

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

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Small PHA Plan Update  
Annual Plan for Fiscal Year: 2003

Town of Hoosick Housing Authority

Stephen Griffing, Chairperson  
M. Patrice Zedalis, Executive Director

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

## PHA Plan Agency Identification

**PHA Name:** Town of Hoosick Housing Authority

**PHA Number:** NY501

**PHA Fiscal Year Beginning: (mm/yyyy)** 01/2003

### PHA Plan Contact Information:

Name: M. Patrice Zedalis, Executive Director

Phone: (518) 686-7316

TDD:

Email (if available): thha@cserve.net

### 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  
*Town of Hoosick Housing Authority  
P.O. Box 149  
Hoosick Falls, New York 12090*
- PHA development management offices

### Display Locations For PHA Plans and Supporting Documents

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

- Main administrative office of the PHA (Address listed above.)
- PHA development management offices
- Main administrative office of the local, county or State government
- Public library
- PHA website
- Other (list below)

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

- Main business office of the PHA (Address listed above.)
- PHA development management offices
- Other (list below)

### PHA Programs Administered:

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

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

**i. Table of Contents**

Provide a table of contents for the Plan, including attachments, and a list of supporting documents available for public inspection. For Attachments, indicate which attachments are provided by selecting all that apply. Provide the attachment's name (A, B, etc.) in the space to the left of the name of the attachment. If the attachment is provided as a **SEPARATE** file submission from the PHA Plans file, provide the file name in parentheses in the space to the right of the title.

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**Attachments**

- Attachment A : Supporting Documents Available for Review (ny501a04)
- Attachment B : Capital Fund Program Annual Statement (ny501b04)
- Attachment C : Capital Fund Program 5 Year Action Plan (ny501c04)
- Attachment    : Capital Fund Program Replacement Housing Factor Annual Statement
- Attachment    : Public Housing Drug Elimination Program (PHDEP) Plan
- Attachment D : Resident Membership on PHA Board or Governing Body (ny501d04)
- Attachment E : Membership of Resident Advisory Board or Boards (ny501e04)
- Attachment    : Comments of Resident Advisory Board or Boards & Explanation of PHA Response (must be attached if not included in PHA Plan text)
- Other (List below, providing each attachment name)
- Attachment F : Deconcentration – Statement of Exemption (ny501f04)
- Attachment G : Voluntary Conversion to Tenant-Based Assistance (ny501g04)

**ii. Executive Summary**

[24 CFR Part 903.7 9 (r)]

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

The provision of an *Executive Summary* is optional.

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

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

- a. The Authority is monitoring Congressional action relative to the *Community Service / Economic Self Sufficiency* requirement of §12(c) of the Housing Act of 1937, as amended. Congress prohibited the use of FY2002 funding for implementation or enforcement of the Community Service requirement. At this time, Congress has not approved an FY2003 appropriations bill or a housing authorization bill. Pending definitive action by the Congress, the Authority will abide by the directive posted by HUD on its webpage on December 10, 2001, allowing PHAs to suspend enforcement and implementation of the Community Service program.
- b. The Authority will undertake the capital improvements outlined in its Annual Statement.
- c. The Authority will implement its flat rent program. HUD regulations granted housing authorities until October 1, 2002 to implement flat rent programs. 24 CFR §960.253(d).

## **2. Capital Improvement Needs**

[24 CFR Part 903.7 9 (g)]

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

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

B. What is the amount of the PHA's estimated or actual (if known) Capital Fund Program grant for the upcoming year? \$ 47,483. *This is an estimate based on FY2002 funding levels. The FY2003 appropriation has not been enacted at this time and the allocation to the Town of Hoosick Housing Authority is therefore unknown.*

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

D. Capital Fund Program Grant Submissions

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

The Capital Fund Program 5-Year Action Plan is provided as Attachment ny501b04

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

The Capital Fund Program Annual Statement is provided as Attachment ny501c04

## **3. Demolition and Disposition**

[24 CFR Part 903.7 9 (h)]

