

HAMMOND HOUSING AUTHORITY Plans

5 Year Plan for Fiscal Years 2004 - 2008
Annual Plan for Fiscal Year 2004

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

HHA Plan Agency Identification

PHA Name: Hammond Housing Authority

HHA Number: IN010

HHA Fiscal Year Beginning: 01/2004

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 HHA
- PHA development management offices
- PHA local offices

Display Locations For PHA Plans and Supporting Documents

The HHA 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
HHA FISCAL YEARS 2004 - 2008
[24 CFR Part 903.5]

A. Mission

The Mission of the Hammond Housing Authority is to operate solely for the purpose of providing decent, safe and sanitary dwellings within the financial reach of families of low and moderate income as to promote service, efficiency and economy and in such manner as to achieve the economic advancement and social well-being of the residents, ensuring that the facilities owned are a marketable asset to the community while identifying and addressing housing needs of the City of Hammond.

Goals

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

- HHA Goal: Expand the supply of assisted housing
- Objectives:
- Apply for additional rental vouchers: a minimum of 50 per year as new funding is made available.
 - Reduce public housing vacancies:
 - Leverage private or other public funds to create additional housing opportunities: Apply for grants and other funding sources annually.
2003 PROGRESS REPORT Housing Authority's Non-for-profit CHDO (community housing development organization) is continuing to use some HOME funds, for reimbursement of acquisition & rehab costs of HUD homes and homebuyer assistance. An application was submitted in September 2003 to the Affordable Housing Program to the Federal Home Loan Bank of Indianapolis.
 - Acquire or build units or developments
2003 PROGRESS REPORT: Housing Authority's Non-for-profit CHDO (community housing development organization) in partnership with the Hammond Housing Authority acquired it's third HUD Dollar home in 2003. The second HUD Dollar home has been completely rehabbed and was purchased by a Public Housing family.

- Hammond Housing Authority Goal: Improve the quality of assisted housing.
Objectives:
- Improve public housing management: (PHAS score)
 - Improve voucher management: (SEMAP score)
2003 PROGRESS REPORT: Leaseup as of August 2003 has averaged 98.65%.
 - Increase customer satisfaction:
2003 PROGRESS REPORT: H.C.V. has a Customer Service Plan
 - Concentrate on efforts to improve specific management functions:
(list; e.g., public housing finance; voucher unit inspections)
 - Renovate or modernize public housing units:
2003 PROGRESS REPORT:
*Rehab of 6 units in Columbia Center were completed in July 2003;
A Garage/storage facility building extention tahe current
Administration/Maintenance Bldg. was completed in August 2003.
Master Plan completed for Columbia Center*
 - Converted to a new Housing Authority Software.*
 - Boiler in the Senior Bldg. replaced*
 - Demolish or dispose of obsolete public housing:
Master Plan for the next 5 years includes some building demolition
 - Provide replacement public housing.
 - Provide replacement vouchers:
 - Other:
- Hammond Housing Authority Goal: Increase assisted housing choices
Objectives:
- Provide voucher mobility counseling: Information provided in the Initial briefing packet **2003 PROGRESS REPORT: Ongoing briefings are conducted with voucher mobility information to initial issuances.**
 - Conduct outreach efforts to potential voucher landlords, attract a minimum of 50 new landlords by 2004.
2003 PROGRESS REPORT: From January – July 2003 a total of 65 new Landlords partnered with our agency. A professional marketing brochure and pamphlet is used for outreach. Second Annual Landlord appreciation dinner will be held on November 7th 2003.
 - Increase voucher payment standards
 - Implement voucher homeownership program: By December 2005

- Implement public housing or other homeownership programs: Continue providing Housing Counseling Services for 1st time homebuyers.
2003 PROGRESS REPORT: During the first eight months of 2003, there were 59 families that received homeownership counseling. Nine families decided not to purchase housing due to their credit and open up a savings account. There were twenty two families that closed on a home after receiving counseling. One family was from the Columbia Center public housing complex and three families were from the Section 8 Housing Choice Voucher Program.
- 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

- Hammond Housing Authority Goal: Provide an improved living environment
Objectives:
 - Implement measures to de-concentrate poverty by bringing higher income public housing households into lower income developments: 25% of the Public housing units shall be occupied by residents with higher income By year end.
 - 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:
2003 PROGRESS REPORT: Additional lighting and cameras installed at Hi-rise.
 - 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

Hammond Housing Authority Goal: Promote self-sufficiency and asset development of assisted households

Objectives:

Increase the number and percentage of employed persons in assisted families: Continue to recruit Family Self-Sufficiency participants. **2003 PROGRESS REPORT:** *PHA: 16 PHA clients currently enrolled. 9 Active escrow accounts; 5 earning escrow; 7 currently employed; 4 Attending School (GED Or Post Secondary). The PHA FSS program clients are being re-evaluated on their goals, and the needs to meet each goal. Updating resumes, credit issues, transportation are the top priorities with them. HCV: 37 HCV clients currently enrolled; 25 active escrow accounts; 15 earning escrow; 14 currently employed Full Time; 8 currently employed Part Time; 14 attending School (GED or Post Secondary). The Housing Choice Voucher FSS program clients are focused on establishing Homeownership requirements: 1) Steady Income (employment); 2) Credit Report Debt reduction; 3) Reduction of high monthly debts (Credit cards/car payments); 4) Cash on hand (establishing savings/checking/IDA accounts). From January to August 2003, the FSS has had 4 Contract completions, 2 of those became homeowners.*

Provide or attract supportive services to improve assistance recipients employability: Pursue any available funding to provide onsite services and continue to network with local agencies.

Progress Report 2003:

#1 – Fathers & Families is a Program designed to promote beneficial interaction between fathers and their children. The Program is designed to teach parenting skills, increase involvement with children and establish co-parenting relationships. Program services are directed toward family reunification, familial responsibility and child welfare. This is the third year HHA has been awarded a grant to conduct the Program.

#2 – Job Search Mondays provides Housing Authority residents a source for current job openings throughout Lake County, Indiana. Residents can peruse employment opportunities, receive help developing resumes and obtain referrals to jobs, training and counseling.

#3 – Sunshine Daycare Center provides Housing Authority residents with a safe, caring environment for their children while pursuing education or going to work. The Daycare is underwritten by CDBG funding and child care vouchers.

#4 – Home Start Family Services and Hammond Housing Authority have been collaborating over two years to provide counseling and support services to residents within their home environment. Under the auspices of Purdue University Calumet, Home Start works with troubled families helping them develop Coping skills, provides addiction referrals, addresses child abuse Issues and offers support during times of duress resulting in Stressful circumstances for the families.

#5 – On-Site Banking Services through Bank Calumet was developed to provide banking services to residents at the PHA. The site provides checking and savings opportunities, along with IDA opportunities. Banking personnel teach resident’s checking account etiquette, the benefit of savings and offer essential services to residents who normally do not have access to traditional financial institutions.

- Provide or attract supportive services to increase independence for the elderly or families with disabilities. Agency applied for Service Coordinator funding for supportive services. On-going networking with local senior/disabled Social Service Agencies.
- Other: (list below)

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

- HHA 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: **Continue to network with local Service Agencies.**

- 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)
Annually conduct onsite Fair Housing & Equal Opportunity sessions for all Housing Authority staff. **2003 PROGRESS REPORT: Conducting a Fair Housing Training for entire staff on October 29, 2003.**

Annual HHA Plan
HHA Fiscal Year 2002
[24 CFR Part 903.7]

i. Annual Plan Type:

Select which type of Annual Plan the PHA will submit.

