

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

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# PHA Plans

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

Benton Harbor Housing Commission, Michigan

**PHA Number:** MI 010

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

**PHA Plan  
Agency Identification**

**PHA Name:** Benton Harbor Housing Commission

**PHA Number:** MI 010

**PHA Fiscal Year Beginning:** 10/2004

**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 PHA
- PHA development management offices
- PHA local offices

**Display Locations For PHA Plans and Supporting Documents**

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

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

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

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

**5-YEAR PLAN**  
**PHA FISCAL YEARS 2004 - 2008**  
[24 CFR Part 903.5]

**A. Mission**

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

- The mission of the PHA is the same as that of the Department of Housing and Urban Development: To promote adequate and affordable housing, economic opportunity and a suitable living environment free from discrimination.
- The PHA's mission is:  
Provide quality affordable housing and programs to families in transition to self-sufficiency.

**B. Goals**

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

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

- PHA Goal: Expand the supply of assisted housing  
Objectives:
- Apply for additional rental vouchers:
  - Reduce public housing vacancies:
  - Leverage private or other public funds to create additional housing opportunities:
  - Acquire or build units or developments
  - Other (list below)  
Use Youth Build partnership to increase affordable housing and job training
- PHA Goal: Improve the quality of assisted housing  
Objectives:
- Improve public housing management: (PHAS score)
  - Improve voucher management: (SEMAP score)
  - Increase customer satisfaction:
  - Concentrate on efforts to improve specific management functions: (list; e.g., public housing finance; voucher unit inspections)

- Renovate or modernize public housing units:
  - Demolish or dispose of obsolete public housing:
  - Provide replacement public housing:
  - Provide replacement vouchers:
  - Other: (list below)
- Apply for and receive a HOPE VI Grant for new construction, and build mixed income housing

PHA Goal: Increase assisted housing choices

Objectives:

- Provide voucher mobility counseling:
- Conduct outreach efforts to potential voucher landlords
- Increase voucher payment standards
- Implement voucher homeownership program:
- Implement public housing or other homeownership programs:
- Implement public housing site-based waiting lists:
- Convert public housing to vouchers:
- Other: (list below)

**HUD Strategic Goal: Improve community quality of life and economic vitality**

PHA Goal: Provide an improved living environment

Objectives:

- Implement measures to deconcentrate poverty by bringing higher income public housing households into lower income developments:
  - Implement measures to promote income mixing in public housing by assuring access for lower income families into higher income developments:
  - Implement public housing security improvements:
  - Designate developments or buildings for particular resident groups (elderly, persons with disabilities)
  - Other: (list below)
- Partner with business to get economic opportunity

**HUD Strategic Goal: Promote self-sufficiency and asset development of families and individuals**

PHA Goal: Promote self-sufficiency and asset development of assisted households

Objectives:

- Increase the number and percentage of employed persons in assisted families:
- Provide or attract supportive services to improve assistance recipients' employability:

- Provide or attract supportive services to increase independence for the elderly or families with disabilities.
- Other: (list below)

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

- PHA Goal: Ensure equal opportunity and affirmatively further fair housing  
Objectives:
  - Undertake affirmative measures to ensure access to assisted housing regardless of race, color, religion national origin, sex, familial status, and disability:
  - Undertake affirmative measures to provide a suitable living environment for families living in assisted housing, regardless of race, color, religion national origin, sex, familial status, and disability:
  - Undertake affirmative measures to ensure accessible housing to persons with all varieties of disabilities regardless of unit size required:
  - Other: (list below)  
Remove severely distressed public housing that is an impediment to fair housing.

**Other PHA Goals and Objectives: (list below)**

**Annual PHA Plan  
PHA Fiscal Year 2004**

[24 CFR Part 903.7]

**i. Annual Plan Type:**

Select which type of Annual Plan the PHA will submit.

**Standard Plan**

**Streamlined Plan:**

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

**Troubled Agency Plan**

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

[24 CFR Part 903.7 9 (r)]

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

This Agency plan identifies goals and strategies to come off of the troubled housing list and to drastically improve the community with new housing. We also plan to improve the lives of residents if they participate in job training and acquire jobs in the HOPE VI program and with our partner agencies.

To remove severely distressed public housing. Continue to provide safe, decent, affordable housing to families and disabled residents.

**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>
<b>Annual Plan</b>	
i. Executive Summary	1
ii. Table of Contents	1
1. Housing Needs	5
2. Financial Resources	11
3. Policies on Eligibility, Selection and Admissions	12
4. Rent Determination Policies	20
5. Operations and Management Policies	23
6. Grievance Procedures	24
7. Capital Improvement Needs	25
8. Demolition and Disposition	27
9. Designation of Housing	27

10. Conversions of Public Housing	28
11. Homeownership	30(Attachment M)
12. Community Service Programs	31
13. Crime and Safety	33
14. Pets	35
15. Civil Rights Certifications (included with PHA Plan Certifications)	36
16. Audit	36
17. Asset Management	36
18. Other Information	37

### Attachments

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

#### Required Attachments:

<input checked="" type="checkbox"/> (A) Admissions Policy for Deconcentration	37
<input checked="" type="checkbox"/> (B) FY 2004 Capital Fund Program Annual Statement	40
<input checked="" type="checkbox"/> Most recent board-approved operating budget (Required Attachment for PHAs that are troubled or at risk of being designated troubled ONLY) mi010a03	

#### Optional Attachments:

<input type="checkbox"/> PHA Management Organizational Chart	
<input checked="" type="checkbox"/> (C) FY 2004 Capital Fund Program 5 Year Action Plan	44
<input type="checkbox"/> ( ) Comments of Resident Advisory Board or Boards (must be attached if not included in PHA Plan text)	
<input checked="" type="checkbox"/> Other (List below, providing each attachment name)	
Attachment D Criteria for Substantial Deviation and Significant Amendments	49
Attachment E: Summary of Policy and Program Changes	50
Attachment F: Resident Member on the PHA Governing Board	51
Attachment G: Membership of the Resident Advisory Board or Boards	52
Attachment H: Progress in meeting the 5-year plan mission and goals	53
Attachment I: Component 3, (6) Deconcentration and Income Mixing	54
Attachment J: Implementation of Public Housing Resident Community Service Requirement	55
Attachment K: Component 10 (B) Voluntary Conversion Initial Assessments	57
Attachment L Optional Public Housing Asset Management Table	58
Attachment M: 2003 501 Performance and Evaluation Report	59
Attachment N: 2003 502 Performance and Evaluation Report	63
Attachment O: 2002 Performance and Evaluation Report	66
Attachment P: 2001 Performance and Evaluation Report	70
Attachment Q: 2000 Performance and Evaluation Report	77

### Supporting Documents Available for Review

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

<b>List of Supporting Documents Available for Review</b>		
<b>Applicable &amp; On Display</b>	<b>Supporting Document</b>	<b>Applicable Plan Component</b>
YES	PHA Plan Certifications of Compliance with the PHA Plans and Related Regulations	5 Year and Annual Plans
YES	State/Local Government Certification of Consistency with the Consolidated Plan	5 Year and Annual Plans
YES	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
YES	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
YES	Most recent board-approved operating budget for the public housing program	Annual Plan: Financial Resources;
YES	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
YES	Section 8 Administrative Plan	Annual Plan: Eligibility, Selection, and Admissions Policies
YES	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
YES	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
YES	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
YES	Section 8 rent determination (payment standard) policies <input checked="" type="checkbox"/> check here if included in Section 8 Administrative Plan	Annual Plan: Rent Determination
YES	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
YES	Public housing grievance procedures	Annual Plan: Grievance

<b>List of Supporting Documents Available for Review</b>		
<b>Applicable &amp; On Display</b>	<b>Supporting Document</b>	<b>Applicable Plan Component</b>
	<input checked="" type="checkbox"/> check here if included in the public housing A & O Policy	Procedures
YES	Section 8 informal review and hearing procedures <input checked="" type="checkbox"/> check here if included in Section 8 Administrative Plan	Annual Plan: Grievance Procedures
YES	The HUD-approved Capital Fund/Comprehensive Grant Program Annual Statement (HUD 52837) for the active grant year	Annual Plan: Capital Needs
N/A	Most recent CIAP Budget/Progress Report (HUD 52825) for any active CIAP grant	Annual Plan: Capital Needs
YES	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
YES	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
N/A	Approved or submitted applications for demolition and/or disposition of public housing	Annual Plan: Demolition and Disposition
N/A	Approved or submitted applications for designation of public housing (Designated Housing Plans)	Annual Plan: Designation of Public Housing
N/A	Approved or submitted assessments of reasonable revitalization of public housing and approved or submitted conversion plans prepared pursuant to section 202 of the 1996 HUD Appropriations Act	Annual Plan: Conversion of Public Housing
N/A	Approved or submitted public housing homeownership programs/plans	Annual Plan: Homeownership
YES	Policies governing any Section 8 Homeownership program <input checked="" type="checkbox"/> check here if included in the Section 8 Administrative Plan	Annual Plan: Homeownership
YES	Any cooperative agreement between the PHA and the TANF agency	Annual Plan: Community Service & Self-Sufficiency
N/A	FSS Action Plan/s for public housing and/or Section 8	Annual Plan: Community Service & Self-Sufficiency
N/A	Most recent self-sufficiency (ED/SS, TOP or ROSS or other resident services grant) grant program reports	Annual Plan: Community Service & Self-Sufficiency
N/A	The most recent Public Housing Drug Elimination Program (PHDEP) semi-annual performance report for any open grant and most recently submitted PHDEP application (PHDEP Plan)	Annual Plan: Safety and Crime Prevention
YES	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
YES	Troubled PHAs: MOA/Recovery Plan	Troubled PHAs
YES	Other supporting documents (optional) Pet Policy	Annual Plan: Pet Policy

# 1. Statement of Housing Needs

[24 CFR Part 903.7 9 (a)]

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

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

Housing Needs of Families in the Jurisdiction by Family Type							
Family Type	Overall	Afford-ability	Supply	Quali-ty	Access-ibility	Size	Loca-tion
Income <= 30% of AMI	5	5	5	3	1	3-4 BR 1	Scattered 1
Income >30% but <=50% of AMI	3	5	5	3	1	2-4 BR 1	Scattered 1
Income >50% but <80% of AMI	1	1	1	3	1	2-4 BR 1	Scattered 1
Elderly	3	5	3	4	---	2-4 BR 4	City Wide 4
Families with Disabilities	5	5	5	4	2	2-4 BR 2	2
Race/Ethnicity	2	1	1	2	2		2
Race/Ethnicity	1	1	1	3			
Race/Ethnicity							
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: 2000
- 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.