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

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

2. Activity Description

<b>Demolition/Disposition Activity Description</b> <b>(Not including Activities Associated with HOPE VI or Conversion Activities)</b>
1a. Development name:
1b. Development (project) number:
2. Activity type: Demolition <input type="checkbox"/> Disposition <input type="checkbox"/>
3. Application status (select one) Approved <input type="checkbox"/> Submitted, pending approval <input type="checkbox"/> Planned application <input type="checkbox"/>
4. Date application approved, submitted, or planned for submission: <u>(DD/MM/YY)</u>
5. Number of units affected:
6. Coverage of action (select one) <input type="checkbox"/> Part of the development <input type="checkbox"/> Total development
7. Relocation resources (select all that apply) <input type="checkbox"/> Section 8 for      units <input type="checkbox"/> Public housing for      units <input type="checkbox"/> Preference for admission to other public housing or section 8 <input type="checkbox"/> Other housing for      units (describe below)
8. Timeline for activity: a. Actual or projected start date of activity: b. Actual or projected start date of relocation activities: c. Projected end date of activity:

**4. Voucher Homeownership Program**

[24 CFR Part 903.7 9 (k)]

- A.  Yes  No: Does the PHA plan to administer a Section 8 Homeownership program pursuant to Section 8(y) of the U.S.H.A. of 1937, as implemented by 24 CFR part 982 ? (If “No”, skip to next component; if “yes”, describe each program using the table below (copy and complete questions for each program identified.)

**B. Capacity of the PHA to Administer a Section 8 Homeownership Program**

The PHA has demonstrated its capacity to administer the program by (select all that apply):

- Establishing a minimum homeowner downpayment requirement of at least 3 percent and requiring that at least 1 percent of the downpayment comes from the family's resources
- Requiring that financing for purchase of a home under its section 8 homeownership will be provided, insured or guaranteed by the state or Federal government; comply with secondary mortgage market underwriting requirements; or comply with generally accepted private sector underwriting standards
- Demonstrating that it has or will acquire other relevant experience (list PHA experience, or any other organization to be involved and its experience, below):

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

[24 CFR Part 903.7 (m)]

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

*The PHDEP program was not funded by the Congress in FY2002 and HUD has requested no funding for FY2003. By Notice posted on its website on November 29, 2001, HUD advised that PHAs "will no longer be required to complete [the PHDEP segment] of the annual Plan, or the PHDEP template." Notwithstanding the preceding sentence, should the Congress appropriate funds for the PHDEP program for FY2003, the Housing Authority reserves its right to amend this annual plan.*

- A.  Yes  No: Is the PHA eligible to participate in the PHDEP in the fiscal year covered by this PHA Plan?
- B. What is the amount of the PHA's estimated or actual (if known) PHDEP grant for the upcoming year?  
\$ \_\_\_\_\_
- C.  Yes  No Does the PHA plan to participate in the PHDEP in the upcoming year? If yes, answer question D. If no, skip to next component.
- D.  Yes  No: The PHDEP Plan is attached at Attachment \_\_\_\_\_

**6. Other Information**

[24 CFR Part 903.7 9 (r)]

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

- 1.  Yes  No: Did the PHA receive any comments on the PHA Plan from the Resident Advisory Board/s?
- 2. If yes, the comments are Attached at Attachment (File name)  
*No comments were made by the Resident Advisory Board.*
- 3. In what manner did the PHA address those comments? (select all that apply)
  - The PHA changed portions of the PHA Plan in response to comments  
A list of these changes is included

- Yes  No: below or  
 Yes  No: at the end of the RAB Comments in Attachment \_\_\_\_\_.
- Considered comments, but determined that no changes to the PHA Plan were necessary. An explanation of the PHA's consideration is included at the at the end of the RAB Comments in Attachment \_\_\_\_\_.
- Other: (list below)

**B. Statement of Consistency with the Consolidated Plan**

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

1. Consolidated Plan jurisdiction: (provide name here) State of New York
2. The PHA has taken the following steps to ensure consistency of this PHA Plan with the Consolidated Plan for the jurisdiction: (select all that apply)

