

U.S.DepartmentofHousingandUrbanDevelopment
OfficeofPublicandIndianHousing

SmallPHAPlanUpdate
AnnualPlanforFiscalYear: 2003

**NOTE:THISPHAPLANSTEMPLATE(HUD50075)ISTOBECOMPLETEDIN
ACCORDANCEWITHINSTRUCTIONSLOCATEDINAPPLICABLEPIHNOTICES**

PHA Plan Agency Identification

PHAName: WaelderHousingAuthority

PHANumber: TX109

PHAFiscalYearBeginning: 04/2003

PHA Plan Contact Information :

Name: JeanetteGreen

Phone: 830-788-7371

TDD:

Email(ifavailable): jeangreen99@hotmail.com

Public Access to Information

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

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

Display Locations For PHA Plans and Supporting Documents

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

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

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

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

PHA Programs Administered :

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

Annual PHA Plan
Fiscal Year 20
 [24CFR Part 903.7]

i. Table of Contents

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

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<input checked="" type="checkbox"/> Attachment D: Public Housing Drug Elimination Program (PHDEP) Plan –Part of Plan Text	
<input checked="" type="checkbox"/> Attachment E: Resident Membership on PHA Board or Governing Body – Part of Plan Text	
<input checked="" type="checkbox"/> Attachment F: Membership of Resident Advisory Board or Boards –Part of Plan Text	
<input checked="" type="checkbox"/> Attachment G: Voluntary Conversion Initial Assessments	
<input checked="" type="checkbox"/> Other (List below, providing each attachment name)	
<input checked="" type="checkbox"/> Attachment H: Five Year Plan Mission & Goals Progress	
<input checked="" type="checkbox"/> Attachment I: Selection Process For Resident Advisory Board	

- Attachment J: Comments of Resident Advisory Board or Boards & Explanation of PHA Response (must be attached if not included in PHA Plan text) – Part of Plan Text
- Attachment K: Dec oncentration and Income Mixing
- Attachment L: REAC Resident Assessment Follow - Plan

Required Small PHA Plan Update Attachments

- List of Supporting Documents Available for Review
- Admissions Policy for Dec oncentration (incl. Revised questions from PIH Notice 2001 -4 – review FR Notice issued 12/22/00 for PHAs that are exempt)
- Capital Fund Program Annual Statement/Performance and Evaluation Report (if applicable)
- Capital Fund Program 5 Year Action Plan (if applicable)
- Voluntary Conversion Required Initial Assessment (incl. Questions from PIH Notice 2001-26)
- Public Housing Drug Elimination (PHDEP) Plan (if applicable)
- Resident Membership on the PHA Board or Governing Body
- Membership of the Resident Advisory Board or Boards
- Comments of the Resident Advisory Board or Boards & Explanation of PHA Response (must be attached if not included in PHA Plan text)
- Section 8 Homeownership Capacity Statement (if applicable)
- Brief Description of Policy or Program Changes (since last plan)
- Statement of Consistency with the Consolidated Plan
- Criteria for Substantial Deviation and Significant Amendments (if not contained in previous Plan)
- Other

ii. Executive Summary

[24CFR Part 903.79(r)]

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

None provided.

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

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

The PHA’s admissions, pet, community service and economic self-sufficiency policies are under review and while no specific changes are planned it is possible that modifications could be made.

2. Capital Improvement Needs

[24CFR Part 903.79(g)]

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

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

B. What is the amount of the PHA's estimated or actual (if known) Capital Fund Program grant for the upcoming year? \$ 85,000

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

D. Capital Fund Program Grant Submissions

(1) Capital Fund Program 5 -Year Action Plan

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

(2) Capital Fund Program Annual Statement

The Capital Fund Program Annual Statement is provided as Attachment B

3.D Demolition and Disposition

[24CFR Part 903.79(h)]

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

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

2. Activity Description

Demolition/Disposition Activity Description (Not including Activities Associated with HOPE VI or Conversion Activities)
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:

<p>6. Coverage of action (select one)</p> <p><input type="checkbox"/> Part of the development</p> <p><input type="checkbox"/> Total development</p>
<p>7. Relocation resources (select all that apply)</p> <p><input type="checkbox"/> Section 8 for units</p> <p><input type="checkbox"/> Public housing for units</p> <p><input type="checkbox"/> Preference for admission to other public housing or section 8</p> <p><input type="checkbox"/> Other housing for units (describe below)</p>
<p>8. Timeline for activity:</p> <p>a. Actual or projected start date of activity:</p> <p>b. Actual or projected start date of relocation activities:</p> <p>c. Projected end date of activity:</p>

4. Voucher Homeownership Program

[24CFR Part 903.79(k)]

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

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

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

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

5. Safety and Crime Prevention: PHDEP Plan

[24CFR Part 903.7(m)]

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

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

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

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

D. Yes No:

6. Other Information

[24CFR Part 903.79(r)]

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

1. Yes No: Did the PHA receive any comments on the PHA Plan from the Resident Advisory Board/s?

2. If yes, the comments are attached at Attachment (Filename) J

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

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

B. Statement of Consistency with the Consolidated Plan

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

1. Consolidated Plan jurisdiction: State of Texas' Gonzales County

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

- The PHA has based its statement of needs of families in the jurisdiction on the needs expressed in the Consolidated Plan/s.
- The PHA has participated in any consultation process organized and offered by the Consolidated Plan agency in the development of the Consolidated Plan.
- The PHA has consulted with the Consolidated Plan agency during the development of this PHA Plan.