<b>Housing Needs of Families on the Waiting List</b>			
Waiting list type: (select one)			
<input type="checkbox"/> Section 8 tenant-based assistance			
<input checked="" type="checkbox"/> Public Housing			
<input type="checkbox"/> Combined Section 8 and Public Housing			
<input type="checkbox"/> Public Housing Site-Based or sub-jurisdictional waiting list (optional)			
If used, identify which development/subjurisdiction:			
	# of families	% of total families	Annual Turnover
Waiting list total	721		58
Extremely low income <=30% AMI	562	78	
Very low income (>30% but <=50% AMI)	159	22	
Low income (>50% but <80% AMI)			
Families with children	497	69	
Elderly families	3	.4	
Families with Disabilities	227	31	
Race/ethnicity	African American	100%	
Race/ethnicity			
Race/ethnicity			
Race/ethnicity			
Characteristics by Bedroom Size (Public Housing Only)			
1 BR	23	9	5
2 BR	60	24	14
3 BR	165	65	38
4 BR	5	2	3
5 BR			
5+ BR			

<b>Housing Needs of Families on the Waiting List</b>	
Is the waiting list closed (select one)? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
If yes:	
How long has it been closed (# of months)?	
Does the PHA expect to reopen the list in the PHA Plan year? <input type="checkbox"/> No <input type="checkbox"/> Yes	
Does the PHA permit specific categories of families onto the waiting list, even if generally closed? <input type="checkbox"/> No <input type="checkbox"/> Yes	

<b>Housing Needs of Families on the Waiting List</b>			
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	397		38
Extremely low income <=30% AMI	278	70	
Very low income (>30% but <=50% AMI)	99	25	
Low income (>50% but <80% AMI)	20	5	
Families with children	337	85	
Elderly families	4	1	
Families with Disabilities	12	3	
Race/ethnicity – Black	397	100	
Race/ethnicity			
Race/ethnicity			
Race/ethnicity			
Characteristics by Bedroom Size (Public Housing Only)			
1 BR			
2 BR			
3 BR			
4 BR			
5 BR			
5+ BR			

## Housing Needs of Families on the Waiting List

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

If yes:

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

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

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

### C. Strategy for Addressing Needs

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

#### (1) Strategies

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

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

Select all that apply

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

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

Select all that apply

- Apply for additional section 8 units should they become available
- Leverage affordable housing resources in the community through the creation of mixed – finance housing

- Pursue housing resources other than public housing or Section 8 tenant-based assistance.
- Other: (list below)  
Build more units use Youth Build to provide more houses.

**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)  
Partner with Faith Based Organization

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

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

Select all that apply

- Seek designation of public housing for families with disabilities
- Carry out the modifications needed in public housing based on the section 504 Needs Assessment for Public Housing
- Apply for special-purpose vouchers targeted to families with disabilities, should they become available

- Affirmatively market to local non-profit agencies that assist families with disabilities
- Other: (list below)

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

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

Select if applicable

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

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

Select all that apply

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

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

**(2) Reasons for Selecting Strategies**

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

- Funding constraints
- Staffing constraints
- Limited availability of sites for assisted housing
- Extent to which particular housing needs are met by other organizations in the community
- Evidence of housing needs as demonstrated in the Consolidated Plan and other information available to the PHA
- Influence of the housing market on PHA programs
- Community priorities regarding housing assistance
- Results of consultation with local or state government
- Results of consultation with residents and the Resident Advisory Board
- Results of consultation with advocacy groups
- Other: (list below)

## 2. Statement of Financial Resources

[24 CFR Part 903.7 9 (b)]

List the financial resources that are anticipated to be available to the PHA for the support of Federal public housing and tenant-based Section 8 assistance programs administered by the PHA during the Plan year.

Note: the table assumes that Federal public housing or tenant based Section 8 assistance grant funds are expended on eligible purposes; therefore, uses of these funds need not be stated. For other funds, indicate the use for those funds as one of the following categories: public housing operations, public housing capital improvements, public housing safety/security, public housing supportive services, Section 8 tenant-based assistance, Section 8 supportive services or other.

<b>Financial Resources: Planned Sources and Uses</b>		
<b>Sources</b>	<b>Planned \$</b>	<b>Planned Uses</b>
<b>1. Federal Grants (FY 2004 grants)</b>		
a) Public Housing Operating Fund	941,318	
b) Public Housing Capital Fund	649,354	
c) HOPE VI Revitalization	15,947,000	
d) HOPE VI Demolition		
e) Annual Contributions for Section 8 Tenant-Based Assistance	529,562	
f) Public Housing Drug Elimination Program (including any Technical Assistance funds)	N/A	
g) Resident Opportunity and Self-Sufficiency Grants	N/A	
h) Community Development Block Grant	N/A	
i) HOME	N/A	
Other Federal Grants (list below)		
<b>2. Prior Year Federal Grants (unobligated funds only) (list below)</b>		
2003 501 CFP	588,088	
2003 502 CFP	117,204	
<b>3. Public Housing Dwelling Rental Income</b>	<b>684,000</b>	
<b>4. Other income (list below)</b>	<b>50,000</b>	
Interest, miscellaneous		
<b>4. Non-federal sources (list below)</b>	<b>0</b>	
<b>Total resources</b>	<b>19,506,526</b>	

Financial Resources: Planned Sources and Uses		
Sources	Planned \$	Planned Uses

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

[24 CFR Part 903.7 9 (c)]

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

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

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

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

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

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

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

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

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

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

##### **(2)Waiting List Organization**

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

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

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

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

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

1. How many site-based waiting lists will the PHA operate in the coming year?
2.  Yes  No: Are any or all of the PHA's site-based waiting lists new for the upcoming year (that is, they are not part of a previously-HUD-approved site based waiting list plan)?  
If yes, how many lists?
3.  Yes  No: May families be on more than one list simultaneously?  
If yes, how many lists?
4. Where can interested persons obtain more information about and sign up to be on the site-based waiting lists (select all that apply)?
  - PHA main administrative office
  - All PHA development management offices
  - Management offices at developments with site-based waiting lists
  - At the development to which they would like to apply
  - Other (list below)

**(3) Assignment**

- a. How many vacant unit choices are applicants ordinarily given before they fall to the bottom of or are removed from the waiting list? (select one)
  - One
  - Two
  - Three or More
- b.  Yes  No: Is this policy consistent across all waiting list types?
- c. If answer to b is no, list variations for any other than the primary public housing waiting list/s for the PHA:

**(4) Admissions Preferences**

- a. Income targeting:
  - Yes  No: Does the PHA plan to exceed the federal targeting requirements by targeting more than 40% of all new admissions to public housing to families at or below 30% of median area income?
- b. Transfer policies:  
In what circumstances will transfers take precedence over new admissions? (list below)

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

c. Preferences

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

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

Former Federal preferences:

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

Other preferences: (select below)

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

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

1 Date and Time

Former Federal preferences:

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

Other preferences (select all that apply)

- Working families and those unable to work because of age or disability
- Veterans and veterans' families
- Residents who live and/or work in 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)

f. Relationship of preferences to income targeting requirements:

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

### **(5) Occupancy**

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

- The PHA-resident lease
- The PHA's Admissions and (Continued) Occupancy policy
- PHA briefing seminars or written materials
- Other source (list) Area United Way Directory

b. How often must residents notify the PHA of changes in family composition? (select all that apply)

- At an annual reexamination and lease renewal
- Any time family composition changes
- At family request for revision
- Other (list)

### **(6) Deconcentration and Income Mixing**

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

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

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

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

Employing waiting list "skipping" to achieve deconcentration of poverty or income mixing goals at targeted developments  
If selected, list targeted developments below:

Employing new admission preferences at targeted developments  
If selected, list targeted developments below:

Other (list policies and developments targeted below)

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

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

- Additional affirmative marketing  
 Actions to improve the marketability of certain developments  
 Adoption or adjustment of ceiling rents for certain developments  
 Adoption of rent incentives to encourage deconcentration of poverty and income-mixing  
 Other (list below)  
Whitfield I, Whitfield II, Harbor Towers, Scattered Sites

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

- Not applicable: results of analysis did not indicate a need for such efforts  
 List (any applicable) developments below:  
MI 10-1, MI 10-2, MI 10-5, MI 10-7 and MI 10-9

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

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

## B. Section 8

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

### (1) Eligibility

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

### (2) Waiting List Organization

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

### (3) Search Time

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

If yes, state circumstances below:

If the client can document that the family has made a diligent search to locate housing, or if the unit is near completion and the family will be able to move in shortly.

**(4) Admissions Preferences**

- a. Income targeting

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

- b. Preferences

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

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

Former Federal preferences

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

Other preferences (select all that apply)

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

3. If the PHA will employ admissions preferences, please prioritize by placing a "1" in the space that represents your first priority, a "2" in the box representing your second priority, and so on. If you give equal weight to one or more of these choices (either

through an absolute hierarchy or through a point system), place the same number next to each. That means you can use “1” more than once, “2” more than once, etc.

1 Date and Time

Former Federal preferences

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

Other preferences (select all that apply)

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

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

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

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

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

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

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

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

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

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

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

- Through published notices
- Other (list below)

#### **4. PHA Rent Determination Policies**

[24 CFR Part 903.7 9 (d)]

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

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

##### **(1) Income Based Rent Policies**

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

a. Use of discretionary policies: (select one)

- The PHA will not employ any discretionary rent-setting policies for income based rent in public housing. Income-based rents are set at the higher of 30% of adjusted monthly income, 10% of unadjusted monthly income, the welfare rent, or minimum rent (less HUD mandatory deductions and exclusions). (If selected, skip to sub-component (2))

---or---

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

b. Minimum Rent

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

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

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

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

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

1.  Yes  No: Does the PHA plan to charge rents at a fixed amount or percentage less than 30% of adjusted income?
2. If yes to above, list the amounts or percentages charged and the circumstances under which these will be used below:

d. Which of the discretionary (optional) deductions and/or exclusions policies does the PHA plan to employ (select all that apply)

- For the earned income of a previously unemployed household member  
 For increases in earned income  
 Fixed amount (other than general rent-setting policy)

If yes, state amount/s and circumstances below:

- Fixed percentage (other than general rent-setting policy)  
 If yes, state percentage/s and circumstances below:

- For household heads  
 For other family members  
 For transportation expenses  
 For the non-reimbursed medical expenses of non-disabled or non-elderly families  
 Other (describe below)

e. Ceiling rents

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

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

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

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

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

- Market comparability study  
 Fair market rents (FMR)  
 95<sup>th</sup> percentile rents

- 75 percent of operating costs
- 100 percent of operating costs for general occupancy (family) developments
- Operating costs plus debt service
- The "rental value" of the unit
- Other (list below)

f. Rent re-determinations:

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

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

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

**(2) Flat Rents**

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

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

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

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

**(1) Payment Standards**

Describe the voucher payment standards and policies.

