

# PHA Plans

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

Housing Authority of the County of Greene

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

## Agency Identification

**PHA Name:** Housing Authority of the County of Greene

**PHA Number:** PA045

**PHA Fiscal Year Beginning:** 01/2003

### 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**  
**PHA FISCAL YEARS 2003- 2007**  
[24 CFR Part 903.5]

**A. Mission**

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

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

**B. Goals**

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

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

- PHA Goal: Expand the supply of assisted housing  
Objectives:
- Apply for additional rental vouchers:
  - Reduce public housing vacancies:
  - Leverage private or other public funds to create additional housing opportunities:
  - Acquire or build units or developments
  - Other (list below)  
Expand listing of area landlords in handout form for assistance to Section 8 applicants.
- PHA Goal: Improve the quality of assisted housing  
Objectives:
- Improve public housing management: (PHAS score)
  - 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:
- 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)

**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)**

- 1. To continue to enforce our “One Strike” policies for residents and applicants.**
- 2. To improve and/or maintain our financial stability through aggressive rent collection and improved reserve position.**
- 3. To increase marketing measures in Public Housing.**

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

**i. Annual Plan Type:**

Select which type of Annual Plan the PHA will submit.

**Standard Plan**

**Streamlined Plan:**

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

**Troubled Agency Plan**

**ii. Executive Summary of the Annual PHA Plan**

[24 CFR Part 903.7 9 (r)]

Provide a brief overview of the information in the Annual Plan, including highlights of major initiatives and discretionary policies the PHA has included in the Annual Plan.

**Executive Summary**

The Housing Authority of the County of Greene is a medium Capital Funded agency located in Greene County, Pennsylvania. The HACG manages five developments consisting of 290 units of public housing.

The mission of the HACG is:

To provide adequate and affordable housing, economic opportunity and a suitable living environment without discrimination for low-income, very low-income families, persons with disabilities, and the elderly. The Housing Authority is committed to excellence in providing quality housing with an environment which will ensure all residents opportunity, access to resources, and the expectation that their communities will be safe, secure places to live and realize their potential.

The HACG will accomplish its mission ideals through its goals and objectives:

1. Providing decent, safe and affordable housing in our community.
2. Ensuring equal opportunity in housing for all.
3. To provide timely response to resident request for maintenance service.
4. To return vacated units with new resident in 20 days.
5. To continue to enforce our "One Strike" policies for resident and applicants.
6. To improve and/or maintain our financial stability through aggressive rent collections and improved reserve position.

The HACG's financial resources include an operating fund, capital fund, dwelling rental income and Section 8 Administrative fees which will be used to operate the

agency in the most cost effective means possible and still provide services and activities for it's residents.

The HACG has assessed the housing needs of Waynesburg and the surrounding Greene County area and has determined that it is currently, and will continue, to meet the housing needs of the community to the extent practical for a small agency. The HACG has an approved Deconcentration Policy and has utilized Local Preferences to attract and encourage applicants that can qualify for public housing. The HACG has determined that its housing strategy complies with the state of Pennsylvania's Consolidated Plan

The HACG has an updated Admissions and Continued Occupancy Policy, Dwelling Lease, and Grievance procedures to comply with all QHWRA requirements. The HACG has established a minimum rent of \$25.00 and elected to recognize its flat and ceiling rents as synonymous and chosen to select the local Fair Market Rents (FMR) to determine the dollar value of same.

The HACG has conducted a physical needs assessment to determine its modernization requirements and has developed an Annual and 5-year Action Plan to address its Capital Improvements.

The HACG has no plans to demolish or dispose of any of its properties.

The HACG has jointly addressed with the local police department to develop safety and crime prevention that adequately meets the needs of its residents.

The HACG has developed an agency wide Pet Policy that allows any family to have a pet within adopted guidelines.

The HACG has certified that it has and will continue to adhere to all Civil Rights requirements and will affirmatively further fair housing. In addition, the HACG has included a copy of its most recent fiscal year audit reports (2001) as part of the documentation made available for public review during the 45 days prior to submission of HACG's Agency Plan to HUD.

Because the HACG is a PHAS High-Performer, it was not required to respond to the following Annual Plan components.

- 5.) Operations and Management
- 6.) Grievance Procedures
- 9.) Designation of Housing
- 11.) Homeownership
- 12.) Community Service and Self-sufficiency Programs
- 13.) Safety
- 17.) Asset Management

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

[24 CFR Part 903.7 9 (r)]

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

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#### **Attachments**

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

#### Required Attachments:

- Admissions Policy for Deconcentration (pa045i01.doc)
- FY 2003 Capital Fund Program Annual Statement (pa045c01.doc)
- Final Performance and Evaluation Report PA28P045707-99 – (pa045c01.doc)
- Performance and Evaluation Report(06/30/02) PA28P045501-00 – (pa045c01.doc)
- Performance and Evaluation Report(06/30/02) PA28P045501-01 – (pa045c01.doc)
- X Annual Statement PA28P045501-02 – (pa045g01.rtf)
- X Statement of Progress Meeting the 5 Year Plan Mission and Goals (pa045j01.doc)

- X Conversion of Public Housing to Tenant-Based Assistance (pa045h01.doc)
- X Statement of Pet Policy – (pa045k01.doc)
- X Resident Advisory Board Membership – (pa045d01.doc)
- X Resident Membership of the PHA Governing Board – (pa045e01.doc)
- X Substantial Deviation and Significant Amendment/Modification to the PHA Plan – (pa045m01.doc)

Optional Attachments:

- PHA Management Organizational Chart
- FY 2000 Capital Fund Program 5 Year Action Plan
- Public Housing Drug Elimination Program (PHDEP) Plan
- Comments of Resident Advisory Board or Boards (must be attached if not included in PHA Plan text)
- Other (List below, providing each attachment name)

**Supporting Documents Available for Review**

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

<b>List of Supporting Documents Available for Review</b>		
<b>Applicable &amp; On Display</b>	<b>Supporting Document</b>	<b>Applicable Plan Component</b>
X	PHA Plan Certifications of Compliance with the PHA Plans and Related Regulations	5 Year and Annual Plans
X	State/Local Government Certification of Consistency with the Consolidated Plan	5 Year and Annual Plans
X	Fair Housing Documentation: Records reflecting that the PHA has examined its programs or proposed programs, identified any impediments to fair housing choice in those programs, addressed or is addressing those impediments in a reasonable fashion in view of the resources available, and worked or is working with local jurisdictions to implement any of the jurisdictions’ initiatives to affirmatively further fair housing that require the PHA’s involvement.	5 Year and Annual Plans
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;
	Public Housing Admissions and (Continued) Occupancy	Annual Plan: Eligibility,

<b>List of Supporting Documents Available for Review</b>		
<b>Applicable &amp; On Display</b>	<b>Supporting Document</b>	<b>Applicable Plan Component</b>
X	Policy (A&O), which includes the Tenant Selection and Assignment Plan [TSAP]	Selection, and Admissions Policies
X	Section 8 Administrative Plan	Annual Plan: Eligibility, Selection, and Admissions Policies
X	Public Housing Deconcentration and Income Mixing Documentation: 1. PHA board certifications of compliance with deconcentration requirements (section 16(a) of the US Housing Act of 1937, as implemented in the 2/18/99 <i>Quality Housing and Work Responsibility Act Initial Guidance; Notice</i> and any further HUD guidance) and 2. Documentation of the required deconcentration and income mixing analysis	Annual Plan: Eligibility, Selection, and Admissions Policies
X	Public housing rent determination policies, including the methodology for setting public housing flat rents <input checked="" type="checkbox"/> check here if included in the public housing A & O Policy	Annual Plan: Rent Determination
X	Schedule of flat rents offered at each public housing development <input checked="" type="checkbox"/> check here if included in the public housing A & O Policy	Annual Plan: Rent Determination
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
N/A	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
N/A	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
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
X	Most recent, approved 5 Year Action Plan for the Capital Fund/Comprehensive Grant Program, if not included as an attachment (provided at PHA option)	Annual Plan: Capital Needs
N/A	Approved HOPE VI applications or, if more recent, approved or submitted HOPE VI Revitalization Plans or any other approved proposal for development of public housing	Annual Plan: Capital Needs
	Approved or submitted applications for demolition and/or	Annual Plan: Demolition