- Activities to be undertaken by the PHA in the coming year are consistent with specific initiatives contained in the Consolidated Plan. (list such initiatives below)
- Other: (list below)

3. PHA Requests for support from the Consolidated Plan Agency

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

4. The Consolidated Plan of the jurisdiction supports the PHA Plan with the following actions and commitments: _____ None specified by jurisdictional authority.

C. Criteria for Substantial Deviation and Significant Amendments

1. Amendment and Deviation Definitions

24CFR Part 903.7(r)

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

A. Substantial Deviation from the 5 -year Plan:

Substantial deviation from the 5 -year Plan shall be defined as any change in its mission statement or goals and any change in its objectives that are inconsistent with achievement of the PHA's mission or goals.

1. Any change to the Mission Statement
2. 50% deletion from or addition to the goals and objectives as a whole; and
3. 50% or more decrease in the quantifiable measurement of any individual goal and objective.

A. Significant Amendment or Modification to the Annual Plan:

Significant amendment to the Annual Plan shall be defined as any change in policy, rules, regulations or any other aspect of the plan that is inconsistent with the PHA's mission statement or goals.

1. Any increase or decrease over 50% in the funds projected in the Financial Resource Statement and/or the Capital Fund Program Statement.
2. Any change in policy or procedure that requires a regulatory 30 day posting;
3. Any submission to HUD that requires a separate notification to residents, such as hopevi, Public Housing Conversion, Demolition/Disposition, Designated Housing or Homeownership programs; and
4. Any change inconsistent with the local, approved Consolidated Plan.

Attachment A

Supporting Documents Available for Review

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

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

List of Supporting Documents Available for Review

Applicable & On Display	Supporting Document	Related Plan Component
X	Public housing management and maintenance policy documents, including policies for the prevention or eradication of pest infestation (including cockroach infestation)	Annual Plan: Operations and Maintenance
X	Results of latest binding Public Housing Assessment System (PHAS) Assessment	Annual Plan: Management and Operations
X	Follow-up Plan to Results of the PHAS Resident Satisfaction Survey (if necessary)	Annual Plan: Operations and Maintenance and Community Service & Self-Sufficiency
X	Results of latest Section 8 Management Assessment System (SEMAP)	Annual Plan: Management and Operations
X	Any required policies governing any Section 8 special housing types <input checked="" type="checkbox"/> check here if included in Section 8 Administrative Plan	Annual Plan: Operations and Maintenance
X	Public housing grievance procedures <input checked="" type="checkbox"/> check here if included in the public housing A&O Policy	Annual Plan: Grievance Procedures
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 any active grant year	Annual Plan: Capital Needs
X	Most recent CIAP Budget/Progress Report (HUD 52825) for any active CIAP grants	Annual Plan: Capital Needs
N/A	Approved HOPEVI applications or, if more recent, approved or submitted HOPEVI revitalization Plans, or any other approved proposal for development of public housing	Annual Plan: Capital Needs
X	Self-evaluation, Needs Assessment and Transition Plan required by regulations implementing §504 of the Rehabilitation Act and the Americans with Disabilities Act. See, PIH 99 -52 (HA).	Annual Plan: Capital Needs
N/A	Approved or submitted applications for demolition and/or disposition of public housing	Annual Plan: Demolition and Disposition
N/A	Approved or submitted applications for designation of public housing (Designated Housing Plans)	Annual Plan: Designation of Public Housing
N/A	Approved or submitted assessments of reasonable revitalization of public housing and approved or submitted conversion plans prepared pursuant to section 202 of the 1996 HUD Appropriations Act, Section 22 of the US Housing Act of 1937, or Section 33 of the US Housing Act of 1937	Annual Plan: Conversion of Public Housing
N/A	Approved or submitted public housing homeownership programs/plans	Annual Plan: Homeownership