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

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

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

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

c. If the payment standard is higher than FMR, why has the PHA chosen this level?  
(select all that apply)

- FMRs are not adequate to ensure success among assisted families in the PHA's segment of the FMR area
- Reflects market or submarket
- To increase housing options for families
- Other (list below)

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

- Annually
- Other (list below)

e. What factors will the PHA consider in its assessment of the adequacy of its payment standard? (select all that apply)

- Success rates of assisted families
- Rent burdens of assisted families
- Other (list below)

## **(2) Minimum Rent**

a. What amount best reflects the PHA's minimum rent? (select one)

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

b.  Yes  No: Has the PHA adopted any discretionary minimum rent hardship exemption policies? (if yes, list below)

## **5. Operations and Management**

[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:  
 The PHA Board sets goals and policies, the Executive Director reports to the Board, the Assistant Director is also the Leasing & Occupancy Director, the Sec 8 Coordinator reports to the Assistant Director/Leasing and Occupancy Director

**B. HUD Programs Under PHA Management**

List Federal programs administered by the PHA, number of families served at the beginning of the upcoming fiscal year, and expected turnover in each. (Use "NA" to indicate that the PHA does not operate any of the programs listed below.)

Program Name	Units or Families Served at Year Beginning	Expected Turnover
Public Housing	370	125
Section 8 Vouchers	128	7
Section 8 Certificates	0	
Section 8 Mod Rehab	0	
Special Purpose Section 8 Certificates/Vouchers (list individually)	0	
Public Housing Drug Elimination Program (PHDEP)		
Other Federal Programs(list individually)		
HOPE VI	94	20

**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)  
 Admissions and Continued Occupancy

(2) Section 8 Management: (list below)  
 Section 8 Administration Plan

**6. PHA 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 PHA established informal review procedures for applicants to the Section 8 tenant-based assistance program and informal hearing procedures for families assisted by the Section 8 tenant-based assistance program in addition to federal requirements found at 24 CFR 982?

If yes, list additions to federal requirements below:

2. Which PHA office should applicants or assisted families contact to initiate the informal review and informal hearing processes? (select all that apply)
- PHA main administrative office
  - Other (list below)  
Section 8 Office

## **7. Capital Improvement Needs**

[24 CFR Part 903.7 9 (g)]

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

### **A. Capital Fund Activities**

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

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

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

Select one:

- The Capital Fund Program Annual Statement is provided as an attachment to the PHA Plan at Attachment (B)

-or-

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

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

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

- a.  Yes  No: Is the PHA providing an optional 5-Year Action Plan for the Capital Fund? (if no, skip to sub-component 7B)
- b. If yes to question a, select one:
- The Capital Fund Program 5-Year Action Plan is provided as an attachment to the PHA Plan at Attachment (C)
- or-
- The Capital Fund Program 5-Year Action Plan is provided below: (if selected, copy the CFP optional 5 Year Action Plan from the Table Library and insert here)

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

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

- Yes  No: a) Has the PHA received a HOPE VI revitalization grant? (if no, skip to question c; if yes, provide responses to question b for each grant, copying and completing as many times as necessary)
- b) Status of HOPE VI revitalization grant (complete one set of questions for each grant) Approved July 8, 2004
1. Development name: Whitfield I
  2. Development (project) number: MI33P010-001
  3. Status of grant: (select the statement that best describes the current status)
    - Revitalization Plan under development
    - Revitalization Plan submitted, pending approval
    - Revitalization Plan approved
    - Activities pursuant to an approved Revitalization Plan underway
- Yes  No: c) Does the PHA plan to apply for a HOPE VI Revitalization grant in the Plan year?  
If yes, list development name/s below:
- Yes  No: d) Will the PHA be engaging in any mixed-finance development activities for public housing in the Plan year?

If yes, list developments or activities below:  
Whitfield Complex I (replacement housing)

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

If yes, list developments or activities below:  
Whitfield Complex I & scattered sites

**8. Demolition and Disposition**

[24 CFR Part 903.7 9 (h)]

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

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

2. Activity Description

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

<b>Demolition/Disposition Activity Description</b>	
1a. Development name: Whitfield Complex I	
1b. Development (project) number: MI 10-001	
2. Activity type: Demolition <input checked="" type="checkbox"/> Disposition <input checked="" 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>06/20/2006</u>
5. Number of units affected: 94	
6. Coverage of action (select one) <input type="checkbox"/> Part of the development <input checked="" type="checkbox"/> Total development	
7. Timeline for activity: a. Actual or projected start date of activity: 06/30/2006 b. Projected end date of activity: 06/30/09	

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

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

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

2. Activity Description

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

<b>Designation of Public Housing Activity Description</b>	
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 <u>approved</u> , submitted, or planned for submission: ( _____ )	
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**

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

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

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

2. Activity Description

- Yes  No: Has the PHA provided all required activity description information for this component in the **optional** Public Housing Asset Management Table? If "yes", skip to component 11. If "No", complete the Activity Description table below.

<b>Conversion of Public Housing Activity Description</b>	
1a. Development name:	
1b. Development (project) number:	
2. What is the status of the required assessment?	
<input type="checkbox"/> Assessment underway <input type="checkbox"/> Assessment results submitted to HUD <input type="checkbox"/> Assessment results approved by HUD (if marked, proceed to next question) <input type="checkbox"/> Other (explain below)	
3. <input type="checkbox"/> Yes <input type="checkbox"/> No: Is a Conversion Plan required? (If yes, go to block 4; if no, go to block 5.)	
4. Status of Conversion Plan (select the statement that best describes the current status)	
<input type="checkbox"/> Conversion Plan in development <input type="checkbox"/> Conversion Plan submitted to HUD on: (DD/MM/YYYY) <input type="checkbox"/> Conversion Plan approved by HUD on: (DD/MM/YYYY) <input type="checkbox"/> Activities pursuant to HUD-approved Conversion Plan underway	
5. Description of how requirements of Section 202 are being satisfied by means other than conversion (select one)	
<input type="checkbox"/> Units addressed in a pending or approved demolition application (date submitted or approved: ) <input type="checkbox"/> Units addressed in a pending or approved HOPE VI demolition application (date submitted or approved: ) <input type="checkbox"/> Units addressed in a pending or approved HOPE VI Revitalization Plan (date submitted or approved: ) <input type="checkbox"/> Requirements no longer applicable: vacancy rates are less than 10 percent <input type="checkbox"/> Requirements no longer applicable: site now has less than 300 units <input type="checkbox"/> Other: (describe below)	

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

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

**11. Homeownership Programs Administered by the PHA**

[24 CFR Part 903.7 9 (k)]

**A. Public Housing**

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

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

2. Activity Description

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

<b>Public Housing Homeownership Activity Description (Complete one for each development affected)</b>
1a. Development name: - 1b. Development (project) number:
2. Federal Program authority: <input type="checkbox"/> HOPE I <input type="checkbox"/> 5(h) <input type="checkbox"/> Turnkey III <input type="checkbox"/> Section 32 of the USHA of 1937 (effective 10/1/99)
3. Application status: (select one) <input type="checkbox"/> Approved; included in the PHA’s Homeownership Plan/Program <input type="checkbox"/> Submitted, pending approval <input type="checkbox"/> Planned application
4. Date Homeownership Plan/Program approved, submitted, or planned for submission: ( _____ )
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: Assist with homeownership opportunities and use the Section 8 Rental Assistance to pay mortgages. Continue the FSS program with 17 FSS units.
- a. Size of Program  
 Yes  No: Will the PHA limit the number of families participating in the section 8 homeownership option?

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

- 25 or fewer participants  
 26 - 50 participants  
 51 to 100 participants  
 more than 100 participants

- b. PHA-established eligibility criteria  
 Yes  No: Will the PHA’s program have eligibility criteria for participation in its Section 8 Homeownership Option program in addition to HUD criteria?  
 If yes, list criteria below:

## 12. PHA Community Service and Self-sufficiency Programs

[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. PHA Coordination with the Welfare (TANF) Agency

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

If yes, what was the date that agreement was signed? 08/01/2004

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) CSS committee representative for HOPE VI

**B. Services and programs offered to residents and participants**

**(1) General**

a. Self-Sufficiency Policies

Which, if any of the following discretionary policies will the PHA employ to enhance the economic and social self-sufficiency of assisted families in the following areas? (select all that apply)

- Public housing rent determination policies
- Public housing admissions policies
- Section 8 admissions policies
- Preference in admission to section 8 for certain public housing families
- Preferences for families working or engaging in training or education programs for non-housing programs operated or coordinated by the PHA
- Preference/eligibility for public housing homeownership option participation
- Preference/eligibility for section 8 homeownership option participation
- Other policies (list below)

b. Economic and Social self-sufficiency programs

- Yes  No: Does the PHA coordinate, promote or provide any programs to enhance the economic and social self-sufficiency of residents? (If "yes", complete the following table; if "no" skip to sub-component 2, Family Self Sufficiency Programs. The position of the table may be altered to facilitate its use. )

Services and Programs				
Program Name & Description (including location, if appropriate)	Estimated Size	Allocation Method (waiting list/random selection/specific criteria/other)	Access (development office / PHA main office / other provider name)	Eligibility (public housing or section 8 participants or both)

Self Sufficiency	17	Waiting list	Office	Public Housing

**(2) Family Self Sufficiency program/s**

a. Participation Description

Family Self Sufficiency (FSS) Participation		
Program	Required Number of Participants (start of FY 2003Estimate)	Actual Number of Participants (As of: DD/MM/YY)
Public Housing	17	17 6/30/00
Section 8	0	0

- b.  Yes  No: If the PHA is not maintaining the minimum program size required by HUD, does the most recent FSS Action Plan address the steps the PHA plans to take to achieve at least the minimum program size?  
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 use to determine the need for PHA actions to improve safety of residents (select all that apply).