<b>List of Supporting Documents Available for Review</b>		
<b>Applicable &amp; On Display</b>	<b>Supporting Document</b>	<b>Applicable Plan Component</b>
N/A	disposition of public housing	and Disposition
N/A	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	Annual Plan: Conversion of Public Housing
N/A	Approved or submitted public housing homeownership programs/plans	Annual Plan: Homeownership
N/A	Policies governing any Section 8 Homeownership program <input type="checkbox"/> check here if included in the Section 8 Administrative Plan	Annual Plan: Homeownership
N/A	Any cooperative agreement between the PHA and the TANF agency	Annual Plan: Community Service & Self-Sufficiency
N/A	FSS Action Plan/s for public housing and/or Section 8	Annual Plan: Community Service & Self-Sufficiency
N/A	Most recent self-sufficiency (ED/SS, TOP or ROSS or other resident services grant) grant program reports	Annual Plan: Community Service & Self-Sufficiency
N/A	The most recent Public Housing Drug Elimination Program (PHEDEP) semi-annual performance report for any open grant and most recently submitted PHDEP application (PHDEP Plan)	Annual Plan: Safety and Crime Prevention
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**

[24 CFR Part 903.7 9 (a)]

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

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

<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>Locatio-n</b>
Income <= 30%	8459	5	5	5	3	3	2

Housing Needs of Families in the Jurisdiction by Family Type							
Family Type	Overall	Afford-ability	Supply	Quality	Access-ibility	Size	Locatio-n
of AMI							
Income >30% but <=50% of AMI	4521	5	5	4	3	3	2
Income >50% but <80% of AMI	1021	2	2	2	2	2	2
Elderly	3815	4	5	5	4	4	5
Families with Disabilities	3433	5	5	5	5	4	5
Race/Ethnicity W	14,425	5	5	5	3	3	2
Race/Ethnicity B	115	5	5	5	3	3	2
Race/Ethnicity I	45	5	5	5	3	3	2
Race/Ethnicity H	N/A	N/A	N/A	N/A	N/A	N/A	N/A

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: 1996-2000
- U.S. Census data: the Comprehensive Housing Affordability Strategy (“CHAS”) dataset 1991
- American Housing Survey data  
Indicate year:
- Other housing market study  
Indicate year:
- Other sources: (list and indicate year of information)

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

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

Housing Needs of Families on the Waiting List	
Waiting list type: (select one)	
<input type="checkbox"/>	Section 8 tenant-based assistance
<input checked="" type="checkbox"/>	Public Housing
<input type="checkbox"/>	Combined Section 8 and Public Housing
<input type="checkbox"/>	Public Housing Site-Based or sub-jurisdictional waiting list (optional)
If used, identify which development/subjurisdiction:	

<b>Housing Needs of Families on the Waiting List</b>			
	# of families	% of total families	Annual Turnover
Waiting list total	153		64
Extremely low income <=30% AMI	136	89	
Very low income (>30% but <=50% AMI)	16	10	
Low income (>50% but <80% AMI)	1	1	
Families with children	89	58	
Elderly families	26	30.07	
Families with Disabilities	27	17.65	
Race/ethnicity W	148	96.73	
Race/ethnicity B	1	0.65	
Race/ethnicity N/S	4	2.61	
Race/ethnicity	N/A	N/A	
Characteristics by Bedroom Size (Public Housing Only)			
1BR	52	34	
2 BR	79	52	
3 BR	20	13	
4 BR	2	1	
5 BR	N/A	N/A	
5+ BR	N/A	N/A	
Is the waiting list closed (select one)? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
If yes:			
How long has it been closed (# of months)?			
Does the PHA expect to reopen the list in the PHA Plan year? <input type="checkbox"/> No <input type="checkbox"/> Yes			
Does the PHA permit specific categories of families onto the waiting list, even if generally closed? <input type="checkbox"/> No <input type="checkbox"/> Yes			

### Housing Needs of Families on the Waiting List

Waiting list type: (select one)

- Section 8 tenant-based assistance  
 Public Housing  
 Combined Section 8 and Public Housing  
 Public Housing Site-Based or sub-jurisdictional waiting list (optional)

If used, identify which development/subjurisdiction:

	# of families	% of total families	Annual Turnover
Waiting list total	28		6
Extremely low income <=30% AMI	20	71	
Very low income (>30% but <=50% AMI)	5	18	
Low income (>50% but <80% AMI)	3	11	
Families with children	11	39	
Elderly families	6	21	
Families with Disabilities	14	50	
Race/ethnicity W-N/H	28	100	
Race/ethnicity	N/A	N/A	
Race/ethnicity	N/A	N/A	
Race/ethnicity	N/A	N/A	
Characteristics by Bedroom Size (Public Housing Only)			
1BR			
2 BR			
3 BR			
4 BR			
5 BR			
5+ BR			

## Housing Needs of Families on the Waiting List

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

If yes:

How long has it been closed (# of months)? 0.2 mos.

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

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

### C. Strategy for Addressing Needs

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

#### (1) Strategies

**Need: Shortage of affordable housing for all eligible populations**

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

Select all that apply

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

**Strategy 2: Increase the number of affordable housing units by:**

Select all that apply

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

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

**Strategy 1: Target available assistance to families at or below 30 % of AMI**

Select all that apply

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

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

**Strategy 1: Target available assistance to families at or below 50% of AMI**

Select all that apply

- Employ admissions preferences aimed at families who are working
- Adopt rent policies to support and encourage work
- Other: (list below)

**Need: Specific Family Types: The Elderly**

**Strategy 1: Target available assistance to the elderly:**

Select all that apply

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

**Need: Specific Family Types: Families with Disabilities**

**Strategy 1: Target available assistance to Families with Disabilities:**

Select all that apply

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

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

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

Select if applicable

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

**Strategy 2: Conduct activities to affirmatively further fair housing**

Select all that apply

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

**Other Housing Needs & Strategies: (list needs and strategies below)**

**(2) Reasons for Selecting Strategies**

Of the factors listed below, select all that influenced the PHA's selection of the strategies it will pursue:

- Funding constraints
- Staffing constraints
- Limited availability of sites for assisted housing
- Extent to which particular housing needs are met by other organizations in the community
- Evidence of housing needs as demonstrated in the Consolidated Plan and other information available to the PHA
- Influence of the housing market on PHA programs

- Community priorities regarding housing assistance
- Results of consultation with local or state government
- Results of consultation with residents and the Resident Advisory Board
- Results of consultation with advocacy groups
- Other: (list below)

## **2. Statement of Financial Resources**

[24 CFR Part 903.7 9 (b)]

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

<b>Financial Resources: Planned Sources and Uses</b>		
<b>Sources</b>	<b>Planned \$</b>	<b>Planned Uses</b>
<b>1. Federal Grants (FY 2003 grants)</b>		
a) Public Housing Operating Fund	320,683	
b) Public Housing Capital Fund	510,237	
c) HOPE VI Revitalization	N/A	
d) HOPE VI Demolition	N/A	
e) Annual Contributions for Section 8 Tenant-Based Assistance	106,686	
f) Public Housing Drug Elimination Program (including any Technical Assistance funds)	N/A	
g) Resident Opportunity and Self-Sufficiency Grants	N/A	
h) Community Development Block Grant	N/A	
i) HOME	N/A	
Other Federal Grants (list below)	00.00	
<b>2. Prior Year Federal Grants (unobligated funds only) (list below)</b>		
501-01	82,590	
<b>3. Public Housing Dwelling Rental Income</b>		

Financial Resources: Planned Sources and Uses		
Sources	Planned \$	Planned Uses
	611,639	
<b>4. Other income</b> (list below)		
Interest, Resident Charges, Laundry Proceeds	52,924	
<b>5. Non-federal sources</b> (list below)	N/A	
<b>Total resources</b>	1,684,759	

### **3. PHA Policies Governing Eligibility, Selection, and Admissions**

[24 CFR Part 903.7 9 (c)]

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

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

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

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

- When families are within a certain number of being offered a unit: (state number) - 3
- When families are within a certain time of being offered a unit: (state time)
- Other: (describe)

b. Which non-income (screening) factors does the PHA use to establish eligibility for admission to public housing (select all that apply)?