Streamlined Plan:

High Performing PHA

ii. Executive Summary of the Annual HHA Plan

[24 CFR Part 903.7 9 (r)]

Operate & manage the Hammond Housing Authority's housing developments in an efficient and effective manner thereby maintaining a high performer rating, provide a safe and secure environment within the housing developments, expand the range and quality of housing choices available to participants in the tenant-based assistance program.

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.

Table of Contents

	<u>Page #</u>
Annual Plan	
i. Executive Summary	1
ii. Table of Contents	2
1. Housing Needs	6
2. Financial Resources	13
3. Policies on Eligibility, Selection and Admissions	15
4. Rent Determination Policies	25
5. Capital Improvement Needs	31
6. Voluntary Conversions of Public Housing	36
7. Civil Rights Certifications	44
8. Audit	44
9. Other Information: Resident Advisory	45
10. Substantial Deviations	48
11. Resident Member on the HHA governing Board	49
12. Membership of the Resident Advisory Board	50
13. RASS – Follow-up plan	51

Attachments

Required Attachments:

- Admissions Policy for De-concentration
- FY 2004 Capital Fund Program Annual Statement (**attachment file in010a04**)
- Most recent board-approved operating budget (Required Attachment for PHAs that are troubled or at risk of being designated troubled ONLY)

Optional Attachments:

- PHA Management Organizational Chart
- FY 2004 Capital Fund Program 5 Year Action Plan (**attachment in010a04**)
- Public Housing Drug Elimination Program (PHDEP) Plan:
- Comments of Resident Advisory Board or Boards (must be attached if not included in HHA Plan text)

- Other (List below, providing each attachment name)

Supporting Documents Available for Review

List of Supporting Documents Available for Review		
Applicable & On Display	Supporting Document	Applicable Plan Component
A	PHA Plan Certifications of Compliance with the PHA Plans and Related Regulations	5 Year and Annual Plans
A	State/Local Government Certification of Consistency with the Consolidated Plan	5 Year and Annual Plans
A	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
A	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
A	Most recent board-approved operating budget for the public housing program	Annual Plan: Financial Resources;
A	Public Housing Admissions and (Continued) Occupancy Policy (A&O), which includes the Tenant Selection and Assignment Plan [TSAP]	Annual Plan: Eligibility, Selection, and Admissions Policies
A	Section 8 Administrative Plan	Annual Plan: Eligibility, Selection, and Admissions Policies
A	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
A	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
A	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
A	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	Applicable Plan Component
	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
A	Public housing grievance procedures <input type="checkbox"/> check here if included in the public housing A & O Policy	Annual Plan: Grievance Procedures
A	Section 8 informal review and hearing procedures <input checked="" type="checkbox"/> check here if included in Section 8 Administrative Plan	Annual Plan: Grievance Procedures
A	The HUD-approved Capital Fund/Comprehensive Grant Program Annual Statement (HUD 52837) for the active grant year	Annual Plan: Capital Needs
	Most recent CIAP Budget/Progress Report (HUD 52825) for any active CIAP grant	Annual Plan: Capital Needs
A	Most recent, approved 5 Year Action Plan for the Capital Fund/Comprehensive Grant Program, if not included as an attachment (provided at PHA option)	Annual Plan: Capital Needs
	Approved 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 disposition of public housing	Annual Plan: Demolition and Disposition
	Approved or submitted applications for designation of public housing (Designated Housing Plans)	Annual Plan: Designation of Public Housing
	Approved or submitted assessments of reasonable revitalization of public housing and approved or submitted conversion plans prepared pursuant to section 202 of the 1996 HUD Appropriations Act	Annual Plan: Conversion of Public Housing
	Approved or submitted public housing homeownership programs/plans	Annual Plan: Homeownership
	Policies governing any Section 8 Homeownership program <input type="checkbox"/> check here if included in the Section 8 Administrative Plan	Annual Plan: Homeownership
	Any cooperative agreement between the PHA and the TANF agency	Annual Plan: Community Service & Self-Sufficiency
A	FSS Action Plan/s for public housing and/or Section 8	Annual Plan: Community Service & Self-Sufficiency
	Most recent self-sufficiency (ED/SS, TOP or ROSS or other resident services grant) grant program reports	Annual Plan: Community Service & Self-Sufficiency
	The most recent Public Housing Drug Elimination Program (PHDEP) semi-annual performance report for any open grant and most recently submitted PHDEP application (PHDEP Plan)	Annual Plan: Safety and Crime Prevention
A	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

List of Supporting Documents Available for Review		
Applicable & On Display	Supporting Document	Applicable Plan Component
	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

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

Housing Needs of Families in the Jurisdiction by Family Type							
Family Type	Overall	Afford-ability	Supply	Quality	Access-ibility	Size	Loca-tion
Income <= 30% of AMI	3210	5	5	4	4	3	3
Income >30% but <=50% of AMI	1536	4	4	3	3	3	3
Income >50% but <80% of AMI	2328	3	3	3	3	3	3
Elderly	2113	3	3	3	4	2	2
Families with Disabilities	N/A						
Race/Ethnicity -B	1366	4	3	3	3	3	3
Race/Ethnicity -W	2089	4	3	3	2	3	2
Race/Ethnicity -H	840	4	3	3	3	4	3
Race/Ethnicity							

What sources of information did the PHA use to conduct this analysis? (Check all that apply; all materials must be made available for public inspection.)

- Consolidated Plan of the Jurisdiction/s
Indicate year: 03
- U.S. Census data: the Comprehensive Housing Affordability Strategy (“CHAS”) dataset
- American Housing Survey data
Indicate year:
- Other housing market study
Indicate year:
- Other sources: (list and indicate year of information)

B. Housing 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/sub jurisdiction:			
	# of families	% of total families	Annual Turnover
Waiting list total	953		
Extremely low income <=30% AMI	886	.96	
Very low income (>30% but <=50% AMI)	57	.06	
Low income (>50% but <80% AMI)		.01	
Families with children	798	.84	
Elderly families	40	.04	
Families with Disabilities	115	.12	
Race/-White	186	.20	
Race/Black	767	.80	
Race/ - Ethnicity Hispanic	89	.09	
Race/- Ethnicity - Other	0	0	
Characteristics by Bedroom Size (Public Housing Only)			
1BR	205	21.29	
2 BR	422	43.85	
3 BR	249	25.88	
4 BR	76	7.89	
5 BR	0	0	

Housing Needs of Families on the Waiting List			
5+ BR	0	0	
Is the waiting list closed (select one)? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes			
If yes:			
How long has it been closed (# of months)? 10/9/03 (less than a month)			
Does the PHA expect to reopen the list in the PHA Plan year? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes			
Does the PHA permit specific categories of families onto the waiting list, even if generally closed? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes- Seniors/Disabled for Senior Bldg.			

Housing Needs of Families on the Waiting List			
Waiting list type: (select one)			
<input checked="" type="checkbox"/> Section 8 tenant-based assistance			
<input 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:			
	# of families	% of total families	Annual Turnover
Waiting list total	312		
Extremely low income <=30% AMI	251	80.45	
Very low income (>30% but <=50% AMI)	47	15.06	
Low income (>50% but <80% AMI)	6	1.92	
Families with children	283	90.71	
Elderly families	3	.96	
Families with Disabilities	26	8.33	
Race/ethnicity- White	31	9.94	
Race/ethnicity – Black	279	89.42	
Race/ethnicity - Hispanic	15	4.81	
Race/ - Other	2	.64	

Housing Needs of Families on the Waiting List			
Characteristics by Bedroom Size (Public Housing Only)			
1BR	117	.22	
2 BR	232	.43	
3 BR	134	.25	
4 BR	54	.10	
5 BR	0	0	
5+ BR	0	0	
Is the waiting list closed (select one)? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes If yes: How long has it been closed (# of months) 24 Does the PHA expect to reopen the list in the PHA Plan year? <input checked="" type="checkbox"/> Yes Does the PHA permit specific categories of families onto the waiting list, even if generally closed? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes- HHA displaced residents for Capital Improvements.			