- Safety and security survey of residents
- Analysis of crime statistics over time for crimes committed "in and around" public housing authority
- Analysis of cost trends over time for repair of vandalism and removal of graffiti
- Resident reports
- PHA employee reports
- Police reports
- Demonstrable, quantifiable success with previous or ongoing anticrime/anti drug programs
- Other (describe below)

3. Which developments are most affected? (list below)

Whitfield I and Whitfield II, Harbor Towers, Scattered Sites

**B. Crime and Drug Prevention activities the PHA has undertaken or plans to undertake in the next PHA fiscal year**

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

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

1. Which developments are most affected? (list below)

Harbor Towers

**C. Coordination between PHA and the police**

1. Describe the coordination between the PHA and the appropriate police precincts for carrying out crime prevention measures and activities: (select all that apply)

- Police involvement in development, implementation, and/or ongoing evaluation of drug-elimination plan
  - Police provide crime data to housing authority staff for analysis and action
  - Police have established a physical presence on housing authority property (e.g., community policing office, officer in residence)
  - Police regularly testify in and otherwise support eviction cases
  - Police regularly meet with the PHA management and residents
  - Agreement between PHA and local law enforcement agency for provision of above-baseline law enforcement services
  - Other activities (list below)
2. Which developments are most affected? (list below)  
Whitfield I and Whitfield II, Harbor Towers

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

PHAs eligible for FY 2003PHDEP 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  No: This PHDEP Plan is an Attachment. (Attachment Filename: )

**14. RESERVED FOR PET POLICY**

[24 CFR Part 903.7 9 (n)]

**PET POLICY FOR FAMILY DEVELOPMENTS**

In compliance with Section 526 of The Quality Housing and Work Responsibility Act of 1998, PHA residents shall be permitted to own and keep common household pets. Animals that are an auxiliary for persons with a disability are excluded from this policy. The ownership of common household pets is subject to rules and limitations:

1. Common household pets shall be defined as “domesticated animals such as a dog, cat, bird, rodent, fish or turtle”.
2. No more than one (1) dog or cat shall be permitted in a household. In the case of birds, a maximum of two birds may be permitted. There shall be no limit as to the number of fish, but no more than one aquarium with a maximum capacity of twenty (20) gallons shall be permitted. A Resident with a dog or cat may also have other categories of “common household pets” as defined above.
3. Pets other than a dog or cat shall be confined to an appropriate cage or container. Such a pet may be removed from its cage while inside the owner’s apartment for the purpose of handling, but shall not generally be unrestrained.
4. Only one (1) dog or cat is allowed per household. **NO PIT BULLS WILL BE PERMITTED.** All dogs and cats will need to be on a leash, tied up, or otherwise restrained at all times when they are outside. Neither dogs nor cats shall be permitted to run loose.
5. Pet owners shall maintain their pet in such a manner as to prevent any damage to their unit, yard or common areas of the community in which they live. The animal shall be maintained so as not to be a nuisance or a threat to the health or safety of neighbors, PHA employees, or the public, by reason of noise, unpleasant odors or other objectionable situations.
6. Each pet owner shall be fully responsible for the care of the pet, including the proper disposal of pet wastes in a safe and sanitary manner. Animal wastes must be collected by the pet owner and

put into a plastic bag that is then tied shut and disposed of by placing the bag into a waste disposal container. Improper disposal of pet waste is a lease violation and may be grounds for termination.

7. All pets shall be inoculated and licensed in accordance with applicable state and local laws. All cats or dogs shall be neutered or spayed, unless a veterinarian certifies that the spaying or neutering would be inappropriate or unnecessary (because of health, age, etc.).
8. All pets shall be registered with the Management Office immediately.
9. Any litigation resulting from actions by pets shall be the sole responsibility of the pet owner. The pet owner agrees to indemnify and hold harmless the PHA from all claims, causes of action damages or expenses, including attorney's fees, resulting from the action or the activities of his or her pet.

## **15. Civil Rights Certifications**

[24 CFR Part 903.7 9 (o)]

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

## **16. Fiscal Audit**

[24 CFR Part 903.7 9 (p)]

1.  Yes  No: Is the PHA required to have an audit conducted under section 5(h)(2) of the U.S. Housing Act of 1937 (42 U.S.C. 1437c(h))?  
(If no, skip to component 17.)
2.  Yes  No: Was the most recent fiscal audit submitted to HUD?
3.  Yes  No: Were there any findings as the result of that audit?
4.  Yes  No: If there were any findings, do any remain unresolved?  
If yes, how many unresolved findings remain? \_\_\_\_\_
5.  Yes  No: Have responses to any unresolved findings been submitted to HUD?  
If not, when are they due (state below)?  
We had one finding – Travel advance reimbursement, this has been resolved.

## **17. PHA 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 PHA engaging in any activities that will contribute to the long-term asset management of its public housing stock, including how the Agency will plan for long-term operating, capital investment, rehabilitation, modernization, disposition, and other needs that have **not** been addressed elsewhere in this PHA Plan?
2. What types of asset management activities will the PHA undertake? (select all that apply)  
 Not applicable  
 Private management  
 Development-based accounting

- Comprehensive stock assessment  
 Other: (list below)

3.  Yes  No: Has the PHA included descriptions of asset management activities in the **optional** Public Housing Asset Management Table?  
(Attachment M)

## **18. Other Information**

[24 CFR Part 903.7 9 (r)]

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

1.  Yes  No: Did the PHA receive any comments on the PHA Plan from the Resident Advisory Board/s?
2. If yes, the comments are: (if comments were received, the PHA **MUST** select one)  
 Attached at Attachment (File name)  
 Provided below:  
How are we going to administer all of this.  
Questions regarding residence – violations  
HOPE VI questions regarding relocation
3. In what manner did the PHA address those comments? (select all that apply)  
 Considered comments, but determined that no changes to the PHA Plan were necessary.  
 The PHA changed portions of the PHA Plan in response to comments  
List changes below:  
  
 Other: (list below)

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

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

### **3. Description of Resident Election Process**

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

b. Eligible candidates: (select one)

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

c. Eligible voters: (select all that apply)

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

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

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

1. Consolidated Plan jurisdiction: City of Benton Harbor, Michigan

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

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

4. The Consolidated Plan of the jurisdiction supports the PHA Plan with the following actions and commitments: (describe below)  
To provide quality housing to increase Section 8. To remove distressed public housing

### **D. Other Information Required by HUD**

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

### **Attachments**

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

Attachment A  
Deconcentration Policy

Deconcentration Policy

It is the policy of the Benton Harbor Housing Commission (BHHC) to house families in a manner that will prevent a concentration of poverty families and/or concentration of higher income families in any one development. The specific objective of the BHHC is to house no less than 40% of its BHHC inventory with families that have income at or below 30% of the area median income by public housing development. Also, the BHHC will take actions to insure that no individual development has a concentration of higher income families in one or more of the developments. To insure that the BHHC does not concentrate families with higher income levels, it is the goal of the BHHC not to house more than 60% of its units in any one development with families whose income exceeds 30% of the area median income. The BHHC will track the status of family income, by development, on a monthly basis by utilizing income reports generated by the BHHC's computer system.

To accomplish the deconcentration goals the BHHC will take the following actions:

- A. At the beginning of each fiscal year, the BHHC will establish a goal for housing 40% of its new admissions with families whose incomes are at or below the area median income. The annual goal will be calculated by taking 40% of the total number of move-ins from the previous fiscal year.
- B. To accomplish the goals of:
  1. Housing not less than 40% of its inventory on an annual basis with families that have incomes at or below 30% of area median income; and
  2. Not housing families with incomes that exceed 30% of the area median income in developments that have 60% or more of the total household living in the development with incomes that exceed 30% of the area median income, the BHHC's Tenant Selection and Assignment Plan which is a part of this policy, provides for the utilization of "Local Preferences" in regards to the selection of applicants to meet the priorities of the policy.

Attachment B  
2004 Capital Fund Program

<b>Annual Statement/Performance and Evaluation Report</b>					
<b>Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary</b>					
<b>PHA Name: Benton Harbor Housing Commission</b>		<b>Grant Type and Number</b> Capital Fund Program Grant No: MI33P010501-04 Replacement Housing Factor Grant No:			<b>Federal FY of Grant:</b> <b>2004</b>
<input checked="" type="checkbox"/> <b>Original Annual Statement</b> <input type="checkbox"/> <b>Reserve for Disasters/ Emergencies</b> <input type="checkbox"/> <b>Revised Annual Statement (revision no: )</b> <input type="checkbox"/> <b>Performance and Evaluation Report for Period Ending:</b> <input type="checkbox"/> <b>Final Performance and Evaluation Report</b>					
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations	129,870			
3	1408 Management Improvements	64,935			
4	1410 Administration	64,935			
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	38,961			
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	350,653			
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Nondwelling Structures				
13	1475 Nondwelling Equipment				
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1499 Development Activities				
19	1502 Contingency				
	Amount of Annual Grant: (sum of lines.....)	649,354			
	Amount of line XX Related to LBP Activities				
	Amount of line XX Related to Section 504 compliance				
	Amount of line XX Related to Security –Soft Costs				
	Amount of Line XX related to Security-- Hard Costs				
	Amount of line XX Related to Energy Conservation Measures				
	Collateralization Expenses or Debt Service				

<b>Annual Statement/Performance and Evaluation Report</b>									
<b>Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)</b>									
<b>Part II: Supporting Pages</b>									
PHA Name: <b>Benton Harbor Housing Commission</b>			Grant Type and Number Capital Fund Program Grant No: MI33P010501-04 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	
HA Wide Operations	A. Housing Operations		1406	20%	129,870				
	<b>Sub total</b>				<b>129,870</b>				
HA Wide Management Improvements	A. Resident Services Coordinator		1408	100%	29,000				
	B. Resident Programs		1408	100%	5,935				
	C. Commissioners Training		1408	100%	5,000				
	D. Staff Training		1408	100%	5,000				
	E. Family Investment Center Ops		1408	100%	20,000				
	<b>Sub total</b>				<b>64,935</b>				
HA Wide Admin Cost	A. Partial Salary and benefits of staff involved in CFP		1410	7%	64,935				
	<b>Sub total</b>				<b>64,935</b>				
HA Wide Fees & Cost	A. A/E Services		1430	100%	38,961				
	<b>Sub total</b>				<b>38,961</b>				

<b>Annual Statement/Performance and Evaluation Report</b> <b>Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)</b> <b>Part II: Supporting Pages</b>								
PHA Name: <b>Benton Harbor Housing Commission</b>		Grant Type and Number Capital Fund Program Grant No: MI33P010501-04 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
MI 10-2	Rehabilitate Baths And Bedrooms		1460	78 units	350,653			
	<b>Sub total</b>				<b>350,653</b>			
	<b>Grand total</b>				<b>649,354</b>			

<b>Annual Statement/Performance and Evaluation Report</b> <b>Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)</b> <b>Part III: Implementation Schedule</b>							
<b>PHA Name:</b> <b>Benton Harbor Housing Commission</b>		<b>Grant Type and Number</b> Capital Fund Program No: MI33P010501-04 Replacement Housing Factor No:				<b>Federal FY of Grant:</b> 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	
HA Wide	9/30/06			9/30/08			
MI 10-2	9/30/06			9/30/08			