- Criminal or Drug-related activity
- Rental history
- Housekeeping
- Other (describe)

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

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

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

**(2) Waiting List Organization**

- a. Which methods does the PHA plan to use to organize its public housing waiting list (select all that apply)

- Community-wide list  
 Sub-jurisdictional lists  
 Site-based waiting lists  
 Other (describe)

- b. Where may interested persons apply for admission to public housing?

- PHA main administrative office  
 PHA development site management office  
 Other (list below)

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

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

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 transfers take precedence over new admissions? (list below)

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

c. Preferences

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

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

Former Federal preferences:

Involuntary Displacement (Disaster, Government Action, Action of Housing

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

Other preferences: (select below)

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

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

#### 1 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)

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

4. Relationship of preferences to income targeting requirements:

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

**(5) Occupancy**

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

- The PHA-resident lease  
 The PHA's Admissions and (Continued) Occupancy policy  
 PHA briefing seminars or written materials  
 Other source (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  
 Any time family composition changes  
 At family request for revision  
 Other (list)

**(6) Deconcentration and Income Mixing *DISREGARDED AND REPLACED WITH REQUIRED ATTACHMENT (pa045i01.doc)***

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

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

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

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

- Employing waiting list “skipping” to achieve deconcentration of poverty or income mixing goals at targeted developments  
If selected, list targeted developments below:
- Employing new admission preferences at targeted developments  
If selected, list targeted developments below:
- Other (list policies and developments targeted below)

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

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

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

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

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

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

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

## **B. Section 8**

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

### **(1) Eligibility**

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

**(2) Waiting List Organization**

- a. With which of the following program waiting lists is the section 8 tenant-based assistance waiting list merged? (select all that apply)
- None
  - Federal public housing
  - Federal moderate rehabilitation
  - Federal project-based certificate program
  - Other federal or local program (list below)
- b. Where may interested persons apply for admission to section 8 tenant-based assistance? (select all that apply)
- PHA main administrative office
  - Other (list below)

**(3) Search Time**

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

If yes, state circumstances below:

If verified circumstances are consistent with the Section 8 Administrative Plan.

**(4) Admissions Preferences**

- a. Income targeting

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

- b. Preferences

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

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

Former Federal preferences

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

Other preferences (select all that apply)

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

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

1. Date and Time

Former Federal preferences

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

Other preferences (select all that apply)

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

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

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

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

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

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

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

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

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

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

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

- Through published notices
- Other (list below)

**4. PHA Rent Determination Policies**

[24 CFR Part 903.7 9 (d)]

**A. Public Housing**

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

**(1) Income Based Rent Policies**

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

a. Use of discretionary policies: (select one)

- The PHA will not employ any discretionary rent-setting policies for income based rent in public housing. Income-based rents are set at the higher of 30% of adjusted monthly income, 10% of unadjusted monthly income, 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
- Other (describe below)

e. Ceiling rents

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

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

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

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

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

- Market comparability study
- Fair market rents (FMR)
- 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 (list below)

f. Rent re-determinations:

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

- Never
- At family option
- Any time the family experiences an income increase
- Any time a family experiences an income increase above a threshold amount or percentage: (if selected, specify threshold)\$40/month
- Other (list below)

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

## **(2) Flat Rents**

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

- The section 8 rent reasonableness study of comparable housing  
 Survey of rents listed in local newspaper  
 Survey of similar unassisted units in the neighborhood  
 Other (list/describe below)

Per guidelines, this PHA has elected to use ceiling/flat rents synonymously.

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

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

### **(1) Payment Standards**

Describe the voucher payment standards and policies.

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

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

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

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

- c. If the payment standard is higher than FMR, why has the PHA chosen this level?  
(select all that apply)
- FMRs are not adequate to ensure success among assisted families in the PHA's segment of the FMR area
  - Reflects market or submarket
  - To increase housing options for families
  - Other (list below)
- d. How often are payment standards reevaluated for adequacy? (select one)
- Annually
  - Other (list below)
- e. What factors will the PHA consider in its assessment of the adequacy of its payment standard? (select all that apply)
- Success rates of assisted families
  - Rent burdens of assisted families
  - Other (list below)

**(2) Minimum Rent**

- a. What amount best reflects the PHA's minimum rent? (select one)
- \$0
  - \$1-\$25
  - \$26-\$50
- b.  Yes  No: Has the PHA adopted any discretionary minimum rent hardship exemption policies? (if yes, list below)

**5. Operations and Management –EXEMPT-High Performer**

[24 CFR Part 903.7 9 (e)]

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

**A. PHA Management Structure**

Describe the PHA's management structure and organization.

(select one)

- An organization chart showing the PHA's management structure and organization is attached.
- 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		
Section 8 Vouchers		
Section 8 Certificates		
Section 8 Mod Rehab		
Special Purpose Section 8 Certificates/Vouchers (list individually)		
Public Housing Drug Elimination Program (PHDEP)		
Other Federal Programs(list individually)		

**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)

(2) Section 8 Management: (list below)

**6. PHA Grievance Procedures – EXEMPT – High Performer**

[24 CFR Part 903.7 9 (f)]

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

**A. Public Housing**

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

If yes, list additions to federal requirements below:

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

- PHA main administrative office
- PHA development management offices
- Other (list below)

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

1.  Yes  No: Has the PHA established informal review procedures for applicants to the Section 8 tenant-based assistance program and informal hearing procedures for families assisted by the Section 8 tenant-based assistance program in addition to federal requirements found at 24 CFR 982?

If yes, list additions to federal requirements below:

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

- PHA main administrative office
- Other (list below)

**7. Capital Improvement Needs**

[24 CFR Part 903.7 9 (g)]

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

**A. Capital Fund Activities**

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

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

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

Select one:

The Capital Fund Program Annual Statement is provided as an attachment to the PHA Plan at Attachment(s) pa045c01.doc and pa045g01.rtf.

-or-

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

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

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

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

b. If yes to question a, select one:

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

-or-

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

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

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

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

1. Development name:

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

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

Yes  No: c) Does the PHA plan to apply for a HOPE VI Revitalization grant in the Plan year?

If yes, list development name/s below:

Yes  No: d) Will the PHA be engaging in any mixed-finance development activities for public housing in the Plan year?