C. Strategy for Addressing Needs

Hammond Housing Authority’s Admissions/Occupancy Department will continuously conduct a strong outreach to all local Churches and Social Service Agencies and Community involvement of activities.

(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
- 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
- Increase section 8 lease-up rates by marketing the program to owners, particularly those outside of areas of minority and poverty concentration
- 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)

Develop a plan to accelerate the modernization of our Public Housing unit Inventory.

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

Select all that apply

- Apply for additional section 8 units should they become available
- Develop a plan to 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 HHA'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 HHA 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)]

Financial Resources: Planned Sources and Uses		
Sources	Planned \$	Planned Uses
1. Federal Grants (FY 2004 grants)		
a) Public Housing Operating Fund	875,586	
b) Public Housing Capital Fund	1,430,568	
c) HOPE VI Revitalization	0	
d) HOPE VI Demolition	0	
e) Annual Contributions for Section 8 Tenant-Based Assistance	3,973,163	
f) Public Housing Drug Elimination Program (including any Technical Assistance funds)		
g) Resident Opportunity and Self-Sufficiency Grants	46,200	
h) Community Development Block Grant	34,700	Supportive Services
i)		
Other Federal Grants (list below)		
Housing Counseling	19,069	Supportive Services
Fathers & Families	47,300	Supportive Services
2. Prior Year Federal Grants (unobligated funds only) (list below)		
Capitol Fund 2003	1,430,568	P.H. Capitol Improvements
Capitol Fund 2002	337,071	P.H. Capitol Improvements
Capitol Fund 2001	41,026	P.H. Capitol Improvements
PHDEP Anti-Drug		P.H. Safety/Security P.H. Safety/Security
3. Public Housing Dwelling Rental Income	1,007,000	P.H. Operations
4. Other income (list below)		
Interest	35,000	Operations
Electric Utility & Other Misc.	12,500	Operations
4. Non-federal sources (list below)		
Step Ahead - State	36,000	P.H. Supportive Services

Financial Resources: Planned Sources and Uses		
Sources	Planned \$	Planned Uses
Total resources	9,325,751	

[24 CFR Part 903.7 9 (c)]

2. HHA Policies Governing Eligibility, Selection, and Admissions

A. Public Housing

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

(1) Eligibility

a. When does the HHA 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)
- When families are within a certain time of being offered a unit: (state time)
- Other: (describe)

Eligibility is verified at initial application and re-verified at pre-move interview.

b. Which non-income (screening) factors does the HHA 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 HHA request criminal records from local law enforcement agencies for screening purposes?

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

e. Yes No: Does the HHA 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 HHA 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?

- HHA main administrative office

- HHA 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 HHA 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
- Over-housed
- Under-housed
- Medical justification
- Administrative reasons determined by the PHA (e.g., to permit modernization work)
- Resident choice: (state circumstances below)
- Other: (list below)
Hate crimes, witness or victim witness.

c. Preferences

1. Yes No: Has the HHA 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 HHA 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)
Elderly/Disabled, Indiana Residents, Economic hardship

3. If the HHA 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.

Date and Time:

- 1 - Date and Time
- 1 - Residents who live and/or work in the jurisdiction
- 2 – Indiana Residents

Former Federal preferences:

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

Other Local Preferences:

- 4 - Victims of Reprisals or Hate Crimes
- 4 - Those currently enrolled in educational training or upward mobility programs
- 4 - Household that contribute to meeting income goals (broad range of incomes)
- 5 - Veterans and Veterans families
- 4 - Other Preferences: Elderly/Disabled, Indiana residents, Economic Hardship

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 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): Elderly/Disabled, Indiana resident

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 HHA 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 Hammond Housing Authority's resident lease
- The Hammond Housing Authority's Admissions and (Continued) Occupancy Policy
- Hammond Housing Authority's briefing seminars or written materials
- Other source:
Tenant Handbook

b. How often must residents notify the HHA 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

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

b. Yes No: Did the HHA adopt any changes to its **admissions policies** based on the results of the required analysis of the need to promote de-concentration 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 de-concentration 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:

Columbia Center

Other (list policies and developments targeted below)

d. Yes No: Did the HHA adopt any changes to **other** policies based on the results of the required analysis of the need for de-concentration 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 de-concentration of poverty and income-mixing
- Other (list below)

f. Based on the results of the required analysis, in which developments will the HHA 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:

Columbia Center

g. Based on the results of the required analysis, in which developments will the HHA 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:

Turner Park

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 HHA? (select all that apply)

- Criminal or drug-related activity only to the extent required by law or regulation
- Criminal and drug-related activity, more extensively than required by law or regulation
- More general screening than criminal and drug-related activity (list factors below)
- Other (list below)

- b. Yes No: Does the HHA request criminal records from local law enforcement agencies for screening purposes?
- c. Yes No: Does the HHA request criminal records from State law enforcement agencies for screening purposes?
- d. Yes No: Does the HHA 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:
- Information shared by previous landlord regarding rent payment, any warnings
And lease violations.

(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:

The Section 8 Office or designated sites, when applications are being accepted.

(3) Search Time

- a. Yes No: The HHA gives automatic standard 120-day period to search for a unit.

If yes, state circumstances below: At Initial issuance, the full 120 days is automatically given.

(4) Admissions Preferences

a. Income targeting

- Yes No: Does the HHA 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 HHA 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):
Lake County residents and Indiana State residents. Applicants who are 62 Years of age or older or disabled or receiving payments based on inability to Work.
Hammond Housing Authority Public Housing Residents who are displaced due to Capital Improvements and there is no vacancy to accommodate the family size.

3. If the HHA 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
- 1 Residents who live and/or work in the jurisdiction
- 1 Public Housing Authority Residents who are relocated due to Capital Improvements and for which appropriate unit size is not available.

Former Federal preferences

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

Other Preferences:

- 2 - Lake County Resident
- 3 - Indiana State Resident
- 3- Those enrolled currently in educational, training or upward mobility prog.
- 4 - Veterans and Veteran’s families
- 5 - Applicants who are 62 years of age or older or disabled or receiving payments based on inability to work.

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 preferences:

Lake County residents and/or Indiana State resident applicants 62 years of age

Or older or disabled or receiving payments based on inability to work.

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 HHA 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 HHA 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

- o 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 HHA contained? (select all that apply)

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

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

- Through published notices
 Other:

Radio, posted at Public Agencies.

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, the welfare rent, or minimum rent (less HUD mandatory deductions and exclusions). (If selected, skip to sub-component (2))

---or---

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

b. Minimum Rent

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

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

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

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

Residents with no real income will be allowed to work off any charges due the Housing Authority at the Federal Minimum wage.

Residents who have no real income who by reason of disability, infirmity or age, and unable to work off minimum rent obligation as established by previous Board resolution will have an established rent of (0) zero minimum rent.

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

1. Yes No: Does the HHA 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 HHA 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:

Child support payments for dependents not living in household, Union dues, Uniform Charges.

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)
- 95th 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) 25%
- Other :

Any time the family experiences a decrease in income;
Any time the family has a change in family composition

g. Yes No: Does the HHA 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 HHA 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)

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 HHA'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 HHA selected this standard? (select all that apply)

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

d. How often are payment standards reevaluated for adequacy? (select one)

- Annually
- Other:
When FMR's are published.

e. What factors will the HHA 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 HHA’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

[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 HHA 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.)

