list below) Displaced persons/families due to fire.
Lead _____ -based pain in health risk.
Adult residents already in Public Housing.

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

2 Date and Time

Former Federal preferences:

- Involuntary Displacement (Disaster, Government Action, Action of Housing Owner, Inaccessibility, Property Disposition)
- 1 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
- 2 Household that contributes to meeting income goals (broad range of incomes)
- 2 Household that contributes to meeting income requirements (targeting)
- Those previously enrolled in educational, training, or upward mobility programs

- Victims of reprisals or hate crimes
- 1 Other preference(s) (list below) Displaced persons/families due to fire.
Lead -based pain the health risk.
Adult residents already in Public Housing.

4. Relationship of preferences to income targeting requirements:

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

(5) Occupancy

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

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

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

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

(6) Deconcentration and Income Mixing

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

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

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

- Adoption of site -based waiting lists
If selected, list targeted developments below:
- Employing waiting list "skipping" to achieve deconcentration of poverty or income mixing goals at targeted developments
If selected, list targeted developments below:
- Employing new admission preferences at targeted developments
If selected, list targeted developments below:
- Other (list policies and development targeted below)

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

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

- Additional affirmative marketing
- Actions to improve the marketability of certain developments
- Adoption or adjustment of ceiling rents for certain developments
- Adoption of rent incentives to encourage deconcentration of poverty and income-mixing
- Other (list below)

f. Based on the results of the required analysis, in which developments will the PHA make special efforts to attract or retain higher -income families? (select all that apply)

- Not applicable: results of analysis did not indicate a need for such efforts
- List (any applicable) developments below:

g. Based on the results of the required analysis, in which developments will the PHA make special efforts to assure access for lower -income families? (select all that apply)

- Not applicable: results of analysis did not indicate a need for such efforts
- List (any applicable) developments below:

B. Section 8

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

(1) Eligibility

- a. What is the extent of screening conducted by the PHA? (select all that apply)
- Criminal or drug -related activity only to the extent required by law or regulation
 - Criminal and drug -related activity, more extensively than required by law or regulation
 - More general screening than criminal and drug -related activity (list factors below)
 - Other (list below)
- b. Yes No: Does the PHA request criminal records from local law enforcement agencies for screening purposes?
- c. Yes No: Does the PHA request criminal records from State law enforcement agencies for screening purposes?
- d. Yes No: Does the PHA access FBI criminal records from the FBI for screening purposes? (either directly or through an NCIC - authorized source)
- e. Indicate what kinds of information you share with prospective landlords? (select all that apply)
- Criminal or drug -related activity
 - Other (describe below) If asked, will report knowledge of late payments, excessive damages, etc...

(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) Applications available (and then mailed to SHA) at SHA Administrative office, HUD Storefront, and other community agencies.

(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: If request is made.

(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 a tor below 30% of median area income?

b. Preferences

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

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

Former Federal preferences

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

Other preferences (select all that apply)

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

Other preference(s) (list below) Lead -based pain the health risk.

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

2 Date and Time

Former Federal preferences

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

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

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

5. If the PHA plans to employ preferences for "residents who live and/or work in the jurisdiction" (select one)

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

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

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

(5) Special Purpose Section 8 Assistance Programs

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

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

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

- Through published notices
- Other (list below) Letters, and personal contact with various community organizations.

4. PHA Rent Determination Policies

[24CFR Part 903.79(d)]

A. Public Housing

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

(1) Income Based Rent Policies

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

a. Use of discretionary policies: (select one)

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

---or---

- ThePHAemploysdiscretionarypoliciesfordeterminingincomebasedrent(If selected,continuetou questionb.)

b. Minimum Rent

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

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

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

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

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

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

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

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

For the earned income of a previously unemployed household member
 For increases in earned income
 Fixed amount (other than general rent -setting policy)
If yes, state amount/s and circumstances below:

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

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

e. Ceiling rents

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

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

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

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

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

- Market comparability study
- Fair market rents (FMR)
- 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 re-examinations, how often must tenants report changes in income or family composition to the PHA such that the changes result in an adjustment to rent? (select all that apply)

- Never
- At family option
- Anytime the family experiences an income increase

- Anytime a family experiences an income increase above a threshold amount or percentage: (if selected, specify threshold) Over \$200 per month
- Other (list below) Anytime family composition changes. Monthly for tenants on \$0 (minimum) rent.

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) Ceiling Rent Analysis - Operating Cost, Utility Allowance, and Adjustment factors to 2-bedroom standard as stated in HUD proposed rule 11/25/97.
- Leasing History within sections of SHA developments.

B. Section 8 Tenant -Based Assistance

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

(1) Payment Standards

Describe the voucher payment standards and policies.

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

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

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

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

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

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

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

- Annually
- Other (list below)

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

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

(2) Minimum Rent

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

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

b. Yes No: Has the PHA adopted any discretionary minimum rent hardship exemption policies? (if yes, list below)

5. Operations and Management

[24CFR Part 903.79(e)]

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

A. PHA Management Structure

Describe the PHA's management structure and organization.

(select one)

- An organization chart showing the PHA's management structure and organization is attached.
- A brief description of the management structure and organization of the PHA follows:

The PHA has an administration department which is staffed by the Executive Director, Assistant Executive Director, Management Analyst, and Administrative Analyst. The rest of the Housing departments fall under the purview of Administration. These departments include: Occupancy, Section 8, Grants, Youth Services, Human Services, Tenant Services, Personnel, Accounting/Payroll, MIS, Property Services, Security, Maintenance, Grounds/Garage, Lease Compliance, and Purchasing. The entire agency is comprised of about 275 full-time and 65 part-time employees.

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	2301	22%
Section 8 Vouchers	2868	18%
Section 8 Certificates		
Section 8 Mod Rehab	25	10%
Special Purpose Section 8 Certificates/Vouchers (list individually)		
Public Housing Drug Elimination Program (PHDEP)		
Other Federal Programs (list		

individually)		
ShelterPlusCare	317	15%

C. Management and Maintenance Policies

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

- (1) Public Housing Maintenance and Management: (list below)
- Admissions and Occupancy Management Policy
 - Employee Policies (parking, smoking, cell phones, etc)
 - Security Policy
 - Purchasing Policy
 - Tenant Handbook
 - Preventive Maintenance Program
 - Emergency Response Maintenance Policy
 - Fire Policy – High Rises
 - Disaster Response Policy
 - Deconcentration Policy
 - Grievance Procedures Policy
 - Extermination Policy
 - Project-Based Voucher Program

- (2) Section 8 Management: (list below)

Section 8 Administrative Plan

6. PHA Grievance Procedures

[24 CFR Part 903.79(f)]

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

A. Public Housing

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

If yes, list additions to federal requirements below:

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

- PHA main administrative office
- 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 addition to federal requirements below:

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

- PHA main administrative office
- Other (list below)

7. Capital Improvement Needs

[24 CFR Part 903.79(g)]

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

A. Capital Fund Activities

Exemptions from sub -component 7A: 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 (statername)ny001b01.xls, ny001c01.xls, ny001d01.xls, ny001e01.xls, and ny001f01.xls

-or-

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

(2) Optional 5 -Year Action Plan

Agencies are encouraged to include a 5 -Year Action Plan covering capital work items. This statement can be completed by using the 5 Year Action Plan template 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 (state name) 001g01.xls

-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

- 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-financed development activities for public housing in the Plan year?
If yes, list developments or activities below:

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

8. Demolition and Disposition

[24CFR Part 903.79(h)]

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

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

2. Activity Description

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

Demolition/Disposition Activity Description
1a. Development name: Pioneer Homes
1b. Development (project) number: NY06P001001
2. Activity type: Demolition <input checked="" type="checkbox"/>

Disposition <input type="checkbox"/>
3. Application status (select one) Approved <input checked="" type="checkbox"/> Submitted, pending approval <input type="checkbox"/> Planned application <input type="checkbox"/>
4. Date application approved, submitted, or planned for submission: <u>(06/30/2002)</u>
5. Number of units affected: 20
6. Coverage of action (select one) <input checked="" type="checkbox"/> Part of the development <input type="checkbox"/> Total development
7. Timeline for activity: a. Actual or projected start date of activity: 04/01/2003 b. Projected end date of activity: 07/30/2003

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

[24 CFR Part 903.79(i)]

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

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

2. Activity Description

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

Designation of Public Housing Activity Description
1a. Development name:

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

10. Conversion of Public Housing to Tenant -Based Assistance

[24CFR Part 903.79(j)]

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

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

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

2. Activity Description

Yes No: Has the PHA provided all required activity description information for this component in the **optional** Public Housing Asst 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 requirement assessment? <input type="checkbox"/> Assessment underway <input type="checkbox"/> Assessment results submitted to HUD <input type="checkbox"/> Assessment results approved by HUD (if marked, proceed to next question) <input type="checkbox"/> Other (explain below)
3. <input type="checkbox"/> Yes <input type="checkbox"/> No: Is a Conversion Plan required? (If yes, go to block 4; if no, go to block 5.)
4. Status of Conversion Plan (select the statement that best describes the current status) <input type="checkbox"/> Conversion Plan in development <input type="checkbox"/> Conversion Plan submitted to HUD on: (DD/MM/YYYY) <input type="checkbox"/> Conversion Plan approved by HUD on: (DD/MM/YYYY) <input type="checkbox"/> Activities pursuant to HUD - approved Conversion Plan underway
5. Description of how requirements of Section 202 are being satisfied by means other than conversion (select one) <input type="checkbox"/> Units addressed in a pending or approved demolition application (date submitted or approved: _____) <input type="checkbox"/> Units addressed in a pending or approved HOPEVI demolition application (date submitted or approved: _____) <input type="checkbox"/> Units addressed in a pending or approved HOPEVI revitalization plan (date submitted or approved: _____) <input type="checkbox"/> Requirements no longer applicable: vacancy rates are less than 10 percent <input type="checkbox"/> Requirements no longer applicable: site now has less than 300 units <input type="checkbox"/> Other: (describe below)

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

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

11. Homeownership Programs Administered by the PHA

[24CFR Part 903.79(k)]

A.PublicHousing

ExemptionsfromComponent1 1A:Section8onlyPHAsarenotrequiredtocomplete11A.

1. Yes No: DoesthePHAadministeranyhomeownershipprograms administeredbythePHAunderanapprovedsection5(h) homeownershipprogram(42U.S.C.1437c (h)),oranapproved HOPE Iprogram(42U.S.C.1437aaa)orhasthePHAappliedor plantoapplytoadministeranyhomeownershipprogramsunder section5(h),theHOPEIprogram,orsection32oftheU.S. HousingActof1937(42U.S.C.1437z -4).(If“No”, skipto component11B;if“yes”,completeoneactivitydescriptionfor eachapplicableprogram/plan,unlesseligibletocompletea streamlinedsubmissiondueto **smallPHA** or **highperforming PHA**status.PHAscompletingstreamlinedsubmissionsmay skipto component11B.)

2.ActivityDescription
 Yes No: HasthePHAprovidedallrequiredactivitydescription informationforthiscomponentinthe **optional**PublicHousing AssetManagementTable?(If“yes”,skiptocompone nt12.If “No”,completetheActivityDescriptiontablebelow.)

PublicHousingHomeownershipActivityDescription (Completeoneforeachdevelopmentaffected)
1a.Developmentname: 1b.Development(project)number:
2.FederalProgramauthority: <input type="checkbox"/> HOPEI <input type="checkbox"/> 5(h) <input type="checkbox"/> TurnkeyIII <input type="checkbox"/> Section32oftheUSHAof1937(effective10/1/99)
3.Applicationstatus:(selectone) <input type="checkbox"/> Approved;includedinthePHA’sHomeownershipPlan/ Program <input type="checkbox"/> Submitted,pendingapproval <input type="checkbox"/> Plannedapplication
4.DateHomeownershipPlan/Programapproved,submitted,orplannedforsubmission: (DD/MM/YYYY)
5. Numberofunitsaffected: 6.Coverage ofaction:(selectone) <input type="checkbox"/> Partofthedevelopment <input type="checkbox"/> Totaldevelopment

B. Section 8 Tenant Based Assistance

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

2. Program Description:

a. Size of Program

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

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

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

b. PHA - established eligibility criteria

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

If yes, list criteria below: Current participant of the FSS program.