- The PHA has based its statement of needs of families in the jurisdiction on the needs expressed in the Consolidated Plan/s.
- The PHA has participated in any consultation process organized and offered by the Consolidated Plan agency in the development of the Consolidated Plan.
- The PHA has consulted with the Consolidated Plan agency during the development of this PHA Plan.
- Activities to be undertaken by the PHA in the coming year are consistent with specific initiatives contained in the Consolidated Plan. (list such initiatives below)  
*Consistent with the objectives of the New York State Consolidated Plan (2001-2005), the Town of Hoosick Housing Authority will:*
  1. *Continue to offer affordable housing, where rent is a factor of family income. (Consistent with federal law, the Authority also allows families to elect, if they choose, to pay flat rents that are market-based.) The provision of income-based rents is consistent with the State Consolidated Plan's finding that statewide 44% of renters are unable to afford local Fair Market Rents.*
  2. *Seek a fair share increase in the Authority's section 8 tenant-based assistance program, subject to the level of the FY2003 appropriation. This is consistent with the objective of the State of New York's Plan to increase the supply of affordable housing.*
  3. *Continue to offer public housing and section 8 assistance to families with the greatest housing needs. In accordance with federal law, at least 40% of its annual turnover will be provided to households with incomes at or below 30% of area median income. In the Section 8 program, the Authority will annually provide that a minimum of 75% of its annual turnover is provided to households at similar income levels. This is consistent with the State's objectives to provide affordable housing resources to its neediest families.*

4. *Continue its efforts to preserve its current public housing stock by making appropriate capital improvements. This activity is consistent with the State Consolidated Plan's objective of preserving and maintaining the stock of affordable housing in New York that is currently available.*
5. *Maintain its public housing units at federal (HQS) and local code levels.*
6. *Continue to provide accessible housing to persons with disabilities.*
7. *Market the Housing Authority's public housing so as to make individuals and families aware of the availability of decent, safe, sanitary and affordable housing in the Town of Hoosick Falls.*

Other: (list below)

3. PHA Requests for support from the Consolidated Plan Agency

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

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

*The New York State Consolidated Plan establishes three strategic objectives, set out in summary below, that form the basis of New York's strategy to support efforts by local housing agencies:*

- (a) *Preserve and increase the supply of decent, safe and affordable housing available to all low and moderate income households, and help identify and develop available resources to assist in the development of housing.*
- (b) *Improve the ability of low and moderate income New Yorkers to access rental and homeownership opportunities.*
- (c) *Address the shelter, housing and service needs of the homeless poor and others with special needs, including the frail elderly, disabled individuals and others requiring supportive living arrangements or services.*

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

**1. Amendment and Deviation Definitions**

24 CFR Part 903.7(r)

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

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

A substantial deviation is a goal that the Housing Authority is unable to complete within the timeframe established by the Five Year Plan. Provided, however, a substantial deviation will not occur where the goal can not be accomplished due to elements that are beyond the Housing Authority's control, including but not limited to lower appropriations or HUD allocations, litigation, legislative or judicial directives or changes in HUD regulations or policy directives.

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

A significant amendment or modification of an annual plan will occur when:

- During the first nine months of the term of an annual plan, a federal statutory or regulatory change is made effective and, in the opinion of the Housing Authority, has substantial program or financial effects on the programs administered, or creates substantial obligations or administrative burdens beyond the programs under administration at the start of the Plan year, or
- Any other event that the Housing Authority deems to be a significant amendment or modification of the annual plan.