Attachment C  
2004 - 2008 Capital Fund Program Five Year Action Plan

**Capital Fund Program Five-Year Action Plan**  
**Part I: Summary**

PHA Name <b>Benton Harbor Housing Commission</b>		Benton Harbor/ /Michigan		<input checked="" type="checkbox"/> <b>Original 5-Year Plan</b> <input type="checkbox"/> <b>Revision No:</b>	
Development Number/Name/HA-Wide	Year 1	Work Statement for Year 2 FFY Grant: PHA FY: 2005	Work Statement for Year 3 FFY Grant: PHA FY: 2006	Work Statement for Year 4 FFY Grant: PHA FY: 2007	Work Statement for Year 5 FFY Grant: PHA FY: 2008
	Annual Statement 226,000				
MI 10-1,2		40,000	52,000	40,000	64,434
MI 10-3		180,000	150,000	95,000	72,488
MI 10-5, 7, 9		65,000	66,476	146,476	131,554
HA Wide Ops		90,038	90,038	90,038	90,038
HA Wide Other		265,840	265,840	265,840	265,840
HA Wide Non-dwelling		8,476	25,000	12,000	25,000
Total CFP Funds (Est.)		649,354	649,354	649,354	649,354
Total Replacement Housing Factor Funds					

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

Activities for Year 1	Activities for Year : 2 FFY Grant: PHA FY: 2005			Activities for Year: 3 FFY Grant: PHA FY: 2006		
	Development Name/Number	Major Work Categories	Estimated Cost	Development Name/Number	Major Work Categories	Estimated Cost
	<b>MI 10-1,2</b>	A. Hope VI leverage	40,000	<b>MI 10-1,2</b>	A. Hope VI leverage	52,000
See		<b>Subtotal</b>	<b>40,000</b>		<b>Subtotal</b>	<b>52,000</b>
Annual	<b>MI 10-3</b>	A. Replace windows	180,000	<b>MI 10-3</b>	A. Replace carpeting	150,000
		<b>Subtotal</b>	<b>180,000</b>		<b>Subtotal</b>	<b>150,000</b>
				<b>MI 10-5,7,9</b>	A. Renovate kitchens	36,476
<b>Statement</b>	<b>MI 10-5,7,9</b>	A. HVAC upgrade	65,000		B. Build storage sheds	30,000
		<b>Subtotal</b>	<b>65,000</b>		<b>Subtotal</b>	<b>66,476</b>
				<b>MI 10-9</b>	A. Build Sheds	30,000
					<b>Subtotal</b>	<b>30,000</b>
	<b>HA Wide Non-dwelling Equipment</b>	A. Replace office equipment	6,476	<b>HA Wide Non-dwelling Equipment</b>	A. Replace Maintenance vehicle	25,000
		B. Replace Maintenance Equipment	2,000		<b>Subtotal</b>	<b>25,000</b>
		<b>Subtotal</b>	<b>8,476</b>			
	<b>HA Wide Operations</b>	A. Housing Operations	90,038	<b>HA Wide Operations</b>	A. Housing Operations	90,038
		<b>Subtotal</b>	<b>90,038</b>		<b>Subtotal</b>	<b>90,038</b>



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

Activities for Year 1	Activities for Year : 4 FFY Grant: PHA FY: 2007			Activities for Year: 5 FFY Grant: PHA FY: 2008		
	Development Name/Number	Major Work Categories	Estimated Cost	Development Name/Number	Major Work Categories	Estimated Cost
	<b>MI 10-1,2</b>	A. Hope VI leverage	40,000	<b>MI 10-1,2</b>	A. Hope VI leverage	34,034
See		<b>Subtotal</b>	<b>40,000</b>		B. Replace appliances	30,400
					<b>Subtotal</b>	<b>64,434</b>
Annual						
	<b>MI 10-3</b>	A. Plumbing upgrade	95,000	<b>MI 10-3</b>	A. Landscaping	18,644
		<b>Subtotal</b>	<b>95,000</b>		B. Site Improvements	18,644
Statement					C. Replace appliances	35,200
					<b>Subtotal</b>	<b>72,488</b>
	<b>MI 10-5,7,9</b>	A. Renovate kitchens	146,476	<b>MI 10-7,9</b>	A. Landscaping	33,535
		<b>Subtotal</b>	<b>146,476</b>		B. Site Improvements	33,535
					C. Replace appliances	64,484
					<b>Subtotal</b>	<b>131,554</b>
	<b>HA Wide Non-dwelling Equipment</b>	A. Replace office equipment	10,000	<b>HA Wide Non-dwelling Equipment</b>	A. Replace Maintenance Vehicle	25,000
		B. Replace Maintenance Equipment	2,000		<b>Subtotal</b>	<b>25,000</b>
		<b>Subtotal</b>	<b>12,000</b>			
	<b>HA Wide Operations</b>	A. Housing Operations	90,038	<b>HA Wide Operations</b>	A. Housing Operations	90,038
		<b>Subtotal</b>	<b>90,038</b>		<b>Subtotal</b>	<b>90,038</b>



### **Amendment and Deviation Definitions**

#### **Substantial Deviation from the 5-year Plan:**

The Public Housing Authority's (PHA) Definition of Substantial Deviation and Significant Amendment or Modification are as follows:

- changes to rent or admissions policies or organization of the waiting list;
- additions of non-emergency work items (items not intended in the current 5-Year Action Plan) or change in use of replacement reserve funds under the Capital Fund; and
- any change with regard to demolition or disposition, designation, homeownership programs or conversion activities.

#### **Significant Amendment or Modification to the Annual Plan:**

The Public Housing Authority's (PHA) Definition of Substantial Deviation and Significant Amendment or Modification are as follows:

- changes to rent or admissions policies or organization of the waiting list;
- additions of non-emergency work items (items not intended in the current Annual Statement) or change in use of replacement reserve funds under the Capital Fund; and
- any change with regard to demolition or disposition, designation, homeownership programs or conversion activities.

Attachment E  
Summary of Policy and Program Changes

Summary of Policy and Program changes

The PHA has not made nor intends to make any major policy or program changes in 2004. Local preferences were established and will not change, rent policies remain the same, community service policy parameters were included in our lease and ACOP and will be reinstated by July 31, 2003, and our family development pet policy has already been implemented.

**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:  
Mr. Jimmie Caldwell

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

C. The term of appointment is (include the date term expires):  
11/11/02 – 11/11/07

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):

A. Date of next term expiration of a governing board member:

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

Mr. Charles L. Yarbrough, Mayor of Benton Harbor

Attachment G  
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.)

Ura Green  
Sherry Edwards  
Annie Smith  
Jimmie Carowell  
Mrs. Doolittle

Attachment H  
Progress in meeting the 5-Year Plan Mission and Goals

The PHA has been able to maintain its mission to promote adequate and affordable housing, economic opportunity and a suitable living environment free from discrimination through the utilization of previous Capital funds and the proper application of our public housing policies.

We are continuing to address public housing vacancies very aggressively and our PHAS scores indicate that other operational issues are being positively addressed.

Capital funds have been utilized to provide modernization of our property and our FY 2004 application will continue that effort.

PHA has implemented local preferences to improve the living environment in addition to our modernization efforts

The implementation of a family pet policy has provided the opportunity for residents to enjoy pets within a regulated environment. In addition, PHA will reinstate a Community Service program and discuss with residents and each adult member of every household by July 31, 2003.

We are confident that the PHA will be able to continue to meet and accommodate all our goals and objectives for FY 2004.

Attachment I  
 Component 3, (6) Deconcentration and Income Mixing

- a.  Yes  No: Does the PHA have any general occupancy (family) public housing developments covered by the deconcentration rule? If no, this section is complete. If yes, continue to the next question.
- b.  Yes  No: Do any of these covered developments have average incomes above or below 85% to 115% of the average incomes of all such developments? If no, this section is complete.

If yes, list these developments as follows:

<b>Deconcentration Policy for Covered Developments</b>			
<b>Development Name:</b>	<b>Number of Units</b>	<b>Explanation (if any) [see step 4 at §903.2(c)(1)(iv)]</b>	<b>Deconcentration policy (if no explanation) [see step 5 at §903.2(c)(1)(v)]</b>

## Attachment J Implementation of Public Housing Resident Community Service Requirement

The Benton Harbor Housing Commission's policy is designed to identify which adult family members are subject to or exempt from the service requirements; to explain how the PHA will administer its program; to identify PHA and/or third party certification opportunities available to eligible adult family members; and to assure resident compliance with identified work activities with fair and equitable actions.

### PHA Responsibilities

#### (1.) Eligibility Determination

The PHA will review every existing resident file to determine each Adult member's status regarding community service per the following guidelines.

- a. As family status is determined a registered letter or other certifiable document of receipt will be sent to each adult member of that family to notify them of their status (exempt or non-exempt) and explaining the steps they should immediately proceed with through their housing representative.
- b. The PHA will include a copy of the general information section of its Community Service Policy and a listing of PHA and/or third party work activities that are eligible for certification of the community service requirement.
- c. At the scheduled meeting with each non-exempt adult family member, not only will the parameters of the community service requirement be reviewed but also the PHA and/or third party work activities will be identified and selected for compliance with the annual obligation for certification at their annual lease renewal date.

#### (2.) Work Activity Opportunities

The Benton Harbor Housing Commission has elected to provide to those adult family members that must perform community service activities the opportunity to select either PHA sanctioned work activities or Third Party certifiable work items. The administration of the certification process would be:

- a. **PHA Provided Activities.**  
When qualifying activities are provided by the Commission directly, designated Commission employee(s) shall provide signed certification that the family member has performed the proper number of hours for the selected service activities.
- b. **Third Party Certification**  
When qualifying activities are administered by any organization other than PHA, the family member must provide signed certification (see III A (c)) to the Commission by such third party organization that said family member has performed appropriate service activities for the required hours.
- c. **Verification of Compliance.**  
The Commission is required to review family compliance with service requirement, and must verify such compliance annually at least thirty (30) days before the end of the twelve (12) month lease term (annual re-certification time). Evidence of service performance and/or exemption must be maintained in the participant files.
- d. **Notice of Noncompliance.**  
If the Commission determines that, a family member who is subject to fulfilling a service requirement, but who has violated the family's obligation (a noncompliant resident) the Commission must notify the specific family member of this determination.