Program Name	Units or Families Served at Year Beginning	Expected Turnover
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)

- Section 8 Management: (list below)

6. HHH Grievance Procedures

[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 HHA 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 HHA Plan at Attachment (state name) (**attachment in010a04**)

-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 HHA providing an optional 5-Year Action Plan for the Capital Fund? (if no, skip to sub-component 7B)

b. If yes to question a, select one:

The Capital Fund Program 5-Year Action Plan is provided as an attachment to the PHA Plan at Attachment (state name(**attachment in010a04**))

-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 HHA 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 HHA plan to apply for a HOPE VI Revitalization grant in the Plan year?

If yes, list development name/s below:

Columbia Center

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

If yes, list developments or activities below:

If awarded a Hope VI Grant at Columbia Center Development

Yes No: e) Will the HHA 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:

At Columbia Center complex if awarded a Hope VI 2004 Grant

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 HHA 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 HHA 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.)

Demolition/Disposition Activity Description	
1a. Development name:	Columbia Center
1b. Development (project) number:	
2. Activity type:	Demolition <input checked="" type="checkbox"/> Disposition <input type="checkbox"/>
3. Application status (select one)	Approved <input type="checkbox"/> Submitted, pending approval <input type="checkbox"/> Planned application <input checked="" type="checkbox"/>
4. Date application approved, submitted, or planned for submission:	<u>(DD/MM/YY)</u>
5. Number of units affected:	35
6. Coverage of action (select one)	<input checked="" type="checkbox"/> Part of the development <input type="checkbox"/> Total development
7. Timeline for activity:	a. Actual or projected start date of activity: 2004 b. Projected end date of activity: 2005

9. Designation of Public Housing for Occupancy by Elderly Families or Families with Disabilities or Elderly Families and Families with Disabilities

[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 HHA 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 HHA 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: <u>(DD/MM/YY)</u>
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 HHA’s developments or portions of developments been identified by HUD or the HHA 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.)

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.

Conversion of Public Housing Activity Description
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
<p>5. Description of how requirements of Section 202 are being satisfied by means other than conversion (select one)</p> <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

3.11.2 Subcomponent B: Voluntary Conversions

a. How many of the PHA’s developments are subject to the Required Initial Assessments?

Two (2) – Columbia Center and Turner Park

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)?

One (1) Hubert Humphrey Building

c. How many Assessments were conducted for the PHA’s covered developments?

One assessment per development and one (1) overall assessment.

d. Identify PHA developments that may be appropriate for conversion based on the required the Required Assessment Assessments:

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

Columbia Center 400
 Turner Park 80

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

N/A

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

11. Homeownership Programs Administered by the PHA

[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 HHA 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 HHA 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.)

Public Housing Homeownership Activity Description (Complete one for each development affected)
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) <input type="checkbox"/> Part of the development <input type="checkbox"/> Total development

B. Section 8 Tenant Based Assistance

1. Yes No: Does the PHA plan to administer a Section 8 Homeownership program pursuant to Section 8(y) of the U.S.H.A. of 1937, as implemented by 24 CFR part 982 ? (If "No", skip to component 12; if "yes", describe each program using the table below (copy and complete questions for each program identified), unless the PHA is eligible to complete 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. HHA Community Service and Self-sufficiency Programs

[24 CFR Part 903.7 9 (l)]

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. HHA Coordination with the Welfare (TANF) Agency

1. Cooperative agreements:

- Yes No: Has the HHA 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)

If no, list steps the PHA will take below:

C. Welfare Benefit Reductions

1. The PHA is complying with the statutory requirements of section 12(d) of the U.S. Housing Act of 1937 (relating to the treatment of income changes resulting from welfare program requirements) by: (select all that apply)

- Adopting appropriate changes to the PHA's public housing rent determination policies and train staff to carry out those policies
- Informing residents of new policy on admission and reexamination
- Actively notifying residents of new policy at times in addition to admission and reexamination.
- Establishing or pursuing a cooperative agreement with all appropriate TANF agencies regarding the exchange of information and coordination of services
- Establishing a protocol for exchange of information with all appropriate TANF agencies
- Other: (list below)

D. Reserved for Community Service Requirement pursuant to section 12(c) of the U.S. Housing Act of 1937
--

13. PHA Safety and Crime Prevention Measures

[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 used 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 HHA 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 HHA 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 2002 in this PHA Plan? Yes
- Yes No: This PHDEP Plan is an Attachment.

Section 4: Certifications

14. RESERVED FOR PET POLICY

[24 CFR Part 903.7 9 (n)]

15. Civil Rights Certifications

[24 CFR Part 903.7 9 (o)]

The Hammond Housing Authority does hereby agree and certify that it will carry out this Agency Plan (both Five Year and Annual Plan) in compliance with all applicable civil rights requirements and will affirmatively further fair housing. In particular, we will comply with Title VI of the Civil Rights Act of 1964, the Fair Housing Act, section 504 of the Rehabilitation Act of 1973, and Title II of the Americans with Disabilities Act of 1990. This is in continuation of our long-standing anti-discrimination tradition.

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

16. Fiscal Audit

[24 CFR Part 903.7 9 (p)]

1. Yes No: Is the HHA 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. HHA Asset Management

[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 HHA 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 HHA 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 HHA receive any comments on the HHA 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
 - Provided below:

Resident Advisory Board Meeting (last of 4)
7329 Columbia Circle West, Hammond, Indiana
Held on September 9, 2003 at 1:00 p.m.

Executive Director Maria C. Becerra welcomed the residents and thanked them for coming today. This meeting is important today because our Agency Plan will soon have to be submitted to HUD and I want

your input, questions, suggestions and comments on the Agency Plan 2004. Today we will talk about what are plans are for the next 5 years and what your suggestions are.

As you know, we are finishing this phase of rehab units. We have a Master Plan we will talk about, but how do you think we look to the surrounding community? The residents responded, the new units look very good, each wished they all had rehabbed units.

Director Becerra stated, as we have spoken of in the past, it has been suggested that included in our Master Plan, the office (administration building) be moved off site. It has also been suggested that the first phase in our master plan perhaps will be a senior assisted living complex. We have lost some of our senior residents because they have gone to Nursing homes. An assisted senior complex would be wonderful, as there would be nursing assistance on site. Hammond has no in between housing choices for seniors. The Mayor also thinks this would be excellent for the City. Perhaps the Housing Authority could partner with St. Margaret's Hospital. We are looking at the senior complex for next year hopefully.

We have also discussed incubator homeownership, rent and eventually have residents who would own their own homes.

We are looking for any suggestions from you here today. We will be applying for Tax Credit, application for funding. Perhaps in 2005 we will start demolishing the two story apartments and approval must come from HUD first including a relocation plan.

The Last phase of our Plan will be homeownership. We are working very hard to change our image in this community.

Director Becerra ask for suggestions. Sandra Mikkelson stated it would be nice to have a strip mall, as it is hard for those who do not drive to get to places. Director Becerra again state how vital a tenant counsel is and encouraged the resident to continue attending the Crime Watch meeting.

Ms. Kyser ask about space for a senior coffee hour. Judy Turner to speak with Lark Lile, Resident Services about scheduling a space and time.

Ms. Pierce ask about placing wire trash containers for public use.

Ms. Pierce ask about having street drains cleaned out again (water stands in street after rain) - Judy to inform Dan.

Director Becerra ask those present to think of something for the 2004 Leadership education conference, I would like to have more residents attend, we do have the money for that purpose. Ms. Pierce did recite her experiences from her South Bend training.