If yes, list developments or activities below:

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

If yes, list developments or activities below:

## **8. Demolition and Disposition**

[24 CFR Part 903.7 9 (h)]

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

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

### 2. Activity Description

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

<b>Demolition/Disposition Activity Description</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: (DD/MM/YY)
5. Number of units affected:
6. Coverage of action (select one) <input type="checkbox"/> Part of the development <input type="checkbox"/> Total development
7. Timeline for activity: a. Actual or projected start date of activity: b. Projected end date of activity:

**9. Designation of Public Housing for Occupancy by Elderly Families or Families with Disabilities or Elderly Families and Families with Disabilities – EXEMPT – High Performer**

[24 CFR Part 903.7 9 (i)]

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

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

2. Activity Description

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

**Designation of Public Housing Activity Description**

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

## **10. Conversion of Public Housing to Tenant-Based Assistance**

[24 CFR Part 903.7 9 (j)]

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

### **A. Assessments of Reasonable Revitalization Pursuant to section 202 of the HUD FY 1996 HUD Appropriations Act**

1.  Yes  No: Have any of the PHA's developments or portions of developments been identified by HUD or the PHA as covered under section 202 of the HUD FY 1996 HUD Appropriations Act? (If "No", skip to component 11; if "yes", complete one activity description for each identified development, unless eligible to complete a streamlined submission. PHAs completing streamlined submissions may skip to component 11.) See attachment – pa045h01.doc

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

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

**11. Homeownership Programs Administered by the PHA – EXEMPT – High Performer**

[24 CFR Part 903.7 9 (k)]

**A. Public Housing**

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

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

2. Activity Description

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

<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"/> HOPE I <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)

- Part of the development  
 Total development

## B. Section 8 Tenant Based Assistance

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

2. Program Description:

a. Size of Program

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

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

- 25 or fewer participants  
 26 - 50 participants  
 51 to 100 participants  
 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 – EXEMPT – High Performer**

[24 CFR Part 903.7 9 (I)]

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

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

1. Cooperative agreements:

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

If yes, what was the date that agreement was signed? 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 homeownership option participation
- Preference/eligibility for section 8 homeownership option participation
- Other policies (list below)

b. Economic and Social self-sufficiency programs



### 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>
--

### **13. PHA Safety and Crime Prevention Measures – EXEMPT-High Performer**

[24 CFR Part 903.7 9 (m)]

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

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

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

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

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

- Safety and security survey of residents
- Analysis of crime statistics over time for crimes committed “in and around” public housing authority
- Analysis of cost trends over time for repair of vandalism and removal of graffiti
- Resident reports
- PHA employee reports
- Police reports
- Demonstrable, quantifiable success with previous or ongoing anticrime/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 plans to undertake in the next PHA fiscal year**

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

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

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, officer in residence)

- Police regularly testify in and otherwise support eviction cases
  - Police regularly meet with the PHA management and residents
  - Agreement between PHA and local law enforcement agency for provision of above-baseline law enforcement services
  - Other activities (list below)
2. Which developments are most affected? (list below)

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

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

- Yes  No: Is the PHA eligible to participate in the PHDEP in the fiscal year covered by this PHA Plan?
- Yes  No: Has the PHA included the PHDEP Plan for FY 2000 in this PHA Plan?
- Yes  No: This PHDEP Plan is an Attachment. (Attachment Filename: \_\_\_\_)

**14. RESERVED FOR PET POLICY**

[24 CFR Part 903.7 9 (n)]

REQUIRED ATTACHMENT (pa045k01.doc)

**15. Civil Rights Certifications**

[24 CFR Part 903.7 9 (o)]

Civil rights certifications are included in the PHA Plan Certifications of Compliance with the PHA Plans and Related Regulations and have been previously mailed to the PHA field office. The PHA has retained a copy of same as a supporting document to this PHA Plan.

**16. Fiscal Audit**

[24 CFR Part 903.7 9 (p)]

- 1.  Yes  No: Is the PHA required to have an audit conducted under section 5(h)(2) of the U.S. Housing Act of 1937 (42 U.S.C. 1437c(h))?  
(If no, skip to component 17.)
- 2.  Yes  No: Was the most recent fiscal audit submitted to HUD?
- 3.  Yes  No: Were there any findings as the result of that audit?
- 4.  Yes  No: If there were any findings, do any remain unresolved?  
If yes, how many unresolved findings remain? \_\_\_\_

5.  Yes  No: Have responses to any unresolved findings been submitted to HUD?  
If not, when are they due (state below)?

## **17. PHA Asset Management – EXEMPT- High Performer**

[24 CFR Part 903.7 9 (q)]

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

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

## **18. Other Information**

[24 CFR Part 903.7 9 (r)]

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

1.  Yes  No: Did the PHA receive any comments on the PHA Plan from the Resident Advisory Board/s?
2. If yes, the comments are: (if comments were received, the PHA **MUST** select one)
- Attached at Attachment (File name)
  - Provided below:
3. In what manner did the PHA address those comments? (select all that apply)
- Considered comments, but determined that no changes to the PHA Plan were necessary.

- The PHA changed portions of the PHA Plan in response to comments  
List changes below:
- Other: (list below)

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

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

3. Description of Resident Election Process

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

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

b. Eligible candidates: (select one)

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

c. Eligible voters: (select all that apply)

- All adult recipients of PHA assistance (public housing and section 8 tenant-based assistance)
- Representatives of all PHA resident and assisted family organizations
- Other (list)

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

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

1. Consolidated Plan jurisdiction: State of Pennsylvania.

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

- The PHA has based its statement of needs of families in the jurisdiction on the needs expressed in the Consolidated Plan/s.
- The PHA has participated in any consultation process organized and offered by the Consolidated Plan agency in the development of the Consolidated Plan.
- The PHA has consulted with the Consolidated Plan agency during the development of this PHA Plan.
- Activities to be undertaken by the PHA in the coming year are consistent with the initiatives contained in the Consolidated Plan. (list below)
- Other: (list below)

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

The Consolidated Plan of the State of Pennsylvania has established the following housing priorities to address housing needs. These are also the priorities of the Housing Authority of the County of Greene.

1. Maintain the supply of decent, safe, and sanitary rental housing that is affordable for low, very low, and moderate income families.
2. Rehabilitation of existing housing that is occupied by low and very low income families.

**C. Substantial Deviation and Significant Amendment/Modification**

See attachment – pa045m01.doc

**Attachments**

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

# PHA Plan Table Library

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

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

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

Original Annual Statement

Line No.	Summary by Development Account	Total Estimated Cost
1	Total Non-CGP Funds	
2	1406 Operations	
3	1408 Management Improvements	
4	1410 Administration	
5	1411 Audit	
6	1415 Liquidated Damages	
7	1430 Fees and Costs	
8	1440 Site Acquisition	
9	1450 Site Improvement	
10	1460 Dwelling Structures	
11	1465.1 Dwelling Equipment-Nonexpendable	
12	1470 Nondwelling Structures	
13	1475 Nondwelling Equipment	
14	1485 Demolition	
15	1490 Replacement Reserve	
16	1492 Moving to Work Demonstration	
17	1495.1 Relocation Costs	
18	1498 Mod Used for Development	
19	1502 Contingency	
20	<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	

**Annual Statement  
 Capital Fund Program (CFP) Part II: Supporting Table**

Development Number/Name HA-Wide Activities	General Description of Major Work Categories	Development Account Number	Total Estimated Cost

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

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

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

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

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



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

<b>PHA Name:</b> HOUSING AUTHORITY OF THE COUNTY OF GREENE	<b>Grant Type and Number</b> Capital Fund Program: PA28PO45707-99 Capital Fund Program Replacement Housing Factor Grant No:	<b>Federal FY of Grant:</b>  1999
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Original Annual Statement Performance and Evaluation Report for Period Ending:  Reserve for Disasters/ Emergencies  Revised Annual Statement (revision no: )  
 Final Performance and Evaluation Report

