

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

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Small PHA Plan Update  
Annual Plan for Fiscal Year: **2003**

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

## PHA Plan Agency Identification

**PHA Name:** Joint City of Republic Ferry County Housing Authority

**PHA Number:** WA069

**PHA Fiscal Year Beginning: (January 2003)**

### PHA Plan Contact Information:

Name: Teri Cruz

Phone: (509) 775-3924

TDD: None

Email (if available): [ferryha@televar.com](mailto:ferryha@televar.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 2003**

[24 CFR Part 903.7]

**i. Table of Contents**

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

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- Other (List below, providing each attachment name)
  - Attachment D Budget 2003

## **ii. Executive Summary**

[24 CFR Part 903.7 9 (r)]

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

### **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 Ferry County Housing Authority will continued to administer the Transitional Housing, Operating and Rents (THOR Program). Initially in (2001-2002) we received fewer funds then in the prior year. However, additional funds were granted and the contract amended later in the contract year. This year (2002-2003) we applied for and received more funding in the amount of \$10,281.**

**The housing authority plans to continue to administer the HOME/TBRA Program providing supportive services and rental assistance to a greater number of individuals and families. We applied for and received \$125,000 in HOME/TBRA funds. This is a one-year contract and is a substantial increase.**

**We have renewed our application for HUD McKinney Funds to help support the case management of the Family Independence Program (FIP). Pending the grant award we plan to increase the number of participants for this program.**

**We have also initiated the update of our Administrative Plan. The Ferry County Housing Authority continues to implement the 5-year plan and provide housing assistance to the communities of Ferry County.**

### **2. Capital Improvement Needs**

[24 CFR Part 903.7 9 (g)]

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

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

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

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

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

The Capital Fund Program Annual Statement is provided as Attachment

**3. Demolition and Disposition**

[24 CFR Part 903.7 9 (h)]

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

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

2. Activity Description

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

- |  |
|--|
| <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**

[24 CFR Part 903.7 9 (k)]

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

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

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

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

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

[24 CFR Part 903.7 (m)]

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

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

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

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

D.  Yes  No: The PHDEP Plan is attached at Attachment \_\_\_\_\_

## **6. Other Information**

[24 CFR Part 903.7 9 (r)]

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

1.  Yes  No: Did the PHA receive any comments on the PHA Plan from the Resident Advisory Board/s?
2. If yes, the comments are Attached at Attachment (File name)
3. In what manner did the PHA address those comments? (select all that apply)
  - The PHA changed portions of the PHA Plan in response to comments  
A list of these changes is included  
 Yes  No: below or  
 Yes  No: at the end of the RAB Comments in Attachment \_\_\_\_.
  - Considered comments, but determined that no changes to the PHA Plan were necessary. An explanation of the PHA's consideration is included at the at the end of the RAB Comments in Attachment \_\_\_\_.
  - Other: (list below)

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

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

1. Consolidated Plan jurisdiction: (provide name here)
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)
    - Apply for and administer the HOME/TBRA Voucher

- Apply for and administer the Housing Choice Voucher
- Apply for and administer the THOR Program
- Provide Case Management in an ongoing process to all Family Independence Program (FIP) and Family Self-Sufficiency (FSS) Participants.
- Continue to provide up to \$25,000 for the Emergency Repair Program for Seniors.
- Continued sustainability procedures for the Housing Rehabilitation and Home Purchase Program.
- Continue to establish partnerships in a collaborative effort to provide Assisted Living Housing in Ferry County.

3. PHA Requests for support from the Consolidated Plan Agency

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

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

The Ferry County Continuum of Care Plan Supports the PHA Plan as maintained in the Ferry County Continuum of Care Strategy for Homelessness (April 1998).

STRATEGY #1

Develop housing projects to fill Continuum of Care Gaps.

STRATEGY #2

Continue to dedicate and access new resources and create collaborative relationships to expand the continuum of life skills training and other supporting services that will be accessible throughout the County.

STRATEGY #3

Establish a Case Management/Homeless Task Force to continue annual Continuum of Care development support projects that fill community gaps, and expand community awareness of causes and solutions to homelessness.