Director Becerra ask each person in attendance today to come to the Public meeting in September and bring a neighbor with you.

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

- Considered comments, but determined that no changes to the PHA Plan were necessary.
- The HHA changed portions of the PHA Plan in response to comments
List changes below:
- Other: (list below)

Description of Election process for Residents on the HHA Board

- 1. Yes No: Does the HHA 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 HHA Board elected by the residents? (If yes, continue to question 3; if no, skip to sub-component C.)

2. Description of Resident Election Process – Appointed by Mayor

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)

Indiana State Statute 36-7-18-5 City Executive – Mayor appoints the Commissioners of the Housing Authority. The Mayor has appointed a Resident to the Board.

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: City of Hammond

- 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 HHA 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)

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

The Hammond Housing Authority is part of effort undertaken by the City of Hammond of Lake County, Indiana to address our jurisdiction's affordable housing needs. While we cannot ourselves meet the entire need identified here, in accordance with our goals included in this Plan, we will strive to address some of the identified needs by using appropriate resources to maintain and preserve our existing stock. When appropriate and feasible, we will apply for additional grants from federal, state and local sources, including private sources to help add to the affordable housing available in our community. Hammond Housing Authority intends to work with our local partners, the City of Hammond, H.H.A. 2000+, Hammond Elderly Housing, Inc. to try to meet this identified need.

D. Other Information Required by HUD

Use this section to provide any additional information requested by HUD.

Substantial deviations or significant amendments or modifications are defined as discretionary changes in the plans or policies of the Housing Authority that fundamentally change the mission, goals, objectives, or plans of the Agency and which require formal approval of the Board of Commissioners.

Attachments

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

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: Ms. Ruth Tall

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

- Elected
 Appointed

C. The term of appointment is (include the date term expires): 5/27/05

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: 5/27/04

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

Appointing Official: Mayor Duane W. Dedelow, Jr. Mayor of the City of Hammond

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.)

<u>Columbia Center</u>	<u>Turner Park</u>	<u>Section 8</u>
Sandra Mikkelson	Ruth Tall	Robert Anderson
Mame Kyser	Pearl Donaldson	Florine McGee
Judy Short	Annie Stadurs	Samuel Smith
Ola Pierce	Hagop Janian	
Mary Rak	Jack Wvesthoff	
Annette Liddell	Colleen Wright	
Sherman Dennison	Harold Schmueser	
	April Manley	
	Charles Stemper	
	Fred Bonior	
	Patricia Vaughn	
	Jacob Vincinguerra	
	Deanna Richardson	
	Jean Wartsbaugh	
	Linda Johnson	
	A. Sepulveda	

FOLLOW-UP PLAN
RASS

NEIGHBORHOOD APPEARANCE

How satisfied are you with the upkeep of the following areas in your development?

- **Common Areas**

Maintenance will inspect the area weekly and make necessary repairs and clean-ups as needed. Also Management will post “No Littering and/or Dumping” signs in common areas.

- **Exterior Buildings**

Management will increase yard inspections by “Walk, Stop, and Knock” method. Management will walk grounds, Stop to talk with residents, and Knock on doors of units whose exteriors are in dissatisfactory condition. Random inspections will be performed by a representative from Maintenance and Management of building exteriors bi-weekly. A list of deficiencies will be sent to the Tenant requiring a five (5) response; as a re-inspection will be performed within seven (7) days. Fines will be imposed should the deficiency failed to be corrected within the allotted time frame.

- **Parking**

The addition of parking slots to increase parking and the widening the parking area recently improved parking at Turner Park.

Columbia Center management will see if parking improvements can be implemented into future Modernization projects. Security will also enforce the proper use of parking permits.

- **Playgrounds**

Maintenance will conduct a weekly inspection of playground and equipment. List of rules will be posted for public view. Security will also enforce a playground curfew.

- **Broken Glass**

Provide recycle bins to tenants in need. During the bi-weekly inspections performed by Management and Maintenance, extra attention will be given to incidents relating to broken glass, as this is also a health and safety issue. Community service workers will also be assigned areas to upkeep in exchange for community service hours. Fines will be imposed should tenants not comply with agency requests for debris removal.

- **Noise**

Neighborly behavior will be advocated through Management comments placed in the agency newsletter. Management will address all complaints of disturbances within forty-eight (48) hours. Responsibility for the actions of guests including disturbances will be stressed during the “initial” reading of the lease. Warning notices will be sent.

- **Rodents and Insects**

Extermination of each unit will become mandatory at least once a quarter (4 times a year). Residents will be made aware that maintenance does provide supplemental items for pest control. Treatment for water bugs shall increase to two (2) times annually, rather than one.

- **Trash/Litter**

At Turner Park, this area has already been addressed. Dumpsters have been installed for resident trash disposal. They have also been enclosed to avoid becoming an eyesore to the community.

Columbia Center Management will implement the “Walk, Stop, & Knock” method on Mondays, the day before trash pick-up, to better avoid trash build-ups and assure residents are prepared for trash pick-up the following day. Maintenance will loan yard care supplies (rakes, shovels, lawn mowers) when able to.

COMMUNICATION

Do you think management provides you information about:

- **Maintenance and Repair**

Management will assure that flyers are sent out to Residents informing them of upcoming modernization activities and/or site upgrades and improvements. The newsletter will also be used as an additional form of communication between management and residents. When unforeseen calamities occur, the marquee shall be used if available. Door to door methods will also be used when time permits.

- **Rules of the Lease**

A section of the Lease will be highlighted each month in the newsletter. Additionally, Management purchased a video outlining the rental agreement between the agency and resident. Also an interactive check list providing emphasis on the lease will be issued to and reviewed with each “new” resident at the conclusion of the lease reading to provide emphasis on points of extreme importance. A move-in packet is disseminated to new residents at move-in.

- **Responsive to Questions and Concerns**

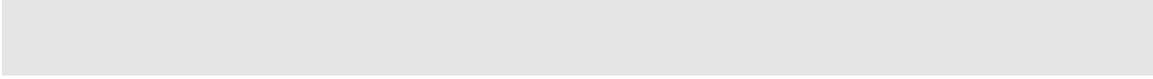
A forty-eight hour response to complaints will be implemented by Management.

- **Courteous and Professional**

A “How was my service card” will randomly be mailed and/or distributed to residents by staff at least once quarterly. Thus, the results will be used to highlight areas of concern and make necessary improvements. A staff meeting relating to customer service will also be planned when applicable. HTVN training throughout year when applicable.

- **Supportive of Resident/Tenant Organizations within the Housing Development**

Management will increase presence at Resident Crime Watch Meetings, Tenant Council Meetings, etc. Management will aid in resident activities whenever time permits.