List of Supporting Documents Available for Review

Applicable & On Display	Supporting Document	Related Plan Component
N/A	Policies governing any Section 8 Homeownership program (section _____ of the Section 8 Administrative Plan)	Annual Plan: Homeownership
N/A	Cooperation agreement between the PHA and the TANF agency and between the PHA and local employment and training service agencies	Annual Plan: Community Service & Self-Sufficiency
X	FSS Action Plan/s for public housing and/or Section 8	Annual Plan: Community Service & Self-Sufficiency
X	Section 3 documentation required by 24 CFR Part 135, Subpart E	Annual Plan: Community Service & Self-Sufficiency
X	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 (PHDEP) semi-annual performance report	Annual Plan: Safety and Crime Prevention
N/A	PHDEP-related documentation: <ul style="list-style-type: none"> · Baseline law enforcement services for public housing developments assisted under the PHDEP plan; · Consortium agreement/s between the PHA participating in the consortium and a copy of the payment agreement between the consortium and HUD (applicable only to PHA participating in a consortium as specified under 24 CFR 761.15); · Partnership agreements (indicating specific leveraged support) with agencies/organizations providing funding, services or other in-kind resources for PHDEP-funded activities; · Coordination with other law enforcement efforts; · Written agreement(s) with local law enforcement agencies (receiving any PHDEP funds); and · All crime statistics and other relevant data (including Part I and specified Part II crimes) that establish need for the public housing sites assisted under the PHDEP Plan. 	Annual Plan: Safety and Crime Prevention
X	Policy on Ownership of Pets in Public Housing Family Developments (as required by regulation at 24 CFR Part 960, Subpart G) <input type="checkbox"/> check here if included in the public housing A&O Policy	Pet Policy
X	The results of the most recent fiscal year audit of the PHA conducted under section 5(h)(2) of the U.S. Housing Act of 1937 (42 U.S.C. 1437c(h)), together with the results of that audit and the PHA's response to any findings	Annual Plan: Annual Audit
N/A	Troubled PHAs: MOA/Recovery Plan	Troubled PHAs
None	Other supporting documents (optional) (list individually; use as many lines as necessary)	(specify as needed)

AttachmentB

AnnualStatement/PerformanceandEvaluationReport

CapitalFundProgramandCapitalFundProgramReplacementHousingFactor(CFP/CFPRHF)Part1:Summary

PHAName:WaelderHousingAuthority	GrantTypeandNumber CapitalFundProgram: TX59P109501-03 CapitalFundProgram ReplacementHousingFactorGrantNo:	FederalFYofGrant: 2003
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OriginalAnnualStatement
 ReserveforDisasters/Emergencies
 RevisedAnnualStatement(revisionno:)
 PerformanceandEvaluationReportforPeriodEnding:
 FinalPerformanceandEvaluationReport

Line No.	SummarybyDevelopmentAccount	TotalEstimatedCost		TotalActualCost	
		Original	Revised	Obligated	Expended
	PHASEIII				
1	Totalnon -CFPFunds	0			
2	1406Operations	4,691			
3	1408ManagementImprovements	3,015			
4	1410Administration	1,511			
5	1411Audit	0			
6	1415liquidatedDamages	0			
7	1430FeesandCosts	10,372			
8	1440SiteAcquisition	0			
9	1450SiteImprovement	3,921			
10	1460DwellingStructures	59,990			
11	1465.1DwellingEquipment —Nonexpendable	0			
12	1470Nondwelli ngStructures	1,500			
13	1475NondwellingEquipment	0			
14	1485Demolition	0			
15	1490ReplacementReserve	0			
16	1492MovingtoWorkDemonstration	0			
17	1495.1RelocationCosts	0			
18	1498ModUsedforDevelopment	0			
19	1502Contingency	0			
20	AmountofAnnualGrant:(sumoflines2 -19)	85,000			
21	Amountofline20RelatedtoLBPActivities	0			
22	Amountofline20RelatedtoSection504Compliance	0			
23	Amountofline20RelatedtoSecurity	0			
24	Amountofline20Relatedto EnergyConservation Measures	0			

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

PHAName: Waelder Housing Authority		Grant Type and Number Capital Fund Program#: TX59P109501-03 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	
	PHASE III							
PHAWide	Operations	1406		4,691				
PHAWide	Management Improvements Upgrade of computer systems, training and software development.	1408		3,015				
PHAWide	Administration Costs and expenses related to administration of the project include procurement, advertising, travel, postage, communications and clerical support.	1410		1,511				
PHAWide	Fees and Costs	1430		10,372				
001-002	Complete Replace/Repair Sidewalks	1450		3,921				
001-002	Complete Roofing	1460		24,254				
001-002	Continue Repainting Apartments	1460		8,125				
001-002	Continue Cabinet Repair/Replacements	1460		4,338				
001-002	Continue Repair Exterior Wood Surfaces	1460		5,158				
001-002	Continue Repaint Exteriors	1460		9,438				
001-002	Complete Security Window Screens	1460		2,138				
001-002	Complete Security Screen Doors	1460		2,877				
001-002	Repair/Replace Exterior Light Fixtures	1460		3,662				
002	Repair/Renovate Office Maint. Bldg.	1470		1,500				

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

PHAName: Waelder Housing Authority		Grant Type and Number Capital Fund Program#: TX59P109501-03 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	

AttachmentB

AnnualStatement/PerformanceandEvaluationReport

CapitalFundProgramandCapitalFundProgramReplacementHousingFactor(CFP/CFPRHF)Part1:Summary

