

# PortChester HousingAuthorityPlans

5YearPlanforFiscalYears2003 -2007  
AnnualPlanforFiscalYear2003

**NOTE:THISPHAPLANSTEMPLAT E(HUD50075)ISTOBECOMPLETEDIN  
ACCORDANCEWITHINSTRUCTIONSLOCATEDINAPPLICABLEPIHNOTICES**

**PHA Plan  
Agency Identification**

**PHAName: Port Chester Housing Authority**

**PHANumber: NY014**

**PHAFiscalYearBeginning: 04/2003**  
**Public Access to Information**

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

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

**Display Locations For PHA Plans and Supporting Documents**

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

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

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

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

**5-YEAR PLAN**  
**PHAF ISCAL YEARS 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 targets such as: numbers of families served or PHAS scores achieved.) PHAs 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: (as they become available)
  - Reduce public housing vacancies:
  - Leverage private or other public funds to create additional housing opportunities:
  - Acquire or build units or developments
  - Other (list below)
    - The PHA will work with City Government to further promote Decent, safe and affordable housing
- PHA Goal: Improve the quality of assisted housing  
Objectives:
- Improve public housing management: (PHAS score)
    - yearly, over next 5 yrs.

- Improve voucher management: (SEMAP score)
- Increase customer satisfaction:
- Concentrate on efforts to improve specific management functions: (list; e.g., public housing finance; voucher unit inspections)
- Renovate or modernize public housing units:
  - Yearly, over next 5 years.
- 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 efforts 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)
  - Coordinate efforts with local council of realtors and property management groups.

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

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

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

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

Objectives:

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

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

PHA Goal: Ensure equal opportunity and affirmatively further fair housing

Objectives:

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

**Other PHA Goals and Objectives: (list below)**

**AnnualPHAPlan**  
**PHAFiscalYear2000**  
[24CFRPart903.7]

**i. AnnualPlanType:**

SelectwhichtypeofAnnualPlanthePHAwillsubmit.

**StandardPlan**

**StreamlinedPlan:**

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

**TroubledAgencyPlan**

**ii. ExecutiveSummaryoftheAnnualPHAPlan**

[24CFRPart903.79(r)]

ProvideabriefoverviewoftheinformationintheAnnualPlan,includinghighlightsofmajorinitiativesanddiscretionarypoliciessthePHAhasincludedintheAnnualPlan.

ThePortChesterHousingAuthorityhaspreparedthisAnnualPHAPlanin compliancewithSection511oftheQualityHousingand Work andWork ResponsibilityActof1998andtheensuingHUDrequirements.

ThepurposeofthisAnnualPlanistoprovideaframeworkforlocal accountabilityandeasilyidentifiablesourcebywhichhousingresidents, participantsinthetenant -basedassistanceprogramandothermembersof thepublicmaylocatebasicPHApolicies,rulesandrequirementsrelatedto theoperations,programsandservicesoftheagency.

TheMissionStatementandtheGoalsandObjectiveswerebasedon informationcontainedinourjurisdiction'sConsolidatedPlanandwill ensurethatourresidentswillreceivethebestcustomerservice.

ExcellentcustomerserviceandfulfillmentoftheMissionStatementand GoalsandObjectivesisensuredbyimplementationofaseriesofpolicies thataredisplaywiththisPlan.TheAdmissionsandOccupancyPolicy andSection8AdministrativePlanarethetwoprimarypoliciesondisplay. Theseimportantdocumentscoverthepublichousingtenantselectionand assignmentplan,outreachservices,grievanceprocedures,etc.

The most important challenges to be met by the Port Chester Housing Authority during FY2003 include:

- Improvement of the physical conditions of the housing developments through the Capital Funds activities.
- Involve the public housing residents through the Annual Plan Resident Advisory Board.

### **iii. Annual Plan Table of Contents**

[24CFR Part 903.79(r)]

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

#### **Table of Contents**

Page#

#### **Annual Plan**

- i. Executive Summary
- ii. Table of Contents
  1. Housing Needs
  2. Financial Resources
  3. Policies on Eligibility, Selection and Admissions
  4. Rent Determination Policies
  5. Operations and Management Policies
  6. Grievance Procedures
  7. Capital Improvement Needs
  8. Demolition and Disposition
  - 9.
  10. Community Service Programs
  11. Crime and Safety
  12. Pets (Inactive for January 1 PHAs)
  13. Civil Rights Certifications (included with PHA Plan Certifications)
  14. Audit
  15. Asset Management
  16. Other Information

#### **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
- FY 2003 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
- FY 2003 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)
  - ny014a04 Capital Fund Program Annual Statement

- ny014b04 5YearActionPlan
- ny014c04 OrganizationChart
- ny014d04 P&EReportFY2000
- ny014e04 P&ERepor tFY2001
- ny014f04 P&EReportFY2002
- ny014g04 ResidentAdvisoryBoard
- ny014h04 CorrectiveActionPlan

### Supporting Documents Available for Review

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

List of Supporting Documents Available for Review		
Applicable & On Display	Supporting Document	Applicable Plan Component
X	PHA Plan Certification of Compliance with the PHA Plans and Related Regulations	5 Year and Annual Plans
X	State/Local Government Certification of Consistency with the Consolidated Plan	5 Year and Annual Plans
X	Fair Housing Documentation: Records reflecting that the PHA has examined its programs or proposed programs, identified any impediments to fair housing choice in those programs, addressed or is addressing those impediments in a reasonable fashion in view of the resources available, and where necessary 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
X	Consolidated Plan for the jurisdiction/s in which the PHA is located (which includes the Analysis of Impediments to Fair Housing Choice (AI)) and any additional backup data to support statement of housing needs in the jurisdiction	Annual Plan: Housing Needs
X	Most recent board -approved operating budget for the public housing program	Annual Plan: Financial Resources;
X	Public Housing Admissions and (Continued) Occupancy Policy (A&O), which includes the Tenant Selection and Assignment Plan [TSAP]	Annual Plan: Eligibility, Selection, and Admissions Policies
	Section 8 Administrative Plan	Annual Plan: Eligibility, Selection, and Admissions Policies
X	Public Housing Deconcentration and Income Mixing Documentation: 1. PHA board certification of compliance with deconcentration requirements (section 16(a) of the US Housing Act of 1937, as implemented in the 2/18/99 <i>Quality Housing and Work Responsibility Act Initial</i>	Annual Plan: Eligibility, Selection, and Admissions Policies

<b>List of Supporting Documents Available for Review</b>		
<b>Applicable &amp; On Display</b>	<b>Supporting Document</b>	<b>Applicable Plan Component</b>
	<i>Guidance; Notice</i> and any further HUD guidance) and 2. Documentation of the required deconcentration and income mixing analysis	
X	Public housing rent determination policies, including the methodology for setting public housing flat rents <input type="checkbox"/> check here if included in the public housing A&O Policy	Annual Plan: Rent Determination
	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
	Section 8 rent determination (payment standard) policies <input type="checkbox"/> check here if included in Section 8 Administrative Plan	Annual Plan: Rent Determination
X	Public housing management and maintenance policy documents, including policies for the prevention or eradication of pest infestation (including cockroach infestation)	Annual Plan: Operations and Maintenance
X	Public housing grievance procedures <input checked="" type="checkbox"/> check here if included in the public housing A&O Policy	Annual Plan: Grievance Procedures
	Section 8 informal review and hearing procedures <input type="checkbox"/> check here if included in Section 8 Administrative Plan	Annual Plan: Grievance Procedures
X	The HUD -approved Capital Fund/Comprehensive Grant Program Annual Statement (HUD 52837) for the active grant year	Annual Plan: Capital Needs
X	Most recent CIAP Budget/Progress Report (HUD 52825) for any active CIAP grant	Annual Plan: Capital Needs
	Most recent, approved 5 Year Action Plan for the Capital Fund/Comprehensive Grant Program, if not included as an attachment (provided at PHA option)	Annual Plan: Capital Needs
	Approved 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
	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
	Policies governing any Section 8 Homeownership program <input type="checkbox"/> check here if included in the Section 8 Administrative Plan	Annual Plan: Homeownership

<b>List of Supporting Documents Available for Review</b>		
<b>Applicable &amp; On Display</b>	<b>Supporting Document</b>	<b>Applicable Plan Component</b>
	Any cooperative agreement between the PHA and the TANF agency	Annual Plan: Community Service & Self - Sufficiency
	FSS Action Plan/s for public housing and/or Section 8	Annual Plan: Community Service & Self - Sufficiency
	Most recent self - sufficiency (ED/SS, TOP or ROSS or other resident services grant) grant program reports	Annual Plan: Community Service & Self - Sufficiency
	The most recent Public Housing Drug Elimination Program (PHDEP) semi - annual performance report for any open grant and most recently submitted PHDEP application (PHDEP Plan)	Annual Plan: Safety and Crime Prevention
X	The most recent fiscal year audit of the PHA conducted under section 5(h)(2) of the U.S. Housing Act of 1937 (42 U.S.C. 1437c(h)), the results of that audit and the PHA's response to any findings	Annual Plan: Annual Audit
	Troubled PHAs: MOA/Recovery Plan	Troubled PHAs
	Other supporting documents (optional) (list individually; use as many lines as necessary)	(specify as needed)

## **1. Statement of Housing Needs**

[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.