Family monthly gross income of over \$15,000.

Full time employment record of at least one year prior to application (except for elderly or disabled families).

Other Requirements as established by SHA.

12. PHA Community Service and Self -sufficiency Programs

[24 CFR Part 903.79(1)]

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

A.PHACoordinationwiththeWelfare(TANF)Agency

1.Cooperativeagreements:

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

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

**Currently under review by TANF and HAF signing July, 2003.

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

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

B. Services and programs offered to residents and participants

(1) General

a. Self-Sufficiency Policies

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

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

b. Economic and Social self-sufficiency programs

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

Services and Programs				
Program Name & Description (including location, if appropriate)	Estimated Size	Allocation Method (waiting list/random selection/specific criteria/other)	Access (development office/ PHA main office/ other provider name)	Eligibility (public housing or section 8 participants or both)
TAPI	75	Enroll	Program Space	PH
TAPII	35	Enroll	Program Space	PH
TAPIII	25	Enroll	Program Space	PH

(2) Family Self Sufficiency program/s

a. Participation Description

Family Self Sufficiency (FSS) Participation		
Program	Required Number of Participants (start of FY 2000 Estimate)	Actual Number of Participants (As of: DD/MM/YY)
Public Housing		
Section 8	300	685

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

C. Welfare Benefit Reductions

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

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

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

13. PHA Safety and Crime Prevention Measures

[24CFR Part 903.79(m)]

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

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

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

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

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

- Safety and security survey of residents

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

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

Pioneer Homes, Central Village.

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

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

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

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

C. Coordination between PHA and the police

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

- Police involvement in development, implementation, and/or ongoing evaluation of drug -elimination plan
- Police provide media 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 do the -wise 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)

PioneerHomes,CentralVillage.

D.AdditionalinformationasrequiredbyPHDEP/PHDEPPlan

PHAseligibleforFY2000PHDEPfundsmustprovideaPHDEPPlanmeetingspeci
fiedrequirements
priortoreceiptofPHDEPfund.

- Yes No: IsthePHAeligibletoparticipateinthePHDEPinthefiscalyear coveredbythisPHAPlan?
- Yes No: HasthePHAinclude dthePHDEPPlanforFY2000inthisPHA Plan?
- Yes No: ThisPHDEPPlanisanAttachment.(AttachmentFilename:___)

14.RESERVEDFORPETPOLICY

[24CFRPart903.79(n)]

Attachmentsny001g01.doc,ny001h01.doc.

15.CivilRightsCertifications

[24CFRPart903.79(o)]

CivilrightscertificationsareincludedinthePHAPlanCertificationsofCompliance withthePHAPlansandRelatedRegulations.

16.FiscalAudit

[24CFRPart903.79(p)]

- 1. Yes No: IsthePHArequiredtohaveanauditconductedundersection 5(h)(2)oftheU.S.HousingActof1937(42US.C.1437c(h))? (Ifno,skiptocomponent17.)
- 2. Yes No: Wasthemostrec entfiscalauditsubmittedtoHUD?
- 3. Yes No: Werethereanyfindingsastheresultofthataudit?
- 4. Yes No: Iftherewereanyfindings,doanyremainunresolved? Ifyes,howman yunresolvedfindingsremain?_____
- 5. Yes No: Haveresponsestoanyunresolvedfindingsbeensubmittedto HUD? Ifnot,whenaretheydue(statebelow)?

17.PHAAssetManagement

[24CFRPart903.79(q)]

Exemptions fromcomponent17:Section8OnlyPHAsarenotrequiredtocompletethiscomponent. HighperformingandsmallPHAsarenotrequiredtocompletethiscomponent.

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

18. Other Information

[24 CFR Part 903.79(r)]

A. Resident Advisory Board Recommendations

1. Yes No: Did the PHA receive any comments on the PHA Plan from the Resident Advisory Board/s?
2. If yes, the comments are: (if comments were received, the PHA **MUST** select one)
- Attached at Attachment (Filename) ny001a01.doc
 - 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)

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

1. Yes No: Does the PHA meet the exemption criteria provided section 2(b)(2) of the U.S. Housing Act of 1937? (If no, continue to question 2; if yes, skip to sub-component C.)
2. Yes No: Was the resident who serves on the PHA Board elected by the residents? (If yes, continue to question 3; if no, skip to sub-component C.)

3. Description of Resident Election Process

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

- Candidates were nominated by resident and assisted family organizations
- Candidates could be nominated by any adult recipient of PHA assistance
- Self-nomination: Candidates registered with the PHA and requested a place on ballot
- Other: (describe) Candidates collect signatures in a petitioning process from assisted family members 18 years of age and older.

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: (Syracuse, NY)

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.

- ThePHAhasparticipatedinanyconsultationprocessorganizedandofferedby theConsolidatedPlanagencyinthedevelopmentoftheConsolidatedPlan.
- ThePHAhasconsultedwiththeConsolidatedPlanagencyduringthe developmentofthisPHAPlan.
- ActivitiestobeundertakenbythePHAinthecomingyearareconsistentwith theinitiativescontainedintheConsolidatedPlan.(listbelow)

- Other:(listbelow)

3. TheConsolidatedPlanofthejurisdictionssupportsthePHAPlanwiththe followingactionsandcommitments:(describebelow)
- Withaneighborhood-basedplanwhichwillprovideopportunitiesforwork, expandedgovernmentservices,housing,andrecreation,theCityofSyracuse ConsolidatedPlansupportsthecontinuedeffortsoftheSyracuseHousing Authoritytoprovidesafeandsecurehousing,programsandassistancefor economicself-sufficiency,andaqualitylivingenvironmentforitsresidents. Thecity'scommitmenttomixed-incomeneighborhoods,improvedaccessto housing,housingaffordability,improvingthequalityofowner-occupiedhousing, cleaninguppropertieswiththeVacantPropertyProgram,andnumerousother programsallaffordtheSyracuseHousingAuthoritysupportinititscommitmentto itspublichousingdevelopmentsandsurroundingneighborhoods.

D.OtherInformationRequiredbyHUD

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

TheSyracuse Housing Authority Follow-Up Plan to the FY2002 RASS score:

- 1) TheSyracuseHousingAuthoritywillcontinueitsSecurityProgramineachof itsdevelopments,concentratingonthe preventionand interdictionof anycrime oractivitywhich interrupts the peaceful residency of tenants.
- 2) TheSyracuseHousingAuthoritywillalsoattempttoinformandeducateits residentstotheavailabilityofanyNeighborhoodWatchorsimilarprograms.

3) Attachments

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

PHA Plan Table Library

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

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

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

Original Annual Statement

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

AnnualStatement
CapitalFundProgram(CFP)PartII:SupportingTable

Development Number/Name HA-WideActivities	GeneralDescriptionofMajorWork Categories	Development Account Number	Total Estimated Cost

**AnnualStatement
CapitalFundProgram(CFP)PartIII:ImplementationSchedule**

Development Number/Name HA-WideActivities	AllFundsObligated (QuarterEndingDate)	AllFundsExpended (QuarterEndingDate)

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

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

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

Comments Received From Resident Advisory Board Concerning the Five -Year and FY2003 Annual Plans

In a series of meetings with the Resident Advisory Board, which was comprised of the President's Committee of the City -Wide Council of Low Income Residents, the duly elected governing body of the SHA tenant organizations, the following comments were offered:

March 19, 2003 Meeting

- 1) Comment which was directed to the perceived exclusion of specific elderly housing issues in the plan. The template does not truly distinguish between elderly and family housing and the variety of issues which affect them.
- 2) Comment about the potential cuts in County and City grant and the implications for elderly services and programming.
- 3) Comment about any further Job Training/Preparation programs to be sponsored by the Syracuse Housing Authority, like the FUTURE program.
- 4) Comment concerning the possibility of the Syracuse Housing Authority to start a homeownership program.
- 5) A number of comments about the elevators in the high rise buildings, and the schedule of replacement, repair.
- 6) Comment about the Resident Participation Funding.
- 7) Comment and concern about the ending of PHDEP funding. The concern is how this will affect the Youth programs and self-sufficiency programs offered to the public housing community.

Comments from RAB members individually

- 1) Question about the changes that the SHA is making along Burt Street with the Forward Funding Bond money.
- 2) Questions and discussion about budgetary cuts from the Federal Government.
- 3) Questions and comments about the Community Service requirement, and whether it would be reinstated.

Subsequent comments submitted in writing and by phone by RAB members.

- 1) Questions about future modernization projects and the replacement of appliances in units. Referred to the Capital Budget annual and five-year plan.

Annual Statement/Performance and Evaluation Report

Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1:0

PHA Name SYRACUSE HOUSING AUTHORITY	Grant Type and Number Capital Fund Program Grant No: NY06 P001 501 2000 Replacement Housing Factor Grant No:	Federal
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**Original Annual Statement Reserve for Disasters/Emergencies Revised Annual Statement (revision no:3)
 XX Performance and Evaluation Report for Period Ending: 12/31/02**

Line No.	Summary by Development Account	Total Estimated Cost		Obligated	Total
		Original	Revised		
1	Total Non-CGPFunds				
2	1406 Operations	920,000		920,000	
3	1408 Management Improvements	900,000		900,000	
4	1410 Administration	460,000		460,000	
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	225,000		225,000	
8	1440 Site Acquisition				
9	1450 Site Improvement	46,250		46,250	
10	1460 Dwelling Structures	987,549		987,549	
11	1465.1 Dwelling Equipment--Nonexpendable	150,000		150,000	
12	1470 Nondwelling Structures	143,000		143,000	
13	1475 Nondwelling Equipment	658,002		658,002	
14	1485 Demolition	0		0	
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs	111,856		111,856	
18	1498 Development Activities				
19	1501 Collateralization or Debt Service				
20	1502 Contingency				
21	Amount of Annual Grant (Sum of lines 2-20)	4,601,657	0	4,601,657	

Signature of Executive Director and Date

Annual Statement/Performance and Evaluation Report

Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1:

PHAName SYRACUSE HOUSING AUTHORITY	Grant Type and Number Capital Fund Program Grant No: NY06 P001 501 2000 Replacement Housing Factor Grant No:	Federal:
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Original Annual Statement Reserve for Disasters/Emergencies Revised Annual Statement (revision no:)
Performance and Evaluation Report for Period Ending: 12/31/00 Final Performance and Evaluation Report

Line No.	Summary by Development Account	Total Estimated Cost		Obligated	Total
		Original	Revised		
22	Amount of line XX Related to LBP Activities	0		0	
23	Amount of line XX Related to Section 504 Compliance	0		0	
24	Amount of line XX Related to Security--Soft Costs	456,750		456,750	
25	Amount of line XX Related to Security--Hard Costs	116,065		116,065	
26	Amount of line XX Related to Energy Conservation Measures	1,250		1,250	

25-Mar-03

Summary

alFYofGrant:

2000

**ActualCost
Expended**

0

360,132

460,002

225,161

46,089

1,222,322

150,000

136,769

396,083

0

111,856

3,108,414

Summary

alFYofGrant:

2000

**ActualCost
Expended**

0

0

117,903

116,064

0

Annual Statement/Performance and Evaluation Report

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

Part II: Supporting Pages

PHAName	Grant Type and Number	Federal FY of Gra
SYRACUSE HOUSING AUTHORITY	Capital Fund Program Grant No: NY06 P001 501 2000	
	Replacement Housing Factor Grant No:	