PHAName:WaelderHousingAuthority	GrantTypeandNumber CapitalFundProgram: TX59P109501-02 CapitalFundProgram ReplacementHousingFactorGrantNo:	FederalFYofGrant: 2002
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OriginalAnnualStatement ReserveforDisasters/Emergencies RevisedAnnualStatement(revisionno:)
 PerformanceandEvaluationReportforPeriodEnding: 09/30/02 FinalPerformanceandEvaluationReport

Line No.	SummarybyDevelopmentAccount	TotalEstimatedCost		TotalActualCost	
		Original	Revised	Obligated	Expended
	PHASEIII				
1	Totalnon -CFPFunds	0		0	0
2	1406Operations	4,691		0	0
3	1408ManagementImprovements	3,015		3,015	3,000
4	1410Adminis tration	1,511		1,511	1,000
5	1411Audit	0		0	0
6	1415liquidatedDamages	0		0	0
7	1430FeesandCosts	10,555		10,555	5,250
8	1440SiteAcquisition	0		0	0
9	1450SiteImprovement	3,921		0	0
10	1460DwellingStructures	53,052		21,891	4,600
11	1465.1 DwellingEquipment —Nonexpendable	0		0	0
12	1470NondwellingStructures	8,438		0	0
13	1475NondwellingEquipment	0		0	0
14	1485Demolition	0		0	0
15	1490ReplacementReserve	0		0	0
16	1492MovingtoWorkDemonstration	0		0	0
17	1495.1RelocationCosts	0		0	0
18	1498ModUsedforDevelopment	0		0	0
19	1502Contingency	0		0	0
20	AmountofAnnualGrant:(sumoflines2 -19)	85,183		36,972	13,850
21	Amountofline20RelatedtoLBPActivities	0			
22	Amountofline20RelatedtoSection504Compliance	0			
23	Amountofline20RelatedtoSecurity	0			
24	Amountofline20RelatedtoEnergyConservation Measures	0			

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

PHAName: Waelder Housing Authority		Grant Type and Number Capital Fund Program#: TX59P109501-02 Capital Fund Program Replacement Housing Factor#:			Federal FY of Grant: 2002			
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	
	PHASE III							
PHAWide	Operations	1406		4,691		0	0	Ongoing
PHAWide	Management Improvements Upgrade of computer systems, training and software development.	1408		3,015		3,015	3,000	Ongoing
PHAWide	Administration Costs and expenses related to administration of the project include procurement, advertising, travel, postage, communications and clerical support.	1410		1,511		1,511	1,000	Ongoing
PHAWide	Fees and Costs	1430		10,555		10,555	5,250	Ongoing
001-002	Replace/Repair Side walks	1450		3,921		0	0	Pending
001-002	Replace Roofing	1460		20,254		10,254	1,500	Ongoing
001-002	Repaint Occupied Apartments	1460		8,125		2,500	500	Ongoing
001-002	Replace Cabinets	1460		4,338		2,300	350	Ongoing
001-002	Repair Exterior Wood Surfaces	1460		4,220		0	0	Pending
001-002	Repaint Exteriors	1460		7,438		5,174	1,500	Ongoing
001-002	Install Security Window Screens	1460		2,138		1,663	750	Ongoing
001-002	Install Security Screen Doors	1460		2,877		0	0	Pending
001-002	Repair/Replace Exterior Light Fixtures	1460		3,662		0	0	Pending
002	Repair/Renovate Office Maint. Bldg.	1470		8,438		0	0	Pending

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

PHAName: Waelder Housing Authority		Grant Type and Number Capital Fund Program#: TX59P109501-02 Capital Fund Program Replacement Housing Factor#:			Federal FY of Grant: 2002			
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	

AttachmentB

AnnualStatement/PerformanceandEvaluationReport

CapitalFundProgramandCapitalFundProgramReplacementHousingFactor(CFP/CFPRHF)Part1:Summary

PHAName:WaelderHousingAuthority	GrantTypeandNumber CapitalFundProgram: TX59P109501-01 CapitalFundProgram ReplacementHousingFactorGrantNo:	FederalFYofGrant: 2001
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OriginalAnnualStatement
 ReserveforDisasters/Emergencies
 RevisedAnnualStatement(revisionno:)
 PerformanceandEvaluationReportforPeriodEnding: 09/30/02
 FinalPerformanceandEvaluationReport