The Notice of Noncompliance must:

1. Briefly, describe the noncompliance (inadequate number of hours).

Attachment J  
Implementation of Public Housing Resident Community Service Requirement

2. State that the Commission will not renew the lease at the end of the twelve (12) month lease term unless:

The resident or any other noncompliant adult family member enters into a written agreement with the Commission to cure the noncompliance and in fact perform to the letter of agreement.

- Or -

The family provides written assurance satisfactory, to the PHA that the resident or other noncompliant adult family member no longer resides in the unit.

This Notice of Noncompliance must also state that the resident may request a grievance hearing and that the resident may exercise any available judicial remedy to seek timely redress for the Commission's non-renewal of the lease because of a noncompliance determination.

- e. Resident agreement to comply with the service requirement.

The written agreement entered into with the Commission to cure the service requirement noncompliance by the resident and any other adult family member must:

1. Agree to complete additional service hours needed to make up the total number of hours required over the twelve (12) month term of the new lease.
2. State that all other members of the family subject to the service requirement are in current compliance with the service requirement or are no longer residing in the unit.

- f. The Benton Harbor Housing Commission has developed a list of Agency certifiable and/or third party work activities of which each non-exempt adult family member can select to perform their individual service requirement.

Attachment K  
Component 10 (B) Voluntary Conversion Initial Assessments

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

<b>Development Name</b>	<b>Number of Units</b>

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

Attachment L  
 Optional Public Housing Asset Management Table

**Public Housing Asset Management**

<b>Development Identification</b>		<b>Activity Description</b>						
Name, Number, and Location	Number and Type of units	Capital Fund Program Parts II and III <i>Component 7a</i>	Development Activities <i>Component 7b</i>	Demolition / disposition <i>Component 8</i>	Designated housing <i>Component 9</i>	Conversion <i>Component 10</i>	Home-ownership <i>Component 11a</i>	Other (describe) <i>Component 17</i>
MI 10-1	94	Demolish and rebuild new units	16,000,000.00	4,000,000.00				
MI 10-2	78	Demolish and rebuild new units	14,000,000.00	0				
MI 10-3	95	Remodel, new windows, HVAC, new elevators	7,000,000.00	0				
MI 10-5	46	Rehab interior	690,000.00	0				
MI 10-7	40	Rehab interior	650,000.00	0				
MI 10-9	17	Install new carpet and new cabinets	60,000.00	0				

<b>Annual Statement/Performance and Evaluation Report</b>					
<b>Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary</b>					
<b>PHA Name: Benton Harbor Housing Commission</b>		<b>Grant Type and Number</b> Capital Fund Program Grant No: MI33P010501-03 Replacement Housing Factor Grant No:			<b>Federal FY of Grant:</b> <b>2003</b>
<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: 3/31/04 <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	117,617		0	0
3	1408 Management Improvements	84,000		0	0
4	1410 Administration	46,840		0	0
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	115,000		0	0
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	214,631		0	0
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Nondwelling Structures				
13	1475 Nondwelling Equipment	10,000		0	0
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1499 Development Activities				
19	1502 Contingency				
	Amount of Annual Grant: (sum of lines.....)	588,088		0	0
	Amount of line XX Related to LBP Activities				
	Amount of line XX Related to Section 504 compliance				
	Amount of line XX Related to Security –Soft Costs				
	Amount of Line XX related to Security-- Hard Costs				
	Amount of line XX Related to Energy Conservation Measures				
	Collateralization Expenses or Debt Service				

<b>Annual Statement/Performance and Evaluation Report</b>									
<b>Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)</b>									
<b>Part II: Supporting Pages</b>									
PHA Name: <b>Benton Harbor Housing Commission</b>			Grant Type and Number Capital Fund Program Grant No: MI33P010501-03 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	
HA Wide Operations	A. Housing Operations		1406	20%	117,617		0	0	0% Complete
	<b>Sub total</b>				<b>117,617</b>		<b>0</b>	<b>0</b>	
HA Wide Management Improvements	A. Resident Services Coordinator		1408	100%	29,000		0	0	0% Complete
	B. Resident Programs		1408	100%	10,000		0	0	0% Complete
	C. Commissioners Training		1408	100%	7,500		0	0	0% Complete
	D. Staff Training		1408	100%	7,500		0	0	0% Complete
	E. Family Investment Center Ops		1408	100%	30,000		0	0	0% Complete
	<b>Sub total</b>				<b>84,000</b>		<b>0</b>	<b>0</b>	
HA Wide Admin Cost	A. Partial Salary and benefits of staff involved in CFP		1410	7%	46,840		0	0	0% Complete
	<b>Sub total</b>				<b>46,840</b>		<b>0</b>	<b>0</b>	
HA Wide Fees & Cost	A. A/E Services		1430	100%	105,000		0	0	0% Complete
	B. Consulting fees		1430	100%	10,000		0	0	0% Complete
	<b>Sub total</b>				<b>115,000</b>		<b>0</b>	<b>0</b>	

<b>Annual Statement/Performance and Evaluation Report</b> <b>Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)</b> <b>Part II: Supporting Pages</b>									
PHA Name: <b>Benton Harbor Housing Commission</b>			<b>Grant Type and Number</b> Capital Fund Program Grant No: MI33P010501-03 Replacement Housing Factor Grant No:				<b>Federal FY of Grant:</b> 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
MI 10-1,2	A. Patch & Painting interiors		1460	86 units	86,000		0	0	0% Complete
	<b>Sub total</b>				<b>86,000</b>		<b>0</b>	<b>0</b>	
MI 10-3	A. Replace windows		1460	27 units	78,631		0	0	0% Complete
	B. Upgrade emergency boiler and generator		1460	1 Sys	50,000		0	0	0% Complete
	<b>Sub total</b>				<b>128,631</b>		<b>0</b>	<b>0</b>	
HA Wide Non-dwelling Equipment	A. Replace office equipment		1475		5,000		0	0	0% Complete
	B. Replace Maintenance Equipment		1475		5,000		0	0	0% Complete
	<b>Sub total</b>				<b>10,000</b>		<b>0</b>	<b>0</b>	
	<b>Grand total</b>				<b>588,088</b>		<b>0</b>	<b>0</b>	

<b>Annual Statement/Performance and Evaluation Report</b> <b>Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)</b> <b>Part III: Implementation Schedule</b>							
PHA Name: <b>Benton Harbor Housing Commission</b>		Grant Type and Number Capital Fund Program No: MI33P010501-03 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	
HA Wide	9/30/05			9/30/07			
MI 10-1	9/30/05			9/30/07			
MI 10-2	9/30/05			9/30/07			
MI 10-3	9/30/05			9/30/07			

Attachment N  
2003 502 Performance and Evaluation Report

<b>Annual Statement/Performance and Evaluation Report</b>					
<b>Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary</b>					
<b>PHA Name: Benton Harbor Housing Commission</b>		<b>Grant Type and Number</b> Capital Fund Program Grant No: MI33P010502-03 Replacement Housing Factor Grant No:			<b>Federal FY of Grant:</b> <b>2003</b>
<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: 3/31/04 <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	23,441		0	0
3	1408 Management Improvements				
4	1410 Administration				
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	20,000		0	0
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	73,763		0	0
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Nondwelling Structures				
13	1475 Nondwelling Equipment				
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1499 Development Activities				
19	1502 Contingency				
	Amount of Annual Grant: (sum of lines.....)	117,204		0	0
	Amount of line XX Related to LBP Activities				
	Amount of line XX Related to Section 504 compliance				
	Amount of line XX Related to Security –Soft Costs				
	Amount of Line XX related to Security-- Hard Costs				
	Amount of line XX Related to Energy Conservation Measures				
	Collateralization Expenses or Debt Service				

<b>Annual Statement/Performance and Evaluation Report</b> <b>Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)</b> <b>Part II: Supporting Pages</b>									
PHA Name: <b>Benton Harbor Housing Commission</b>			Grant Type and Number Capital Fund Program Grant No: MI33P010502-03 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	
HA Wide Operations	A. Housing Operations		1406	20%	23,441		0	0	0% Complete
	<b>Sub total</b>				<b>23,441</b>		<b>0</b>	<b>0</b>	
HA Wide Fees & Cost	A. A/E Services		1430	100%	20,000		0	0	0% Complete
	<b>Sub total</b>				<b>20,000</b>		<b>0</b>	<b>0</b>	
MI 10-2	A. To rehabilitate bathrooms on Buss Avenue		1460	78 units	73,763		0	0	0% Complete
	<b>Sub total</b>				<b>73,763</b>		<b>0</b>	<b>0</b>	
	<b>Grand total</b>				<b>117,204</b>		<b>0</b>	<b>0</b>	



<b>Annual Statement/Performance and Evaluation Report</b>					
<b>Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary</b>					
<b>PHA Name:</b> Benton Harbor Housing Commission		<b>Grant Type and Number</b> Capital Fund Program Grant No: MI33P010501-02 Replacement Housing Factor Grant No:			<b>Federal FY of Grant:</b> 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: 3/31/04 <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	139,800		139,800	139,800
3	1408 Management Improvements	84,000		84,000	0
4	1410 Administration	46,840		46,840	0
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	135,000		135,000	0
8	1440 Site Acquisition				
9	1450 Site Improvement				0
10	1460 Dwelling Structures	283,476		283,476	0
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Nondwelling Structures				0
13	1475 Nondwelling Equipment	10,000		10,000	0
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1499 Development Activities				
19	1502 Contingency				
	Amount of Annual Grant: (sum of lines.....)	699,116		699,116	139,800
	Amount of line XX Related to LBP Activities				
	Amount of line XX Related to Section 504 compliance				
	Amount of line XX Related to Security –Soft Costs				
	Amount of Line XX related to Security-- Hard Costs				
	Amount of line XX Related to Energy Conservation Measures				
	Collateralization Expenses or Debt Service				