<b>Housing Needs of Families in the Jurisdiction by Family Type</b>							
<b>Family Type</b>	<b>Overall</b>	<b>Afford-ability</b>	<b>Supply</b>	<b>Quality</b>	<b>Access-ibility</b>	<b>Size</b>	<b>Loca-tion</b>
Income ≤ 30% of AMI	1102	5	5	4	3	3	3
Income > 30% but ≤ 50% of AMI	2389	5	5	4	3	3	3
Income > 50% but < 80% of AMI	762	5	5	4	3	3	3
Elderly	Na	5	5	4	3	3	3
Families with Disabilities	Na						
Race/Ethnicity	385	5	5	4	3	3	3

<b>Housing Need of Families in the Jurisdiction by Family Type</b>							
Family Type	Overall	Afford- ability	Supply	Quality	Access- ibility	Size	Loca- tion
Afro Americans							
Race/Ethnicity Hispanic	856	5	5	4	3	3	3
Race/Ethnicity Others	318	5	5	5	3	3	3
Race/Ethnicity							

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: 1995
- U.S. Census data: the Comprehensive Housing Affordability Strategy (“CHAS”) dataset
- American Housing Survey data  
Indicate year:
- Other housing market study  
Indicate year:
- Other sources: (list and indicate year of information)

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

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

<b>Housing Need of Families on the Waiting List</b>			
Waiting list type: (select one)			
<input type="checkbox"/> Section 8 tenant-based assistance			
<input checked="" type="checkbox"/> Public Housing (Family units)			
<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	100		20
Extremely low	83	83	

<b>Housing Needs of Families on the Waiting List</b>			
income ≤ 30% AMI			
Very low income (>30% but ≤ 50% AMI)	16	16	
Low income (>50% but <80% AMI)	1	1	
Families with children	36	36	
Elderly families	30	30	
Families with Disabilities	2	2	
Afro Americans	28	28	
Hispanic	46	46	
White	26	26	
Other			
Characteristics by Bedroom Size (Public Housing Only)			
1BR	25	25	
2BR	32	32	
3BR	15	15	
4BR	1	1	
0BR	27	27	
5+BR			
Is the waiting list closed (select one)? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes If yes: How long has it been closed (# of months)? 12 months Does the PHA expect to reopen the list in the PHA Plan year? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Does the PHA permit specific categories of families onto the waiting list, even if generally closed? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			

**C. Strategy for Addressing Needs**

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

**(1) Strategies**

**Need: Shortage of affordable housing for alleligible populations**

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

Select all that apply

- Employ effective maintenance and management policies to minimize the number of public housing units off-line
- Reduce turnover time for vacated public housing units
- Reduce time to renovate public housing units
- Seek replacement of public housing units lost to the inventory through mixed finance development
- Seek replacement of public housing units lost to the inventory through section 8 replacement housing resources
- Maintain or increase section 8 lease 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 rates by marketing the program to owners, particularly those outside of areas of minority and poverty concentration
- Maintain or increase section 8 lease 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:(listbelow)

**Need:SpecificFamilyTypes:Familiesatorbelow50%ofmedian**

**Strategy1:Targetavailableassistanceto familiesatorbelow50%of AMI**

Selectallthatapply

- Employadmissionspreferencesaimedatfamilieswhoareworking
- Adoptrentpoliciesupportandencouragework
- Other:(listbelow)

**Need:SpecificFamilyTypes:TheElderly**

**Strategy1: Targetavailableassistancetotheelderly:**

Selectallthatapply

- Seekdesignationofpublichousingfortheelderly
- Applyforspecial -purposevoucherstargetedtotheelderly,shouldtheybecome available
- Other:(listbelow)

**Need:SpecificFamilyTypes:FamilieswithDisabilities**

**Strategy1: TargetavailableassistancetoFamilieswithDisabilities:**

Selectallthatapply

- Seekdesignationofpublichousingfor familieswithdisabilities
- Carryoutthomodificationsneededinpublichousingbasedonthesection504 NeedsAssessmentforPublicHousing
- Applyforspecial -purposevoucherstargetedtofamilieswithdisabilities,should theybecomeavailable
- Affirmativelymarkettolocalnon -profitagenciesthatassistfamilieswith disabilities
- Other:(listbelow)

**Need:SpecificFamilyTypes:Racesorethnicitieswithdisproportionatehousing needs**

**Strategy1:IncreaseawarenessofPHAresourcesamongfamiliesofracesand ethnicitieswithdisproportionateneeds:**

Selectifapplicable

- Affirmativelymarkettoraces/ethnicitiesshowntohavedisproportionatehousing needs

Other:(listbelow)

**Strategy2:Conductactivitiestoaffirmativelyfurtherfairhousing**

Selectallthatapply

- Counselsection8tenantsastolocationofunitsoutsideofareasofpovertyor minorityconcentrationandass isthemtolocatethoseunits
- Marketthesection8programtoownersoutsideofareasofpoverty/minority concentrations
- Other:(listbelow)

**OtherHousingNeeds&Strategies:(listneedsandstrategiesbelow)**

**(2) ReasonsforSelectingStrategies**

Ofthefactorslistedbelow,selectallthatinfluencedthePHA’sselectionofthestrategies itwillpursue:

- Fundingconstraints
- Staffingconstraints
- Limitedavailabil ityofsitesforassistedhousing
- Extenttowhichparticularhousingneedsaremetbyotherorganizationsinthe community
- EvidenceofhousingneedsasdemonstratedintheConsolidatedPlanandother informationavailabl etothePHA
- InfluenceofthehousingmarketonPHAprograms
- Communityprioritiesregardinghousingassistance
- Resultsofconsultationwithlocalorstategovernment
- Resultsofconsul tationwithresidentsandtheResidentAdvisoryBoard
- Resultsofconsultationwithadvocacygroups
- Other:(listbelow)

**2. StatementofFinancialResources**

[24CFRPart903.79(b)]

Listthefinancialresourcesatarea ntipatedtobeavailabletothePHAforthesupportofFederalpublic housingandtenant -basedSection8assistanceprogramsadministeredbythePHAduringthePlanyear. Note:thetableassumes thatFederalpublichousingortenantbasedSection8as sistancegrantfundsare expendedoneligiblepurposes;therefore,usesofthesefundsneednotbestated.Forotherfunds,indicate theuseforthosefundsasoneofthefollowingcategories:publichousingoperations,publichousingcapital improvements,publichousingssafety/security,publichousingssupportiveservices,Section8tenant -based assistance,Section8supportiveservicesorother.

<b>FinancialResources: PlannedSourcesandUses</b>		
<b>Sources</b>	<b>Planned\$</b>	<b>PlannedUses</b>

<b>FinancialResources: PlannedSourcesandUses</b>		
<b>Sources</b>	<b>Planned\$</b>	<b>PlannedUses</b>
<b>1. FederalGrants(FY200 3grants)</b>		
a) PublicHousingOperatingFund	415,851.00	
b) PublicHousingCapitalFund	693,530.00	
c) HOPEVIRevitalization		
d) HOPEVIDemolition		
e) AnnualContributionsforSection 8Tenant -BasedAssistance		
f) PublicHousingDrugElimination Program(includin ganyTechnical Assistancefunds)		
g) ResidentOpportunityandSelf - SufficiencyGrants		
h) CommunityDevelopmentBlock Grant		
i) HOME		
OtherFederalGrants(listbelow)		
<b>2.PriorYearFederalGrants (unobligatedfundsonly)(list below)</b>		
CGP&CFP	546,950.00	Modernization
<b>3.PublicHousingDwellingRental Income</b>	1,395,090.00	Operations/Tenant Services
<b>4.Otherincome (listbelow)</b>		
Interest	15,520.00	OperationsPublic Housing
Otherincome(misc.)	15,000.00	OperationsPublic Housing
<b>4.Non -federalsources (listbelow)</b>		
<b>Totalresources</b>	2,388,411.00	PublicHousing operations

### **3.PHAPoliciesGoverningEligibility,Selection,andAdmissions**

[24CFRPart903.79(c)]

#### **A.PublicHousing**

Exemptions:PHAsthatdonotad ministerpublichousingarenotrequiredto completesubcomponent3A.

##### **(1)Eligibility**

a. WhendoesthePHAverifyeligibilityforadmissiontopublichousing?(selectallthat apply)

- Whenfamiliesarewithinacertainnumberofbeingof feredaunit:(statenumber)  
(*Within3,perunitsize*)
- Whenfamiliesarewithinacertaintimeofbeingofferedaunit:(statetime)
- Other:(describe)

b. Whichnon -income(screening)factorsdoesthePHAusetoestablis heligibilityfor admissiontopublichousing(selectallthatapply)?

- CriminalorDrug -relatedactivity
- Rentalhistory
- Housekeeping
- Other(describe)

c.  Yes  No:DoesthePHArequestcriminalrecordsfromlocallawenforcement agenciesforscreeningpurposes?

d.  Yes  No:DoesthePHArequestcriminalrecordsfromStatelawenforcement agenciesforscreeningpu rposes?