**Attachment A**  
**(ny501a04)**

**Supporting Documents Available for Review**

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

<b>List of Supporting Documents Available for Review</b>		
<b>Applicable &amp; On Display</b>	<b>Supporting Document</b>	<b>Related Plan Component</b>
X	PHA Plan Certifications of Compliance with the PHA Plans and Related Regulations	5 Year and Annual Plans
	State/Local Government Certification of Consistency with the Consolidated Plan <b>(not required for this update)</b>	5 Year and Annual Plans
X	Fair Housing Documentation Supporting Fair Housing Certifications: Records reflecting that the PHA has examined its programs or proposed programs, identified any impediments to fair housing choice in those programs, addressed or is addressing those impediments in a reasonable fashion in view of the resources available, and worked or is working with local jurisdictions to implement any of the jurisdictions’ initiatives to affirmatively further fair housing that require the PHA’s involvement.	5 Year and Annual Plans
X	Housing Needs Statement of the Consolidated Plan for the jurisdiction/s in which the PHA is located and any additional backup data to support statement of housing needs in the jurisdiction	Annual Plan: Housing Needs
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/ACOP), which includes the Tenant Selection and Assignment Plan [TSAP]	Annual Plan: Eligibility, Selection, and Admissions Policies
	Any policy governing occupancy of Police Officers in Public Housing <input type="checkbox"/> check here if included in the public housing A&O Policy	Annual Plan: Eligibility, Selection, and Admissions Policies
X	Section 8 Administrative Plan	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>Related Plan Component</b>
X	Public housing rent determination policies, including the method for setting public housing flat rents <input type="checkbox"/> check here if included in the public housing A & O Policy	Annual Plan: Rent Determination
X	Schedule of flat rents offered at each public housing development <input type="checkbox"/> check here if included in the public housing A & O Policy	Annual Plan: Rent Determination
X	Section 8 rent determination (payment standard) policies <input checked="" type="checkbox"/> check here if included in Section 8 Administrative Plan	Annual Plan: Rent Determination
X	Public housing management and maintenance policy documents, including policies for the prevention or eradication of pest infestation (including cockroach infestation)	Annual Plan: Operations and Maintenance
X	Results of latest binding Public Housing Assessment System (PHAS) Assessment	Annual Plan: Management and Operations
	Follow-up Plan to Results of the PHAS Resident Satisfaction Survey (if necessary)	Annual Plan: Operations and Maintenance and Community Service & Self-Sufficiency
X	Results of latest Section 8 Management Assessment System (SEMAP)	Annual Plan: Management and Operations
	Any required policies governing any Section 8 special housing types <input type="checkbox"/> check here if included in Section 8 Administrative Plan	Annual Plan: Operations and Maintenance
X	Public housing grievance procedures <input type="checkbox"/> check here if included in the public housing A & O Policy	Annual Plan: Grievance Procedures
X	Section 8 informal review and hearing procedures <input checked="" type="checkbox"/> check here if included in Section 8 Administrative Plan	Annual Plan: Grievance Procedures
	The HUD-approved Capital Fund/Comprehensive Grant Program Annual Statement (HUD 52837) for any active grant year	Annual Plan: Capital Needs
X	Most recent CIAP Budget/Progress Report (HUD 52825) for any active CIAP grants	Annual Plan: Capital Needs
	Approved HOPE VI applications or, if more recent, approved or submitted HOPE VI Revitalization Plans, or any other approved proposal for development of public housing	Annual Plan: Capital Needs

<b>List of Supporting Documents Available for Review</b>		
<b>Applicable &amp; On Display</b>	<b>Supporting Document</b>	<b>Related Plan Component</b>
	Self-evaluation, Needs Assessment and Transition Plan required by regulations implementing §504 of the Rehabilitation Act and the Americans with Disabilities Act. See, PIH 99-52 (HA).	Annual Plan: Capital Needs
	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
X	Approved or submitted assessments of reasonable revitalization of public housing and approved or submitted conversion plans prepared pursuant to section 202 of the 1996 HUD Appropriations Act, Section 22 of the US Housing Act of 1937, or Section 33 of the US Housing Act of 1937	Annual Plan: Conversion of Public Housing
	Approved or submitted public housing homeownership programs/plans	Annual Plan: Homeownership
	Policies governing any Section 8 Homeownership program (section _____ of the Section 8 Administrative Plan)	Annual Plan: Homeownership
	Cooperation agreement between the PHA and the TANF agency and between the PHA and local employment and training service agencies	Annual Plan: Community Service & Self-Sufficiency
	FSS Action Plan/s for public housing and/or Section 8	Annual Plan: Community Service & Self-Sufficiency
	Section 3 documentation required by 24 CFR Part 135, Subpart E	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 (PHEDEP) semi-annual performance report	Annual Plan: Safety and Crime Prevention