<b>Annual Statement/Performance and Evaluation Report</b>									
<b>Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)</b>									
<b>Part II: Supporting Pages</b>									
PHA Name: <b>Benton Harbor Housing Commission</b>			Grant Type and Number Capital Fund Program Grant No: MI33P010501-02 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	
HA Wide Operations	A. Housing Operations		1406	20%	139,800		139,800	139,800	Completed
	<b>Sub total</b>				<b>139,800</b>		<b>139,800</b>	<b>139,800</b>	
HA Wide Management Improvements	A. Resident Services Coord		1408	100%	29,000		29,000	0	0% Complete
	B. Resident Programs		1408	100%	10,000		10,000	0	0% Complete
	C. Commissioners Training		1408	100%	7,500		7,500	0	0% Complete
	D. Staff Training		1408	100%	7,500		7,500	0	0% Complete
	E. Family Investment Center Ops		1408	100%	30,000		30,000	0	0% Complete
	<b>Sub total</b>				<b>84,000</b>		<b>84,000</b>	<b>0</b>	
HA Wide Admin Cost	A. Partial Salary and benefits of staff involved in CFP		1410	7%	46,840		46,840		
	<b>Sub total</b>				<b>46,840</b>		<b>46,840</b>	<b>0</b>	
HA Wide Fees & Cost	A. A/E Services		1430	100%	125,000		125,000	0	0% Complete
	B. Consulting fees		1430	100%	10,000		10,000	0	0% Complete
	<b>Sub total</b>				<b>135,000</b>		<b>135,000</b>	<b>0</b>	
MI 10-1,2	A. Replace roofing		1460	86 units	70,000		70,000	0	0% Complete
	B. furnace replacement		1460	86 units	86,000		86,000	0	0% Complete
	<b>Sub total</b>				<b>156,000</b>		<b>156,000</b>	<b>0</b>	

<b>Annual Statement/Performance and Evaluation Report</b>									
<b>Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)</b>									
<b>Part II: Supporting Pages</b>									
PHA Name: <b>Benton Harbor Housing Commission</b>			Grant Type and Number Capital Fund Program Grant No: MI33P010501-02 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
MI 10-3	A. Replace roofing		1460	95 units	50,000		50,000	0	0% Complete
	B. Replace windows		1460	27 units	77,476		77,476	0	0% Complete
	<b>Sub total</b>				<b>127,476</b>		<b>127,476</b>	<b>0</b>	
HA Wide	A. Office Equipment		1475	LS	5,000		5,000	0	0% Complete
	B. Maintenance Equipment		1475	LS	5,000		5,000	0	0% Complete
	<b>Sub total</b>				<b>10,000</b>		<b>10,000</b>	<b>0</b>	
	<b>Grand total</b>				<b>699,116</b>		<b>699,116</b>	<b>139,800</b>	

<b>Annual Statement/Performance and Evaluation Report</b> <b>Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)</b> <b>Part III: Implementation Schedule</b>							
<b>PHA Name:</b> <b>Benton Harbor Housing Commission</b>		<b>Grant Type and Number</b> Capital Fund Program No: MI33P010501-02 Replacement Housing Factor No:				<b>Federal FY of Grant:</b> 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	
HA Wide	3/31/04			9/30/05			
MI 10-1	3/31/04			9/30/05			
MI 10-2	3/31/04			9/30/05			
MI 10-3	3/31/04			9/30/05			
MI 10-5	3/31/04			9/30/05			
MI 10-7	3/31/04			9/30/05			
MI 10-9	3/31/04			9/30/05			

Attachment P  
2001 Performance and Evaluation Report

<b>Annual Statement/Performance and Evaluation Report</b>					
<b>Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary</b>					
<b>PHA Name: Benton Harbor Housing Commission</b>		<b>Grant Type and Number</b>		<b>Federal FY of Grant:</b>	
		Capital Fund Program Grant No: MI33P010501-01		<b>2001</b>	
		Replacement Housing Factor Grant No:			
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input checked="" type="checkbox"/> Revised Annual Statement (revision no: 1)					
<input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 3/31/04 <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	150,822		150,822	150,822
3	1408 Management Improvements	84,000		84,000	44,655
4	1410 Administration	50,000		50,000	0
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	55,000		55,000	32,260
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	314,913		314,913	258,533
11	1465.1 Dwelling Equipment—Nonexpendable	59,375		59,375	0
12	1470 Nondwelling Structures				
13	1475 Nondwelling Equipment	40,000		40,000	0
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1499 Development Activities				
19	1502 Contingency				
	Amount of Annual Grant: (sum of lines.....)	754,110		754,110	486,270
	Amount of line XX Related to LBP Activities				
	Amount of line XX Related to Section 504 compliance				
	Amount of line XX Related to Security –Soft Costs				
	Amount of Line XX related to Security-- Hard Costs				
	Amount of line XX Related to Energy Conservation Measures				
	Collateralization Expenses or Debt Service				

<b>Annual Statement/Performance and Evaluation Report</b>									
<b>Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)</b>									
<b>Part II: Supporting Pages</b>									
PHA Name: <b>Benton Harbor Housing Commission</b>			Grant Type and Number Capital Fund Program Grant No: MI33P010501-01 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	Obligated	Expended	
HA Wide Operations	A. Operations		1406		150,822		150,822	150,822	Complete
	<b>Sub total</b>				<b>150,822</b>		<b>150,822</b>	<b>150,822</b>	
HA Wide Management Improvements	A. Resident Services Coordinator		1408		29,000		29,000	29,000	Completed
	B. Resident programs		1408		10,000		10,000	655	15% Complete
	C. Commissioner training		1408		7,500		7,500	7,500	Completed
	D. Staff training		1408		7,500		7,500	7,500	Completed
	E. Family Investment Center Operations		1408		30,000		30,000	0	0% Complete
	<b>Sub total</b>				<b>84,000</b>		<b>84,000</b>	<b>44,655</b>	
HA Wide Administration	A. Percentage of staff salary/benefits		1410		50,000		50,000	0	0% Complete
	<b>Sub total</b>				<b>50,000</b>		<b>50,000</b>	<b>0</b>	
HA Wide Fees and Cost	A. A/E fees & related cost		1430		35,591		35,591	25,851	73% Complete
	B. Grant preparation		1430		2,500		2,500	2,500	Completed
	C. Energy Audit		1430		6,000		6,000	0	0% Complete
	D. Environmental Review		1430		7,000		7,000	0	0% Complete
	E. Mkt Rent & RR stock		1430		3,909		3,909	3,909	Completed
	<b>Sub total</b>				<b>55,000</b>		<b>55,000</b>	<b>32,260</b>	
HA Wide Dwelling Equipment	A. Ranges and refrigerators		1465	95 units	59,375		59,375	0	0% Complete
	<b>Sub total</b>				<b>59,375</b>		<b>59,375</b>	<b>0</b>	

<b>Annual Statement/Performance and Evaluation Report</b>									
<b>Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)</b>									
<b>Part II: Supporting Pages</b>									
PHA Name: <b>Benton Harbor Housing Commission</b>			Grant Type and Number Capital Fund Program Grant No: MI33P010501-01 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
HA Wide Non-dwelling Equipment	A. Replace vehicle		1475		25,000		25,000	0	0% Complete
	B. New riding tractor		1475		15,000		15,000	0	0% Complete
	<b>Sub total</b>				<b>40,000</b>		<b>40,000</b>	<b>0</b>	
MO 10-1,2 Dwelling Construction	A. Finish storm door replacement program		1460	100%	30,000		30,000	30,000	Completed
	B. Furnace replacement		1460	1	1,485		1,485	1,485	Complete
	C. Removal of distressed housing		1460	LS	89,713		89,713	89,713	Completed
	<b>Sub total</b>				<b>121,198</b>		<b>121,198</b>	<b>121,198</b>	
MO 10-3 Dwelling Construction	A. Paint interiors of units		1460	95 units	66,500		66,500	10,120	0% Complete
	B. Begin window replacement program		1460	95 units	19,235		19,235	19,235	Completed
	<b>Sub total</b>				<b>85,735</b>		<b>85,735</b>	<b>29,355</b>	
MO 10-7	A. Complete siding replacement		1460	100%	107,980		107,980	107,980	Completed
	<b>Sub total</b>				<b>107,980</b>		<b>107,980</b>	<b>107,980</b>	
	<b>Grand total</b>				<b>754,110</b>		<b>754,110</b>	<b>486,270</b>	



Attachment Q  
2000 Performance and Evaluation Report

<b>Annual Statement/Performance and Evaluation Report</b>					
<b>Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary</b>					
<b>PHA Name: Benton Harbor Housing Commission</b>		<b>Grant Type and Number</b>		<b>Federal FY of Grant:</b>	
		Capital Fund Program Grant No: MI33P010501-00		<b>2000</b>	
		Replacement Housing Factor Grant No:			
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input checked="" type="checkbox"/> Revised Annual Statement (revision no: 2) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 3/31/04 <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	147,840		147,840	147,840
3	1408 Management Improvements	74,000		74,000	74,000
4	1410 Administration	50,000		50,000	50,000
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	205,689		205,689	205,689
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	191,886		191,886	191,886
11	1465.1 Dwelling Equipment—Nonexpendable	50,780		50,780	50,780
12	1470 Nondwelling Structures				
13	1475 Nondwelling Equipment	19,005		19,005	19,005
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1499 Development Activities				
19	1502 Contingency				
	Amount of Annual Grant: (sum of lines.....)	739,200		739,200	739,200
	Amount of line XX Related to LBP Activities				
	Amount of line XX Related to Section 504 compliance				
	Amount of line XX Related to Security –Soft Costs				
	Amount of Line XX related to Security-- Hard Costs				
	Amount of line XX Related to Energy Conservation Measures				
	Collateralization Expenses or Debt Service				

<b>Annual Statement/Performance and Evaluation Report</b>									
<b>Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)</b>									
<b>Part II: Supporting Pages</b>									
PHA Name: <b>Benton Harbor Housing Commission</b>			Grant Type and Number Capital Fund Program Grant No: MI33P010501-00 Replacement Housing Factor Grant No:				Federal FY of Grant: 2000		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories		Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
					Original	Revised	Obligated	Expended	
HA Wide Operations	A. Operations		1406		147,840		147,840	147,840	Completed
	<b>Sub total</b>				<b>147,840</b>		<b>147,840</b>	<b>147,840</b>	
HA Wide Management Improvements	A. Resident Services Coordinator		1408		29,000		29,000	29,000	Completed
	B. Commissioner training		1408		7,500		7,500	7,500	Completed
	C. Staff training		1408		7,500		7,500	7,500	Completed
	D. Family Investment Center Operations		1408		30,000		30,000	30,000	Completed
	<b>Sub total</b>				<b>74,000</b>		<b>74,000</b>	<b>74,000</b>	
HA Wide Administration	A. Percentage of staff salary/benefits		1410		50,000		50,000	50,000	Completed
	<b>Sub total</b>				<b>50,000</b>		<b>50,000</b>	<b>50,000</b>	
HA Wide Fees and Costs	A. A/E fees and related costs		1430		12,860		12,860	12,860	Completed
	B. Grant preparation		1430		2,000		2,000	2,000	Completed
	C. survey and site plan of MI 10-1,2		1430		8,250		8,250	8,250	Completed
	D. Tax credit Consultant		1430		49,220		49,220	49,220	Completed
	E. HOPE VI Consultant		1430		131,000		131,000	131,000	Completed
	F. Rent Reasonableness Study		1430		2,359		2,359	2,359	Completed