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

##### **(2)WaitingListOrganization**

a. WhichmethodsdoesthePHApl antousetoorganizeitspublichousingwaitinglist (selectallthatapply)

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

b. Wheremayinte restedpersonsapplyforadmissiontopublichousing?

- PHAmainadministrativeoffice
- PHAdevelopmentsitemanagementoffice
- Other(listbelow)

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?
2.  Yes  No: Are any or all of the PHA's site-based waiting lists new for the upcoming year (that is, they are not part of a previously HUD-approved site-based waiting list plan)? If yes, how many lists?
3.  Yes  No: May families be on more than one list simultaneously? If yes, how many lists?
4. Where can interested persons obtain more information about and sign up to be on the site-based waiting lists (select all that apply)?
  - PHA main administrative office
  - All PHA development management offices
  - Management offices at developments with site-based waiting lists
  - At the development to which they would like to apply
  - Other (list below)

**(3) Assignment**

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

- One
- Two
- Three or More

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

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

**(4) Admissions Preferences**

a. Income targeting:

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

b. Transfer policies:

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

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

c. Preferences

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

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

Former Federal preferences:

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

Other preferences: (select below)

- Working families and those unable to work because of age or disability
- Veterans and veterans' families
- Residents who live and/or work in the jurisdiction
- Those enrolled currently in educational, training, or upward mobility programs
- 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 reprisal or hate crimes
- Other preference(s) (list below)

3. If the PHA will employ admission 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.

1 Date and Time

Former Federal preferences:

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

Other preferences (select all that apply)

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

4. Relationship of preferences to income targeting requirements:

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

**(5) Occupancy**

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

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

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

- At an annual reexamination and lease renewal
- Anytime family composition changes
- At family request for revision

Within 10 days of occurrence

**(6) Deconcentration and Income Mixing**

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

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

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

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

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

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

Other (list policies and 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)

- Resident mailing address
- Current and prior landlords name and mailing address.

**(2)WaitingListOrganization**

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

- None
- Federal public housing
- Federal moderate rehabilitation
- Federal project -based certificate program
- Other federal or local program (list below)

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

- PHA main administrative office
- Other (list below)

**(3)SearchTime**

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

If yes, state circumstances below:

**(4)Admissions Preferences**

a. Income targeting

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

b. Preferences

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

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

Former Federal preferences

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

Other preferences (select all that apply)

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

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

Date and Time

Former Federal preferences

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

Other preferences (select all that apply)

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

Other preference(s) (list below)

4. 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 ensures that the PHA will meet income targeting requirements

#### **(5) Special Purpose Section 8 Assistance Programs**

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

The Section 8 Administrative Plan

Briefing sessions and written materials

Other (list below)

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

Through published notices

Other (list below)

#### **4. PHA Rent Determination Policies**

[24 CFR Part 903.79(d)]

##### **A. Public Housing**

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

##### **(1) Income Based Rent Policies**

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

a. Use of discretionary policies: (select one)

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

---or---

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

b. Minimum Rent

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

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

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

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

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

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
- The Port Chester Housing Authority does not plan to implement any deductions and/or exclusions

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)
- 95<sup>th</sup> 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(listbelow)

f. Rentre -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) \_\_\_\_\_  
 Within 10 days of occurrence

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 rent listed in local newspaper  
 Survey of similar unassisted units in the neighborhood  
 Other(list/describe below)

- *Fair Market Rents*

## **B. Section 8 Tenant -Based Assistance**

Exemptions: PHA 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 repayment 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. (ny014 -a04)
- A brief description of the management structure and organization of the PHA follows:

### **B. HUD Programs Under PHA Management**

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

<b>Program Name</b>	<b>Units or Families Served at Year Beginning</b>	<b>Expected Turnover</b>
Public Housing	340	20
Section 8 Vouchers	0	
Section 8 Certificates	0	
Section 8 Mod Rehab		
Special Purpose Section 8 Certificates/Vouchers (list individually)	0	
Public Housing Drug Elimination Program (PHDEP)		
Other Federal Programs (list individually)		

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**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)

- ACOPS
- Maintenance Policy

**6. PHA Grievance Procedures**

[24CFR 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 24CFR Part 966, Subpart B, for residents of public housing?

If yes, list addition to federal requirements below:

2. Which PHA offices should residents or applicant stop 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 applicant 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 applicant 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**

[24CFR Part 903.7 9(g)]

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

### **A. Capital Fund Activities**

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

#### **(1) Capital Fund Program Annual Statement**

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

Select one:

- The Capital Fund Program Annual Statement is provided as an attachment to the PHA Plan at Attachment (state name)ny014b01

-or-

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

#### **(2) Optional 5 -Year Action Plan**

Agencies are encouraged to include a 5 -Year Action Plan covering capital work items. This statement can be completed by using the 5 Year Action Plan table provided in the table library at the end of the PHA Plan template **OR** by completing and attaching a properly updated HUD Form 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)ny014c02

-or-

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

## **B. HOPEVI and Public Housing Development and Replacement Activities (Non -Capital Fund)**

Applicability of sub -component 7B: All PHAs administering public housing. Identify any approved 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 HOPEVI revitalization grant? (if no, skip to question c; if yes, provide responses to question b for each grant, copying and completing as many times as necessary)  
b) Status of HOPEVI revitalization grant (complete one set of questions for each grant)

1. Development name:

2. Development (project) number:

3. Status of grant: (select the statement that best describes the current status)

- Revitalization Plan under development  
 Revitalization Plan submitted, pending approval  
 Revitalization Plan approved  
 Activities pursuant to an approved Revitalization Plan underway

- Yes  No: c) Does the PHA plan to apply for a HOPEVI revitalization grant in the Plan year?  
If yes, list development name/s below:

- Yes  No: d) Will the PHA be engaging in any mixed -financed development activities for public housing in the Plan year?  
If yes, list developments or activities below:

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

## **8. Demolition and Disposition**

[24CFRPart903.79(h)]

Applicabilityofcomponent8:Section8onlyPHAsarenotrequiredto completethissection.

1.  Yes  No: DoesthePHAplantoconductanydemolitionordisposition activities(pursuanttosection18oftheU.S.HousingActof1937 (42U.S.C.1437p))intheplanFiscalYear?(If“No”,skipto component9;if “yes”,completeoneactivitydescriptionforeach development.)

2.ActivityDescription

Yes  No: HasthePHAprovidedtheactivitiesdescriptioninformationinthe **optional**PublicHousingAssetManagementTable?(If “yes”,skip tocomponent9.If“No”,completetheActivityDescriptiontable below.)

<b>Demolition/DispositionActivityDescription</b>	
1a.Developmentname:	
1b.Development(project)number:	
2.Activitytype:Demolition <input type="checkbox"/> Disposition <input type="checkbox"/>	
3.Applicationstatus(selectone) Approved <input type="checkbox"/> Submitted,pendingapproval <input type="checkbox"/> Plannedapplication <input type="checkbox"/>	
4.Dateapplicationapproved,submitted,orplannedforsubmission: (DD/MM/YY)	
5.Numberofunitsaffected:	
6.Coverageofaction(selectone) <input type="checkbox"/> Partofthedevelopment <input type="checkbox"/> Totaldevelopment	
7.Timelineforactivity: a.Actualorprojectedstartdateofactivity: b.Projectendeddateof activity:	

**9. DesignationofPublicHousingforOccupancybyElderlyFamiliesor FamilieswithDisabilitiesorElderlyFamiliesandFamilieswith Disabilities**

[24CFRPart903.79(i)]

ExemptionsfromComponent9;Section8onlyPHAsarenotrequiredto completethissection.

1.  Yes  No: HasthePHAdesignatedorappliedforapprovaltodesignateor doesthePHAplantoapplytodesignateanypublichousingfor occupancyonlybytheelderlyfamiliesoronlybyfamilieswith disabilities?

disabilities, or by elderly families and families with disabilities or will apply for designation for occupancy by only elderly families or only families with disabilities, or by elderly families and families with disabilities as provided by section 7 of the U.S. Housing Act of 1937 (42 U.S.C. 1437e) in the upcoming fiscal year? (If "No", skip to component 10. If "yes", complete one activity description for each development, unless the PHA is eligible to complete a streamlined submission; PHA 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.

<b>Designation of Public Housing Activity Description</b>	
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(s) (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**

[24 CFR Part 903.79(j)]

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

**A. Assessments of Reasonable Revitalization Pursuant to section 202 of the HUD 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 a streamlined submission. PHAs completing streamlined submissions may skip to component 11.)