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations	0	3,013.02	3,013.02	3,013.02
3	1408 Management Improvements	3,000	0	0	0
4	1410 Administration	32,500	32,670.19	32,670.19	32,670.19
5	1411 Audit				
6	1415 liquidated Damages				
7	1430 Fees and Costs	17,000	23,815.00	23,815.00	23,815.00
8	1440 Site Acquisition				
9	1450 Site Improvement	230,770	202,761.89	202,761.89	202,761.89
10	1460 Dwelling Structures	150,000	174,129.85	174,129.85	174,129.85
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Nondwelling Structures	20,000	16,880.05	16,880.05	16,880.05
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)	453,270	453,270.00	453,270.00	453,270.00
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				

Annual Statement/Performance and Evaluation Report				
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary				
PHA Name: HOUSING AUTHORITY OF THE COUNTY OF GREENE		Grant Type and Number Capital Fund Program: PA28PO45707-99 Capital Fund Program Replacement Housing Factor Grant No:		Federal FY of Grant:  1999
<input type="checkbox"/> Original Annual Statement		<input type="checkbox"/> Reserve for Disasters/ Emergencies <input type="checkbox"/> Revised Annual Statement (revision no: )		
Performance and Evaluation Report for Period Ending:		X Final Performance and Evaluation Report		
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost
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 II: Supporting Pages**

PHA Name: HOUSING AUTHORITY OF THE COUNTY OF GREENE		Grant Type and Number Capital Fund Program #: PA28PO45707-99 Capital Fund Program Replacement Housing Factor #:			Federal FY of Grant: 1999			
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work
				Original	Revised	Funds Obligated	Funds Expended	
PA28PO45-001								
WAYNESBURG								
HOUSING	Replace water lines (scattered sites)	1450		76,000	0	0	0	Deleted
	Replace mailboxes (elderly hi-rise)	1450		3,000	3,227.48	3,227.48	3,227.48	Completed
	Replace playground equipment	1450		15,000	0	0	0	Future CFP
	Replace roof & fence (garbage area)	1450		6,000	0	0	0	Deleted
	Replace entry system (elderly hi-rise)	1459		10,000	0	0	0	Used non-CFP
	Installation of window awnings (elderly hi-rise)	1450		0	48,440.00	48,440.00	48,440.00	2003 CFP Completed
	Replace hwt (apt. units)	1460		0	6,000.00	6,000.00	6,000.00	2000 CFP Completed
	TOTAL PA28PO45-001			110,000	57,667.48	57,667.48	57,667.48	



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

PHA Name: HOUSING AUTHORITY OF THE COUNTY OF GREENE		Grant Type and Number Capital Fund Program #: PA28PO45707-99 Capital Fund Program Replacement Housing Factor #:			Federal FY of Grant: 1999			
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work
				Original	Revised	Funds Obligated	Funds Expended	
PA28PO45-004								
GRANDVIEW								
APARTMENTS	Replace kit. cabinets, floor tile, base, closet doors, sm.det., handrails	1460		78,000	121,036.85	121,036.85	121,036.85	Completed
	Replace playground equipment	1450		10,770	5,510.86	5,510.86	5,510.86	Completed
	Replace apt. bldg. Siding	1450		0	19,508.40	19,508.40	19,508.40	Final/705
	Resurface parking lots	1450		0	44,579.72	44,579.72	44,579.72	Completed
	Re-roof apt. complex	1460		0	10,460.00	10,460.00	10,460.00	Final/706
	TOTAL PA28PO45-004			88,770	201,095.83	201,095.83	201,095.83	

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

PHA Name: HOUSING AUTHORITY OF THE COUNTY OF GREENE		Grant Type and Number Capital Fund Program #: PA28PO45707-99 Capital Fund Program Replacement Housing Factor #:			Federal FY of Grant: 1999			
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work
				Original	Revised	Funds Obligated	Funds Expended	
PA28PO45-005								
WOODSIDE								
MANOR	A&E Services	1430		17,000	23,815.00	23,815.00	23,815.00	
	Sub-Total			17,000	23,815.00	23,815.00	23,815.00	
	Re-roof apt. complex	1450		100,000	62,500.00	62,500.00	62,500.00	Completed
	Upgrade kitchens/504	1460		0	25,607.00	25,607.00	25,607.00	Completed
	Provide security lighting	1450		10,000	16,714.79	16,714.79	16,714.79	Completed
	Replace resident mailboxes	1450		0	2,280.64	2,280.64	2,280.64	Completed
	Re-key apt. building	1460		0	3,474.00	3,474.00	3,474.00	2003 CFP Completed
	Replace hwt (apt. units)	1460		0	7,552.00	7,552.00	7,552.00	Completed
	Sub-Total			110,000	118,128.43	118,128.43	118,128.43	
	TOTAL PA28PO45-005			127,000	141,943.43	141,943.43	141,943.43	

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

PHA Name: HOUSING AUTHORITY OF THE COUNTY OF GREENE		Grant Type and Number Capital Fund Program #: PA28PO45707-99 Capital Fund Program Replacement Housing Factor #:			Federal FY of Grant: 1999			
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work
				Original	Revised	Funds Obligated	Funds Expended	
PHA WIDE								
ADMINISTRATI	Operations	1406		0	3,013.02	3,013.02	3,013.02	
	Management Improvements	1408		3,000	0	0	0	Future CFP
	Sub-Total			3,000	3,013.02	3,013.02	3,013.02	
	Salaries/coordinate CFP	1410		25,000	25,000.00	25,000.00	25,000.00	Completed
	Fringe benefits	1410		4,300	4,300.00	4,300.00	4,300.00	Completed
	Advertisements	1410		3,200	3,370.19	3,370.19	3,370.19	Completed
	Sub-Total			32,500	32,670.19	32,670.19	32,670.19	
	TOTAL ADMINISTRATION			35,500	35,683.21	35,683.21	35,683.21	
	GRAND TOTAL PA28PO45707-99			453,270	453,270.00	453,270.00	453,270.00	

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

PHA Name: HOUSING AUTHORITY OF THE COUNTY OF GREENE		Grant Type and Number Capital Fund Program #: PA28PO45707-99 Capital Fund Program Replacement Housing Factor #:			Federal FY of Grant: 1999			
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work
				Original	Revised	Funds Obligated	Funds Expended	



## 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.

CFP 5-Year Action Plan		
<input type="checkbox"/> Original statement <input type="checkbox"/> Revised statement		
Development Number	Development Name (or indicate PHA wide)	
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/Performance and Evaluation Report**  
**Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary**

<b>PHA Name: HOUSING AUTHORITY OF THE COUNTY OF GREENE</b>	<b>Grant Type and Number</b> Capital Fund Program: PA28PO45501-00 Capital Fund Program Replacement Housing Factor Grant No:	<b>Federal FY of Grant:</b>  <b>2000</b>
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Original Annual Statement       Reserve for Disasters/ Emergencies       Revised Annual Statement (revision no:    ) )  
 Performance and Evaluation Report for Period Ending: 06/30/2002       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		2,209.44	2,209.44	00.00
3	1408 Management Improvements	10,000	5,412.92	5,412.92	5,412.92
4	1410 Administration	36,500	36,000.69	36,000.69	33,372.08
5	1411 Audit				
6	1415 liquidated Damages				
7	1430 Fees and Costs	30,100	30,100.00	30,100.00	30,100.00
8	1440 Site Acquisition				
9	1450 Site Improvement	255,623	362,821.25	362,821.25	342,090.66
10	1460 Dwelling Structures	179,000	73,936.40	73,936.40	73,936.40
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Nondwelling Structures	15,000	15,742.30	15,742.30	13,239.56
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)	526,223	526,223.00	526,223.00	498,151.62
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 Compliance				