<b>List of Supporting Documents Available for Review</b>		
<b>Applicable &amp; On Display</b>	<b>Supporting Document</b>	<b>Related Plan Component</b>
	PHDEP-related documentation: <ul style="list-style-type: none"> <li>· Baseline law enforcement services for public housing developments assisted under the PHDEP plan;</li> <li>· Consortium agreement/s between the PHAs participating in the consortium and a copy of the payment agreement between the consortium and HUD (applicable only to PHAs participating in a consortium as specified under 24 CFR 761.15);</li> <li>· Partnership agreements (indicating specific leveraged support) with agencies/organizations providing funding, services or other in-kind resources for PHDEP-funded activities;</li> <li>· Coordination with other law enforcement efforts;</li> <li>· Written agreement(s) with local law enforcement agencies (receiving any PHDEP funds); and</li> <li>· All crime statistics and other relevant data (including Part I and specified Part II crimes) that establish need for the public housing sites assisted under the PHDEP Plan.</li> </ul>	Annual Plan: Safety and Crime Prevention
X	Policy on Ownership of Pets in Public Housing Family Developments (as required by regulation at 24 CFR Part 960, Subpart G) <input type="checkbox"/> check here if included in the public housing A & O Policy	Pet Policy
X	The results of the most recent fiscal year audit of the PHA conducted under section 5(h)(2) of the U.S. Housing Act of 1937 (42 U. S.C. 1437c(h)), the results of that audit and the PHA's response to any findings	Annual Plan: Annual Audit
	Troubled PHAs: MOA/Recovery Plan	Troubled PHAs
	Other supporting documents (optional) (list individually; use as many lines as necessary)	(specify as needed)

**Attachment B NY501b04**  
**Capital Fund Program 5-Year Action Plan**

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.

<b>CFP 5-Year Action Plan</b>		
<input type="checkbox"/> Original statement <input checked="" type="checkbox"/> Revised statement		
Development Number	Development Name (or indicate PHA wide)	
NY501	PHA Wide / Hoosack Meadows	
Description of Needed Physical Improvements or Management Improvements	Estimated Cost	Planned Start Date (HA Fiscal Year)
Repaving basketball courts, renovations to unit #16 and Management Improvement.	\$47,483	FY2003
Office Improvements, playground, apartment renovations, sewer system improvements.	\$45,000	FY2004
Water system improvements and apartment renovations.	\$45,000	FY2005
Community room improvements and operations.	\$45,000	FY2006
Landscaping, structural repairs and operations	\$45,000	FY2007
<b>Total estimated cost over next 5 years</b>	<b>\$227,483</b>	

## Attachment C NY501c04

<b>Annual Statement/Performance and Evaluation Report</b>					
<b>Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary</b>					
PHA Name: Town of Hoosick Housing Authority		Grant Type and Number Capital Fund Program: NY06P50150103 Capital Fund Program Replacement Housing Factor Grant No:			Federal FY of Grant: FY2003
<input checked="" type="checkbox"/> Original Annual Statement (revision no: )				<input type="checkbox"/> Reserve for Disasters/ Emergencies	
<input type="checkbox"/> Revised Annual Statement					
<input type="checkbox"/> Performance and Evaluation Report for Period Ending: 09/02			<input type="checkbox"/> Final Performance and Evaluation Report		
Lin e No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations	47,483			
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				

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

PHA Name: Town of Hoosick Housing Authority	Grant Type and Number Capital Fund Program: NY06P50150103 Capital Fund Program Replacement Housing Factor Grant No:	Federal FY of Grant: FY2003
---------------------------------------------	------------------------------------------------------------------------------------------------------------------------------	--------------------------------

**Original Annual Statement** (revision no: )  **Reserve for Disasters/ Emergencies**  **Revised Annual Statement**  
 **Performance and Evaluation Report for Period Ending: 09/02**  **Final Performance and Evaluation Report**

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
19	1502 Contingency				
20	Amount of Annual Grant: (sum of lines 2-19)	47,483			
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 Compliance				
23	Amount of line 20 Related to Security				
24	Amount of line 20 Related to Energy Conservation Measures				





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

PHA Name: Town of Hoosick Housing Authority	Grant Type and Number Capital Fund Program: NY06P50150102 Capital Fund Program Replacement Housing Factor Grant No:	Federal FY of Grant: FY2002
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Original Annual Statement       Reserve for Disasters/ Emergencies       Revised Annual Statement (revision no: 1)  
 Performance and Evaluation Report for Period Ending: 09/02       Final Performance and Evaluation Report

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations	25,000			
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	7,483			
11	1465.1 Dwelling Equipment— Nonexpendable				
12	1470 Nondwelling Structures	15,000			
13	1475 Nondwelling Equipment				
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1498 Mod Used for Development				
19	1502 Contingency				
20	Amount of Annual Grant: (sum of lines 2-19)	47,483			
21	Amount of line 20 Related to LBP Activities				