Development Number/Name HA-Wide Activities	General Description of Major Work Categories	Dev. Acct. No.	Quantity	Total Estimated Cost		Total Actual Cost	
				Original	Revised	Funds Obligated	Funds Expended
PHA-WIDE Operations	1. Operations			920000		920000	
	Development Account Total	1406		920000	0	920000	0

PHA-WIDE Management Improvements	1. Reduce apt turnaround time (VAPC)			200,000.00		200,000.00	143,678.89
	2. Marketing initiative			130,000.00		130,000.00	48,822.52
	3. Vacancy reduction (site managers)			156,500.00		156,500.00	16,612.22
	4. Tenant Selector						
	5. Resident-Staff Training (RMCTech Assist.)						
	6. Resident Management Aides			40,000.00		40,000.00	14,174.28
	7. Security to Control Drug Activity			348,500.00		348,500.00	98,965.96
	8. Job Development			10,000.00		10,000.00	29,569.00
	9. Organizational effectiveness			15,000.00		15,000.00	8,309.17
	Development Account Total	1408		900000	0	900000	360132.04

PHA-WIDE Administration	1. Technical Salaries & Benefits			460000		460000	460001.93
	Development Account Total	1410		460000	0	460000	460001.93

PHA-WIDE Fees and Costs	1. Architect and Engineering Fees			207604		207604	207713.65
	2. Other Fees and Costs			17396		17396	17447.25
	Development Account Total	1430		225000	0	225000	225160.9

NY06P001001 Pioneer Homes							
------------------------------	--	--	--	--	--	--	--

	DevelopmentAccountTotal						
	DevelopmentAccountTotal						
	DevelopmentAccountTotal						
	ProjectTotal	NY1-01		0	0	0	0

NY06P001002	1.	Installporchlights-frontentrancerowapts	1460	220	42913		42913	42912.59
JamesGeddes02	2.	Replaceelevatormachines,cables,etc.	1475	4	324,950.00		324,950.00	1,293.74
	3.	Replacewaterservice	1460	2	10,201.00		10201	10201.02
		DevelopmentAccountTotal	1460		53,114.00	0.00	53,114.00	53,113.61
		DevelopmentAccountTotal	1475		324,950.00	0.00	324,950.00	1,293.74
		ProjectTotal	NY1-02		378,064.00	0.00	378,064.00	54,407.35

AnnualStatement/PerformanceandEvaluationReport
CapitalFundProgramandCapitalFundProgramReplacementHousingFactor(CFP/CFPRHF)
PartII:SupportingPages

PHAName		GrantTypeandNumber				FederalFYofGra	
SYRACUSEHOUSINGAUTHORITY		CapitalFundProgramGrantNo: NY06 P001 501 2000					
		ReplacementHusingFactorGrantNo:					
Development Number/Name HA-Wide Activities	General Description of Major Work Categories	Dev. Acct. No.	Quantity	TotalEstimatedCost		TotalActualCost	
				Original	Revised	Funds Obligated	Funds Expended
NY06P001003 JamesGeddes03	1. Replaceelevatormachines,cables,etc.	1475	2	160,050.00		160,050.00	203,109.00
	DevelopmentAccountTotal						0
	DevelopmentAccountTotal	1475		160050	0	160050	203109
	ProjectTotal	NY1-03		160050	0	160050	203109

NY06P001004 AlmusOlver	1. Significantrehabcontracts		1460		25000	0	25000	215.63
	DevelopmentAccountTotal		1460		25000	0	25000	215.63
	ProjectTotal		NY1-04		25000	0	25000	215.63
NY06P001005 ToomeyAbbott								
	DevelopmentAccountTotal							
	ProjectTotal		NY1-05		0	0	0	0
NY06P001009 RossTowers	1. Replaceaptdomesticsupplylines		1460	160x2				
	2. Replacesink/lav/tubdrains&vents		1460	160				
	3. Abateasbestsfloortile(VAT)		1460	172,000sf				
	4. Installnewflooring		1460	172,000sf				
	5. Significantrehab		1460		816,928.00		816,928.00	838,928.32
	6. Replacewindow/curtainwall		1460					
	DevelopmentAccountTotal		1460		816,928.00	0.00	816,928.00	838,928.32
DevelopmentAccountTotal								
ProjectTotal		NY1-09		816,928.00	0.00	816,928.00	838,928.32	
NY06P001010 VnetteTower	1. Installboilerforsnowmeltsystem		1475		59850		59850	58310
	2. Expansionjointfailurerepair		1460	5	10,000.00		10,000.00	5,779.04
	3. HVACimprovements		1460		1,000.00		1,000.00	839.02
	DevelopmentAccountTotal		1460		11000	0	11000	6618.06
	DevelopmentAccountTotal		1475		59850	0	59850	58310
	ProjectTotal		NY1-10		70850	0	70850	64928.06

AnnualStatement/PerformanceandEvaluationReport						
CapitalFundProgramandCapitalFundProgramReplacementHousingFactor(CFP/CFPRHF)						
PartII:SupportingPages						
PHAName	GrantTypeandNumber					FederalFYofGra
SYRACUSEHOUSINGAUTHORITY	CapitalFundProgramGrantNo: NY06 P001 501 2000					
	ReplacementHusingFactorGrantNo:					
Development	General Description of Major Work	Dev.	Quantity	TotalEstimatedCost	TotalActualCost	

Number/Name HA-Wide Activities	Categories	Acct. No.			Original	Revised	Funds Obligated	Funds Expended
NY06P001011 FaheyCourt	1. Installemergencygenerator	1475			0			33382.5
	DevelopmentAccountTotal	1475			0	0	0	33382.5
	ProjectTotal	NY1-11			0	0	0	33382.5
NY06P001012 BendersonHgts	1. Site improvements contract	1450			46250		46250	46088.68
	2. Replace failed interior lighting	1460	65		16507		16507	16506.88
	DevelopmentAccountTotal	1450			46250	0	46250	46088.68
	DevelopmentAccountTotal	1460			16507	0	16507	16506.88
	ProjectTotal	NY1-12			62757	0	62757	62595.56
NY06P001014 ScatteredRehab								
	DevelopmentAccountTotal							
	ProjectTotal	NY1-14			0	0	0	0
NY06P001018 McKinneyManor	1. Repairsidingfailurecontract	1460			5000	0	5000	
	DevelopmentAccountTotal	1460			5000	0	5000	0
	ProjectTotal	NY1-18			5000	0	5000	0
PHA-WIDE Dwelling Structures	1. PHAScorrections	1460			60000		60000	306939.45
	DevelopmentAccountTotal	1460			60000	0	60000	306939.45
	ProjectTotal	PHAWide			60000	0	60000	306939.45
PHA-WIDE Dwelling Equipment	1. Replaceappliancers--EnergyStarProgram	1465.1			150000		150000	150000
	DevelopmentAccountTotal	1465.1			150,000.00	0.00	150,000.00	150,000.00
	ProjectTotal	PHAWide			150,000.00	0.00	150,000.00	150,000.00

PHA-WIDE Non-Dwelling Structures	1. YouthCenter 2. MaintenanceQuonsetHut		1470		143000 0		143,000.00 0.00	133,649.64 3,119.08
		DevelopmentAccountTotal	1470		143000	0	143000	136768.72

AnnualStatement/PerformanceandEvaluationReport
CapitalFundProgramandCapitalFundProgramReplacementHousingFactor(CFP/CFPRHF)
PartII:SupportingPages

PHAName	GrantTypeandNumber	FederalFYofGra
SYRACUSEHOUSINGAUTHORITY	CapitalFundProgramGrantNo: NY06 P001 501 2000	
	ReplacementHusingFactorGrantNo:	

Development Number/Name HA-Wide Activities	General Description of Major Work Categories	Dev. Acct. No.	Quantity	TotalEstimatedCost		TotalActualCost	
				Original	Revised	Funds Obligated	Funds Expended

PHAWIDE Nondwelling Equipment	1. Securityequipment 2. Youthcenters--purchaseequipment							
				73152		73152	73151.56	
				40000		40000	26836.36	
	DevelopmentAccountTotal	1475		113152	0	113152	99987.92	

PHAWide Relocation/ Displacement	DevelopmentAccountTotal	1495		111856		111856	111856
		1495		111856	0	111856	111856

GRANTTOTALS FFY2000(501)	Operations	1406		920,000	0	920,000	0
	ManagementImprovements	1408		900,000	0	900,000	360,132
	Administration	1410		460,000	0	460,000	460,002
	Fees&Costs	1430		225,000	0	225,000	225,161
	SiteImprovements	1450		46,250	0	46,250	46,089
	DwellingStructures	1460		987,549	0	987,549	1,222,322
	DwellingEquipment	1465.1		150,000	0	150,000	150,000
	NondwellingStructures	1470		143,000	0	143,000	136,769

	NondwellingEquipment	1475		658,002	0	658,002	396,083
	Demolition	1485		0	0	0	0
	ReplacementReserve	1490		0	0	0	0
	RelocationCosts	1495.1		111,856	0	111,856	111,856
	GrantTotal	FFY00(501)		4,601,657	0	4,601,657	3,108,413

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int:

2000

Revision#3

Statusof Work

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Workcompleted Progress-20% complete
--

nt: 2000

Revision#3 Statusof Work

Progress-20% complete

100%complete:litigation
delayingclose-out

Progress-20% complete

Workcomplete
Workcomplete
Workcomplete

nt:
2000

Revision#3

Statusof

Work

Inprogress:70%complete
(postedtowrongyear)

Workcomplete
Workcomplete

99.9%complete;seasonal

On-going

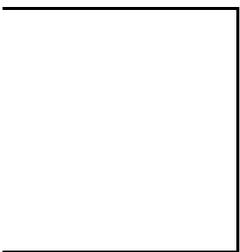
On-going

Workcomplete
Workcomplete

nt:
2000

Revision#3
Statusof
Work

Workcomplete



-

Annual Statement/Performance and Evaluation Report

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

Part III: Implementation Schedule

PHAName		Grant Type and Number			Federal FY of Grant:		
SYRACUSE HOUSING AUTHORITY		Capital Fund Program Grant No: NY06 P001 501 2000			2000		
		Replacement Housing Factor Grant No:			REVISION:#3		
Development Number/Name HAWide Activities	All Funds Obligated (Quarter Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates
	Original	Revised	Actual	Original	Revised	Actual	
NY1-01 Pioneer Homes	9/30/02	N/A		9/30/04	N/A		
NY1-02 James Geddes	9/30/02		12/31/01	9/30/04			
NY1-03 James Geddes	9/30/02		12/31/01	9/30/04			
NY1-04 Almus Olver	9/30/02		12/31/01	9/30/04			
NY1-05 Toomey Abbott	9/30/02	N/A		9/30/04	N/A		
NY1-09 Ross Towers	9/30/02		06/30/02	9/30/04			
NY1-10 Vinette Twers	9/30/02		06/30/02	9/30/04			
NY1-11 Fahey Court	9/30/02	N/A		9/30/04	N/A		
NY1-12 Benderson Hgts	9/30/02		06/30/02	9/30/04			
NY1-14 Scattered Rehab	9/30/02	N/A		9/30/04	N/A		
NY1-16 Scattered Sites	9/30/02	N/A		9/30/04	N/A		
NY1-18 McKinney Manor	9/30/02	N/A		9/30/04	N/A		
SHAWide Dwelling Structures	9/30/02		09/30/02	9/30/04			
SHAWide Nondwelling Structures	9/30/02		12/31/01	9/30/04			
SHAWide Management Improvements	9/30/02		06/30/02	9/30/04			

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

PHAName SYRACUSE HOUSING AUTHORITY	Grant Type and Number Capital Fund Program Grant No: NY06 P001 501 2001 Replacement Housing Factor Grant No:	Federal:
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Original Annual Statement Reserve for Disasters/Emergencies Revised Annual Statement (revision no:1)
xx Performance and Evaluation Report for Period Ending: 12/31/02