2. Activity Description

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

<b>Conversion of Public Housing Activity Description</b>	
1a. Development name:	
1b. Development (project) number:	
2. What is the status of the required assessment?	
<input type="checkbox"/> Assessment underway <input type="checkbox"/> Assessment results submitted to HUD <input type="checkbox"/> Assessment results approved by HUD (if marked, proceed to next question) <input type="checkbox"/> Other (explain below)	
3. <input type="checkbox"/> Yes <input type="checkbox"/> No: Is a Conversion Plan required? (If yes, go to block 4; if no, go to block 5.)	
4. Status of Conversion Plan (select the statement that best describes the current status)	
<input type="checkbox"/> Conversion Plan in development <input type="checkbox"/> Conversion Plan submitted to HUD on: (DD/MM/YYYY) <input type="checkbox"/> Conversion Plan approved by HUD on: (DD/MM/YYYY) <input type="checkbox"/> Activities pursuant to HUD - approved Conversion Plan underway	
5. Description of how requirements of Section 202 are being satisfied by means other than conversion (select one)	
<input type="checkbox"/> Units addressed in a pending or approved demolition application (date submitted or approved: ) <input type="checkbox"/> Units addressed in a pending or approved HOPE VI demolition application (date submitted or approved: ) <input type="checkbox"/> Units addressed in a pending or approved HOPE VI Revitalization Plan (date submitted or approved: ) <input type="checkbox"/> Requirements no longer applicable: vacancy rates are less than 10 percent <input type="checkbox"/> Requirements no longer applicable: site now has less than 300 units <input type="checkbox"/> Other: (describe below)	

--

<b>B. Reserved for Conversions pursuant to Section 22 of the U.S. Housing Act of 1937</b>
---

<b>C. Reserved for Conversions pursuant to Section 33 of the U.S. Housing Act of 1937</b>
---

**11. Homeownership Programs Administered by the PHA**

[24CFR Part 903.79(k)]

**A. Public Housing**

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

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

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

<b>Public Housing Homeownership Activity Description (Complete one for each development affected)</b>
1a. Development name:
1b. Development (project) number:
2. Federal Program authority: <input type="checkbox"/> HOPEI <input type="checkbox"/> 5(h)

<input type="checkbox"/> Turnkey III <input type="checkbox"/> Section 32 of the USHA of 1937 (effective 10/1/99)
3. Application status: (select one) <input type="checkbox"/> Approved; included in the PHA's Homeownership Plan/Program <input type="checkbox"/> Submitted, pending approval <input type="checkbox"/> Planned application
4. Date Homeownership Plan/Program approved, submitted, or planned for submission: (DD/MM/YYYY)
5. Number of units affected: 6. Coverage of action: (select one) <input type="checkbox"/> Part of the development <input type="checkbox"/> Total development

## B. Section 8 Tenant Based Assistance

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

2. Program Description:

a. Size of Program

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

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

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

b. PHA established eligibility criteria

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

## **12. PHA Community Service and Self -sufficiency Programs**

[24CFR Part 903.79(1)]

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

### **A. PHA Coordination with the Welfare (TANF) Agency**

1. Cooperative agreements:

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

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

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

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

### **B. Services and programs offered to residents and participants**

#### **(1) General**

a. Self -Sufficiency Policies

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

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



### **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)

<b>D. Reserved for Community Service Requirement pursuant to section 12(c) of the U.S. Housing Act of 1937</b>
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### **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 level of violent and/or drug -related crime
- Other (describe below)

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

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

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

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

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

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

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

**C. Coordination between PHA and the police**

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

- Police involvement in development, implementation, and/or ongoing evaluation of drug -elimination plan
- Police provide crime data to housing authority staff for analysis and action
- Police have established a physical presence on housing authority property (e.g., community policing office, of ficer in residence)
- Police regularly testify in and otherwise support eviction cases
- Police regularly meet with the PHA management and residents

- Agreement between PHA and local law enforcement agency for provision of above-baseline law enforcement services
- Other activities (list below)
2. Which developments are most affected? (list below)

**D. Additional information as required by PHDEP/PHDEP Plan**

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

- Yes  No: Is the PHA eligible to participate in the PHDEP in the fiscal year covered by this PHA Plan?
- Yes  No: Has the PHA included the PHDEP Plan for FY2000 in this PHA Plan?
- Yes  No: This PHDEP Plan is an Attachment. (Attachment Filename: ny014a03)

**14. RESERVED FOR PET POLICY**

[24CFR Part 903.79(n)]

**15. Civil Rights Certifications**

[24CFR Part 903.79(o)]

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

**16. Fiscal Audit**

[24CFR Part 903.79(p)]

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

**17. PHA Asset Management**

[24CFR Part 903.79(q)]

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

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

## **18. Other Information**

[24CFR Part 903.79(r)]

### **A. Resident Advisory Board Recommendations**

1.  Yes  No: Did the PHA receive any comments on the PHA Plan from the Resident Advisory Board/s?
2. If yes, the comments are: (if comments were received, the PHA **MUST** select one)
- Attached as Attachment (Filename)
  - 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 (Must present petitions signed by 25 eligible residents)
- Other: (describe)

b. Eligible candidates: (select one)

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

c. Eligible voters: (select all that apply)

- All adult recipients of PHA assistance (public housing and section 8 tenant assistance) -based
- Representatives of all PHA resident and assisted family organizations
- Other ( list)
  - Residents of Public Housing, 18 years or older

### 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: **Westchester County**

2. The PHA has taken the following steps to ensure consistency of this PHA Plan with the Consolidated Plan for the jurisdiction: (select all that apply)

- ThePHAhasbaseditsstatementofneedsoffamiliesi nthejurisdictiononthe needsexpressedintheConsolidatedPlan/s.
- ThePHAhasparticipatedinanyconsultationprocessorganizedandofferedby theConsolidatedPlanagencyinthedevelopmentoftheConsolidatedPlan.
- ThePHAhasconsultedwiththeConsolidatedPlanagencyduringthe developmentofthisPHAPlan.
- ActivitiestobeundertakenbythePHAinthecomingyearareconsistentwiththe initiativescontainedintheConsolidatedPlan.(listbel ow)
  
- Other:(listbelow)

4.TheConsolidatedPlanofthejurisdictionssupportsthePHAPlanwiththefollowing actionsandcommitments:(describellow)

#### **D.OtherInformationRequiredbyHUD**

Usethissectiontoprovideanyaddition alinformationrequestedbyHUD.

## **Attachments**

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

- ny014a01 Capital Fund Program Annual Statement
- ny014b01 5 Year Action Plan
- ny014c01 Organization Chart
- ny014d01 P&E Report FY20 00
- ny014e01 P&E Report FY2001
- ny014f01 P&E Report FY2002
- ny014g01 Resident Advisory Board

# 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	<b>Amount of Annual Grant (Sum of lines 2 - 19)</b>	
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	
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**AnnualStatement  
CapitalFundProgram(CFP)PartII:SupportingTable**

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

Development Number/Name HA-WideActivities		AllFundsExpended (QuarterEnding Date)

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

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

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



**Annual Statement for Year #1 CFP 2003**

HA Name: <b>PORTCHESTER HOUSING AUTHORITY</b>	Comprehensive Grant Program: <b>NY36P014</b>	<b>2003</b>
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Original Annual Statement Reserve for Disasters/Emergencies. Revised Annual Statement/Revision Number \_\_\_ Performance and Evaluation Report for Program Year Ending.  
 Final Performance and Evaluation Report.

TOTAL ESTIMATED COST			TOTAL ACTUAL COST (2)		
Line No.	Development Account	Original	Revised (1)	Obligated	Expended
1	Total Non-CGPF Funds				
2	1406 Operations (May not exceed 20% of line 20)	\$85,180.00			
3	1408 Management Improvements				
4	1410 Administration	\$70,850.00			
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	\$61,000.00			
8	1440 Site Acquisition				
9	1450 Site Improvements				
10	1460 Dwelling Structures	\$421,500.00			
11	1465.1 Dwelling Equipment - Nonexpandable				
12	1470 Nondwelling Structures				
13	1475 Nondwelling Equipment	\$25,000.00			
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 (May not exceed 8% of line 20)	\$30,000.00			
20	Amount of Annual Grant (Sum of lines 2-19)	<b>\$693,530.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>
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				

Signature of Executive Director & Date:	Signature of Public Housing Director / Office of Native American Programs Administrator & Date:
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**FFY2003**

Development Number/Name HA-wide Activities	General Description of Major Work Categories	Development Account Number	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work (2)
				Original	Revised (1)	Funds Obligated (2)	Fund Expended (2)	
PHAWide	<b>OPERATIONS</b>							
	Operations Max 20%			\$85,180.00				
	<b>Total Account #1406</b>			<b>\$85,180.00</b>				
	<b>Administration</b>							
PHAWide	Director of Modernization			\$50,900.00				
	Prorated Salaries			\$18,450.00				
	Supplies			\$1,500.00				
	<b>Total Account #1410</b>			<b>\$70,850.00</b>				
	<b>Fees and Costs</b>							
PHAWide	A/E Services			\$35,000.00				
	Inspection Costs			\$25,000.00				
	Printing Costs			\$1,000.00				
	<b>Total Account #1430</b>			<b>\$61,000.00</b>				
	<b>Dwelling Structures</b>							
NY14-2	New Intercom System (See Note 2A on Corrective Action Plan)			\$70,000.00				
NY14-1	Floor Resurfacing			\$217,500.00				
NY14-2	New Stairwell doors (See Note 2C in Corrective Action Plan)			\$80,000.00				
PHA-Wide	Apartment painting (20% of total)			\$54,000.00				
	<b>Total Account #1460</b>			<b>\$421,500.00</b>				
	<b>Nondwelling Equipment</b>							
PHAWide	Computers			\$10,000.00				
	Tools			\$15,000.00				
	<b>Total Account #1475</b>			<b>\$25,000.00</b>				
	<b>Contingency</b>							
	Contingency			\$30,000.00				
	<b>Total Account #1502</b>			<b>\$30,000.00</b>				
	<b>GRAND TOTAL CGP 2003</b>			<b>\$693,530.00</b>				

Signature of Executive Director & Date:

Signature of Public Housing Director / Office of Native American Programs Administrator & Date:

X

X

1 To be Completed for the Performance and Evaluation Report or a Revised Annual Statement  
 2 To be Completed for the Performance Evaluation Report.