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

PHA Name: Town of Hoosick Housing Authority	Grant Type and Number Capital Fund Program: NY06P50150102 Capital Fund Program Replacement Housing Factor Grant No:	Federal FY of Grant: FY2002
---------------------------------------------	------------------------------------------------------------------------------------------------------------------------------	--------------------------------

Original Annual Statement       Reserve for Disasters/ Emergencies       Revised Annual Statement (revision no: 1)  
 Performance and Evaluation Report for Period Ending: 09/02       Final Performance and Evaluation Report

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
22	Amount of line 20 Related to Section 504 Compliance				
23	Amount of line 20 Related to Security				
24	Amount of line 20 Related to Energy Conservation Measures				





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

PHA Name: Town of Hoosick Housing Authority	Grant Type and Number Capital Fund Program: NY06P50150101 Capital Fund Program Replacement Housing Factor Grant No:	Federal FY of Grant: FY2001
---------------------------------------------	------------------------------------------------------------------------------------------------------------------------------	--------------------------------

Original Annual Statement       Reserve for Disasters/ Emergencies       Revised Annual Statement (revision no:      )  
 Performance and Evaluation Report for Period Ending: 09/02       Final Performance and Evaluation Report

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations	24,891		24,891	24,891
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	5,000		5,000	2,100
10	1460 Dwelling Structures				
11	1465.1 Dwelling Equipment— Nonexpendable				
12	1470 Nondwelling Structures				
13	1475 Nondwelling Equipment	20,000		20,000	12,297.08
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1498 Mod Used for Development				
19	1502 Contingency				
20	Amount of Annual Grant: (sum of lines 2-19)	49,891		49,891	39,288.08
21	Amount of line 20 Related to LBP Activities				

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

PHA Name: Town of Hoosick Housing Authority	Grant Type and Number Capital Fund Program: NY06P50150101 Capital Fund Program Replacement Housing Factor Grant No:	Federal FY of Grant: FY2001
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Original Annual Statement     
 Reserve for Disasters/ Emergencies     
 Revised Annual Statement (revision no:      )  
 Performance and Evaluation Report for Period Ending: 09/02     
 Final Performance and Evaluation Report

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
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				





**Required Attachment D:  
(ny501d04)  
Resident Member on the PHA Governing Board**

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

A. Name of resident member(s) on the governing board: *None*

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

Elected

Appointed

C. The term of appointment is (include the date term expires):

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

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

Other (explain):

*The Authority provided notice to the Resident Advisory Board of the opportunity to serve on the governing board. There was no response by the members of the Resident Advisory Board to the Notice provided. The Authority intends to provide a similar notice to the Resident Advisory Board again during the coming year.*

B. Date of next term expiration of a governing board member: 10/01/03

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

*Hon. Marilyn Douglas  
Town of Hoosick Supervisor*

**Required Attachment E :**  
**(ny501e04)**  
**Membership of the Resident Advisory Board or Boards**

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

The Resident Advisory Board for the Town of Hoosick Housing Authority consists of the following assisted persons:

*Ann Bakaitis*  
*Michelle Jepson*

**Attachment F**  
**(ny501f04)**  
**Deconcentration – Statement of Exception**

The Town of Hoosick Housing Authority owns and operates fewer than 100 public housing units.

HUD's final rule implementing the deconcentration requirement of §16(a)(3)(B) of the Housing Act of 1937, as amended, specifically excludes from its coverage Housing Authorities that own and operate fewer than 100 units of federally-assisted public housing. 24 CFR §903.2(b)(2)(i).

**Attachment G**  
**(ny501g04)**

**Voluntary Conversion – Initial Assessments**  
**(Component 10(B))**

- a. How many of the PHA’s developments are subject to the Required Initial Assessments? *One.*
- b. How many of the PHA’s developments are not subject to the Required Initial Assessments based on exemptions (e.g., elderly and/or disabled developments not general occupancy projects)? *None.*
- c. How many assessments were conducted for the PHA’s covered developments? *One.*
- d. Identify PHA developments that may be appropriate for conversion based on the Required Initial Assessments:

<b>Development Name</b>	<b>Number of Units</b>
<i>None</i>	<i>None</i>

- e. If the PHA has not completed the Required Initial Assessments, describe the status of these assessments: *Assessment completed.*