Line No.	Summary by Development Account	Total Estimated Cost		Obligated	Total
		Original	Revised		
1	Total Non-CGPF Funds				
2	1406 Operations				
3	1408 Management Improvements	900,000		0	
4	1410 Administration	469,000		469,000	
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	325,000		325,000	
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	2,515,100		2,030,100	
11	1465.1 Dwelling Equipment--Nonexpendable	70,000		70,000	
12	1470 Nondwelling Structures	125,000		0	
13	1475 Nondwelling Equipment	161,800		161,800	
14	1485 Demolition	30,000		30,000	
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs	100,000		100,000	
18	1498 Development Activities				
19	1501 Collateralization or Debt Service				
20	1502 Contingency				
21	Amount of Annual Grant (Sum of lines 2-20)	4,695,900	0	3,185,900	

Signature of Executive Director and Date

Annual Statement/Performance and Evaluation Report

Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1:

PHAName SYRACUSE HOUSING AUTHORITY		Grant Type and Number Capital Fund Program Grant No: NY06 P001 501 2001 Replacement Housing Factor Grant No:		Feder:	
Original Annual Statement Reserve for Disasters/Emergencies Revised Annual Statement (revision no:) Performance and Evaluation Report for Period Ending: Final Performance and Evaluation Report					
Line No.	Summary by Development Account	Total Estimated Cost		Obligated	Total
		Original	Revised		
22	Amount of line XX Related to LBP Activities	0		0	
23	Amount of line XX Related to Section 504 Compliance	54,453		54,453	
24	Amount of line XX Related to Security--Soft Costs	567,500		0	
25	Amount of line XX Related to Security--Hard Costs	10,000		10,000	
26	Amount of line XX Related to Energy Conservation Measures	15,000		15,000	

25-Mar-03

Summary

alFYofGrant:

2001

**ActualCost
Expended**

83,506

136,990

753,039

149,695

4,731

1,127,961

Summary
alFYofGrant:
2001
ActualCost
Expended
0
22,578
0
0
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		Grant Type and Number				Federal FY of Grant	
SYRACUSE HOUSING AUTHORITY		Capital Fund Program Grant No: NY06 P001 501 2001					
		Replacement Housing Factor Grant No:					
Development Number/Name HA-Wide Activities	General Description of Major Work Categories	Dev. Acct. No.	Quantity	Total Estimated Cost		Total Actual Cost	
				Original	Revised	Funds Obligated	Funds Expended
PHA-WIDE Management Improvements	1. Project Site Managers 2. VAPC Workers 3. Marketing and Community Relations 4. Tenant Selector 5. Citywide Contract 6. Resident-Staff Training (RMCTech Assist.) 7. Security to Control Drug Activity 8. Resident Management Aides 9. Job Development Development Account Total			230,000.00			
				190,000			
				30,000			
				395,000.00			
				40,000.00			
				15,000.00			
		1408		900,000	0	0	0
PHA-WIDE Administration	1. Technical Salaries & Benefits Development Account Total			469,000		469,000	83,506.17
		1410		469,000	0	469,000	83,506.17
PHA-WIDE Fees and Costs	1. Architect and Engineering Fees 2. Other Fees and Costs Development Account Total			275,000		275,000	127,058.75
				50,000		50,000	9,930.76
		1430		325,000	0	325,000	136,989.51
NY06P001001 Pioneer Homes	1. Replace hydronic heating boilers--midrise 2. Demolition of Bldgs #58 & #65 Development Account Total Development Account Total Project Total	1460 1485 1460 1485 NY1-01	4 units 20 units	30,000		30,000	
				0	0	0	0
				30,000	0	30,000	0
				30,000	0	30,000	0

NY06P001002	1. Replaceelevator		1475		0.00			
JamesGeddes02	2. Generalrehab--418Fabioushighrise		1460	50units	100,000.00		100,000.00	444.70
	3. Securityentrances--allhighrise		1460	8doorsets	85000		85000	
	DevelopmentAccountTotal		1460		185,000.00	0.00	185,000.00	444.70
	DevelopmentAccountTotal		1475		0.00	0.00	0.00	0.00
NY06P001003	1. Securityentrances--allhighrise		1460	4doorsets	30000		30000	
JamesGeddes03	2. Replaceelectrictransformers		1475		16800		16800	
	DevelopmentAccountTotal		1460		30000	0	30000	0
	DevelopmentAccountTotal		1475		16800	0	16800	0
NY06P001004	1. Continuationgeneralrehab(litigation)		1460		0			
AlmusOlverTower	2. InstallStateStsecurityentrance		1470		125000	0		I
	DevelopmentAccountTotal		1460		0	0	0	0
	ProjectTotal		NY1-04		125000	0	0	0

Page 3 of 6

AnnualStatement/PerformanceandEvaluationReport							
CapitalFundProgramandCapitalFundProgramReplacementHousingFactor(CFP/CFPRHF)							
PartII:SupportingPages							
PHAName			GrantTypeandNumber				FederalFYofGra
SYRACUSEHOUSINGAUTHORITY			CapitalFundProgramGrantNo: NY06 P001 501 2001				
			ReplacementHusingFactorGrantNo:				
Development Number/Name HA-Wide Activities	General Description of Major Work Categories	Dev. Acct. No.	Quantity	TotalEstimatedCost		TotalActualCost	
				Original	Revised	Funds Obligated	Funds Expended
NY06P001004	1. Curbperimeterlandscapeimprovements		1450				
CentralVillage	DevelopmentAccountTotal		1450		0	0	0
	ProjectTotal		NY1-04		0	0	0
NY06P001009	Replaceaptelectricpanels		1460	160		seebelow	seebelow
RossTowers	Improvebathroom/kitchenventilation		1460	160x2		"	"
	Replacesink/lav/tubdrains&vents		1460	160x3		"	"
	AbateACMfloortile		1460	70000sf		"	"
	Accessibilityupgrades		1460			"	"

	Replaceinteriorpassagedoors		1460	160x2		"	"	
	Kitchens--completereplacement		1460	160		"	"	
	Replaceapentrancedoors&jamb		1460	160		"	"	
	Communityroom&kitchenimprovements		1470			"	"	
	Replacecarpetincommonareas		1470			"	"	
	Replacekitchenstoves		1465.1			"	"	
	Varioussiteimprovements,inc.GreenSt		1450			"	"	
	1. SignificantRehabcontracts		1460		1815100		1815100	752593.83
	DevelopmentAccountTotal		1450		0			
	DevelopmentAccountTotal		1460		1815100	0	1815100	752593.83
	DevelopmentAccountTotal		1465.1		0			
	DevelopmentAccountTotal		1470		0			
	ProjectTotal		NY1-09		1815100	0	1815100	752593.83
NY06P001010	1. Elevators--rebuilt		1475	4units				
VinetteTower	DevelopmentAccountTotal		1475		0	0	0	0
	ProjectTotal		NY1-10		0	0	0	0
NY06P001011	1. Emergencygenerator		1475		95000	0	95000	
FaheyCourt	DevelopmentAccountTotal		1475		95000	0	95000	0
	ProjectTotal		NY1-11		95000	0	95000	0
NY06P001012	1. Replaceboilers&baseboardconvedtors		1460	54Units	180000	0		I
	2. Emergencyroofrepairs		1460		0			
BendersonHgts	DevelopmentAccountTotal		1460		180000	0	0	0
	ProjectTotal		NY1-12		180000	0	0	0
NY06P001014	1. Replaceboilers&baseboardconvedtors		1460	9units	35000	0		I
ScatteredRehab	DevelopmentAccountTotal		1460		35000	0	0	0
	ProjectTotal		NY1-14		35000	0	0	0

AnnualStatement/PerformanceandEvaluationReport
CapitalFundProgramandCapitalFundProgramReplacementHousingFactor(CFP/CFPRHF)
PartII:SupportingPages

PHAName	GrantTypeandNumber	FederalFYofGra
	CapitalFundProgramGrantNo:	NY06 P001 501 2001

SYRACUSE HOUSING AUTHORITY

Replacement Housing Factor Grant No:

Development Number/Name HA-Wide Activities	General Description of Major Work Categories	Dev. Acct. No.	Quantity	Total Estimated Cost		Total Actual Cost	
				Original	Revised	Funds Obligated	Funds Expended
NY06P001016 Scattered Sites	1. Replace boilers & baseboard convectors Development Account Total Project Total	1460 1460 NY1-16	90 units	270000 270000 270000	 0 0	 0 0	 0 0
NY06P001018 McKinney Manor	1. Continuations siding replacement Development Account Total Project Total	1460 1460 NY1-16		0 0 0	 0 0	 0 0	 0 0
PHA-WIDE Dwelling Equipment	1. Replace appliances -- Energy Star Program Development Account Total Project Total	1465.1 1465.1 PHAWide		70000 70,000.00 70,000.00	 0.00 0.00	70000 70,000.00 70,000.00	149695.4 149,695.40 149,695.40
PHAWIDE Nondwelling Equipment	1. Computer hardware 2. Maintenance/Grounds: sewer machine 3. Security equipment: bucket truck 4. Grounds/Garage: emergency furnace replace 5. Youth centers -- purchase equipment Development Account Total	1475 1475		40000 10000 0 50000	 0	40000 10000 50000	 0
PHA-WIDE Relocation	1. Relocation expenses for significant rehab Development Account Total	1495		100000 100000	 0	100000 100000	4730.54 4730.54
GRANT TOTALS FFY2001(501)	Operations Management Improvements Administration Fees & Costs Site Improvements Dwelling Structures	1406 1408 1410 1430 1450 1460		0 900,000 469,000 325,000 0 2,515,100	0 0 0 0 0 0	0 0 469,000 325,000 0 2,030,100	0 0 83,506 136,990 0 753,039

	DwellingEquipment	1465.1		70,000	0	70,000	149,695
	NondwellingStructures	1470		125,000	0	0	0
	NondwellingEquipment	1475		161,800	0	161,800	0
	Demolition	1485		30,000	0	30,000	0
	ReplacementReserve	1490		0	0	0	0
	RelocationCosts	1495.1		100,000	0	100,000	4,731
GrantTotal	FFY01(501)			4,695,900	0	3,185,900	1,127,960

int:

2001

Revision:#1

Statusof
Work

Executed;springstart

Inprogress--forceaccount
Submittalsphase

Submittalsphase
seeabove

Designdevelopmentcomplete

nt:
2001
Revision:#1

Statusof
Work

Inprogress:20%complete

seepreviousyear

Designdevelopmentcomplete

Designdevelopmentcomplete

nt:

2001

Revision:#1

Statusof Work

Designdevelopmentcomplete

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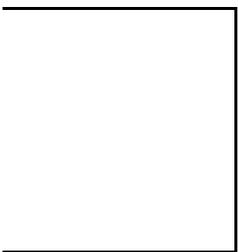
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On-going

Purchased Purchased

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Annual Statement/Performance and Evaluation Report

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

Part III: Implementation Schedule

PHAName SYRACUSE HOUSING AUTHORITY	Grant Type and Number Capital Fund Program Grant No: NY06 P001 501 2001	Federal FY of Grant: 2001
	Replacement Housing Factor Grant No:	REVISION:#1

Development Number/Name HAWide Activities	All Funds Obligated (Quarter Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates
	Original	Revised	Actual	Original	Revised	Actual	
NY1-01 Pioneer Homes	9/30/03			9/30/05			
NY1-02 James Geddes	9/30/03			9/30/05			
NY1-03 James Geddes		09/30/02		9/30/05			
NY1-04 Almus Olver	9/30/03			9/30/05			
NY1-04 Central Village		N/A					
NY1-09 Ross Towers	09/30/02		06/30/02	9/30/05			
NY1-10 Vinette Twers		N/A					
NY1-12 Benderson Hgts	9/30/03			9/30/05			
NY1-14 Scattered Rehab		09/30/03		9/30/05			
NY1-16 Scattered Sites	9/30/03			9/30/05			
NY1-18 McKinney Manor	9/30/03			9/30/05			
SHAWide Dwelling Structures	9/30/03			9/30/05			
SHAWide Nondwelling Structures	9/30/03			9/30/05			
SHAWide Management Improvements	9/30/03			9/30/05			