Line No.	SummarybyDevelopmentAccount	TotalEstimatedCost		TotalActualCost	
		Original	Revised	Obligated	Expended
	PHASEIII				
1	Totalnon -CFPFunds	0		0	0
2	1406Operations	4,691		0	0
3	1408ManagementImprovements	3,015		3,015	3,015
4	1410Administration	1,511		1,511	1,511
5	1411Audit	0		0	0
6	1415liquidatedDamages	0		0	0
7	1430FeesandCosts	10,555		10,555	10,555
8	1440SiteAcquisition	0		0	0
9	1450SiteImprovement	3,921		3,921	3,921
10	1460DwellingStructures	57,625		57,625	57,625
11	1465.1DwellingEquipment —Nonexpendable	0		0	0
12	1470NondwellingStructures	8,438		8,438	8,438
13	1475NondwellingEquipment	0		0	0
14	1485Demolition	0		0	0
15	1490ReplacementReserve	0		0	0
16	1492MovingtoWorkDemonstration	0		0	0
17	1495.1RelocationCosts	0		0	0
18	1498ModUsedforDevelopment	0		0	0
19	1502Contingency	0		0	0
20	AmountofAnnualGrant:(sumoflines2 -19)	89,756		85,065	85,065
21	Amountofline20RelatedtoLBPActivities	0		0	0
22	Amountofline20RelatedtoSection504Compliance	0		0	0
23	Amountof line20RelatedtoSecurity	0		0	0
24	Amountofline20RelatedtoEnergyConservation Measures	0		0	

Annual Statement/Performance and Evaluation Report – Attachment B
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CF PRHF)
Part II: Supporting Pages

PHAName: Waelder Housing Authority		Grant Type and Number Capital Fund Program#: TX59P109501-01 Capital Fund Program Replacement Housing Factor#:			Federal F Y 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	
	PHASE III							
PHAWide	Operations	1406		4,691		0	0	Ongoing
PHAWide	Management Improvements	1408		3,015		3,015	3,015	Complete
PHAWide	Administration	1410		1,511		1,511	1,511	Complete
PHAWide	Fees and Costs	1430		10,555		10,555	10,555	Complete
001-002	Replace/Repair Sidewalks	1450		3,921		3,921	3,921	Complete
001-002	Replace Roofing	1460		20,254		20,254	20,254	Complete
001-002	Repaint Occupied Apartments	1460		8,125		8,125	8,125	Complete
001-002	Replace Cabinets	1460		4,338		4,338	4,338	Complete
001-002	Repair Exterior Wood Surfaces	1460		4,220		4,220	4,220	Complete
001-002	Repaint Exteriors	1460		7,438		7,438	7,438	Complete
001-002	Install Security Window Screens	1460		4,638		4,638	4,638	Complete
001-002	Install Security Screen Doors	1460		4,950		4,950	4,950	Complete
001-002	Repair/Replace Exterior Light Fixtures	1460		3,662		3,662	3,662	Complete
002	Repair/Renovate Office Maint. Bldg.	1470		8,438		8,438	8,438	Complete

Attachment B

Annual Statement/Performance and Evaluation Report

Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CF PRHF) Part 1: Summary

PHAName: Waelder Housing Authority	Grant Type and Number Capital Fund Program: TX59P109501-00 Capital Fund Program Replacement Housing Factor Grant No:	Federal FY of Grant: 2000
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Original Annual Statement
 Reserve for Disasters/Emergencies
 Revised Annual Statement (revision no:)
 Performance and Evaluation Report for Period Ending: 09/30/02
 Final Performance and Evaluation Report

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
	PHASE III				
1	Total non -CFP Funds	0		0	0
2	1406 Operations	8,764		8,764	8,764
3	1408 Management Improvements	7,537		7,537	7,537
4	1410 Administration	3,045		3,045	3,045
5	1411 Audit	0		0	0
6	1415 Liquidated Damages	0		0	0
7	1430 Fees and Costs	13,453		13,453	13,453
8	1440 Site Acquisition	0		0	0
9	1450 Site Improvement	34,275		34,275	34,275
10	1460 Dwelling Structures	20,900		20,900	20,900
11	1465.1 Dwelling Equipment — Nonexpendable	0		0	0
12	1470 Non Dwelling Structures	0		0	0
13	1475 Non Dwelling Equipment	0		0	0
14	1485 Demolition	0		0	0
15	1490 Replacement Reserve	0		0	0
16	1492 Moving to Work Demonstration	0		0	0
17	1495.1 Relocation Costs	0		0	0
18	1498 Mod Used for Development	0		0	0
19	1502 Contingency	0		0	0
20	Amount of Annual Grant: (sum of lines 2 -19)	87,974		87,974	87,974
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 – Attachment B
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)
Part II: Supporting Pages

PHAName: Waelder Housing Authority		Grant Type and Number Capital Fund Program#: TX59P109501-00 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	
	PHASE III							
PHAWide -1	Operations	1406		8,764		8,764	8,764	Completed
PHAWide -2	Management Improvements	1408		7,537		7,537	7,537	Completed
PHAWide -3	Administration	1410		3,045		3,045	3,045	Completed
PHAWide -4	Fees and Costs	1430		13,453		13,453	13,453	Completed
001-002-5	Repair/replace sewer lines	1450		12,350		12,350	12,350	Completed
001-002-6	Repair/replace gas lines	1450		4,575		4,575	4,575	Completed
001-002-7	Repair/replace water lines	1450		17,350		17,350	17,350	Completed
001-002-8	Install vent hoods	1460		6,525		6,525	6,525	Completed
001-002-8	Interior lighting	1460		9,375		9,375	9,375	Completed
001-002-10	Interior electrical	1460		5,000		5,000	5,000	Completed
001-002-11	Building signs	1460		0		0	0	
001-002-12	Copier	1475		0		0	0	

AttachmentC

CapitalFundProgram5 -YearActionPlan

Completeonetableforeachdevelopmentinwhichworkisplannedinthenext5PHAfiscalyears.CompleteatableforanyPHA -widephysicalormangementimprovements
 plannedinthenext5PHAfiscalyear.Copythistableasmanytimesasnecessary.Note:PHAsneednotincludetheinformationfromYearOneofthe5 -Yearcycle,becausethis
 informationisincludedintheCapitalFundProgramAnnualStatement.