Annual Statement/Performance and Evaluation Report  
 Capital Fund Program (CFP) PART III: Implementation Schedule  
**PORTCHESTER HOUSING AUTHORITY**  
**(CFP2003)**

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

OMB Approval No. 2577-0157 (exp. 7/31/98)

Development Number/Name HA-Wide Activities	All Funds Obligated (Quarter Ending Date)			All Funds Expended (Quarter Ending Date)			Reason for revised Target Dates (2)
	Original	Revised (1)	Actual (2)	Original	Revised (1)	Actual (2)	
Operations PHA-Wide	5/30/2005			5/30/06			
Administration PHA-Wide	5/30/2005			5/30/06			
Fees & Costs PHA-Wide	5/30/2005			5/30/06			
Dwelling Structures NY42-1/3/6	5/30/2005			5/30/06			
Non dwelling Equipment PHA-Wide	5/30/2005			5/30/06			
Contingency	5/30/2005			5/30/06			

Signature of Executive Director & Date:  
  
X

Signature of Public Housing Director/Office of Native American Programs Administrator & Date:  
  
X

1 To be completed for the Performance and Evaluation Report or a Revised Annual Statement

2 To be completed for the Performance and Evaluation Report.

**Five-Year Action Plan**  
 Part I: Summary  
 Capital Fund Program (CFP)

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

Submission (6/1/96)  
**attachment ny014b04**  
 OMB Approval No. 2577-0157 (Exp. 7/31/98)

HA Name: <b>PORTCHESTER HOUSING AUTHORITY</b>		Locality: (City/County & State) <b>Port Chester, Westchester, New York</b>		Original	Revision No. _____
A. Development Number/Name	Work Statement for Year 1 FFY: 2003	Work Statement Year 2 FFY: __04__	Work Statement Year 3 FFY: __05__	Work Statement Year 4 FFY: __06__ Original	Work Statement Year 5 FFY: __07__
<b>NY14-1 MIDLAND COURT</b>	See  Annual  Statement	\$ 196,000.00	\$ 185,000.00	\$ 83,980.00	\$ 143,600.00
<b>NY14-2 HARBORVIEW TERRACE-PARKVIEW</b>		\$ 114,180.00	\$ 63,380.00	\$ 140,000.00	\$ 63,380.00
<b>NY14-3 DREW GARDEN-BROOKSVILLE TERRACE</b>		\$ 54,000.00	\$ 150,000.00	\$ 160,000.00	\$ 150,000.00
<b>B. Physical Improvements Subtotal</b>		<b>\$ 364,180.00</b>	<b>\$ 398,380.00</b>	<b>\$ 383,980.00</b>	<b>\$ 356,980.00</b>
C. Management Improvement					
D. HA-Wide Nondwelling Structures & Equipment		\$ 20,000.00	\$ 20,000.00	\$ 35,000.00	\$ 25,000.00
E. Administration		\$ 73,350.00	\$ 75,550.00	\$ 77,750.00	\$ 77,750.00
F. Other		\$ 236,000.00	\$ 199,600.00	\$ 196,800.00	\$ 233,800.00
G. Replacement Reserve					
<b>H. Total CGPF Funds</b>		<b>\$ 693,530.00</b>	<b>\$ 693,530.00</b>	<b>\$ 693,530.00</b>	<b>\$ 693,530.00</b>
I. Total Non-CGPF Funds					
J. Grand Total					
Signature of Executive Director:	Date	Signature of Public Housing/Director of Native American Programs Administrator.			Date:





Capital Fund Program (CFP)

Annual Statement for Year 1 2003	Work Statement for Year 4 FFY:2006			Work Statement for Year 5 FFY:2007			
	Development Number/Name/General Description of Major Work Category	Quantity	Estimated Cost	Development Number/Name/General Description of Major Work Category	Quantity	Estimated Cost	
See Annual Statement	<b>1406-OPERATIONS</b>			<b>1406-OPERATIONS</b>			
	Operations		\$ 138,600.00	Operations		\$ 138,600.00	
	<b>Subtotal</b>		<b>\$ 138,600.00</b>	<b>Subtotal</b>		<b>\$ 138,600.00</b>	
	<b>1410-ADMINISTRATION</b>			<b>1410-ADMINISTRATION</b>			
	Director of Modernization		\$ 57,800.00	Director of Modernization		\$ 57,800.00	
	Prorated Salaries		\$ 18,450.00	Prorated Salaries		\$ 18,450.00	
	Supplies		\$ 1,500.00	Supplies		\$ 1,500.00	
	<b>Subtotal</b>		<b>\$ 77,750.00</b>	<b>Subtotal</b>		<b>\$ 77,750.00</b>	
	Subtotal of Estimated Cost			<b>\$ 216,350.00</b>	Subtotal of Estimated Cost		
	Subtotal of Estimated Cost			<b>\$ 216,350.00</b>	Subtotal of Estimated Cost		

**Five-Year Action Plan**  
**Part II: Supporting Pages**  
Physical Needs Work Statement(s)  
Capital Fund Program (CFP)

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

Annual Statement for Year 1 2003	Work Statement for Year 2 FFY:2004			Work Statement for Year 3 FFY:2005		
	Development Number/Name/General Description of Major Work Category	Quantity	Estimated Cost	Development Number/Name/General Description of Major Work Category	Quantity	Estimated Cost
See Annual Statement	<b>1430-FEES AND COSTS</b>			<b>1430-FEES AND COSTS</b>		
	A/E Services		\$ 35,000.00	A/E Services		\$ 35,000.00
	Inspection Costs		\$ 25,000.00	Inspection Costs		\$ 25,000.00
	Printing		\$ 1,000.00	Printing		\$ 1,000.00
	<b>Subtotal</b>		<b>\$ 61,000.00</b>	<b>Subtotal</b>		<b>\$ 61,000.00</b>
	<b>1460-DWELLING STRUCTURES</b>			<b>1460-DWELLING STRUCTURES</b>		
	<b>NY14-01 MIDLAND COURT</b>			<b>NY14-01 MIDLAND COURT</b>		
	New Closet Doors (Needed after Annual & REAC Inspection)		\$196,000.00	New winter com system	9	\$ 120,000.00
	Kitchen Renovations (being done under CFP 2002)		\$0.00	New Light Fixtures in Hallways	9	\$ 45,000.00
	<b>NY14-02 HARBOR VIEW &amp; PARK VIEW TERR.</b>			Kitchen Renovations (being done under CFP 2002)		\$0.00
	New interior door and hardware	528	\$114,180.00	<b>NY14-03 DREW GARDENS - BROOKSVILLE TERR.</b>		
	New main door and card access system (done under CFP 2000)		\$0.00	New Light Fixtures (see note 2B)		\$ 60,000.00
	<b>PHAWIDE</b>			New Floor in Hallways		\$ 70,000.00
	Apartment Painting 20% of the total		\$ 54,000.00	<b>PHAWIDE</b>		
	<b>Subtotal</b>		<b>\$364,180.00</b>	Apartment painting 20% of the total		\$ 54,000.00
				New Compactors (needed after annual and REAC Inspection)		\$ 49,380.00
				<b>Subtotal</b>		<b>\$ 398,380.00</b>
				<b>NONDWELLING EQUIPMENT</b>		
				Computer		\$ 10,000.00
				Refrigerators		\$ 10,000.00
			<b>Subtotal</b>		<b>\$ 20,000.00</b>	
			<b>NONDWELLING EQUIPMENT</b>			
			Computer		\$10,000.00	
			Tools		\$10,000.00	
			<b>Subtotal</b>		<b>\$20,000.00</b>	
	Subtotal of Estimated Cost		<b>\$ 482,180.00</b>	Subtotal of Estimated Cost		<b>\$ 479,380.00</b>