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

PHAName SYRACUSE HOUSING AUTHORITY	Grant Type and Number Capital Fund Program Grant No: NY06 P001 501 2002 Replacement Housing Factor Grant No:	Federal:
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Original Annual Statement Reserve for Disasters/Emergencies Revised Annual Statement (revision no:)
XX Performance and Evaluation Report for Period Ending: 12/31/02

Line No.	Summary by Development Account	Total Estimated Cost		Obligated	Total
		Original	Revised		
1	Total Non-CGPF Funds				
2	1406 Operations	0	0	0	
3	1408 Management Improvements	885,000	0	0	
4	1410 Administration	440,000	0	0	
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	225,000	0	0	
8	1440 Site Acquisition				
9	1450 Site Improvement	259,825	0	0	
10	1460 Dwelling Structures	2,177,575	0	0	
11	1465.1 Dwelling Equipment--Nonexpendable	0	0	0	
12	1470 Nondwelling Structures	396,021	0	0	
13	1475 Nondwelling Equipment	44,500	0	0	
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1498 Development Activities				
19	1501 Collateralization or Debt Service				
20	1502 Contingency				
21	Amount of Annual Grant (Sum of lines 2-20)	4,427,921	0	0	

Signature of Executive Director and Date

Annual Statement/Performance and Evaluation Report

Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1:

PHAName SYRACUSE HOUSING AUTHORITY		Grant Type and Number Capital Fund Program Grant No: NY06 P001 501 2002 Replacement Housing Factor Grant No:		Federal	
Original Annual Statement Reserve for Disasters/Emergencies Revised Annual Statement (revision no): Performance and Evaluation Report for Period Ending: Final Performance and Evaluation Report					
Line No.	Summary by Development Account	Total Estimated Cost		Obligated	Total
		Original	Revised		
22	Amount of line XX Related to LBP Activities	0	0	0	
23	Amount of line XX Related to Section 504 Compliance	858,400	0	0	
24	Amount of line XX Related to Security--Soft Costs	480,000	0	0	
25	Amount of line XX Related to Security--Hard Costs	20,000	0	0	
26	Amount of line XX Related to Energy Conservation Measures	159,053	0	0	

25-Mar-03

Summary

alFYofGrant:

2002

**ActualCost
Expended**

0

0

0

0

0

0

0

0

0

0

Summary
alFYofGrant:
2002
ActualCost
Expended
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		Grant Type and Number				Federal FY of Grant		
SYRACUSE HOUSING AUTHORITY		Capital Fund Program Grant No: NY06 P001 501 2002						
		Replacement Housing Factor Grant No:						
Development Number/Name HA-Wide Activities	General Description of Major Work Categories	Dev. Acct. No.	Quantity	Total Estimated Cost		Total Actual Cost		
				Original	Revised	Funds Obligated	Funds Expended	
PHA-WIDE Management Improvements	1. Project Site Managers			200,000.00				
	2. VAPC Workers			190,000.00				
	3. Marketing and Community Relations			25,000.00				
	4. Tenant Selector			50,000.00				
	6. Resident-Staff Training (RMCTech Assist.)			35,000.00				
	7. Security to Control Drug Activity			305,000.00				
	8. Resident Management Aides			45,000.00				
	9. Job Development			35,000.00				
	Development Account Total		1408		885,000.00	0.00	0.00	0.00
PHA-WIDE Administration	1. Technical Salaries & Benefits			440,000.00				
	Development Account Total		1410		440,000.00	0.00	0.00	0.00
PHA-WIDE Fees and Costs	1. Architect and Engineering Fees			175,000.00				
	2. Other Fees and Costs			50,000.00				
	Development Account Total		1430		225,000.00	0.00	0.00	0.00
NY06P001001 Pioneer Homes	1. Replace hydronic heating boilers--midrise	1460	4 units	318,105.00				
	2. Replace hydronic heating boilers--rowhouse	1460						
	Development Account Total		1460		318,105.00	0.00	0.00	0.00
Project Total		NY1-01		318,105.00	0.00	0.00	0.00	
NY06P001002 James Geddes 02	1. Replace trash compactors/chute--highrise	1460	2	25,200.00				
	Development Account Total		1460		25,200.00	0.00	0.00	0.00
	Project Total		NY1-02		25,200.00	0.00	0.00	0.00
NY06P001003 James Geddes 03	1. Replace trash compactors/chute--highrise	1460	2	25,200.00				
	Development Account Total		1460		25,200.00	0.00	0.00	0.00
	Project Total		NY1-03		25,200.00	0.00	0.00	0.00
NY06P001005 Toomey Abbott	1. Correct settlement, repair, & replace parking area	1450		174,825.00				
	Development Account Total		1450		174,825.00	0.00	0.00	0.00
	Project Total		NY1-05		174,825.00	0.00	0.00	0.00

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

PHAName SYRACUSE HOUSING AUTHORITY	Grant Type and Number Capital Fund Program Grant No: NY06 P001 501 2002 Replacement Housing Factor Grant No:	Federal FY of Grant
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Development Number/Name HA-Wide Activities	General Description of Major Work Categories	Dev. Acct. No.	Quantity	Total Estimated Cost		Total Actual Cost	
				Original	Revised	Funds Obligated	Funds Expended
NY06P001009 Ross Towers	1. Site improvements at Green St lot	1450	22 spaces	85,000.00			
	2. Replace community room air handler	1460	1 rooftop	5,040.00			
	3. Replace apartment electric panels	1460	160	25,200.00			
	3. Replace plumbing shut-offs	1460		5,250.00			
	4. Replace GFI's	1460	160 x 2	22,680.00			
	5. Relocate & replace drains and drain vents	1460	160 x 2	220,000.00			
	6. Replace bedroom window walls	1460	160	360,000.00			
	7. Significant rehab contract general requirements	1460		225,000.00			
	8. Replace interior passage doors	1460	160 x 3	150,000.00			
	9. Enclose closets	1460	160 x 2	157,500.00			
	10. Construct 'european' bathrooms'	1460	160	638,400.00			
	11. Community room and kitchen rehab	1470		96,021.00			
	12. Common hallway treatment	1470		180,000.00			
	13. Specialty floor and wall treatments	1470		85,000.00			
	14. Construct mail rooms, relocate mailboxes	1470	2	35,000.00			
	Development Account Total	1450		85,000.00	0.00	0.00	0.00
	Development Account Total	1460		1,809,070.00	0.00	0.00	0.00
	Development Account Total	1470		396,021.00	0.00	0.00	0.00
	Project Total	NY1-09		2,290,091.00	0.00	0.00	0.00
PHAWIDE Nondwelling Equipment	1. Computer hardware			10,000.00			
	2. Maintenance/Grounds/Garage equipment--nonroutine			12,000.00			
	3. Security equipment			20,000.00			
	4. Youth centers--purchase equipment			2,500.00			
	Development Account Total	1475		44,500.00	0.00	0.00	0.00

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

PHAName	Grant Type and Number	Federal FY of Gra
SYRACUSE HOUSING AUTHORITY	Capital Fund Program Grant No: NY06 P001 501 2002	
	Replacement Housing Factor Grant No:	

Development Number/Name HA-Wide Activities	General Description of Major Work Categories	Dev. Acct. No.	Quantity	Total Estimated Cost		Total Actual Cost	
				Original	Revised	Funds Obligated	Funds Expended
GRANT TOTALS	Operations	1406		0	0	0	0
FFY2000(709)	Management Improvements	1408		885,000	0	0	0
	Administration	1410		440,000	0	0	0
	Fees & Costs	1430		225,000	0	0	0
	Site Improvements	1450		259,825	0	0	0
	Dwelling Structures	1460		2,177,575	0	0	0
	Dwelling Equipment	1465.1					
	Nondwelling Structures	1470		396,021	0	0	0
	Nondwelling Equipment	1475		44,500	0	0	0
	Demolition	1485					
	Replacement Reserve	1490					
	Relocation Costs	1495.1					
	Development Activities	1499					
	Debt Service	1501		0	0	0	0
	Grant Total FFY02(501)			4,427,921	0	0	0

nt:
2002
Revision:original

Statusof
Work

nt:

2002

Revision:original

Statusof
Work

Inprogress:20%complete

nt: **2002**
Revision:original

Statusof
Work

Annual Statement/Performance and Evaluation Report

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

Part III: Implementation Schedule

PHAName		Grant Type and Number					Federal FY of Grant:
SYRACUSE HOUSING AUTHORITY		Capital Fund Program Grant No: NY06 P001 501 2002					2002
		Replacement Housing Factor Grant No:					REVISION: ORIGINAL
Development Number/Name HAWide Activities	All Funds Obligated (Quarter Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates
	Original	Revised	Actual	Original	Revised	Actual	
NY1-01 Pioneer Homes	06/30/04			06/30/06			
NY1-02 James Geddes	12/31/03			06/30/05			
NY1-03 James Geddes	12/31/03			06/30/05			
NY1-05 Toomey Abbott	12/31/03			06/30/05			
NY1-09 Ross Towers	12/31/03			06/30/05			
SHAWide Management Improvements	12/31/03			06/30/05			

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

PHAName SYRACUSE HOUSING AUTHORITY	Grant Type and Number Capital Fund Program Grant No: NY06 P001 501 2003 Replacement Housing Factor Grant No:	Federal:
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XX Original Annual Statement Reserve for Disasters/Emergencies Revised Annual Statement (revision no:)
Performance and Evaluation Report for Period Ending: Final Performance and Evaluation Report

Line No.	Summary by Development Account	Total Estimated Cost		Obligated	Total
		Original	Revised		
1	Total Non-CGPF Funds				
2	1406 Operations	0	0	0	
3	1408 Management Improvements	450,000	0	0	
4	1410 Administration	440,000	0	0	
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	225,000	0	0	
8	1440 Site Acquisition				
9	1450 Site Improvement	464,050	0	0	
10	1460 Dwelling Structures	2,710,196	0	0	
11	1465.1 Dwelling Equipment--Nonexpendable	0	0	0	
12	1470 Nondwelling Structures	18,675	0	0	
13	1475 Nondwelling Equipment	58,000	0	0	
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs	62,000	0	0	
18	1498 Development Activities				
19	1501 Collateralization or Debt Service				
20	1502 Contingency				
21	Amount of Annual Grant (Sum of lines 2-20)	4,427,921	0	0	

Signature of Executive Director and Date

Annual Statement/Performance and Evaluation Report

Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1:

PHAName SYRACUSE HOUSING AUTHORITY		Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant No: NY			Federal
Original Annual Statement Reserve for Disasters/Emergencies Revised Annual Statement (revision no): Performance and Evaluation Report for Period Ending: Final Performance and Evaluation Report					
Line No.	Summary by Development Account	Total Estimated Cost		Obligated	Total
		Original	Revised		
22	Amount of line XX Related to LBP Activities	0	0	0	
23	Amount of line XX Related to Section 504 Compliance	55,000	0	0	
24	Amount of line XX Related to Security--Soft Costs	242,750	0	0	
25	Amount of line XX Related to Security--Hard Costs	77,960	0	0	
26	Amount of line XX Related to Energy Conservation Measures	723,770	0	0	

25-Mar-03

Summary

alFYofGrant:

2003

1APRIL03

**ActualCost
Expended**

0

0

0

0

0

0

0

0

0

0

0

Summary
alFYofGrant:
2003
ActualCost
Expended
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		Grant Type and Number				Federal FY of Grant	
SYRACUSE HOUSING AUTHORITY		Capital Fund Program Grant No: NY06 P001 501 2003					
		Replacement Housing Factor Grant No:					
Development Number/Name HA-Wide Activities	General Description of Major Work Categories	Dev. Acct. No.	Quantity	Total Estimated Cost		Total Actual Cost	
				Original	Revised	Funds Obligated	Funds Expended
PHA-WIDE Management Improvements	1. SHAWID security details 2. Marketing initiatives 3. Improve maintenance effectiveness 4. Resident management aides 5. Job development 6. Work order streamlining 7. Resident counseling/retention 8. 9.			285,000.00			
	Development Account Total	1408		450,000.00	0.00	0.00	0.00
PHA-WIDE Administration	1. Technical Salaries & Benefits			440,000.00			
	Development Account Total	1410		440,000.00	0.00	0.00	0.00
PHA-WIDE Fees and Costs	1. Architect and Engineering Fees			175,000.00			
	2. Other Fees and Costs			50,000.00			
	Development Account Total	1430		225,000.00	0.00	0.00	0.00
NY06P001001 Pioneer Homes	1. Replace hydronic heating boilers--midrise	1460	4 units	307,696.00			
	2. Replace hydronic heating boilers--rowhouse	1460	8 units	630,000.00			
	3. Repair/repaint brickwork--all buildings	1460		157,500.00			
	4. Replace canopy roofs--midrise	1460		30,240.00			
	5. Install security lighting at porch lights	1460	200 units	57,960.00			
	Development Account Total	1460		1,183,396.00	0.00	0.00	0.00
	Development Account Total						
	Project Total	NY1-01		1,183,396.00	0.00	0.00	0.00
NY06P001002 James Geddes 02	1. Improvements to community meeting space	1470		3,675.00			
	Development Account Total	1460					
	Development Account Total	1470		3,675.00	0.00	0.00	0.00
NY06P001004 Almus Oliver Tower	1. Install additional waste line clean-outs	1460		6,800.00			
	2.						
	Development Account Total	1460		6,800.00	0.00	0.00	0.00
	Project Total	NY1-04		6,800.00	0.00	0.00	0.00

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

PHA Name		Grant Type and Number				Federal FY of Grant	
SYRACUSE HOUSING AUTHORITY		Capital Fund Program Grant No: NY06 P001 501 2003					
		Replacement Housing Factor Grant No:					
Development Number/Name HA-Wide Activities	General Description of Major Work Categories	Dev. Acct. No.	Quantity	Total Estimated Cost		Total Actual Cost	
				Original	Revised	Funds Obligated	Funds Expended
NY06P001004 Central Village	1. Repairs sidewalks and site fencing Development Account Total Project Total	1450		64,050.00			
		1450		64,050.00	0.00	0.00	0.00
		NY1-04		64,050.00	0.00	0.00	0.00
NY06P001005 Toomey Abbott	1. Repair leak at deck/building interface Development Account Total Project Total	1460		52,500.00			
		1460		52,500.00	0.00	0.00	0.00
		NY1-05		52,500.00	0.00	0.00	0.00
NY06P001009 Ross Towers	Improvements to bldg access, site, parking Improvements to community space, kitchen, etc Development Account Total Development Account Total Development Account Total Project Total	1450	A/E estimate	400,000.00			
		1470	A/E estimate	550,000.00			
		1450		400,000.00	0.00	0.00	0.00
		1460					
		1470		550,000.00	0.00	0.00	0.00
NY1-09		950,000.00	0.00	0.00	0.00		
NY06P001010 Vnette Tower	1. Replace windows, curtain walls Development Account Total Project Total	1460	152 units	787,500.00			
		1460		787,500.00			
		NY1-10		787,500.00	0.00	0.00	0.00
PHA-WIDE Dwelling Structures	1. Repairs sidewalks and stoops as needed 2. Install floor drain back-flow preventers Development Account Total Project Total	1460		125,000.00			
		1460		5,000.00			
		1460		130,000.00	0.00	0.00	0.00
		PHAWide		130,000.00	0.00	0.00	0.00
PHAWIDE Nondwelling Structures	1. Improvements to 409 Burt St for Grounds 2. 3. Development Account Total	1470		15,000.00			
		1470		15,000.00	0	0	0

nt:
2003
Revision:Original

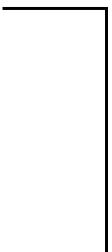
Statusof
Work

nt:

2003

Revision:Original

Statusof
Work



Annual Statement/Performance and Evaluation Report

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

Part III: Implementation Schedule

PHAName		Grant Type and Number					Federal FY of Grant:
SYRACUSE HOUSING AUTHORITY		Capital Fund Program Grant No: NY06 P001 501 2003					2003
		Replacement Housing Factor Grant No:					REVISION: ORIGINAL
Development Number/Name HAWide Activities	All Funds Obligated (Quarter Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates
	Original	Revised	Actual	Original	Revised	Actual	
NY1-01 Pioneer Homes	06/30/05			06/30/07			
NY1-02 James Geddes	06/30/05			06/30/07			
NY1-04 Almus Olver Tower	06/30/05			06/30/07			
NY1-04 Central Village	06/30/05			06/30/07			
NY1-05 Toomey Abbott	06/30/05			06/30/07			
NY1-09 Ross Towers	06/30/05			06/30/07			
NY1-10 Vinette Tower	06/30/05			06/30/07			
SHAWide Dwelling Structures	06/30/05			06/30/07			
SHAWide Non-Dwelling Structures	06/30/05			06/30/07			
SHAWide Management Improvements	06/30/05			06/30/07			

Capital Fund Program Five-Year Action Plan

Part I: Summary

PHAName SYRACUSE HOUSING AUTHORITY		XX		Original 5-Year Plan Revision No: 11 April 03	
Development Number/Name HA - Wide	Year 1 FFY: 2002	Work Statement for Year 2 FFY Grant: 2004 PHA FY: 2004	Work Statement for Year 3 FFY Grant: 2005 PHA FY: 2005	Work Statement for Year 4 FFY Grant: 2006 PHA FY: 2006	
Operations		0	800,000	800,000	
Management Improvements		450,000	450,000	450,000	
Administration		440,000	440,000	440,000	
A/E		225,000	225,000	225,000	
Dwelling Structures & Equip	See				
NY1-01 Pioneer-Midrise		752,174		839,080	
NY1-01 Pioneer-Family	Annual	300,847		200,000	
NY1-02 James Geddes-Family		25,200	618,820		
NY1-02 James Geddes-Hi Rise	Statement	11,455			
NY1-03 James Geddes-Family		2,310			
NY1-03 James Geddes-Hi Rise		14,375			
NY1-04 Almus Olver					
NY1-04 Central Village			642,019	273,749	
NY1-05 Toomey Abbott			174,825	140,850	
NY1-09 Ross Towers			487,757		
NY1-10 Vienne Tower		1,467,060		34,742	
NY1-11 Fahey Court					
NY1-14 Scattered Rehab					
NY1-12 Benderson Heights					
NY1-16 Scattered Sites					
NY1-18 McKinney Manor					
SHAWide				335,000	
Nondwelling Structures					
Nondwelling Equipment		44,500	44,500	44,500	
Demolition					
Replacement Reserve					
Relocation Costs		150,000		100,000	
Debt Service		545,000	545,000	545,000	
CGP Funds Listed for 5-year Planning		4,427,921	4,427,921	4,427,921	
Total RHFF Funds		40,500	40,500	40,500	

WorkStatementforYear5

FFYGrant:2007

PHA FY: 2007

800,000

450,000

440,000

225,000

977,445

199,280

173,459

361,462

187,500

68,775

0

545,000

4,427,921

Capital Fund Program Five-Year Action Plan

Part II: Supporting Pages-- Work Activities

Activities for Year 1	Activities for Year: 2 FFY Grant: 2004 PHAFY: 2004			Work Statement for Year 3	Activities for Year: 3 FFY Grant: 2005 PHAFY: 2005	
	Development Name/Number	Major Work Categories	Estimated Cost		Development Name/Number	Major Work Categories
See Annual Statement	01-01/PioneerHomes	--replacehydronicboilers	322,304	01-02/JamesGeddes	--replaceturnairduct/grills	8,820
	Midrise	--replaceundergroundlines	288,750	Rowhouse	--replaceheatingfurnaces	550,000
		--replacestairpans/stringers	141,120		--replaceDHWheaters	60,000
	SubTotal		752,174	SubTotal		618,820
	01-01/PioneerHomes					
	Rowhouse	--replacehydronicboilers	300,847	01-04/CentralVillage	--replaceheatcircpumps	44,928
	SubTotal		300,847		--upgraderadiation(Runtals)	597,091
				SubTotal		642,019
	01-02/JamesGeddes					
	Rowhouse	--replacekitchenfans	25,200	01-15/ToomeyAbbott	--resurface,correctsettlement @parkinglots	174,825
	01-02/JamesGeddes					
	HighRise	--replacekitchenfans	11,455	SubTotal		174,825
	SubTotal		36,655		36,655	
	01-03/JamesGeddes			01-10VnetteTower	--significantmodernization ACMabatment(VCT),new flooring,accessibilityupgrades, communityroomimprovements, etc.	487,757
	Rowhouse	--replacekitchenfans	2,310			
01-03/JamesGeddes						
HighRise	--replacekitchenfans	14,375	SubTotal		487,757	
SubTotal		16,685				
01-10VnetteTower	--significantmodernization improveventilation;rebuildrooffans upgradeelectrical,replaceplumbing, replacekitchen,baths,improveHCaccess replaceDWbooster,coverbackentrance replacebldgentrancedoors,replaceflooring ACMabatment(VCT),etc.	1,467,060				
SubTotal		1,467,060				
HA-Wide	computerhardware	10,000	HA-Wide	computerhardware	10,000	

	NondwellingEquipment	maintenanceequipment	12,000	NondwellingEquipment	maintenanceequipment	12,000
		securityequipment	20,000		securityequipment	20,000
		communitycentersequip	2,500		communitycentersequip	2,500
		SubTotal	44,500		SubTotal	44,500
TotalCFPEstimatedCost			\$2,617,921			\$1,967,921

**CapitalFundProgramFive-YearActionPlan
PartII:SupportingPages--WorkActivities**

ActivitiesforYear:4 FFYGrant:2006 PHAFY:2006			WorkStatementforYear3	ActivitiesforYear:5 FFYGrant:2007 PHAFY:2007	
Development Name/Number	MajorWork Categories	EstimatedCost	Development Name/Number	MajorWork Categories	EstimatedCost
01-01/PioneerHomes	--replacelightfixtures/ballasts	100,000	01-01/PioneerHomes	--replacekitchens	404,460
Mid-Rise	--abateasbestos(VCT)	359,895	Mid-Rise	--replacebathrooms	359,520
	--replaceflooring	379,185		--patch&paint	213,465
SubTotal		839,080	SubTotal		977,445
01-01/PioneerHomes	--replacelightfixtures/ballasts	200,000	01-11/FaheyCourt	--replacekitchens	69,300
RowHouse				--replaceflooring	87,980
SubTotal		200,000		--replacehallwaycarpets	21,000
				--replacefiredoors	21,000
01-04/CentralVillage	--replaceundergroundlines	273,749	SubTotal		199,280
SubTotal		273,749	01-12/BendersonHeights	--replaceflooring	173,459
01-05/ToomeyAbbott	--generalsitelandscaping	12,600	SubTotal		173,459
	--replacehandrails,fencing	7,350	01-16/ScatteredSites	--replaceflooring	337,837
	--replacewatersourceheatpumps	65,250		--repairstairstringers&treads	23,625
	--compactroomimprovementms	15,750	SubTotal		361,462
	--linechutew/SS	39,900	01-18/McKinneyManor		187,500
SubTotal		140,850	SubTotal		187,500
01-10/VinetteTower	--replaceDWboostersystem	34,742			
SubTotal		34,742	HA-Wide	--CentralOfficeimprovements	68,775
HA-Wide	--PHASremediation	335,000	Non-DwellingStructures	windows,boilers,paint	
DwellingStructures			SubTotal		68,775
SubTotal		335,000	HA-Wide	computerhardware	
HA-Wide	computerhardware	10,000	NondwellingEquipment	maintenanceequipment	
NondwellingEquipment	maintenanceequipment	12,000		securityequipment	
	securityequipment	20,000			