CFP 5 -YearActionPlan		
<input checked="" type="checkbox"/> Originalstatement <input type="checkbox"/> Revisedstatement		
Development Number	DevelopmentName (orindicatePHAwide)	
TX109-001,002	PHAWide	
DescriptionofNeededPhysicalImprovementsorManagement Improvements	EstimatedCost	PlannedStartDate (HAFiscalYear)
1406Operations	18,764	10/01/2004 -03/31/08
1408ManagementImprovements	12,060	FFY10/2004
1410Administration	6,044	
1430 FeesandCosts	16,756	2 nd ,3 rd ,4 th and5 th year
1450Repair/ReplaceSidewalks	46,667	offiveyearplan
1460ReplaceRoofing	88,616	
1460RepaintOccupiedApartments	32,500	
1460ReplaceCabinets	17,351	
1460Rep airExteriorWoodSurfaces	18,777	
1460RepaintExteriors	29,717	
1460InstallSecurityWindowScreens	27,807	
1460InstallSecurityScreenDoors	23,609	
1460Repair/ReplaceExteriorLightingFixtures	16,460	
Totalestimatedcostovernext5years(excludingYr1aspernoteabove)	359,024	

AttachmentD
PHA Public Housing Drug Elimination Program Plan

Note: THIS PHDEP Plan template (HUD50075 - PHDEP Plan) is to be completed in accordance with Instructions located in applicable PIH Notices.

Section 1: General Information/History - Waelder Housing Authority

A. Amount of PHDEP Grant \$ 0

B. Eligibility type (Indicate with an "x") N1 _____ N2 _____ R _____

C. FFY in which funding is requested

D. Executive Summary of Annual PHDEP Plan

In the space below, provide a brief overview of the PHDEP Plan, including highlights of major initiatives or activities undertaken. It may include a description of the expected outcomes. This summary must not be more than five (5) sentences long.

E. Target Areas

Complete the following table by indicating each PHDEP Target Area (development or site where activities will be conducted), the total number of units in each PHDEP Target Area, and the total number of individuals expected to participate in PHDEP sponsored activities in each Target Area.

PHDEP Target Areas (Name of development(s) or site)	Total # of Units with in the PHDEP Target Area(s)	Total Population to be Served within the PHDEP Target Area(s)

F. Duration of Program

Indicate the duration (number of months funds will be required) of the PHDEP Program proposed under this Plan (place an "x" to indicate the length of program by # of months). For "Other", identify the # of months.

6 Months _____ **12 Months** _____ **18 Months** _____ **24 Months** _____

G. PHDEP Program History

Indicate each FY that funding has been received under the PHDEP Program (place an "x" by each applicable Year) and provide amount of funding received. If previously funded programs havenot been closed out at the time of this submission, indicate the fund balance and anticipated completion date. For grant extensions received, place "GE" in column or "W" for waivers.

Fiscal Year of Funding	PHDEP Funding Received	Grant#	Fund Balance as of Date of this Submission	Grant Extensions or Waivers	Anticipated Completion Date

Section 2: PHDEP Plan Goals and Budget

A. PHDEP Plan Summary

In the space below, summarize the PHDEP strategy to address the needs of the target population/target area(s). Your summary should briefly identify: the broad goals and objectives, the role of plan partners, and your system or process for monitoring and evaluating PHDEP-funded activities. This summary should not exceed 5-10 sentences. *WHA's strategy to address the needs of the target population is recruit and train both adults and "at-risk" youth and provide both training and participation activities directed toward drug-awareness and avoidance. The program activities will be monitored in part by observing the anticipated reduction in the number of criminal complaints received from the police, residents and others.*

B. PHDEP Budget Summary

Enter the total amount of PHDEP funding allocated to each line item.

FY 2001 PHDEP Budget Summary

BudgetLineItem	TotalFunding
9110 -ReimbursementofLawEnforcement	
9115 -SpecialInitiative	
9116 -GunBuybackTAMatch	
9120 -SecurityPersonnel	
9130 -EmploymentofInvestigators	
9140 -VoluntaryTenantPatrol	
9150 -PhysicalImprovements	
9160 -DrugPrevention	
9170 -DrugIntervention	
9180 -DrugTreatment	
9190 -OtherProgr amCosts	
TOTALPHDEPFUNDING	

C. PHDEP Plan Goals and Activities

In the tables below, provide information on the PHDEP strategy summarized above by budget line item. Each goal and objective should be numbered sequentially for each budget line item (where applicable). Use as many rows as necessary to list proposed activities (additional rows may be inserted in the tables). PHAs are not required to provide information in shaded boxes. Information provided must be concise — not to exceed two sentences in any column. Tables for line items in which the PHA has no planned goals or activities may be deleted.