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

**Five-Year Action Plan  
Part II: Supporting Pages**

Physical Need Capital Fund	Work Statement for Year 4 FFY:2006			Work Statement for Year 5 FFY:2007		
Annual Statement for Year 1 2003	Development Number/Name/General Description of Major Work Category	Quantity	Estimated Cost	Development Number/Name/General Description of Major Work Category	Quantity	Estimated Cost
See Annual Statement	<b>1430-FEES AND COSTS</b>			<b>1430-FEES AND COSTS</b>		
	A/E Services		\$ 35,000.00	A/E Services		\$ 35,000.00
	Inspection Costs		\$ 22,200.00	Inspection Costs		\$ 22,200.00
	Printing		\$ 1,000.00	Printing		\$ 1,000.00
	<b>Subtotal</b>		<b>\$ 58,200.00</b>	<b>Subtotal</b>		<b>\$ 58,200.00</b>
	<b>1460 DWELLING STRUCTURES</b>			<b>1460 DWELLING STRUCTURES</b>		
	<b>PHAWIDE</b>			<b>NY14-02 HARBORVIEW/PARKVIEW</b>		
	Apartment Painting 20% of the total		\$ 54,000.00	New VCT Floor in Hallways		\$ 35,000.00
	Community room Improvement		\$ 80,000.00			
	Sidewalk and fences improvement		\$ 109,980.00	<b>PHA-WIDE</b>		
	<b>NY14-3 BROOKSVILLE TERRACE/DREW</b>			Resurface Parking lots		\$ 120,000.00
	Hot water heater upgrade		\$ 80,000.00	Upgrade boilers		\$ 136,980.00
	New Floor in Hallways		\$ 60,000.00			
	<b>NY14-2 HARBORVIEW/PARKVIEW TERRACE</b>			<b>NY14-03 BROOKSVILLE TERRACE/DREW</b>		
	Kitchen Renovation (being done under CFP 2002)	30	\$ 120,000.00	New main Doors and New Card Access System (See note 2B)		\$ 65,000.00
<b>Subtotal</b>		<b>\$ 383,980.00</b>	<b>Subtotal</b>		<b>\$ 356,980.00</b>	
<b>NON DWELLING EQUIPMENT</b>			<b>DWELLING EQUIPMENT</b>			
Tools		\$ 10,000.00	Stoves		\$ 13,500.00	
New truck/car		\$ 25,000.00	Refrigerators		\$ 23,500.00	
<b>Subtotal</b>		<b>\$ 35,000.00</b>	<b>Subtotal</b>		<b>\$ 37,000.00</b>	
			<b>NON DWELLING EQUIPMENT</b>			
			Tools		\$ 10,000.00	
			Computers		\$ 15,000.00	
			<b>Subtotal</b>		<b>\$ 25,000.00</b>	
Subtotal of Estimated Cost			<b>\$ 477,180.00</b>	Subtotal of Estimated Cost		
				<b>\$ 477,180.00</b>		





















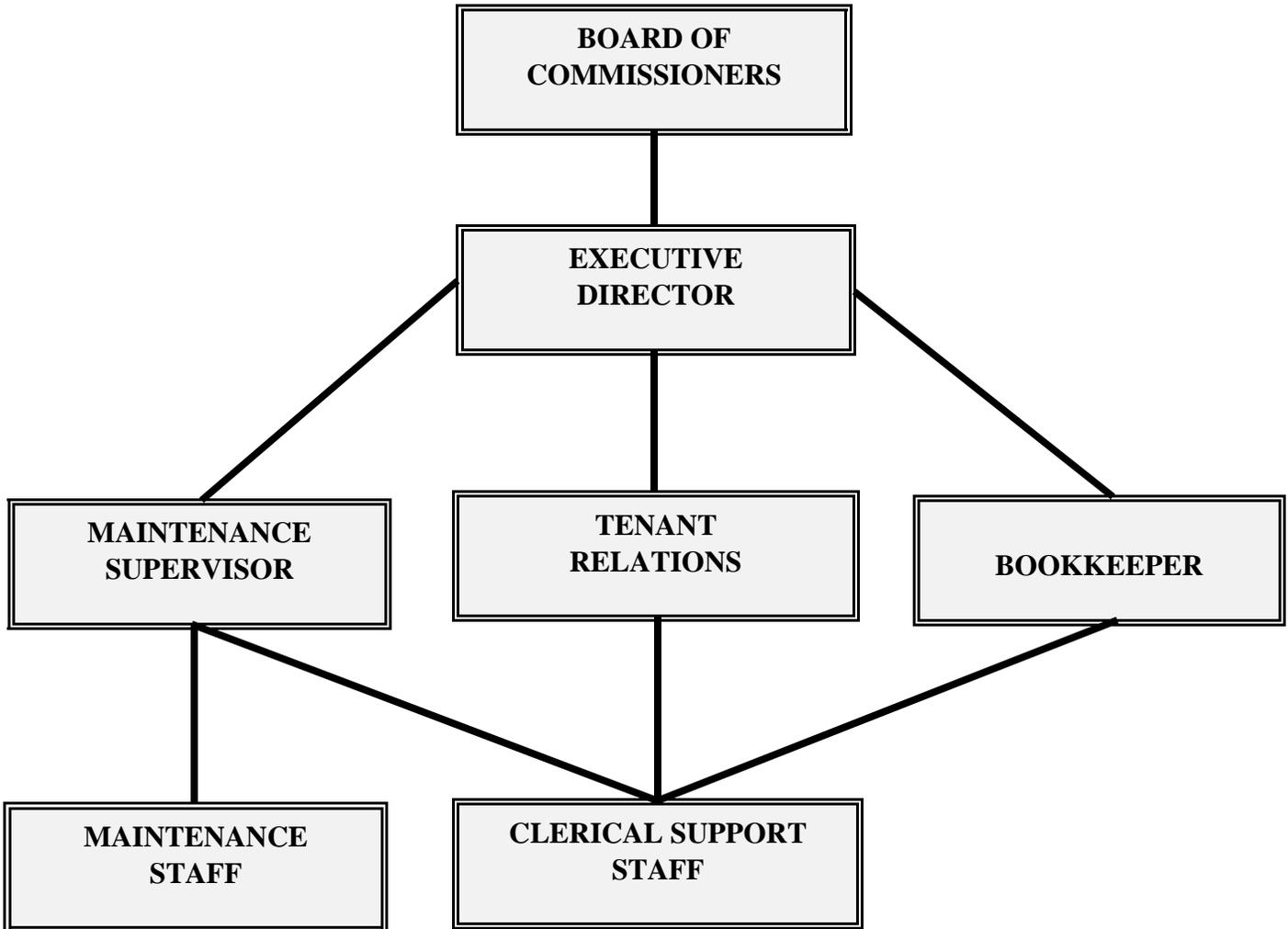








**PORT CHESTER HOUSING AUTHORITY  
ORGANIZATION CHART**



HA Name: <b>PORT CHESTER HOUSING AUTHORITY</b>	Comprehensive Grant Program: <b>NY36P014501-00</b>	FFY of Grant Approval: <b>2000</b>
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Original Annual Statement Reserve for Disasters/Emr Revised Annual Statement/Revision Number\_\_\_ Performance and Evaluation Report for Program Year Ending.  
 Final Performance and Evaluation Report. **SEPTEMBER 30, 2002**

TOTAL ESTIMATED COST			TOTAL ACTUAL COST (2)			
Line No.	by Development Account	Original	Revised (1)		Obligated	Expended
1	Total Non-CGP Funds					
2	1406 Operations (May not to exceed 20% of line 20)	\$142,146.00		\$142,146.00	\$142,146.00	\$142,146.00
3	1408 Management Improvements					
4	1410 Administration	\$68,450.00		\$68,450.00	\$68,450.00	\$67,333.87
5	1411 Audit					
6	1415 Liquidated damages					
7	1430 Fees and Costs	\$57,978.00		\$57,978.00	\$57,978.00	\$50,107.92
8	1440 Site Acquisition					
9	1450 Site Improvements					
10	1460 Dwelling Structures	\$442,159.00		\$442,159.00	\$442,159.00	\$362,849.85
11	1465.1 Dwelling Equipment - Nonexpandable					
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 (May not to exceed 8% of line 20)					
20	Amount of Annual Grant (Sum of lines 2 - 19)	\$710,733.00		\$710,733.00	\$710,733.00	\$622,437.64
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					

Signature of Executive Director & Date:

Signature of public Housing Director/Office of Native American Programs Administrator & Date:

1- To be completed for the Performance and Evaluation Report or a Revised Annual Statement

2- To be completed for the Performance and Evaluation Report.