CAPITAL FUND PROGRAM TABLES START HERE

Annual Statement/Performance and Evaluation Report					
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I: Summary					
PHA Name: Hammond Housing Authority		Grant Type and Number Capital Fund Program Grant No: IN36P010501-01 Replacement Housing Factor Grant No:			Federal FY of Grant: 2001
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input type="checkbox"/> Revised Annual Statement (revision no: 1) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 8/31/03 <input type="checkbox"/> 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	140,000	140,000	140,000	140,000
3	1408 Management Improvements	109,100	168,471	159,072	126,725
4	1410 Administration	140,044	140,044	140,044	140,044
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs				
8	1440 Site Acquisition				
9	1450 Site Improvement	275,000	220,031	220,031	206,971
10	1460 Dwelling Structures	706,067	706,067	723,694	723,694
11	1465.1 Dwelling Equipment—Nonexpendable	24,002	29,997	29,997	34,378
12	1470 Nondwelling Structures	54,457	54,457	46,229	46,229
13	1475 Nondwelling Equipment	45,650	45,650	45,650	45,650
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1499 Development Activities				
19	1501 Collateralization or Debt Service				

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

PHA Name: Hammond Housing Authority	Grant Type and Number Capital Fund Program Grant No: IN36P010501-01 Replacement Housing Factor Grant No:	Federal FY of Grant: 2001
--	--	-------------------------------------

Original Annual Statement Reserve for Disasters/ Emergencies Revised Annual Statement (revision no: 1)
 Performance and Evaluation Report for Period Ending: 8/31/03 Final Performance and Evaluation Report

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
20	1502 Contingency	10,397			
21	Amount of Annual Grant: (sum of lines 2 – 20)	1,504,717	1,504,717	1,504,717	1,463,691
22	Amount of line 21 Related to LBP Activities				
23	Amount of line 21 Related to Section 504 compliance				
24	Amount of line 21 Related to Security – Soft Costs	60,000			
25	Amount of Line 21 Related to Security – Hard Costs				
26	Amount of line 21 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: Hammond Housing Authority		Grant Type and Number Capital Fund Program Grant No: IN36P010501-01 Replacement Housing Factor Grant No:				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 Work
				Original	Revised	Funds Obligated	Funds Expended	
PHA Wide Management Improvements	Concept Plan	1408		0	83,240	73,841	41,494	In Progress
	Energy Audit	1408		0	0	0	0	
	S & P Evaluation	1408		37,500	18,250	18,250	18,250	Completed
	Security and Drug War	1408		60,000	63,186	63,186	63,186	Completed
	Staff and Resident Training	1408		11,600	3,795	3,795	3,795	Completed
	Sub Total			109,100	168,471	159,072	126,725	
Administrative	Administrative Salaries	1410		140,000	140,000	140,000	140,000	Completed
	Miscellaneous Admin. Exp.	1410		44	44	44	44	Completed
	Sub Total	1410		140,044	140,044	140,044	140,044	
Audit	Audit Costs	1411						
	Sub Total							
Fees and Costs	Fees and Costs	1430						
	Sub Total							

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

PHA Name: Hammond Housing Authority		Grant Type and Number Capital Fund Program Grant No: IN36P010501-01 Replacement Housing Factor Grant No:			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 Work
				Original	Revised	Funds Obligated	Funds Expended	
Site Improvement IN 10-1	Boiler	1450		0	63,035	63,035	50,435	In Progress
	Smoke Filter	1450		0	2,280	2,280	2,280	Completed
	Air Handler	1450		0	5,605	5,605	5,605	Completed
	Security Light	1450		0	2,450	2,450	2,450	Completed
	C. C. Electrical Distribution	1450		80,000	95,150	95,150	95,150	Completed
	Landscape Maintenance	1450		10,000	7,695	7,695	7,695	Completed
	Columbia Parking (fence)	1450		100,000	7,000	7,000	7,000	Completed
	Cameras	1450		0	22,471	22,471	22,471	Completed
	Turner Park Parking	1450		85,000	3,400	3,400	3,400	Completed
	Senior Building	1450		0	10,945	10,945	10,485	Completed
	Sub Total			275,000	220,031	220,031	206,971	
Dwelling Structure	Comprehensive unit rehab	1460		706,067	706,067	723,694	723,694	Completed
	Sub Total			706,067	706,067	723,694	723,694	
Non-Dwelling Structure	Parts Storage Cage	1470	01	1,989		1,989	1,989	Completed
	Sub Total			1,989		1,989	1,989	
Dwelling Equipment	Elevator	1465		0	7,478	7,478	7,478	Completed
	Mini Blinds	1465		0	364	364	364	Completed
	Laundry Equipment	1465		24,002	22,155	22,155	26,536	Completed
	Sub Total			24,002	29,997	29,997	34,378	

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

PHA Name: Hammond Housing Authority		Grant Type and Number Capital Fund Program Grant No: IN36P010501-01 Replacement Housing Factor Grant No:				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 Work
				Original	Revised	Funds Obligated	Funds Expended	
Non-Dwelling Structures	Maintenance Building Sub Total	1470		54,457 54,457	54,457 54,457	54,457 54,457	54,457 54,457	Completed
Non-Dwelling Equipment	Maintenance Vehicle Sub Total	1475		45,650 45,650	45,650 45,650	45,650 45,650	45,650 45,650	Completed
Contingency	Contingency Sub Total	1502		10,397	0	0	0	
	Total			1,504,717	1,504,717	1,504,717	1,463,691	

Annual Statement/Performance and Evaluation Report
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)
Part III: Implementation Schedule

PHA Name: Hammond Housing Authority		Grant Type and Number Capital Fund Program No: IN36P0105010501-01 Replacement Housing Factor No:					Federal FY of Grant: 2001
Development Number Name/HA-Wide Activities	All Fund Obligated (Quarter Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates
	Original	Revised	Actual	Original	Revised	Actual	
IN10-1 Columbia Center	9/30/03		9/30/03	9/30/04			
IN10-2 Turner Park	9/30/03		9/30/03	9/30/04			
PHA wide	9/30/03		9/30/03	9/30/04			

CAPITAL FUND PROGRAM TABLES START HERE

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I: Summary						
PHA Name Hammond Housing Authority VRS 07367-92001		Grant Type and Number Capital Fund Program Grant No: IN36P010501-02 Replacement Housing Factor Grant No:			Federal FY of Grant: 2002	
<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: 8/31/03 <input type="checkbox"/> 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	143,000	143,000	143,000	143,000	
3	1408 Management Improvements	175,000	175,000	168,543	168,543	
4	1410 Administration	157,279	157,279	157,279	157,279	
5	1411 Audit	1,100	1,100	1,100	1,100	
6	1415 Liquidated Damages					
7	1430 Fees and Costs	50,000	50,000	45,125	37,369	
8	1440 Site Acquisition					
9	1450 Site Improvement	10,000	10,000	6,656	6,656	
10	1460 Dwelling Structures	780,000	780,000	689,000	501,765	
11	1465.1 Dwelling Equipment—Nonexpendable	28,000	28,000	19,802	62,671	
12	1470 Nondwelling Structures					
13	1475 Nondwelling Equipment	66,500	66,500	57,173	15,113	
14	1485 Demolition					
15	1490 Replacement Reserve					
16	1492 Moving to Work Demonstration					
17	1495.1 Relocation Costs					
18	1499 Development Activities					
19	1501 Collateralization or Debt Service					

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

PHA Name Hammond Housing Authority VRS 07367-92001	Grant Type and Number Capital Fund Program Grant No: IN36P010501-02 Replacement Housing Factor Grant No:	Federal FY of Grant: 2002
---	---	---

Original Annual Statement
 Reserve for Disasters/ Emergencies
 Revised Annual Statement (revision no:)
 Performance and Evaluation Report for Period Ending: 8/31/03
 Final Performance and Evaluation Report

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
20	1502 Contingency	19,689	19,689	0	0
21	Amount of Annual Grant: (sum of lines 2 – 20)	1,430,568	1,430,568	1,287,678	1,093,496
22	Amount of line 21 Related to LBP Activities	0			
23	Amount of line 21 Related to Section 504 compliance				
24	Amount of line 21 Related to Security – Soft Costs	60,000			
25	Amount of Line 21 Related to Security – Hard Costs				
26	Amount of line 21 Related to Energy Conservation Measures	39,000			