## C. Criteria for Substantial Deviation and Significant Amendments

### 1. Amendment and Deviation Definitions

24 CFR Part 903.7(r)

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

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

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

<b>List of Supporting Documents Available for Review</b>		
<b>Applicable &amp; On Display</b>	<b>Supporting Document</b>	<b>Related Plan Component</b>
YES	PHA Plan Certifications of Compliance with the PHA Plans and Related Regulations	5 Year and Annual Plans
YES	State/Local Government Certification of Consistency with the Consolidated Plan (not required for this update)	5 Year and Annual Plans
YES	Fair Housing Documentation Supporting Fair Housing Certifications: Records reflecting that the PHA has examined its programs or proposed programs, identified any impediments to fair housing choice in those programs, addressed or is addressing those impediments in a reasonable fashion in view of the resources available, and worked or is working with local jurisdictions to implement any of the jurisdictions’ initiatives to affirmatively further fair housing that require the PHA’s involvement.	5 Year and Annual Plans
YES	Housing Needs Statement of the Consolidated Plan for the jurisdiction/s in which the PHA is located and any additional backup data to support statement of housing needs in the jurisdiction	Annual Plan: Housing Needs
NO	Most recent board-approved operating budget for the public housing program	Annual Plan: Financial Resources
NO	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
NO	Any policy governing occupancy of Police Officers in Public Housing <input type="checkbox"/> check here if included in the public housing A&O Policy	Annual Plan: Eligibility, Selection, and Admissions Policies
YES	Section 8 Administrative Plan	Annual Plan: Eligibility, Selection, and Admissions Policies
NO	Public housing rent determination policies, including the method for setting public housing flat rents <input type="checkbox"/> check here if included in the public housing A & O Policy	Annual Plan: Rent Determination
NO	Schedule of flat rents offered at each public housing development <input type="checkbox"/> check here if included in the public housing A & O Policy	Annual Plan: Rent Determination

<b>List of Supporting Documents Available for Review</b>		
<b>Applicable &amp; On Display</b>	<b>Supporting Document</b>	<b>Related Plan Component</b>
YES	Section 8 rent determination (payment standard) policies <input type="checkbox"/> check here if included in Section 8 Administrative Plan	Annual Plan: Rent Determination
NO	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
NO	Results of latest binding Public Housing Assessment System (PHAS) Assessment	Annual Plan: Management and Operations
NO	Follow-up Plan to Results of the PHAS Resident Satisfaction Survey (if necessary)	Annual Plan: Operations and Maintenance and Community Service & Self-Sufficiency
YES	Results of latest Section 8 Management Assessment System (SEMAP)	Annual Plan: Management and Operations
YES	Any required policies governing any Section 8 special housing types <input type="checkbox"/> check here if included in Section 8 Administrative Plan	Annual Plan: Operations and Maintenance
NO	Public housing grievance procedures <input type="checkbox"/> check here if included in the public housing A & O Policy	Annual Plan: Grievance Procedures
YES	Section 8 informal review and hearing procedures <input type="checkbox"/> check here if included in Section 8 Administrative Plan	Annual Plan: Grievance Procedures
NO	The HUD-approved Capital Fund/Comprehensive Grant Program Annual Statement (HUD 52837) for any active grant year	Annual Plan: Capital Needs
NO	Most recent CIAP Budget/Progress Report (HUD 52825) for any active CIAP grants	Annual Plan: Capital Needs
NO	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
YES	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
NO	Approved or submitted applications for demolition and/or disposition of public housing	Annual Plan: Demolition and Disposition
NO	Approved or submitted applications for designation of public housing (Designated Housing Plans)	Annual Plan: Designation of Public Housing
NO	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

<b>List of Supporting Documents Available for Review</b>		
<b>Applicable &amp; On Display</b>	<b>Supporting Document</b>	<b>Related Plan Component</b>
NO	Approved or submitted public housing homeownership programs/plans	Annual Plan: Homeownership
NO	Policies governing any Section 8 Homeownership program (section _____ of the Section 8 Administrative Plan)	Annual Plan: Homeownership
YES	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
YES	FSS Action Plan/s for public housing and/or Section 8	Annual Plan: Community Service & Self-Sufficiency
YES	Section 3 documentation required by 24 CFR Part 135, Subpart E	Annual Plan: Community Service & Self-Sufficiency
YES	Most recent self-sufficiency (ED/SS, TOP or ROSS or other resident services grant) grant program reports	Annual Plan: Community Service & Self-Sufficiency
NO	The most recent Public Housing Drug Elimination Program (PHDEP) semi-annual performance report	Annual Plan: Safety and Crime Prevention
NO	PHDEP-related documentation: <ul style="list-style-type: none"> <li>· Baseline law enforcement services for public housing developments assisted under the PHDEP plan;</li> <li>· Consortium agreement/s between the PHAs participating in the consortium and a copy of the payment agreement between the consortium and HUD (applicable only to PHAs participating in a consortium as specified under 24 CFR 761.15);</li> <li>· Partnership agreements (indicating specific leveraged support) with agencies/organizations providing funding, services or other in-kind resources for PHDEP-funded activities;</li> <li>· Coordination with other law enforcement efforts;</li> <li>· Written agreement(s) with local law enforcement agencies (receiving any PHDEP funds); and</li> <li>· All crime statistics and other relevant data (including Part I and specified Part II crimes) that establish need for the public housing sites assisted under the PHDEP Plan.</li> </ul>	Annual Plan: Safety and Crime Prevention
NO	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
YES	The results of the most recent fiscal year audit of the PHA conducted under section 5(h)(2) of the U.S. Housing Act of 1937 (42 U. S.C. 1437c(h)), the results of that audit and the PHA's response to any findings	Annual Plan: Annual Audit
NO	Troubled PHAs: MOA/Recovery Plan	Troubled PHAs
NO	Other supporting documents (optional) (list individually; use as many lines as necessary)	(specify as needed)