9110 -Reimbursement of Law Enforcement –None					Total PHDEP Funding:\$0		
Goal(s)							
Objectives							
Proposed Activities	#of Persons Served	Target Population	Start Date	Expected Complete Date	PHDEP Funding	Other Funding (Amount/ Source)	Performance Indicators
1.							
2.							
3.							

9115 -Special Initiative –None					Total PHDEP Funding:\$0		
Goal(s)							
Objectives							
Proposed Activities	#of Persons Served	Target Population	Start Date	Expected Complete Date	PHDEP Funding	Other Funding (Amount/ Source)	Performance Indicators
1.							
2.							
3.							

9116 -GunBuybackTAMatch –None						TotalPHDEPFunding:\$0	
Goal(s)							
Objectives							
ProposedActivities	#of Persons Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	OtherFunding (Amount/Source)	PerformanceIndicators
1.							
2.							
3.							

9120 -SecurityPersonnel –None						TotalPHDEPFunding:\$ 0	
Goal(s)							
Objectives							
ProposedActivities	#of Persons Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	Other Funding (Amount /Source)	PerformanceIndicators
1.							
2.							
3.							

9130 -EmploymentofInvest igators -None						TotalPHDEPFunding:\$0	
Goal(s)							
Objectives							
ProposedActivities	#of Persons Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	Other Funding (Amount	PerformanceIndicators

						/Source)	
1.							
2.							
3.							

9140 – Voluntary Tenant Patrol					Total PHDEP Funding: \$0		
Goal(s)	Involve residents in own security						
Objectives	Develop and train residents as Citizens -On-Patrol (COPS).						
Proposed Activities	#of Persons Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	Other Funding (Amount /Source)	Performance Indicators
1.							
2.							
3.							

9150 - Physical Improvements –None					Total PHDEP Funding: \$0		
Goal(s)							
Objectives							
Proposed Activities	#of Persons Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	Other Funding (Amount /Source)	Performance Indicators
1.							
2.							
3.							

9160 -DrugPrevention					TotalPHDEPFunding:\$0		
Goal(s)	Discourageuseofdrugsbyat -riskyouth						
Objectives	Recruitandtrain30youthindrug -awareness						
ProposedActivities	#of Persons Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	Other Funding (Amount /Source)	PerformanceIndicators
1.							
2.							
3.							

9170 -DrugIntervention -None					TotalPHDEPFunding:\$0		
Goal(s)							
Objectives							
ProposedActivities	#of Persons Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	Other Funding (Amount /Source)	PerformanceIndicators
1.							
2.							
3.							

9180 -DrugTreatment -None					TotalPHDEPFunding:\$0		
Goal(s)							
Objectives							
ProposedActivities	#of	Target	Start	Expected	PHEDEP	Other	PerformanceIndi cators

	Persons Served	Population	Date	Complete Date	Funding	Funding (Amount /Source)
1.						
2.						
3.						

9190 -OtherProgramCosts -None					TotalPHDEPFunds:\$0		
Goal(s)							
Objectives							
ProposedActivities	#of Persons Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	Other Funding (Amount /Source)	PerformanceIndicators
1.							
2.							
3.							

Required Attachment E: Resident Member on the PHA Governing Board

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

A. Name of resident member(s) on the governing board: Yolanda Holloman

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

- Elected
 Appointed

C. The term of appointment is (include the date term expires): February 2004

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

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

B. Date of next term expiration of a governing board member: February 2003

C. Name and title of appointing official(s) for governing board (indicate appointing official for the next position): Roy Tovar, Mayor (Same)

Required Attachment F: Membership of the Resident Advisory Board or Boards

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

Yolanda Holloman
Armando Hernandez
Gloria Slaughter
John Vann
Ofelia Tristan
Urbanna Reyes

Required Attachment G: Voluntary Conversion Initial Assessments

Component 10(B)

- a. How many of the PHA's developments are subject to the Required Initial Assessments:

Two

- b. How many of the PHA's developments are not subject to the Required Initial Assessments based on exemptions (e.g., elderly and/or disabled developments not general occupancy projects)?

Two

- c. How many assessments were conducted for the PHA's covered developments?

Two (One for each of 2 subject developments)

- d. Identify PHA developments that may be appropriate for conversion based on the Required Initial Assessment?

Development Name	Number of Units
------------------	-----------------

None

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

Required Attachment H: Five Year Plan Mission & Goals Progress

The PHA's mission continues to be to promote adequate and affordable housing, economic opportunity and a suitable living environment free from discrimination.