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

PHA Name: Hammond Housing Authority		Grant Type and Number Capital Fund Program Grant No: IN36P010501-02 Replacement Housing Factor Grant No:			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 Work
				Original	Revised	Funds Obligated	Funds Expended	
PHA Wide	Operations Sub Total	1406		143,000 143,000	143,000 143,000	143,000 143,000	143,000 143,000	Completed
Management Improvements	Software & Training Security & Drug War Staff & Resident Training Sub Total	1408 1408 1408		110,000 63,000 2,000 175,000	110,000 63,000 2,000 175,000	103,543 62,889 2,111 168,543	103,543 62,889 2,111 168,543	In Progress Completed Completed
Administrative	Administrative Salaries Misc. Admin. Expense Sub Total	1410 1410		155,526 1,753 157,279	155,526 1,753 157,279	155,526 1,753 157,279	155,526 1,753 157,279	Completed Completed
Audit	Audit Costs Sub Total	1411		1,100 1,100	1,100 1,100	1,100 1,100	1,100 1,100	Completed
Columbia Center IN10-1 Fees & Costs	A/E Site Rehab Sub Total	1430 1430		50,000 50,000	50,000 50,000	45,125 45,125	37,369 37,369	In Progress

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

PHA Name: Hammond Housing Authority		Grant Type and Number Capital Fund Program Grant No: IN36P010501-02 Replacement Housing Factor Grant No:				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 Work
				Original	Revised	Funds Obligated	Funds Expended	
Site Improvements	Landscape Maintenance SubTotal	1450		10,000	10,000	6,656	6,656	In Progress
Dwelling Structure	Comprehensive Unit Rehab Sub Total	1460		780,000 780,000	780,000 780,000	689,000 689,000	501,765 501,765	In Progress
Dwelling Equipment/Non Expendable	Replace Stoves & Refrigerators Sub Total	1465		28,000 28,000	28,000 28,000	19,802 19,802	62,671 62,671	In Progress
Non-dwelling Equipment	Computer Hardware Furniture Lobby Maintenance Equipment Sub Total	1475 1475 1475		55,000 5,063 6,437 66,500	55,000 5,063 6,437 66,500	46,634 5,063 5,476 57,173	9,637 0 5,476 15,113	In Progress In Progress In Progress
Relocation	Relocate Residents Sub Total	1495						
Contingency	Contingency Sub Total	1502		19,689 19,689	19,689 19,689	0 0	0 0	
Total				1,430,568	1,430,568	1,287,678	1,093,496	

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

PHA Name: Hammond Housing Authority		Grant Type and Number Capital Fund Program Grant No: IN36P010501-02 Replacement Housing Factor Grant No:				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 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 III: Implementation Schedule

PHA Name: Hammond Housing Authority		Grant Type and Number Capital Fund Program No: IN36P010501-02 Replacement Housing Factor No:					Federal FY of Grant: 2002	
Development Number Name/HA-Wide Activities	All Fund Obligated (Quarter Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates	
	Original	Revised	Actual	Original	Revised	Actual		
IN10-1 Columbia Center	9/30/04		9/30/04	9/30/05				
IN10-2 Turner Park	9/30/04		9/30/04	9/30/05				
PHA Wide	9/30/04		9/30/04	9/30/05				

CAPITAL FUND PROGRAM TABLES START HERE

Annual Statement/Performance and Evaluation Report					
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I: Summary					
PHA Name: Hammond Housing Authority VRS 07367-92002		Grant Type and Number Capital Fund Program Grant No: In36P010501-03 Replacement Housing Factor Grant No:			Federal FY of Grant: 2003
<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: 8/31/03 <input type="checkbox"/> 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	143,000	143,000	143,000	
3	1408 Management Improvements	65,000	60,000		
4	1410 Administration	143,000	143,968	143,000	
5	1411 Audit	1,500	2,000		
6	1415 Liquidated Damages				
7	1430 Fees and Costs	40,000	235,000		
8	1440 Site Acquisition				
9	1450 Site Improvement	100,000	70,600		
10	1460 Dwelling Structures	817,000	0		
11	1465.1 Dwelling Equipment—Nonexpendable	8,000	451,000		
12	1470 Nondwelling Structures				
13	1475 Nondwelling Equipment	60,000	60,000		
14	1485 Demolition		150,000		
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs	4,000	95,000		
18	1499 Development Activities				
19	1501 Collateralization or Debt Service				

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

PHA Name: Hammond Housing Authority VRS 07367-92002	Grant Type and Number Capital Fund Program Grant No: In36P010501-03 Replacement Housing Factor Grant No:	Federal FY of Grant: 2003
--	---	-------------------------------------

Original Annual Statement Reserve for Disasters/ Emergencies Revised Annual Statement (revision no:)
 Performance and Evaluation Report for Period Ending: 8/31/03 Final Performance and Evaluation Report

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
20	1502 Contingency	49,068	20,000		
21	Amount of Annual Grant: (sum of lines 2 – 20)	1,430,568	1,430,568	286,000	0
22	Amount of line 21 Related to LBP Activities	30,000			
23	Amount of line 21 Related to Section 504 compliance				
24	Amount of line 21 Related to Security – Soft Costs	60,000			
25	Amount of Line 21 Related to Security – Hard Costs				
26	Amount of line 21 Related to Energy Conservation Measures	30,000			

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

PHA Name: Hammond Housing Authority		Grant Type and Number Capital Fund Program Grant No: IN36P010501-03 Replacement Housing Factor Grant No:			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 Work
				Original	Revised	Funds Obligated	Funds Expended	
PHA Wide	Operations Sub Total	1406		143,000 143,000	143,000 143,000	143,000 143,000		
Management Improvements	Security Drug War Sub Total	1408		65,000 65,000	60,000 60,000			
Administration	Administrative Salaries Administrative Miscellaneous Sub Total	1410 1410		143,000 143,000	143,000 968 143,968	143,000		
Audit	Audit Costs Sub Total	1411		1,500 1,500	2,000 2,000			
Fees & Costs	TP Elevator TP HVAC Energy Management Admin A&E Seniors Building Development Sub Total	1430 1430 1430 1430 1430		40,000 40,000	15,000 15,000 15,000 30,000 160,000 235,000			

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

PHA Name: Hammond Housing Authority		Grant Type and Number Capital Fund Program Grant No: IN36P010501-03 Replacement Housing Factor Grant No:				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 Work
				Original	Revised	Funds Obligated	Funds Expended	
Site Improvement	Street & Sewer Repair	1450		90,000	0			
	Landscaping	1450		10,000	4,000			
	Playground	1450			1,100			
	Sidewalk	1450			500			
	Parking Lot TP	1450			60,000			
	TP Gate Lights	1450			5,000			
	Sub Total				70,600			
Dwelling Structures	Unit Rehab	1460		717,000				
	Window Awnings	1460		60,000				
	Smoke Detectors	1460		40,000				
	Sub Total			817,000				

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

PHA Name: Hammond Housing Authority		Grant Type and Number Capital Fund Program Grant No: IN36P010501-03 Replacement Housing Factor Grant No:				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 Work
				Original	Revised	Funds Obligated	Funds Expended	
Dwelling Equip Non-Exp	Laundry Equip, Stoves, & Refers Elevator TP HVAC Kitchen Cabinets Security Cameras Grab Bars Sub Total	1465		8,000	60,000 200,000 150,000 26,000 9,000 6,000			
				8,000	451,000			
Non-Dwelling Equip	Computer Imaging Sub Total	1475		60,000 60,000	60,000 60,000			
Demolition	Senior Building Administration Building Sub Total	1485 1485			75,000 75,000 150,000			
Relocation	Relocation	1495		4,000	95,000			
Contingency	Contingency Sub Total	1502		49,068	20,000			

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

PHA Name: Hammond Housing Authority		Grant Type and Number Capital Fund Program Grant No: IN36P010501-03 Replacement Housing Factor Grant No:			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 Work
				Original	Revised	Funds Obligated	Funds Expended	
	Total			1,430,568	1,430,568			