Subtotal	communitycentersequip	2,500	SubTotal	communitycentersequip	0
		44,500			
TotalCFPEstimatedCost		\$1,867,921			\$1,711,646

PETPOLICY –FamilyDevelopments

- 1) These pet regulations shall apply to the following Syracuse Housing Authority Facilities:
 - Pioneer Homes
 - Central Village
 - McKinney Manor
 - Benderson Heights
 - James Geddes –Family
 - Scattered Sites –Townhouses
 - Scattered Sites –Rehab
 - Eastwood Homes
- 2) These regulations, except where noted, do not apply to animals used as assistance or companion pets for the elderly or disabled. Any tenant who is applying to own, or own a pet under those circumstances, please note these separate pet policy which cover the elderly/disabled developments in reference to companion and assistance pets.
- 3) Definitions:
 - a) Common household pet –dogs, cats, commonly harbored birds, gerbils, turtles, and fish. This does not include rabbits, ferrets, exotic or unusual pets, or any pet not specifically permitted by state or local laws.
- 4) The tenant, in all cases of injury to themselves or others caused directly or indirectly by any fact of their pet ownership, or damage to personal property, SHA property, or the personal property of another, shall be held liable for all damages and/or injuries caused by that pet. The tenant will be held responsible for all costs and claims arising from such damage and/or injury, and shall at all times hold harmless, the SHA and its Officers, Agents, and Employees, for any damage incurred, including, but not limited to, compensatory damages, punitive damages, court costs, attorney's fees, and any other cost arising out of or related to the filing of a claim, or the defense against any action, that may result due to property damage, bodily injury, illness, or death.
- 5) SHA may designate areas of a building or development as “No Pets Allowed,” and may require pet owners to relocate from those areas into another unit or to another place in the development or building reserved for pet owners. Exceptions are made to assistance or companion pets.
- 6) Pets Permitted:
 - a) Pet owners may harbor only one common household pet. This does not include fish tanks, which are restricted to 10 gallons maximum capacity.
 - b) No tenant may harbor pets who are by nature aggressive. The municipal “dangerous dog” code is applicable to such dogs as guard dogs, attack dogs, and dogs bred/trained for fighting and aggression.

7) Pet Size Limits (exceptions made for Guide Dogs):

- a) the owner(s) of a dog or cat must be able to comfortably carry the pet, but under no circumstances shall any dog exceed 25 lbs., or any cat 15 lbs.
- b) Dogs may not exceed 18" tall, measured from floor to the top of the head while the dog is standing normally.
- c) SHA reserves the right to require that the tenant demonstrate the ability to carry, control, and restrain the pet to SHA's satisfaction.

8) Pet Intake and Yearly Re-registration Procedure:

- a) Any tenant, or prospective tenant who wishes to keep a pet in their apartment, shall comply with the following:
 - i) Tenant shall complete an "application to keep pet" form prior to the purchase/acquisition of the animal.
 - ii) If approval is granted the tenant will have two weeks to complete the Pet Registration Form, provide all applicable documentation, and pay the pet fees.
 - iii) Owner and pet shall comply with pet registration and pet inoculation rules of the City of Syracuse and the State of New York, and must provide SHA with a copy of the validated city licensing form, veterinarian proof of all shots and inoculations, and written proof of the paying/neutering of the cat/dog.
 - iv) The pet will be presented to SHA for photographing documentation, and the issuing of a color-coded collar tag.
 - v) Pets will be re-registered each year, due on the anniversary date of the approval by SHA for ownership. Each year city licensing renewal proof must be presented, as well as the yearly pet check-up part of the Pet Status Report, and any updated shot/inoculation information. At that time, a new colored collar tag will be issued.
 - vi) Fees:
 - a) All fees are due upon approval of pet application.

- b) \$300.00 security deposit will be collected. This is a refundable fee upon leaving SHA housing, providing that there has been no damage caused to the unit by the animal.
- c) A \$200 non-refundable fee to cover the operating costs to the development relating to the presence of a dog or cat.

9) Requirements of Pet Ownership:

- a) Pet owners shall choose and name a "designated alternate responsible person" to be responsible for the pet in the event of an emergency where the owner is absent or otherwise unable to care for the pet. The name, address, and telephone number of that person shall be provided to SHA.
- b) The pet shall be harbored in such a way that it does not interfere with the rights of other tenants to the peaceful enjoyment of their apartments, or with SHA's obligation to provide a safe, sanitary, habitable surroundings for all of its tenants. Excessively noisy dogs, even in the absence of the owner, will be considered in violation of this requirement.
- c) Pets must, at all times, wear a collar upon which is attached a license bearing the owner's name, address, phone number, and the phone number of the designated alternate responsible person; and upon which the applicable yearly color-coded SHA tag is also affixed.
- d) Cat owners must provide a litter box for their pet's use:
 - i) Waste must be separated daily, placed in a properly wrapped trash bag, and disposed of in an area designated by SHA.
 - ii) Kitty litter must be changed twice per week, placed in a properly wrapped trash bag, and disposed of in an area designated by SHA.
 - iii) Under no circumstances may an animal waste or kitty litter be flushed down the toilet, or deposited in the trash chutes. Pet owner will be charged for any clean-up or maintenance made necessary by improper disposal of animal waste.
- e) Except as otherwise provided, no dog or cat may urinate or defecate anywhere on SHA property. Municipal "pooper-scooper" regulations apply. Owners must make their own arrangements for their pets, being mindful that any complaints received by SHA from third-party properties could adversely affect the owner's permission to continue as a pet owner.
- f) Pets shall not be allowed in common areas, including, but not limited to, lobbies, community rooms, halls, or on any common grounds; except for the purpose of

traveling directly to or directly from their own apartment. Guided dogs are exempt from this requirement.

- g) The pet must be carried when traveling within SHA buildings, and must be kept on a leash (no greater than 6' in length) when on SHA grounds. No pet is to be tied to a running lead, post, or physical structure. Guided dogs are exempt from this requirement.
- h) Pets must be treated humanely, and in accordance with all State and Local Laws.
- i) It is up to the pet owner to keep track of any changes to State, Local, or Municipal Laws concerning pets and pet ownership.

10) Pet Health Requirements:

- a) Pets will at all times be current on all inoculations required by law. Dogs and cats must undergo a yearly check-up. The veterinarian administering the check-up must complete his/her section of the "Pet Status Report," with the original submitted by the pet owner to SHA within 10 days of the check-up. The "Pet Status report" shall constitute the yearly SHA re-registration.
- b) Cat owners must provide a scratching post for their cat. Dog owners must have their toenails clipped at regular intervals.
- c) Pet owners are responsible for the physical well-being of their pet. Owners shall employ proper grooming techniques, including, but not limited to, frequent brushing and bathing. Infestations of animal parasites (lice, fleas, ticks, mites, etc...) shall be treated promptly. The cost of pet hygiene shall be borne entirely by the pet owner.
- d) Any pet whose physical condition becomes such that harboring it represents an unreasonable risk to the pet itself, the owner, other tenants, or SHA property, shall be removed immediately from SHA property. For the pet to be re-admitted to the owner's apartment, the owner must show proof that the pet's condition was temporary and has been rectified.
- e) No pet shall be left unattended for longer than twenty-four (24) hours. If longer absences are anticipated, arrangements for care of the pet are the responsibility of the tenant.

11) Penalties:

- a) Procedures used for pet removal and/or eviction under these pet rules shall follow guidelines as required by the "Grounds for Evictions" section of the SHA Tenant Handbook.
- b) It shall be a violation of SHA Pet Regulations for any pet owner to be convicted of, or plead guilty to, and State or Local Law related to the harboring of animals and could result in disqualification from pet ownership.

- c) It shall be a violation of SHA Pet Regulations for any pet owner to harm, misuse, mistreat any pet, and could result in disqualification from pet ownership or a lease violation, or
- d) Any pet waste found on SHA property that is properly attributable to an individual pet shall result in an assessment of a \$5.00 fee against the pet owner. Disputes arising from this rule shall be resolved under "The Grievance Procedure" section of the SHA Tenant Handbook.
- e) Any pet on SHA property that is missing its collared license or appropriate color-coded tag, shall result in an assessment of a \$5.00 fee against the pet owner. Disputes arising from this rule shall be resolved under "The Grievance Procedure" section of the SHA Tenant Handbook.
- f) The pet owners shall reimburse SHA for any damage to SHA property caused by their pet.
- g) Three confirmed violations of these pet rules shall disqualify the tenant from pet ownership. Harboring of the pet after disqualification shall be grounds for eviction of the pet owner.
- h) If any pet exhibits vicious, aggressive, dangerous, or unusual behavior, SHA may require the owner to remove the pet immediately.
- i) SHA reserves the right to enlist the aid of the appropriate Syracuse City Agency to enforce applicable City or State laws, whether or not the suspected violation occurs or is occurring on SHA property.

PETPOLICY –ElderlyDevelopments

- 1) These pet regulations shall apply to the following Syracuse Housing Authority Facilities:

Toomey Abbott Towers
James Geddes Hi Rise
Fahey Court
Vnette Towers
Almus Olver
Ross Towers
Eastwood Heights

- 2) These regulations, except where noted, do apply to animals used as assistance or companion pets for the elderly or disabled. If a tenant is applying to have a pet under this category, which would exempt the tenant from having to pay a pet security deposit, then documentation must be provided by the tenant from a medical doctor or authorizing agency who can certify that the pet is needed to provide a reasonable accommodation for the tenant.

- 3) Definitions:

- a) Common household pet – dogs, cats, commonly harbored birds, gerbils, turtles, and fish. This does not include rabbits, ferrets, exotic or unusual pets, or any pet not specifically permitted by state or local laws.

- 4) The tenant, in all cases of injury to themselves or others caused directly or indirectly by any fact of their pet ownership, or damage to personal property, SHA property, or the personal property of another, shall be held liable for all damages and/or injuries caused by that pet. The tenant will be held responsible for all costs and claims arising from such damage and/or injury, and shall at all times hold harmless, the SHA and its Officers, Agents, and Employees, for any damage incurred, including, but not limited to, compensatory damages, punitive damages, court costs, attorney's fees, and any other cost arising out of or related to the filing of a claim, or the defense against any action, that may result due to property damage, bodily injury, illness, or death.

- 5) SHA may designate areas of a building or development as "No Pets Allowed," and may require pet owners to relocate from those areas into another unit or to another place in the development or building reserved for pet owners. Exceptions are made to assistance or companion pets.

- 6) Pets Permitted:

- a) Pet owners may harbor only one common household pet. This does not include fish tanks, which are restricted to 10 gallons maximum capacity.

- b) Notenantmyharborpetswhoarebynatureaggressive.Themunicipal “dangerousdog”codeisapplicablesuchdogsasguarddogs,attackdogs, anddogsbred/trainedforfightingandaggression.

7) PetSizeLimits(exceptionsmadeforGuideDogs):

- a) theowner(s)ofadogorcatmustbeabletocomfortablycarrythepet,but undernocircumstancesshallanydogexceed25lbs.,oranycat15lbs.
- b) Dogsmaynotexceed18”tall,measuredfromfloortothetopofthehead whilethedogisstandingnormally.
- c) SHAreservestherighttorequirethatthetenantdemonstratetheabilityto carry,control,andrestrainthepettoSHA’ssatisfaction.