Annual Statement/Performance and Evaluation Report  
 Capital Fund Program (CFP) PART II: Supporting Pages  
 Year 2000 page 2

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

OMB Approval No. 2577-0157 (exp. 7/31/98)

PORT CHESTER HOUSING AUTHORITY

APPENDIX 6-1

Development Number/Name HA-wide Activities	General Description of Major Work Categories	Development Account Number	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work (2)
				Original	Revised (1)	Funds Obligated (2)	Fund Expended (2)	
PHA Wide	<b>OPERATIONS</b>	1406						
	Operations Max 20 %			\$142,146.00	\$142,146.00	\$142,146.00	\$142,146.00	Completed
	<b>Total Account # 1406</b>			<b>\$142,146.00</b>	<b>\$142,146.00</b>	<b>\$142,146.00</b>	<b>\$142,146.00</b>	
	<b>Administration</b>	1410						
PHA Wide	Director of Modernization			\$48,500.00	\$48,500.00	\$48,500.00	\$48,500.00	Completed
	Prorated Salaries			\$18,450.00	\$18,450.00	\$18,450.00	\$18,450.00	Completed
	Supplies			\$1,500.00	\$1,500.00	\$1,500.00	\$383.87	25% Completed
	<b>Total Account # 1410</b>			<b>\$68,450.00</b>	<b>\$68,450.00</b>	<b>\$68,450.00</b>	<b>\$67,333.87</b>	
	<b>Fees and Costs</b>	1430						
PHA Wide	A/E Services			\$37,778.00	\$37,778.00	\$37,778.00	\$37,778.00	Completed
	Inspection Costs			\$19,200.00	\$19,048.00	\$19,048.00	\$11,177.92	60 % Completed
	Printing Costs			\$1,000.00	\$1,152.00	\$1,152.00	\$1,152.00	Completed
	<b>Total Account # 1430</b>			<b>\$57,978.00</b>	<b>\$57,978.00</b>	<b>\$57,978.00</b>	<b>\$50,107.92</b>	
	<b>Dwelling Structures</b>	1460						
NY14-1	Rewire individual apts. and provide additional outlets for A/C units and current code compliance			\$202,659.00	\$0.00	\$0.00	\$0.00	No Activity
	Provide new feeders for each apartment.			\$90,000.00	\$0.00	\$0.00	\$0.00	No Activity
	Provide individual metering			\$60,000.00	\$0.00	\$0.00	\$0.00	No Activity
	New lighting in hallways			\$11,250.00	\$0.00	\$0.00	\$0.00	No Activity
	New smoke detectors			\$33,250.00	\$0.00	\$0.00	\$0.00	No Activity
	Hallways renovations			\$45,000.00	\$45,000.00	\$45,000.00	\$44,693.00	99% Completed
NY14-2	Electrical work at Purdy - CGP99			\$0.00	\$85,956.85	\$85,956.85	\$85,956.85	Completed
NY14-1/2	Basketball Court Improvement			\$0.00	\$0.00	\$0.00	\$0.00	No Activity
NY14/2	Building entrance doors/Card Access System			\$0.00	\$41,002.15	\$41,002.15	\$0.00	Obligated
NY14/2	Building Emergency back doors			\$0.00	\$0.00	\$0.00	\$0.00	No Activity
NY14/2	Bathroom lead bend replacement			\$0.00	\$232,200.00	\$232,200.00	\$232,200.00	Completed
NY14-2	Oil Spill			\$0.00	\$0.00	\$0.00	\$0.00	No Activity
NY14-1	New Compactor Units			\$0.00	\$0.00	\$0.00	\$0.00	No Activity
NY14-3	New Heat radiator traps CFP2002 ITEM			\$0.00	\$38,000.00	\$38,000.00	\$0.00	No Activity
	<b>Total Account # 1460</b>			<b>\$442,159.00</b>	<b>\$442,159.00</b>	<b>\$442,159.00</b>	<b>\$362,849.85</b>	
	<b>GRAND TOTAL CFP2000</b>			<b>\$710,733.00</b>	<b>\$710,733.00</b>	<b>\$710,733.00</b>	<b>\$622,437.64</b>	

Signature of Executive Director & Date:

Signature of Public Housing Director/Office of Native American Programs Administrator & Date:

X

X



Annual Statement/Performance and Evaluation Report  
 Capital Fund Program (CFP) PART III: Implementation Schedule

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

OMB Approval No. 2577-0157 (exp. 7/31/98)  
**PORT CHESTER HOUSING AUT.**  
**CFP2000**

Development Number/Name HA-Wide Activities	All Funds Obligated (Quarter Ending Date)			All Funds Expended (Quarter Ending Date)			Reason for revised Target Dates (2)
	Original	Revised (1)	Actual (2)	Original	Revised (1)	Actual (2)	
Operation PHA - Wide	9/30/2002		9/30/2002	9/30/04			
Administration PHA - Wide	9/30/2002		9/30/2002	9/30/04			
Fees & Costs PHA - Wide	9/30/2002		9/30/2002	9/30/04			
Dwelling Structures NY42-1/3/6	9/30/2002		9/30/2002	9/30/04			
Signature of Executive Director & Date:  X				Signature of Public Housing Director/Office of Native American Programs Administrator & Date:  X			

1 To be Completed for the Performance and Evaluation Report or a Revised Annual Statement

2 To be Completed for the Performance and Evaluation Report.



HA Name: <b>PORTCHESTER HOUSING AUTHORITY</b>	Comprehensive Grant Program: <b>NY36P01450501</b>	FFY of Grant Approval: <b>2001</b>
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Original Annual Statement Reserve for Disasters/Emergencies. Revised Annual Statement/Revision Number \_\_\_ Performance and Evaluation Report for Program Year Ending. **SEPTEMBER 30, 2002**  
 Final Performance and Evaluation Report.

TOTAL ESTIMATED COST		TOTAL ACTUAL COST (2)			
Line No.	Development Account	Original	Revised (1)	Obligated	Expended
1	Total Non-CGPF Funds				
2	1406 Operations (May not to exceed 20% of line 20)	\$74,826.00	\$74,826.00	\$74,826.00	\$74,826.00
3	1408 Management Improvements				
4	1410 Administration	\$68,450.00	\$68,450.00	\$68,450.00	\$40,132.43
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	\$57,500.00	\$57,500.00	\$57,500.00	\$3,593.52
8	1440 Site Acquisition				
9	1450 Site Improvements				
10	1460 Dwelling Structures	\$480,000.00	\$480,000.00	\$480,000.00	\$415,293.30
11	1465.1 Dwelling Equipment - Nonexpandable				
12	1470 Nondwelling Structures				
13	1475 Nondwelling Equipment	\$16,000.00	\$16,000.00	\$16,000.00	\$8,762.10
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 (May not to exceed 8% of line 20)	\$30,000.00	\$30,000.00	\$30,000.00	\$0.00
20	Amount of Annual Grant (Sum of lines 2-19)	\$726,776.00	\$726,776.00	\$726,776.00	\$542,607.35
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				

Signature of Executive Director & Date:

Signature of Public Housing Director/Office of Native American Programs Administrator & Date:

1- To be completed for the Performance and Evaluation Report or a Revised Annual Statement

2- To be completed for the Performance and Evaluation Report.











Development Number/Name HA-wide Activities	General Description of Major Work Categories	Development Account Number	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work(2)
				Original	Revised(1)	Funds Obligated(2)	Fund Expended(2)	
PHAWide	<b>OPERATIONS</b>							
	Operations Max 20%			\$74,826.00	\$74,826.00	\$74,826.00	\$74,826.00	Completed
	<b>Total Account #1406</b>			<b>\$74,826.00</b>	<b>\$74,826.00</b>	<b>\$74,826.00</b>	<b>\$74,826.00</b>	
	<b>Administration</b>							
PHAWide	Director of Modernization			\$48,500.00	\$48,500.00	\$48,500.00	\$21,682.43	47% Completed
	Prorated Salaries			\$18,450.00	\$18,450.00	\$18,450.00	\$18,450.00	Completed
	Supplies			\$1,500.00	\$1,500.00	\$1,500.00	\$0.00	Obligated
	<b>Total Account #1410</b>			<b>\$68,450.00</b>	<b>\$68,450.00</b>	<b>\$68,450.00</b>	<b>\$40,132.43</b>	
	<b>Fees and Costs</b>							
PHAWide	A/E Services			\$37,000.00	\$37,000.00	\$37,000.00	\$3,593.52	9% Completed
	Inspection Costs			\$19,500.00	\$19,500.00	\$19,500.00	\$0.00	Obligated
	Printing Costs			\$1,000.00	\$1,000.00	\$1,000.00	\$0.00	Obligated
	<b>Total Account #1430</b>			<b>\$57,500.00</b>	<b>\$57,500.00</b>	<b>\$57,500.00</b>	<b>\$3,593.52</b>	
	<b>Dwelling Structures</b>							
NY14-1	Bathroom Renovations			\$480,000.00	\$480,000.00	\$480,000.00	\$415,293.30	85% Completed
	<b>Total Account #1460</b>			<b>\$480,000.00</b>	<b>\$480,000.00</b>	<b>\$480,000.00</b>	<b>\$415,293.30</b>	
	<b>Nondwelling Equipment</b>							
PHAWide	Computers			\$10,000.00	\$11,413.10	\$11,413.10	\$8,762.10	80% Completed
	Tools			\$6,000.00	\$4,586.90	\$4,586.90	\$0.00	Obligated
	<b>Total Account #1475</b>			<b>\$16,000.00</b>	<b>\$16,000.00</b>	<b>\$16,000.00</b>	<b>\$8,762.10</b>	
	<b>Contingency</b>							
	Contingency			\$30,000.00	\$30,000.00	\$30,000.00	\$0.00	Obligated
	<b>Total Account #1502</b>			<b>\$30,000.00</b>	<b>\$30,000.00</b>	<b>\$30,000.00</b>	<b>\$0.00</b>	
	<b>GRAND TOTAL CFP 2001</b>			<b>\$726,776.00</b>	<b>\$726,776.00</b>	<b>\$726,776.00</b>	<b>\$542,607.35</b>	