Annual Statement/Performance and Evaluation Report				
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary				
PHA Name: HOUSING AUTHORITY OF THE COUNTY OF GREENE		Grant Type and Number Capital Fund Program: PA28PO45501-00 Capital Fund Program Replacement Housing Factor Grant No:		Federal FY of Grant:  2000
<input type="checkbox"/> Original Annual Statement		<input type="checkbox"/> Reserve for Disasters/ Emergencies		<input type="checkbox"/> Revised Annual Statement (revision no: )
<input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 06/30/2002		<input type="checkbox"/> Final Performance and Evaluation Report		
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost
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 II: Supporting Pages**

PHA Name: HOUSING AUTHORITY OF THE COUNTY OF GREENE		Grant Type and Number Capital Fund Program #: PA28PO45501-00 Capital Fund Program Replacement Housing Factor #:			Federal FY of Grant: 2000			
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work
				Original	Revised	Funds Obligated	Funds Expended	
PA28PO45-001								
WAYNESBURG								
HOUSING	A&E Services	1430		5,100	5,100.00	5,100.00	5,100.00	
	Sub-total			5,100	5,100.00	5,100.00	5,100.00	
	Relocate telephone cable/electrical box	1450		0	3,385.30	3,385.30	3,385.30	Completed
	Replace sidewalks (elderly site)	1450		32,000	32,000.00	32,000.00	32,000.00	Completed
	Replact hwt (apt. units)	1460		9,000	0	0	0	Future CFP
	Replace hallway carpet	1460		8,000	9,239.00	9,239.00	9,239.00	Completed
	Replace sidewalks (family units)	1450		35,000	40,666.72	40,666.72	40,666.72	Completed
	Replace exterior maintenance door	1460		0	1,928.00	1,928.00	1,928.00	Completed
	Sub-total			84,000	87,219.02	87,219.02	87,219.02	
	TOTAL PA28PO45-001			89,100	92,319.02	92,319.02	92,319.02	

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

PHA Name: HOUSING AUTHORITY OF THE COUNTY OF GREENE		Grant Type and Number Capital Fund Program #: PA28PO45501-00 Capital Fund Program Replacement Housing Factor #:			Federal FY of Grant: 2000			
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work
				Original	Revised	Funds Obligated	Funds Expended	
PA28PO45-002	WAYNE VILLAGE							
	A&E Services	1430		6,000	6,000.00	6,000.00	6,000.00	
	Sub-total			6,000	6,000.00	6,000.00	6,000.00	
	Electrical Upgrade (1)	1450			3,948.59	3,948.59	3,948.59	Completed
	Resurface/seal pk. Lots	1450		26,500	26,500.00	26,500.00	25,734.60	
	Replace sidewalks	1450		40,000	39,059.00	39,059.00	39,059.00	Completed
	Replace Garbage Pits	1450		0	15,515.95	15,515.95	15,515.95	Completed
	Sub-total			66,500	85,023.54	85,023.54	84,258.14	
	TOTAL PA28PO45-002			72,500	91,023.54	91,023.54	90,258.14	

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

PHA Name: HOUSING AUTHORITY OF THE COUNTY OF GREENE		Grant Type and Number Capital Fund Program #: PA28PO45501-00 Capital Fund Program Replacement Housing Factor #:			Federal FY of Grant: 2000			
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work
				Original	Revised	Funds Obligated	Funds Expended	
PA28PO45-003								
THOMPSON								
GARDENS	A&E Services	1430		9,000	9,000.00	9,000.00	9,000.00	
	Sub-total			9,000	9,000.00	9,000.00	9,000.00	
	Paving/Parking Lot	1450		0	3,250.00	3,250.00	0	Near Completion
	Remodel apartments	1460		63,000	0	0	0	
	Replace sidewalks	1450		21,241	21,241.00	21,241.00	21,241.00	Completed
	Provide security lighting	1450		0	49,547.81	49,547.81	40,022.39	Near Completion
	Remodel Com. Rm.	1470		0	15,742.30	15,742.30	13,239.56	Near Completion
	Sub-total			84,241	89,781.11	89,781.11	74,502.95	
	TOTAL PA28PO45-003			93,241	98,781.11	98,781.11	83,502.95	

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

PHA Name: HOUSING AUTHORITY OF THE COUNTY OF GREENE		Grant Type and Number Capital Fund Program #: PA28PO45501-00 Capital Fund Program Replacement Housing Factor #:			Federal FY of Grant: 2000			
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work
				Original	Revised	Funds Obligated	Funds Expended	
PA28PO45-004								
GRANDVIEW								
APARTMENTS	A&E Services	1430		8,000	8,000.00	8,000.00	8,000.00	
	Sub-total			8,000	8,000.00	8,000.00	8,000.00	
	Remodel apt. units	1460		39,000	27,479.30	27,479.30	27,479.30	Near Completion
	Replace sidewalks	1450		45,300	45,300.00	45,300.00	45,300.00	Completed
	Resurface pk. Lots/roadway	1450		48,500	0	0	0	1999 CFP
	Sub-Total			132,800	72,779.30	72,779.30	72,779.30	
	TOTAL PA28PO45-004			140,800	80,779.30	80,779.30	80,779.30	

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

PHA Name: HOUSING AUTHORITY OF THE COUNTY OF GREENE		Grant Type and Number Capital Fund Program #: PA28PO45501-00 Capital Fund Program Replacement Housing Factor #:			Federal FY of Grant: 2000			
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work
				Original	Revised	Funds Obligated	Funds Expended	
PA28PO45-005								
WOODSIDE								
MANOR	A&E Services	1430		2,000	2,000.00	2,000.00	2,000.00	
	Sub-total			2,000	2,000.00	2,000.00	2,000.00	
	Provide patio cover	1450		7,082	0	0	0	Future CFP
	Replace apt. furnaces	1460		50,000	35,290.10	35,290.10	35,290.10	Completed
	Replace hwt	1460		10,000	0	0	0	1999 CFP
	Remodel Com. Rm.	1470		15,000	0	0	0	Future CFP
	Provide additional pk. lots	1450		0	53,415.28	53,415.28	46,225.51	Near Completion
	Provide security lighting	1450		0	28,991.60	28,991.60	28,991.60	Completed
	Sub-total			82,082	117,696.98	117,696.98	110,507.21	
	TOTAL PA28PO45-005			84,082	119,696.98	119,696.98	112,507.21	

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

PHA Name: HOUSING AUTHORITY OF THE COUNTY OF GREENE		Grant Type and Number Capital Fund Program #: PA28PO45501-00 Capital Fund Program Replacement Housing Factor #:			Federal FY of Grant: 2000			
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work
				Original	Revised	Funds Obligated	Funds Expended	
PHA WIDE	Operations	1406		0	2,209.44	2,209.44	0	
ADMINISTRATI	Maintenance review	1408		5,000	0	0	0	
	Work stations, network/adm.	1408		5,000	5,412.92	5,412.92	5,412.92	
	Sub-Total			10,000	7,622.36	7,622.36	5,412.92	
	Salaries/coordinate CFP	1410		27,300	27,300.00	27,300.00	24,671.39	
	Fringe benefits	1410		6,000	6,000.00	6,000.00	6,000.00	
	Advertisements	1410		3,200	2,700.69	2,700.69	2,700.69	
	Sub-total			36,500	36,000.69	36,000.69	33,372.08	
	TOTAL ADMINISTRATION			46,500	43,623.05	43,623.05	38,785.00	

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

PHA Name: HOUSING AUTHORITY OF THE COUNTY OF GREENE		Grant Type and Number Capital Fund Program #: PA28PO45501-00 Capital Fund Program Replacement Housing Factor #:			Federal FY of Grant: 2000			
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work
				Original	Revised	Funds Obligated	Funds Expended	
	GRAND TOTAL PA28PO4550100			526,223	526,223.00	526,223.00	498,151.62	