**Required Attachment B: 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:

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

- Elected
- Appointed

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

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

- the PHA is located in a State that requires the members of a governing board to be salaried and serve on a full time basis
- the PHA has less than 300 public housing units, has provided reasonable notice to the resident advisory board of the opportunity to serve on the governing board, and has not been notified by any resident of their interest to participate in the Board.
- Other (explain): Section 8 only. No Resident Advisory Board. The County Commissioners and the City Council appoint the Governing Board (see Attachment C)

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): The City Council Members:

- Fred Bremner (Council Member)
- Shirley Couse (Mayor )
- Kathy Gay (Council Member)
- Linda Hall (Council Member)
- Dan Hussey (Council Member)

## **Required Attachment C : Membership of the Resident Advisory Board or Boards**

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

The Ferry County Housing Authority falls within the Federal Register 24CFR 903 guidelines. Residents were notified in writing requesting volunteers to participate as Resident Advisory Board members in the development of the Plan. We received no response to this request. Therefore, the Housing Authority wrote the proposed Plan.

All information relevant to the public hearing has been made available to the public and Residents for inspection at least 45 days before the hearing. A notice has been published and Resident and community members are invited to review the plan, attend the hearing and are requested to provide comments.

Because the Joint City of Republic-Ferry County Housing Authority provides services to less than 150 total Resident families, under the aforementioned CFR's it is believed the Housing Authority is exempt from having Resident Advisory Council representation.

## ATTACHMENT D

### 2. Statement of Financial Resources

### Final 2002 Statement

[24 CFR Part 903.7 9 (b)]

<b>Financial Resources: Planned Sources and Uses</b>		
<b>Sources</b>	<b>Planned \$</b>	<b>Planned Uses</b>
<b>1. Federal Grants (FY 2001 grants)</b>		
a) Public Housing Operating Fund		
b) Public Housing Capital Fund		
c) HOPE VI Revitalization		
d) HOPE VI Demolition		
e) Annual Contributions for Section 8 Tenant-Based Assistance	\$ 73,440	
f) Public Housing Drug Elimination Program (including any Technical Assistance funds)		
g) Resident Opportunity and Self-Sufficiency Grants	\$ 2,400	
h) Community Development Block Grant		
i) HOME/TBRA	\$125,000	Rental Assistance
Other Federal Grants (list below)		
<b>2. Prior Year Federal Grants (unobligated funds only) (list below)</b>		
<b>3. Public Housing Dwelling Rental Income</b>		
<b>4. Other income</b> (list below)		
Rental Income-Special Needs	\$ 41,000	
Rental Income-Kean St. Duplex	\$ 9,000	Admin & Operation
Rental Income-Pine Bluff Seniors	\$ 44,000	Admin & Operation
Rental Income-San Poil Plaza	\$ 50,000	Admin & Operation
Rental Income-Heather Hill Apt.	\$ 20,000	Admin & Operation
<b>4. Non-federal sources</b> (list below)		
Rural Rehab Collaboration	\$ 11,270	Tech. Support
Housing Rehab/Purchase Program	\$233,650	Revolving Loan Fund
Section 8 Portables	\$ 14,560	Rent Assistance
HUD McKinney	\$ 39,980	Family Indep. Program (FIP)
THOR	\$ 10,200	Rental Assistance
<b>Total Resources</b>	<b>\$674,500</b>	

**STATEMENT OF FINANCIAL RESOURCES 2003**

1	<b>Income/Receipts for Public Housing</b>	
2	Rental Income	
3	Investment Income	
4	Entrepreneurial Activities	
5	Donations	
6	Leveraged Funds	
7	Operating Fund Receipts	
8	Current Capital Fund Receipts	
9	Prior Year Capital Fund Receipts	
10	Current Drug Elimination Program Receipts	
11	Prior Year Drug Elimination Receipts	
12	Other Grant Receipts	
13	Other : _____	
14	Other : _____	
15	Other : _____	
16	Other : _____	
17	<b>Total Public Housing Income</b>	
18		
19	<b>Expenditures for Public Housing</b>	
20	Capital Fund Expenditures	
21	New Development Expenditures	
22	Anti-Crime and Security Expenditures	
23	Resident Services Expenditures	
24	Program Administration Expenditures	
25	Contributions to Reserve Account	
26	<b>Total Public Housing Expenditures</b>	
27		
28	<b>Income/Receipts for Tenant-Based Assistance</b>	
29	Annual HAP Contribution	\$88,332
30	Administrative Reserve Interest Income	
31	<b>Total Tenant-Based Income</b>	<b>\$88,332</b>
32		
33	<b>Expenditures for Tenant-Based Assistance</b>	
34	HAP Payment to Owners	\$77,796
35	Program Administration Expenditures	\$ 10,536
36	Contributions to Administrative Reserve	
37	<b>Total Tenant-Based Expenditures</b>	<b>\$88,332</b>
38		
39	<b>Public Housing Reserves</b>	
40	<b>Tenant-Based Administrative Reserves</b>	