Signature of Executive Director & Date:

Signature of Public Housing Director/Office of Native American Programs Administrator & Date:

X

X

1 To be Completed for the Performance and Evaluation Report or a Revised Annual Statement

2 To be Completed for the Performance Evaluation Report.

Development Number/Name HA-Wide Activities	All Funds Obligated (Quarter Ending Date)			All Funds Expended (Quarter Ending Date)			Reason for revised Target Dates (2)
	Original	Revised (1)	Actual (2)	Original	Revised (1)	Actual (2)	
Operations	6/30/03			6/30/05			
PHA-Wide							
Administration PHA-Wide	6/30/03			6/30/05			
Fees & Costs PHA-Wide	6/30/03			6/30/05			
Dwelling Structures NY42-1/3/6	6/30/03			6/30/05			
Non-dwelling Equipment PHA-Wide	6/30/03			6/30/05			

Signature of Executive Director & Date:  
  
X

Signature of Public Housing Director/Office of Native American Programs Administrator & Date:  
  
X



**Annual Statement for Year #1 CFP 2002**

HA Name: <b>PORTCHESTER HOUSING AUTHORITY</b>	Comprehensive Grant Program: <b>NY36P01450502</b>	<b>2002</b>
Original Annual Statement Reserve for Disasters/Emergencies. Final Performance and Evaluation Report.	Revised Annual Statement/Revision Number ___	Performance and Evaluation Report for Program Year Ending. <b>SEPTEMBER 30, 2002</b>

TOTAL ESTIMATED COST			TOTAL ACTUAL COST (2)		
Line No.	Fy Development Account	Original	Revised (1)	Obligated	Expended
1	Total Non-CGPF Funds				
2	1406 Operations (May not to exceed 20% of line 20)	\$92,580.00	\$92,580.00	\$30,000.00	\$20,000.00
3	1408 Management Improvements				
4	1410 Administration	\$68,450.00	\$68,450.00	\$0.00	\$0.00
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	\$60,500.00	\$60,500.00	\$0.00	\$0.00
8	1440 Site Acquisition				
9	1450 Site Improvements				
10	1460 Dwelling Structures	\$417,000.00	\$417,000.00	\$0.00	\$0.00
11	1465.1 Dwelling Equipment - Nonexpandable				
12	1470 Nondwelling Structures				
13	1475 Nondwelling Equipment	\$25,000.00	\$25,000.00	\$0.00	\$0.00
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 (May not to exceed 8% of line 20)	\$30,000.00	\$30,000.00	\$0.00	\$0.00
20	Amount of Annual Grant (Sum of lines 2-19)	<b>\$693,530.00</b>	<b>\$693,530.00</b>	<b>\$30,000.00</b>	<b>\$20,000.00</b>
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				
Signature of Executive Director & Date:			Signature of Public Housing Director / Office of Native American Programs Administrator & Date:		



Development Number/Name HA-wide Activities	General Description of Major Work Categories	Development Account Number	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work (2)
				Original	Revised (1)	Funds Obligated (2)	Fund Expended (2)	
PHAWide	<b>OPERATIONS</b>							
	Operations Max 20%			\$92,580.00	\$92,580.00	\$30,000.00	\$20,000.00	24% Completed
	<b>Total Account #1406</b>			<b>\$92,580.00</b>	<b>\$92,580.00</b>	<b>\$30,000.00</b>	<b>\$20,000.00</b>	
	<b>Administration</b>							
PHAWide	Director of Modernization			\$48,500.00	\$48,500.00	\$0.00	\$0.00	No Activity
	Prorated Salaries			\$18,450.00	\$18,450.00	\$0.00	\$0.00	No Activity
	Supplies			\$1,500.00	\$1,500.00	\$0.00	\$0.00	No Activity
	<b>Total Account #1410</b>			<b>\$68,450.00</b>	<b>\$68,450.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	
	<b>Fees and Costs</b>							
PHAWide	A/E Services			\$37,000.00	\$37,000.00	\$0.00	\$0.00	No Activity
	Inspection Costs			\$22,500.00	\$22,500.00	\$0.00	\$0.00	No Activity
	Printing Costs			\$1,000.00	\$1,000.00	\$0.00	\$0.00	No Activity
	<b>Total Account #1430</b>			<b>\$60,500.00</b>	<b>\$60,500.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	
	<b>Dwelling Structures</b>							
PHAWide	Apartment Painting			\$54,000.00	\$54,000.00	\$0.00	\$0.00	No Activity
PHAWide	Boiler conversion from Oil to gas			\$180,000.00	\$180,000.00	\$0.00	\$0.00	No Activity
NY14-2	Windows frame restoration			\$75,000.00	\$75,000.00	\$0.00	\$0.00	No Activity
NY14-2	Stairwell doors			\$20,000.00	\$20,000.00	\$0.00	\$0.00	No Activity
NY14-2	New Compactor @ Purdy Ave.			\$8,000.00	\$8,000.00	\$0.00	\$0.00	No Activity
NY14-1	Kitchen renovations			\$48,000.00	\$48,000.00	\$0.00	\$0.00	No Activity
NY14-3	Bathroom Renovations			\$32,000.00	\$32,000.00	\$0.00	\$0.00	No Activity
	<b>Total Account #1460</b>			<b>\$417,000.00</b>	<b>\$417,000.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	
	<b>Nondwelling Equipment</b>							
PHAWide	Computers			\$10,000.00	\$10,000.00	\$0.00	\$0.00	No Activity
	Tools			\$15,000.00	\$15,000.00	\$0.00	\$0.00	No Activity
	<b>Total Account #1475</b>			<b>\$25,000.00</b>	<b>\$25,000.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	
	<b>Contingency</b>							
	Contingency			\$30,000.00	\$30,000.00	\$0.00	\$0.00	No Activity
	<b>Total Account #1502</b>			<b>\$30,000.00</b>	<b>\$30,000.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	
	<b>GRAND TOTAL CFP 2002</b>			<b>\$693,530.00</b>	<b>\$693,530.00</b>	<b>\$30,000.00</b>	<b>\$20,000.00</b>	

Signature of Executive Director & Date:

Signature of Public Housing Director / Office of Native American Programs Administrator & Date:

X

X

1 To be Completed for the Performance and Evaluation Report or a Revised Annual Statement  
 2 To be Completed for the Performance Evaluation Report.

Annual Statement/Performance and Evaluation Report  
 Capital Fund Program (CFP) PART III: Implementation Schedule  
**PORTCHESTER HOUSING AUTHORITY**  
**(CFP2002)**

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

OMB Approval No. 2577-0157 (exp. 7/31/98)

Development Number/Name HA-Wide Activities	All Funds Obligated (Quarter Ending Date)			All Funds Expended (Quarter Ending Date)			Reason for revised Target Dates (2)
	Original	Revised (1)	Actual (2)	Original	Revised (1)	Actual (2)	
Operations PHA-Wide	5/30/04			5/30/06			
Administration PHA-Wide	5/30/04			5/30/06			
Fees & Costs PHA-Wide	5/30/04			5/30/06			
Dwelling Structures NY42-1/3/6	5/30/04			5/30/06			
Nondwelling Equipment PHA-Wide	5/30/04			5/30/06			

Signature of Executive Director & Date:  
  
X

Signature of Public Housing Director/Office of Native American Programs Administrator & Date:  
  
X

1 To be completed for the Performance and Evaluation Report or a Revised Annual Statement

2 To be completed for the Performance and Evaluation Report.

# **PortChesterHousingAuthority**

**(attachmentny014g04)**

## **RequiredAttachment(ny014f01):MembershipoftheResident AdvisoryBoardorBoards**

1. BetinaFoust
2. NancyMcKinnon
3. JosephStamps
4. KimberlyFoust
5. EthelLivingston

## Attachmentny014h04

### CORRECTIVE ACTION PLAN

In response to your letter dated May 9, 2003, rejecting our FY 2003 annual plan update enclosed please find the revised plan that, we hope, will meet with your approval. Additionally we have answered your concerns enumerated in your letter with the corresponding numbers.

1. Corrected
2. a) In 1460 we added "New Intercom System at NY 14 -2", this was necessary to make the newly installed magnetic access doors system fully operational.  
b) We moved the items "New Light Fixtures (NY 14 -3)" to FY 2005 and "New Main Door and Card Access System (NY 14 -3)" to FY 2007. These changes were made to balance budget figures against changing priorities of other items.  
c) New Stair Well doors to complete an approved CFP FY 2002 item.
3. Corrected
4. Corrected, please see resubmitted attachmentny014b01.
5. Corrected, please see resubmitted attachmentny014e01
6. Our P&E, FY 2002 report (attachmentny014f01) cumulative obligation of \$146,580.00 is incorrect and not \$30,000.00 as you indicated.
7. The Port Chester Housing Authority has 340 units in its inventory. It is possible that 5 of four units do not qualify for operating subsidy because they are being occupied by our residents superintendents (workers).
8. Corrected.