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

<b>PHA Name: HOUSING AUTHORITY OF THE COUNTY OF GREENE</b>	<b>Grant Type and Number</b> Capital Fund Program: PA28PO45501-01 Capital Fund Program Replacement Housing Factor Grant No:	<b>Federal FY of Grant:</b>  2001
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Original Annual Statement       Reserve for Disasters/ Emergencies       Revised Annual Statement (revision no:    ) )  
**X Performance and Evaluation Report for Period Ending:06/30/2002      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				
3	1408 Management Improvements	6,000	6,000.00	0	0
4	1410 Administration	32,500	32,500.00	29,554.38	2,562.84
5	1411 Audit				
6	1415 liquidated Damages				
7	1430 Fees and Costs	31,000	31,000.00	31,000.00	18,167.82
8	1440 Site Acquisition				
9	1450 Site Improvement	95,366	340,050.00	340,050.00	22,019.65
10	1460 Dwelling Structures	313,581	33,409.30	13,525.40	13,525.40
11	1465.1 Dwelling Equipment—Nonexpendable	58,500	58,500.00	4,740.00	4,740.00
12	1470 Nondwelling Structures		35,487.70	35,487.70	0
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**

<b>PHA Name: HOUSING AUTHORITY OF THE COUNTY OF GREENE</b>	<b>Grant Type and Number</b> Capital Fund Program: PA28PO45501-01 Capital Fund Program Replacement Housing Factor Grant No:	<b>Federal FY of Grant:</b>  2001
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Original Annual Statement
  Reserve for Disasters/ Emergencies
  Revised Annual Statement (revision no: )

Performance and Evaluation Report for Period Ending:06/30/2002
  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)	536,947	536,947.00	454,357.48	61,015.71
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 II: Supporting Pages**

PHA Name: HOUSING AUTHORITY OF THE COUNTY OF GREENE		Grant Type and Number Capital Fund Program #: PA28PO45501-01 Capital Fund Program Replacement Housing Factor #:			Federal FY of Grant: 2001			
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work
				Original	Revised	Funds Obligated	Funds Expended	
PA28PO45-001								
WAYNESBURG								
HOUSING	A&E Services	1430		11,000	11,000.00	11,000.00	11,000.00	
	Replace apartment carpet w/flooring (hi-rise)	1460		80,000	0	0	0	Used non-CFP
	Replace venting for furnace/HWT (scattered sites)	1460		25,000	0	0	0	Future CFP
	Replace baseboard heating units	1460		90,341	33,409.30	13,525.40	13,525.40	Work in progress/as vacancies occur
	Provide additional landscaping	1450		0	1,250.00	1,250.00	1,250.00	Completed
	Replace apartment refrigerators	1465	80	32,000	32,000.00	4,740.00	4,740.00	On going
	TOTAL PA28PO45-001			238,341	77,659.30	30,515.40	30,515.40	









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

PHA Name: HOUSING AUTHORITY OF THE COUNTY OF GREENE		Grant Type and Number Capital Fund Program #: PA28PO45501-01 Capital Fund Program Replacement Housing Factor #:			Federal FY of Grant: 2001			
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work
				Original	Revised	Funds Obligated	Funds Expended	





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

PHA Name: HOUSING AUTHORITY OF THE COUNTY OF GREENE		Grant Type and Number Capital Fund Program: PA28PO45501-03 Capital Fund Program Replacement Housing Factor Grant No:		Federal FY of Grant:  2003	
X Original Annual Statement Performance and Evaluation Report for Period Ending:		<input type="checkbox"/> Reserve for Disasters/ Emergencies <input type="checkbox"/> Revised Annual Statement (revision no: )			
		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	3,000			
3	1408 Management Improvements	3,000			
4	1410 Administration	38,000			
5	1411 Audit				
6	1415 liquidated Damages				
7	1430 Fees and Costs	34,000			
8	1440 Site Acquisition				
9	1450 Site Improvement	350,600			
10	1460 Dwelling Structures	27,000			
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Nondwelling Structures	90,000			
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)	545,600			

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

<b>PHA Name: HOUSING AUTHORITY OF THE COUNTY OF GREENE</b>	<b>Grant Type and Number</b> Capital Fund Program: PA28PO45501-03 Capital Fund Program Replacement Housing Factor Grant No:	<b>Federal FY of Grant:</b>  2003
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**Original Annual Statement**  
**Performance and Evaluation Report for Period Ending:**

**Reserve for Disasters/ Emergencies**
 **Revised Annual Statement (revision no:    )**

**Final Performance and Evaluation Report**

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
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 II: Supporting Pages**

PHA Name: HOUSING AUTHORITY OF THE COUNTY OF GREENE		Grant Type and Number Capital Fund Program #: PA28PO45501-03 Capital Fund Program Replacement Housing Factor #:			Federal FY of Grant: 2003			
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work
				Original	Revised	Funds Obligated	Funds Expended	





**Annual Statement/Performance and Evaluation Report**  
**Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary**  
**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 checked="" type="checkbox"/> Original statement <input type="checkbox"/> Revised statement		
Development Number	Development Name (or indicate PHA wide)	
PA28PO45-001	WAYNESBURG HOUSING	
Description of Needed Physical Improvements or Management Improvements	Estimated Cost	Planned Start Date (HA Fiscal Year)
Painting of common areas	11,000	2004
Replacement of hi-rise exterior doors	8,000	2004
Replacement of window blinds and rods	8,000	2004
Roof replacement (hi-rise)	60,000	2005
Replacement of laundry equipment	3,700	2005
Renovate Community Room	20,000	2005
Correct drainage (scattered sites)	50,000	2006
Provide resident storage sheds	60,000	2005
Window replacement (scattered sites)	130,000	2007
Landscape resident yards	25,000	2004
Replacement of apartment ranges	18,000	2004
Renovate administrative office	26,000	2005
Replace curb (Elm/scattered site)	4,000	2004
Replace water lines (scattered sites)	45,000	2006
<b>Total estimated cost over next 5 years</b>	<b>468,700</b>	



**Annual Statement/Performance and Evaluation Report**  
**Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary**  
**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 checked="" type="checkbox"/> Original statement <input type="checkbox"/> Revised statement		
<b>Development Number</b>	<b>Development Name (or indicate PHA wide)</b>	
PA28PO45-002	WAYNE VILLAGE	
<b>Description of Needed Physical Improvements or Management Improvements</b>	<b>Estimated Cost</b>	<b>Planned Start Date (HA Fiscal Year)</b>
Provide resident storage sheds	90,000	2004
Replace well grates/crawl space doors	40,000	2005
Replace closet doors	20,000	2005
Replace shingled overhang (1-bd/Com. Rm.)	55,000	2007
Landscape resident yards	35,000	2006
Replace apartment ranges	14,000	2004
Provide privacy fence/residents	60,000	2006
<b>Total estimated cost over next 5 years</b>	<b>279,000</b>	

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

**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>		
X Original statement <input type="checkbox"/> Revised statement		
<b>Development Number</b>	<b>Development Name (or indicate PHA wide)</b>	
PA28PO45-003	THOMPSON GARDENS	
<b>Description of Needed Physical Improvements or Management Improvements</b>	<b>Estimated Cost</b>	<b>Planned Start Date (HA Fiscal Year)</b>
Renovate apartment units (12)	108,000	2004
Renovate apartment units (15)	135,000	2005
Renovate apartment units (15)	135,000	2006
Renovate apartment units (15)	135,000	2007
Provide awning for apt. windows/entryway	72,000	2004
Replace apartment doors (hi-rise)	15,000	2005
Paint common areas	5,000	2005
Replace apartment refrigerators	24,000	2005
Repave access road	30,000	2006
Replace garbage pits	15,000	2007
<b>Total estimated cost over next 5 years</b>	<b>674,000</b>	