8) PetIntakeandYearlyRe-registration Procedure:

- a) Anytenant,orprospectivetenantwhowishestokeepapetintheirapartment, shallcomplywiththefollowing:
 - i) Tenantshallcompletean“applicationtokeepapet”form priorto thepurchase/acquisitionoftheanimal.
 - ii) Ifapprovalisgranted thetenantwillhavetwoweekstocomplete thePetRegistrationForm,provideallapplicabledocumentation, andpaythepetfees.
 - iii) Ownerandpetshallcomplywithpetregistrationandpet inoculationrulesoftheCityofSyracuseandtheStateofNew York,andmustprovideSHAwithacopyofthevalidatedcity licensingform,veterinarianproofofallshotsandinoculations,and writtenproofofthepaying/neuteringofthecat/dog.
 - iv) ThepetwillbepresentedtoSHAforphotographing documentation,andtheissuingofacolor-codedcollartag.
 - v) Petswillberegisteredeachyear,dueontheanniversarydateof theapprovalbySHAforownership.Eachyearcitylicensing renewalproofmustbepresented,aswellastheyearlypetcheck uppartofthePetStatusReport,andanyupdatedshot/inoculation information.Atthattime,anewcoloredcollartagwillbeissued.
 - vi) Fees:

- a) All fees are due upon approval of pet application.
- b) \$300.00 security deposit will be collected. This is a refundable fee upon leaving SHA housing, providing that there has been no damage caused to the unit by the animal. For companion and assistance pets this fee may be waived.

9) Requirements of Pet Ownership:

- a) Pet owners shall choose and name a "designate alternate responsible person" to be responsible for the pet in the event of an emergency where the owner is absent or otherwise unable to care for the pet. The name, address, and telephone number of that person shall be provided to SHA.
- b) The pet shall be harbored in such a way that it does not interfere with the rights of other tenants to the peaceful enjoyment of their apartments, or with SHA's obligation to provide a safe, sanitary, habitable surroundings for all of its tenants. Excessively noisy dogs, even in the absence of the owner, will be considered in violation of this requirement.
- c) Pets must, at all times, wear a collar upon which is attached a license bearing the owner's name, address, phone number, and the phone number of the designated alternate responsible person; and upon which the applicable yearly color-coded SHA tag is also affixed.
- d) Cat owners must provide a litter box for their pet's use:
 - i) Waste must be separated daily, placed in a properly wrapped trash bag, and disposed of in an area designated by SHA.
 - ii) Kitty litter must be changed twice per week, placed in a properly wrapped trash bag, and disposed of in an area designated by SHA.
 - iii) Under no circumstances may an animal waste or kitty litter be flushed down the toilet, or deposited in the trash chutes. Pet owner will be charged for any clean-up or maintenance made necessary by improper disposal of animal waste.
- e) Except as otherwise provided, no dog or cat may urinate or defecate anywhere on SHA property. Municipal "pooper-scooper" regulations apply. Owners must make their own arrangements for their pets, being mindful that any complaints received by SHA from third-party properties could adversely affect the owner's permission to continue as a pet owner.

- f) Pets shall not be allowed in common areas, including, but not limited to, lobbies, community rooms, halls, or on any common grounds; except for the purpose of traveling directly to or directly from their own apartment. Guided dogs are exempt from this requirement.
 - g) The pet must be carried when traveling within SHA buildings, and must be kept on a leash (no greater than 6' in length) when on SHA grounds. No pet is to be tied to a running lead, post, or physical structure. Guided dogs are exempt from this requirement.
 - h) Pets must be treated humanely, and in accordance with all State and Local Laws.
 - i) It is up to the pet owner to keep track of any changes to State, Local, or Municipal Laws concerning pets and pet ownership.
- 10) Pet Health Requirements:
- a) Pets will at all times be current on all inoculations required by law. Dogs and cats must undergo a yearly check-up. The veterinarian administering the check-up must complete his/her section of the "Pet Status Report," with the original submitted by the pet owner to SHA within 10 days of the check-up. The "Pet Status report" shall constitute the yearly SHA re-registration.
 - b) Cat owners must provide a scratching post for their cat. Dog owners must have their toenails clipped at regular intervals.
 - c) Pet owners are responsible for the physical well-being of their pet. Owners shall employ proper grooming techniques, including, but not limited to, frequent brushing and bathing. Infestations of animal parasites (lice, fleas, ticks, mites, etc...) shall be treated promptly. The cost of pet hygiene shall be borne entirely by the pet owner.
 - d) Any pet whose physical condition becomes such that harboring it represents an unreasonable risk to the pet itself, the owner, other tenants, or SHA property, shall be removed immediately from SHA property. For the pet to be re-admitted to the owner's apartment, the owner must show proof that the pet's condition was temporary and has been rectified.
 - e) No pet shall be left unattended for longer than twenty-four (24) hours. If longer absences are anticipated, arrangements for care of the pet are the responsibility of the tenant.
- 11) Penalties:
- a) Procedures used for pet removal and/or eviction under these pet rules shall follow guidelines as required by the "Grounds for Evictions" section of the SHA Tenant Handbook.

- b) It shall be a violation of SHA Pet Regulations for any pet owner to be convicted of, or plead guilty to, and State or Local Law related to the harboring of animals and could result in disqualification from pet ownership.
- c) It shall be a violation of SHA Pet Regulations for any pet owner to harm, misuse, or mistreat any pet, and could result in disqualification from pet ownership or a release violation.
- d) Any pet waste found on SHA property that is properly attributable to an individual pet shall result in an assessment of a \$5.00 fee against the pet owner. Disputes arising from this rule shall be resolved under "The Grievance Procedure" section of the SHA Tenant Handbook.
- e) Any pet on SHA property that is missing its collared license or appropriate color-coded tag, shall result in an assessment of a \$5.00 fee against the pet owner. Disputes arising from this rule shall be resolved under "The Grievance Procedure" section of the SHA Tenant Handbook.
- f) The pet owner shall reimburse SHA for any damage to SHA property caused by their pet.
- g) Three confirmed violations of these pet rules shall disqualify the tenant from pet ownership. Harboring of the pet after disqualification shall be grounds for eviction of the pet owner.
- h) If any pet exhibits vicious, aggressive, dangerous, or unusual behavior, SHA may require the owner to remove the pet immediately.
- i) SHA reserves the right to enlist the aid of the appropriate Syracuse City Agency to enforce applicable City or State laws, whether or not the suspected violation occurs or is occurring on SHA property.

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

PHAName SYRACUSE HOUSING AUTHORITY		Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant No: NY06 R001 501 2003			Feder:
XX Original Annual Statement Reserve for Disasters/Emergencies Revised Annual Statement (revision no:)					
Performance and Evaluation Report for Period Ending: Final Performance and Evaluation Report					
Line No.	Summary by Development Account	Total Estimated Cost		Obligated	Total
		Original	Revised		
1	Total Non-CGPF 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 Development Activities	40,505			
19	1501 Collateralization or Debt Service				
20	1502 Contingency				
21	Amount of Annual Grant (Sum of lines 2-20)	40,505	0	0	

Signature of Executive Director and Date

Annual Statement/Performance and Evaluation Report

Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1:

PHAName SYRACUSE HOUSING AUTHORITY		Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant No:		Federal NY06 R001 501 2003	
Original Annual Statement Reserve for Disasters/Emergencies Revised Annual Statement (revision no): Performance and Evaluation Report for Period Ending: Final Performance and Evaluation Report					
Summary by Development Account		Total Estimated Cost		Obligated	Total
Line No.		Original	Revised		
22	Amount of line XX Related to LBP Activities				
23	Amount of line XX Related to Section 504 Compliance				
24	Amount of line XX Related to Security--Soft Costs				
25	Amount of line XX Related to Security--Hard Costs				
26	Amount of line XX Related to Energy Conservation Measures				

30-May-03

Summary

alFYofGrant:

R2003

15APRIL03

**ActualCost
Expended**

0

Summary
alFYofGrant:
R2003
ActualCost
Expended

Annual Statement/Performance and Evaluation Report

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

Part II: Supporting Pages

PHAName		Grant Type and Number				Federal FY of Gra	
SYRACUSE HOUSING AUTHORITY		Capital Fund Program Grant No:					
		Replacement Housing Factor Grant No: NY06 R001 501 2003					
Development Number/Name HA-Wide Activities	General Description of Major Work Categories	Dev. Acct. No.	Quantity	Total Estimated Cost		Total Actual Cost	
				Original	Revised	Funds Obligated	Funds Expended

Replacement Housing	1. Construct single family homes		1498		40,505.00			
		Development Account Total	1498		40,505.00	0.00	0.00	0.00
		Project Total	NY1-0?		40,505.00	0.00	0.00	0.00

nt: R2003 Revision:original
Statusof Work

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Annual Statement/Performance and Evaluation Report

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

Part III: Implementation Schedule

PHAName SYRACUSE HOUSING AUTHORITY		Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant NY06R0015012003					Federal FY of Grant: R2003 REVISION: ORIGINAL
Development Number/Name HAWide Activities NY1-0? Development Activities	All Funds Obligated (Quarter Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates
	Original 6/30/06	Revised	Actual	Original 06/30/08	Revised	Actual	

Annual Statement/Performance and Evaluation Report

Capital Fund Program and Capital Fund Program Replacement Housing Factor (CI)

PHAName SYRACUSE HOUSING AUTHORITY		Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant No: NYO	
Original Annual Statement Reserve for Disasters/Emergencies XX		Revised Annual Statement (rev)	
Performance and Evaluation Report for Period Ending:		Final Performance and Evaluation	
Line No.	Summary by Development Account	Total Estimated Cost	
		Original	Revised
1	Total Non-CGPF 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 Development Activities	40,505	
19	1501 Collateralization or Debt Service		
20	1502 Contingency		
21	Amount of Annual Grant (Sum of lines 2-20)	40,505	0

Signature of Executive Director and Date

Annual Statement/Performance and Evaluation Report

Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFPR)

PHAName SYRACUSE HOUSING AUTHORITY		Grant Type and Number Capital Fund Program Grant No: NYO Replacement Housing Factor Grant No:	
Original Annual Statement Reserve for Disasters/Emergencies		Revised Annual Statement (revised)	
Performance and Evaluation Report for Period Ending:		Final Performance and Evaluation	
Line No.	Summary by Development Account	Total Estimated Cost	
		Original	Revised
22	Amount of line XX Related to LBP Activities		
23	Amount of line XX Related to Section 504 Compliance		
24	Amount of line XX Related to Security--Soft Costs		
25	Amount of line XX Related to Security--Hard Costs		
26	Amount of line XX Related to Energy Conservation Measures		

FP/CFPRHF)Part1:Summary

6R0015012002	FederalFYofGrant: R2002
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tionReport

Obligated	TotalActualCost Expended

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

PHAName		Grant Type and Number			
SYRACUSE HOUSING AUTHORITY		Capital Fund Program Grant No:			
		Replacement Housing Factor Grant No: NY06R0015			
Development Number/Name HA-Wide Activities	General Description of Major Work Categories	Dev. Acct. No.	Quantity	Total Estimated Cost	
				Original	Revised

Replacement Housing	1. Single family affordable housing	Development Account Total	1498		40,505.00	
			1498		40,505.00	0.00
			NY1-0?		40,505.00	0.00
		Project Total				

(CFPRHF)

		FederalFYofGrant: R2002
i012002	Revision:#1	
TotalActualCost		Statusof Work
Funds Obligated	Funds Expended	

0.00	0.00	
0.00	0.00	

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

PHAName SYRACUSE HOUSING AUTHORITY	Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant NY06R0015012002
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Development Number/Name HAWide Activities	All Funds Obligated (Quarter Ending Date)			All Funds Expended (Quarter Ending Date)		
	Original 6/30/06	Revised	Actual	Original 06/30/08	Revised	Actual
NY1-0? Development Activities						

CFP/CFPRHF)

FederalFYofGrant:

2002

REVISION:ORIGINAL

ReasonsforRevisedTargetDates

Datesarerevisedtoconformwith
PIH2003-10andRHFGrant2003