Annual Statement/Performance and Evaluation Report
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)
Part III: Implementation Schedule

PHA Name: Hammond Housing Authority		Grant Type and Number Capital Fund Program No: IN36P010501-03 Replacement Housing Factor No:			Federal FY of Grant: 2003		
Development Number Name/HA-Wide Activities	All Fund Obligated (Quarter Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates
	Original	Revised	Actual	Original	Revised	Actual	

Annual Statement/Performance and Evaluation Report
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)
Part III: Implementation Schedule

PHA Name: Hammond Housing Authority		Grant Type and Number Capital Fund Program No: IN36P010501-03 Replacement Housing Factor No:					Federal FY of Grant: 2003	
Development Number Name/HA-Wide Activities	All Fund Obligated (Quarter Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates	
	Original	Revised	Actual	Original	Revised	Actual		
IN10-1 Columbia Center	9/30/05		9/30/05	9/30/06				
IN10-2 Turner Park	9/30/05		9/30/05	9/30/06				
PHA Wide	9/30/05		9/30/05	9/30/06				

CAPITAL FUND PROGRAM TABLES START HERE

Annual Statement/Performance and Evaluation Report					
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I: Summary					
PHA Name: Hammond Housing Authority VRS 07367-92002		Grant Type and Number Capital Fund Program Grant No: In36P010501-04 Replacement Housing Factor Grant No:			Federal FY of Grant: 2004
<input checked="" type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) <input type="checkbox"/> Performance and Evaluation Report for Period Ending: <input type="checkbox"/> 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	143,000			
3	1408 Management Improvements	65,000			
4	1410 Administration	144,568			
5	1411 Audit	2,000			
6	1415 Liquidated Damages				
7	1430 Fees and Costs	158,000			
8	1440 Site Acquisition				
9	1450 Site Improvement	10,000			
10	1460 Dwelling Structures	290,000			
11	1465.1 Dwelling Equipment—Nonexpendable	15,000			
12	1470 Nondwelling Structures	50,000			
13	1475 Nondwelling Equipment				
14	1485 Demolition	325,000			
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs	200,000			
18	1499 Development Activities				
19	1501 Collateralization or Debt Service				

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

PHA Name: Hammond Housing Authority VRS 07367-92002	Grant Type and Number Capital Fund Program Grant No: In36P010501-04 Replacement Housing Factor Grant No:	Federal FY of Grant: 2004
--	---	-------------------------------------

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

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
20	1502 Contingency	28,000			
21	Amount of Annual Grant: (sum of lines 2 – 20)	1,430,568			
22	Amount of line 21 Related to LBP Activities				
23	Amount of line 21 Related to Section 504 compliance				
24	Amount of line 21 Related to Security – Soft Costs				
25	Amount of Line 21 Related to Security – Hard Costs				
26	Amount of line 21 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: Hammond Housing Authority		Grant Type and Number Capital Fund Program Grant No: IN36P010501-04 Replacement Housing Factor Grant No:			Federal FY of Grant: 2004			
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
PHA Wide	Operations Sub Total	1406		143,000 143,000				
Management Improvements	Security Drug War Sub Total	1408		65,000 65,000				
Administration	Administrative Salaries Administrative Miscellaneous Sub Total	1410 1410		143,000 1,568 144,568				
Audit	Audit Costs Sub Total	1411		2,000 2,000				
Fees & Costs	Columbia Center Phase II CC Rehab TP Maintenance Sub Total	1430 1430 1430		138,000 15,000 5,000 158,000				

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

PHA Name: Hammond Housing Authority		Grant Type and Number Capital Fund Program Grant No: IN36P010501-04 Replacement Housing Factor Grant No:			Federal FY of Grant: 2004			
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
Site Improvement	Landscape Maintenance Sub Total	1450		10,000 10,000				
Dwelling Units	Unit Rehab Sub Total	1460		290,000 290,000				
Dwelling Equip Non-Exp	Laundry Equip, Stoves, & Refers Sub Total	1465		15,000 15,000				
Non-Dwelling Structure	Maintenance Building Sub Total	1470		50,000 50,000				
Demolition	CC Phase II Sub Total	1485		325,000 325,000				
Relocation	CC Phase II Sub Total	1495		200,000 200,000				
	Total			1,430,568				

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

PHA Name: Hammond Housing Authority		Grant Type and Number Capital Fund Program Grant No: IN36P010501-04 Replacement Housing Factor Grant No:			Federal FY of Grant: 2004			
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of 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 III: Implementation Schedule**

PHA Name: Hammond Housing Authority		Grant Type and Number Capital Fund Program No: IN36P010501-04 Replacement Housing Factor No:			Federal FY of Grant: 2004		
Development Number Name/HA-Wide Activities	All Fund Obligated (Quarter Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates
	Original	Revised	Actual	Original	Revised	Actual	
IN10-1 Columbia Center	9/30/06		9/30/06	9/30/07			
IN10-2 Turner Park	9/30/06		9/30/06	9/30/07			
PHA Wide	9/30/06		9/30/06	9/30/07			

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

PHA Name: Hammond Housing Authority		Grant Type and Number Capital Fund Program No: IN36P010501-04 Replacement Housing Factor No:				Federal FY of Grant: 2004	
Development Number Name/HA-Wide Activities	All Fund Obligated (Quarter Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates
	Original	Revised	Actual	Original	Revised	Actual	

CAPITAL FUND PROGRAM TABLES START HERE

Capital Fund Program Five-Year Action Plan

Part I: Summary

PHA Name Hammond Housing Authority		<input checked="" type="checkbox"/> Original 5-Year Plan <input type="checkbox"/> Revision No:			
Development Number/Name/HA-Wide	Year 1 2003	Work Statement for Year 2 FFY Grant: 2005 PHA FY: 2005	Work Statement for Year 3 FFY Grant:2006 PHA FY: 2006	Work Statement for Year 4 FFY Grant: 2007 PHA FY: 2007	Work Statement for Year 5 FFY Grant: 2008 PHA FY: 2008
	Annual Statement				
IN10-1 Columbia Center		1,065,568	1,065,568	1,065,568	1,065,568
IN10-2 Turner Park		10,000	10,000	10,000	10,000
PHA Wide		355,000	355,000	355,000	355,000
CFP Funds Listed for 5-year planning		1,430,568	1,430,568	1,430,568	1,430,568
Replacement Housing Factor Funds					

**Capital Fund Program Five-Year Action Plan
Part II: Supporting Pages—Work Activities**

Activities for Year 1 2003	Activities for Year :2 FFY Grant: 2005 PHA FY: 2005			Activities for Year: 3 FFY Grant: 2006 PHA FY: 2006		
	Development Name/Number	Major Work Categories	Estimated Cost	Development Name/Number	Major Work Categories	Estimated Cost
See						
Annual Statement	IN10-1 Columbia Center	CC. Phase III CC Rehab Sub Total	765,568 300,000 1,065,568	IN10-1 Columbia Center	CC Phase IV CC Rehab Sub Total	765,568 300,000 1,065,568
	IN10-2 Turner Park	Landscaping Sub Total	10,000 10,000	IN10-2 Turner Park	Landscaping Sub Total	10,000 10,000
	HHA Wide Soft Costs	Operations Security Administration Admin. Misc. Sub Total	143,000 65,000 143,000 4,000 355,000	HHA Wide Soft Costs	Operations Security Administration Admin. Misc. Sub Total	143,000 65,000 143,000 4,000 355,000
		Total CFP Estimated Cost	1,430,568			1,430,568