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

**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>		
X Original statement <input type="checkbox"/> Revised statement		
<b>Development Number</b>	<b>Development Name (or indicate PHA wide)</b>	
PA28PO45-004	GRANDVIEW APARTMENTS	
<b>Description of Needed Physical Improvements or Management Improvements</b>	<b>Estimated Cost</b>	<b>Planned Start Date (HA Fiscal Year)</b>
Replace exterior doors	60,000	2005
Replace playground equipment	47,000	2006
Provide apartment complex sign	3,000	2005
Provide privacy fence/residents	40,000	2007
Correct back yard slope	150,000	2006
Renovate Com. Rm.	18,000	2004
<b>Total estimated cost over next 5 years</b>	<b>318,000</b>	



**Annual Statement/Performance and Evaluation Report**  
**Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary**  
**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 checked="" type="checkbox"/> <b>Original statement</b> <input type="checkbox"/> <b>Revised statement</b>		
<b>Development Number</b>	<b>Development Name (or indicate PHA wide)</b>	
<b>PA28PO45-005</b>	<b>WOODSIDE MANOR</b>	
<b>Description of Needed Physical Improvements or Management Improvements</b>	<b>Estimated Cost</b>	<b>Planned Start Date (HA Fiscal Year)</b>
Refinish apartment doors	12,500	2004
Painting of common areas	8,000	2006
Provide apartment complex sign	3,000	2006
Provide entrance canopy	7,000	2006
Replace interior corridor lighting	19,000	2006
Renovate apartments (10)	150,000	2004
Renovate apartments (10)	150,000	2005
Renovate apartments (15)	225,000	2006
Renovate apartments (15)	225,000	2007
Window replacement	60,000	2007
Replace laundry room equipment	4,000	2007
Replace outside steps (garbage rm. entrance)	7,000	2004
<b>Total estimated cost over next 5 years</b>	<b>810,500</b>	

## RESIDENT ADVISORY BOARD-MEMBERSHIP

Name(s) of resident: James E. Blake, Jr.  
Shirley Tarr

Method of selection: Appointment

RESIDENT MEMBERSHIP OF THE PHA GOVERNING BOARD

Name of resident member: Wilma M. Stockdale

Method of selection: Appointment

Date appointed: 11/17/94

Present term expires: 12/20/2004



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				



PA28PO45-002							
WAYNE							
VILLAGE	A&E Services	1430		23,000			
	Replace sidewalks	1450		29,037			
	Replace apartment furnaces	1460		96,000			
	Replace exterior doors/frames	1460		100,000			
	TOTAL PA28PO45-002			248,037			
PA28PO45-003							
THOMPSON							

	Remodel laundry rm., restrooms, kitchen/Com.Bldg.	1470		40,000			
	TOTAL PA28PO45-003			193,000			
PHA WIDE							
ADMINISTRATI	Operations	1406		20,000			
	Management Improvements	1408		3,000			
	Sub-Total			23,000			
	Salaries/coordinate CFP	1410		29,000			
	Fringe benefits	1410		6,000			
	Advertisements	1410		3,200			
	Sub-Total			38,200			




HOUSING AUTHORITY OF THE COUNTY OF GREENE  
ANNUAL PLAN, JANUARY 1, 2003-DECEMBER 31, 2003

PHA PLANS COMPONENT 10, CONVERSION OF PUBLIC HOUSING  
TO TENANT-BASED ASSISTANCE

REQUIRED ASSESSMENT. – OCTOBER 1, 2002

The Housing Authority of the County of Greene has reviewed each covered development's operations as public housing, considered the implications of converting the public housing to tenant-based assistance in accordance with Sec. 202 of HUD Fiscal Year 1996 Appropriations Act, and has concluded that the conversion of these developments would be inappropriate because removal of the developments would not meet the necessary conditions for voluntary conversion as described at 972.200(c).

The Housing Authority of the County of Greene certifies that it has reviewed each development's operations as public housing and considered the implications of converting the public housing to tenant-based assistance. The PHA has considered factors such as overall cost (PILOT, Maintenance costs, remodeling, accrual, insurance, relocation, demolition), vacancy rate, location of units, PFS, etc. in making this determination. Also, local factors such as rural population scattered in large areas, a large percentage of population relying on public assistance, SSI, and SS as sole income, poor availability of decent, safe, and sanitary housing through private landlords, etc., were all determining elements in the PHA final analysis. The Housing Authority operates a total of 290 public housing units included in its covered developments.

No PHA developments have been determined to be appropriate for conversion based on the Required Assessments.

### **Component 3, (6) Deconcentration and Income Mixing**

a. Does the PHA have any general occupancy (family) public housing developments covered by the deconcentration rule? If no, this section is complete.

YES – The Housing Authority of the County of Greene has developments covered by the deconcentration rule.

b. Do any of these covered developments have average incomes above or below 85% to 115% of the average incomes of all such developments? If no, this section is complete.

NO – The Housing Authority of the County of Greene has no covered developments in which average incomes fall above or below the established income range(s) for such developments.

## STATEMENT OF PROGRESS MEETING THE FIVE-YEAR PLAN MISSION AND GOALS

The goal of the Housing Authority of the County of Greene is to work to further improve the quality of life for its housing residents through both PHA and local communities.

We continue to be involved in a research program supporting a grant through a local college seeking data pertaining to the existing problems surrounding housing issues in our area. Review of relevant government documents and analysis of housing affordability assists in obtaining a positive policy direction for opportunities for the State to further its working partnership with PHAs to maximize federal resources.

Our housing communities continue to be enhanced with each capital improvement, which is our goal to meet the needs and requests of residents and to raise our resident survey scores.

With more frequent site inspections we strive to offer developments that are decent, safe and sanitary.

We have been supportive in developing policies that offer housing participants a chance to improve their quality of life, to gain economic stability, and to move into productive community activities.

To further improve our customer service operation-from administration to maintenance-we have established a comprehensive plan which is committed to resident satisfaction. It focuses on enhancing communication between residents and the PHA while meeting HUD requirements and local community needs.

# **HOUSING AUTHORITY OF THE COUNTY OF GREENE ANNUAL PLAN, JANUARY 1, 2003-DECEMBER 31, 2003**

## **PHA PLANS COMPONENT 14, PET POLICY:**

The Housing Authority of the County of Greene adopted a 'Pet Rider To Lease' in January, 2001 as an incorporated and integral part of the Authority Lease.

### Overview:

- Definition of common household pet as permitted therein;
- Number of pets permitted per unit;
- Pet registration requirements;
- Pet responsibility statement;
- Security deposit required;
- General conditions;
- Unit inspection; and,
- Pet Violations.

The executed Pet Rider to Lease is retained in the resident's file and is reviewed on an annual basis with the resident providing updated veterinary information. The pet is also brought to the PHA office on an annual basis to be photographed.

**SECTION 18D. – Substantial Deviation and Significant Amendment/Modification to the PHA Plan.**

PHA definitions of Significant Amendment and/or Modifications to the PHA Annual Plan are synonymous with Final Rule 903.7 (r) (2). The following will be considered as such:

- Changes to rent or admissions policies or organization of the waiting list;
- Additions of non-emergency work items (items not included in the current Annual Statement or 5-Year Action Plan) or change in use of replacement reserve funds under the Capital Fund;
- Any change with regard to demolition or disposition, designation, homeownership programs or conversation activities.

The exception to these definitions will be made for any of the above that are adopted to reflect a change in HUD regulatory requirements.

If any significant amendment or modification to the PHA plan is required, the PHA shall submit a revised PHA Plan that has met full public process requirements.