The PHA's specific goals: Increase the availability of decent, safe, and affordable housing.

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: **Stable**
 - Leverage private or other public funds to create additional housing opportunities:
 - Acquire or build units or developments
 - Other (list below)

- PHA Goal: Improve the quality of assisted housing
Objectives:
 - Improve public housing management: (PHA Score) 80
 - Improve voucher management: (SEMAP score) N/A
 - Increase customer satisfaction:
 - Concentrate on efforts to improve specific management functions: (list; e.g., public housing finance; voucher unit inspections) **Improved**
 - Renovate or modernize public housing units: **Scheduled**
 - Demolish or dispose of obsolete public housing:
 - Provide replacement public housing:
 - Provide replacement 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: **Scheduled**
 - Designate developments or buildings for particular resident groups (elderly, persons with disabilities)

Other:(listbelow w)

HUD Strategic Goal: Promoteself -sufficiencyandassetdevelopmentoffamilies andindividuals

PHAGoal:Promoteself -sufficiencyandassetdevelopmentofassisted households

Objectives:

- Increasethenumberand percentageofemployedpersonsinassisted families:**Notmeasured**
- Provideorattractssupportiveservicestoimproveassistancerecipients' employability: **Notmeasured**
- Provideorattractssupportiveservicestoincrease independenceforthe elderlyorfamilieswithdisabilities.
- Other:(listbelow)

HUD Strategic Goal: EnsureEqualOpportunityinHousingforallAmericans

PHAGoal:Ensureequalopportunityandaffirmativelyfurther fairhousing

Objectives:

- Undertakeaffirmativemeasurestoensureaccesstoassistedhousing regardless ofrace,color,religionnationalorigin,sex,familialstatus,and disability: **Ongoing**
- Undertakeaffirmativemeas urestoprovideasuitablelivingenvironment forfamilieslivinginassistedhousing,regardless ofrace,color,religion nationalorigin,sex,familialstatus,anddisability: **Ongoing**
- Undertakeaffirmativemeasurestoensureaccessib lehousingtopersons withallvarietiesofdisabilitiesregardless ofunitsizerequired: **Ongoing**
- Other:(listbelow)

Required Attachment I: Selection Process For Resident Advisory Board

The PHA's Resident Advisory Board was appointed from 100% of the residents who volunteered and responded to a public notice and invitation to serve on the board.

Required Attachment J: Comments of the Resident Advisory Board (RAB) or Boards & Explanation of PHA Response(s)

The most frequent comments of the RAB involve the implementation of the work items involving installation of an improved heating distribution system for the bedrooms and the painting of apartment units.

PHA Response: These are priority work items scheduled to be implemented in the current phase of work.

**Required Attachment K: Deconcentration and
Income Mixing**

Component 3.(6) Deconcentration and Income Mixing

Yes No: Does the PHA have any general occupancy (family) public housing developments covered by the deconcentration rule? If no, this section is complete. If yes, continue to the next question.

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

If yes, list these developments as follows:

Deconcentration Policy for Covered Developments

Development Name _____	Number Of Units	Explanation (if any) [see step 4 at <u>903.2(c)(1)(iv)</u>]	Deconcentration Policy (if no explanation) [see step 5 at <u>903.2(c)(1)(v)</u>]
------------------------------	-----------------------	--	---

Required Attachment L: REAC Resident Assessment Follow-up Plan

The PHA submits the attached in response to issues related to communication and safety:

- A. **Communication** – To enhance better communication between the residents and PHA staff the following actions will be taken:
1. Initiate more personal contact with various residents.
 2. Encourage resident participation in responding to surveys.
 3. Encourage resident input in all relevant issues.
 4. Improve the procedures in place for the dissemination of information concerning changes in policies, construction and any other issues that are likely to impact residents.
 5. Encourage interest and participation of both non-elderly and elderly residents in the issues of each.
 6. Schedule more regular resident meetings and at different locations.
 7. Encourage and support the formation of a more formal resident organization.
- A. **Safety** – To comply with safety regulations the PHA will re-emphasize the following:
1. Encourage residents to report needed repairs.
 2. Do preventative maintenance checks
 3. Request from city and/or provide additional security lighting
 4. Encourage residents to report unauthorized persons living and/or loitering on PHA property.
 5. Encourage residents to call the police (911) when they feel threatened.
 6. Provide additional locks as necessary.
 7. Include in Capital Fund Program any major items pertaining to security.
 8. Perform additional inspections as necessary in addition to those required annually.

Attachment M: Pet Policy for Elderly and Families

The Waelder Housing Authority currently has a Pet Policy for Elderly and Family Tenants, which outlines all of the issues, procedures and rules related to the following topics:

1. Pet Violation Procedure
2. Violation Rule Meeting
3. Removal Notice
4. Procedure to Terminate Pet Owners Residency
5. Protection of the Pet
6. Nuisance/Threat to Health or Safety
7. Application of Rules
8. Conditional Authorization for Pet
9. Pet Deposit
10. Liability
11. Description of Pet.