<b>Annual Statement/Performance and Evaluation Report</b>									
<b>Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)</b>									
<b>Part II: Supporting Pages</b>									
PHA Name: <b>Benton Harbor Housing Commission</b>			Grant Type and Number Capital Fund Program Grant No: MI33P010501-00 Replacement Housing Factor Grant No:				Federal FY of Grant: 2000		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories		Dev. Acct No.	Quantity	Total Estimated Cost	Total Actual Cost		Status of Work	
	<b>Sub total</b>				<b>205,689</b>	<b>205,689</b>	<b>205,689</b>		
HA Wide Dwelling Equipment	A. Ranges and refrigerators		1465		50,780	50,780	50,780	Completed	
	<b>Sub total</b>				<b>50,780</b>	<b>50,780</b>	<b>50,780</b>		
HA Wide Non-Dwelling Equipment	A. Replace copier		1475		9,735	9,735	9,735	Completed	
	B. Lawn mowers and./or tractors		1475		9,270	9,270	9,270	Completed	
	<b>Sub total</b>				<b>19,005</b>	<b>19,005</b>	<b>19,005</b>		
MO 10-5 & 7 Dwelling Construction	A. Replace furnaces		1460	40 units	121,512	121,512	121,512	Completed	
	<b>Sub total</b>				<b>121,512</b>	<b>121,512</b>	<b>121,512</b>		
MO 10-7 Dwelling Construction	A. Replace siding		1460	40 units	70,374	70,374	70,374	Completed	
	<b>Sub total</b>				<b>70,374</b>	<b>70,374</b>	<b>70,374</b>		
	<b>Grand total</b>				<b>739,200</b>	<b>739,200</b>	<b>739,200</b>		

<b>Annual Statement/Performance and Evaluation Report</b> <b>Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)</b> <b>Part III: Implementation Schedule</b>							
PHA Name: <b>Benton Harbor Housing Commission</b>		Grant Type and Number Capital Fund Program No: MI33P010501-00 Replacement Housing Factor No:				Federal FY of Grant: 2000	
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	
MI 10-1	3/31/02		3/31/02	9/30/03	N/A	N/A	
MI 10-2	3/31/02		3/31/02	9/30/03	N/A	N/A	
MI 10-3	3/31/02		3/31/02	9/30/03	N/A	N/A	
MI 10-5	3/31/02		3/31/02	9/30/07	7/2/04	7/2/04	
MI 10-7	3/31/02		3/31/02	9/30/03	7/2/04	7/2/04	
PHA Wide	3/31/02		3/31/02	9/30/03	7/2/04	7/2/04	

a. Type of Submission <input checked="" type="checkbox"/> Original <input type="checkbox"/> Revision No.:	b. Fiscal Year Ending <b>SEPT. 30, 2005</b>	c. No. of months (check one) <input checked="" type="checkbox"/> 12 mo. <input type="checkbox"/> Other (specify):	d. Type of HUD assisted project(s) 01 <input checked="" type="checkbox"/> PHA/IHA Owned Rental Housing 02 <input type="checkbox"/> IHA Owned Mutual Help Homeownership 03 <input type="checkbox"/> PHA/IHA Leased Rental Housing 04 <input type="checkbox"/> PHM/IHA Owned Turnkey III Homeownership 05 <input type="checkbox"/> PHA/IHA Leased Homeownership
e. Name of Public Housing Agency/Indian Housing Authority (PHA/IHA) <b>BENTON HARBOR HOUSING COMM.</b>			

f. Address (city, state, zip code)  
**721 E. Washington, Benton Harbor, MI 49022**

g. ACC Number <b>C-3028</b>	h. FAS/LOCCS Project No. <b>MI 10/1-9</b>	i. HUD Field Office <b>DETROIT</b>
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j. No. of D. Units <b>370</b>	k. No. of Unit Mod. Avail. <b>4,440</b>	m. No. of Projects <b>6</b>
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Line No.	Acct. No.	Description (1)	Actuals Last FY Sep-03 PUM (2)	Estimates Current Sep-04 PUM (3)	Requested Budget Estimates			
					PHA/IHA Estimates		HUD Modifications	
					PUM (4)	(to nearest \$10) (5)	PUM (6)	(to nearest \$10) (7)
<b>Homebuyers Monthly Payments for:</b>								
010	7710	Operating Expense						
020	7712	Earned Home Payments						
030	7714	Nonroutine Maintenance Reserve						
040	Total	Break-Even Amount (sum of lines 010, 020 and 030)						
050	7716	Excess (or deficit) in Break-Even						
060	7790	Homebuyers Monthly Payments - Contra						
<b>Operating Receipts</b>								
070	3110	Dwelling Rental	147.25	151.35	154.05	634,000		
080	3120	Excess Utilities	0.58	0.68				
090	3190	Nondwelling Rental	0.46	0.39				
100	Total	Rental Income (sum of lines 070, 080 and 090)	148.30	0.03	154.05	634,000		
110	3610	Interest on General Fund Investments	1.09	1.35	0.16	700		
120	3890	Other Income	4.94	5.18	4.95	22,000		
130	Total	Operating Income (sum of lines 100, 110 and 120)	154.33	0.04	159.17	706,700		
<b>Operating Expenditures - Administration:</b>								
140	4110	Administrative Salaries	59.21	67.19	69.29	307,650		
	4120	Compensated Absences	3.97					
150	4130	Legal Expense			0.00	0		
160	4140	Staff Training						
170	4150	Travel						
180	4170	Accounting Fees	5.95	13.51	2.25	10,000		
190	4171	Auditing Fees	4.95	5.06	5.20	23,100		
200	4190	Other Administrative Expenses	0.75	0.86	1.52	6,750		
210	Total	Administrative Expense (sum of lines 140 thru line 200)	20.27	20.99	22.30	99,000		
<b>Tenant Services:</b>								
220	4210	Salaries	1.32	6.45				
230	4220	Recreation, Publications and Other Services Resident Part	0.00	2.02	2.02	8,975		
240	4230	Contract Costs, Training, Other	1.98	2.25	0.00			
250	Total	Tenant Services Expense (sum of lines 220, 230 and 240)	3.30	10.72	2.02	8,975		
<b>Utilities:</b>								
260	4310	Water	10.97	11.28	13.51	60,000		
270	4320	Electricity	26.65	28.15	33.78	150,000		
280	4330	Gas	28.94	24.77	36.04	160,000		
290	4340	Fuel						
300	4350	Labor						
310	4390	Other utilities expense						
320	Total	Utilities Expense (sum of line 260 thru line 310)	66.56	64.19	83.33	370,000		

revised editions are obsolete

Name of PHA/HA <b>BENTON HARBOR HOUSING COMM.</b>			Fiscal Year Ending <b>SEPT. 30, 2005</b>					
Line No.	Acct. No.	Description (1)	Actuals Last FY Sep-03 PUM (2)	Estimates Current Budget Sep-04 PUM (3)	Requested Budget Estimates			
					PHA/HA Estimates		HUD Modifications	
					PUM (4)	(to nearest \$10) (5)	PUM (6)	(to nearest \$10) (7)
<b>Ordinary Maintenance and Operation:</b>								
330	4410	Labor	48.91	52.85	54.22	240,715		
340	4420	Materials	31.04	27.03	33.78	150,000		
350	4430	Contract Costs	61.85	89.14	55.29	245,500		
360		<b>Total Ordinary Maintenance &amp; Operation Expenses (line 330 to 350)</b>	<b>141.80</b>	<b>149.02</b>	<b>143.29</b>	<b>636,215</b>		
<b>Protective Services:</b>								
370	4460	Labor						
380	4470	Materials						
390	4480	Contract Costs						
400		<b>Total Protective Services Expense (sum of lines 370 to 390)</b>						
<b>General Expense:</b>								
410	4510	Insurance	21.80	25.36	25.72	127,500		
420	4520	Payments in Lieu of Taxes	7.00	8.82	7.07	31,400		
430	4530	Terminal Leave Payments	1.05		0.00			
440	4540	Employee Benefit Contributions	35.84	60.81	59.80	265,500		
450	4570	Collection Losses	9.03	9.01	8.71	40,000		
460	4590	Other General Expenses						
470		<b>Total General Expense (sum of lines 410 to 460)</b>	<b>74.72</b>	<b>103.80</b>	<b>104.59</b>	<b>464,400</b>		
480		<b>Total Routine Expense (sum of lines 210,250,320,360,400 &amp; 470)</b>	<b>381.48</b>	<b>435.33</b>	<b>433.80</b>	<b>1,926,090</b>		
<b>Rent for Leased Dwellings:</b>								
490	4710	Rents to Owners of Leased Dwellings						
500		<b>Total Operating Expense (sum of lines 480 and 490)</b>	<b>381.48</b>	<b>435.33</b>	<b>433.80</b>	<b>1,926,090</b>		
<b>Nonroutine Expenditures:</b>								
510	4610	Extraordinary Maintenance						
511	4620	Casualty Losses	0.36					
512	4800	Depreciation Expense	0.07		0.11	500		
520	7520	Replacement of Nonexpendable Equipment						
530	7540	Property Betterments and Additions						
540		<b>Total Nonroutine Expenditures (sum of lines 510,520 and 530)</b>	<b>0.43</b>		<b>0.11</b>	<b>500</b>		
560		<b>Total Operating Expenditures (sum of lines 500 and 540)</b>	<b>381.92</b>	<b>435.33</b>	<b>433.92</b>	<b>1,926,590</b>		
<b>Prior Year Adjustments:</b>								
580	6010	Prior Year Adjustments Affecting Residual Receipts						
<b>Other Expenditures:</b>								
570		Deficiency in Residual Receipts at End of Preceding Fiscal Yr.						
580		<b>Total Operating Expenditures, including prior year adjustments and other expenditures (line 560 plus or minus line 570)</b>	<b>381.92</b>	<b>435.33</b>	<b>433.92</b>	<b>1,926,590</b>		
590		Residual Receipts (or Deficit) before HUD Contributions and provision for operating reserve (line 130 minus line 580)	(227.59)	(276.38)	(274.75)	(1,216,890)		
<b>HUD Contributions:</b>								
600	8010	Basic Annual Contribution Earned - Leased Projects Current Year						
610	8011	Prior Year Adjustments - (Debit) Credit						
620		<b>Total Basic Annual Contribution (line 600 plus or minus line 610)</b>						
630	8020	Contributions Earned - Op.Sub.;Cur.Yr.(before yr.end adj)	166.87	167.23	212.01	941,318		
640		Mandatory PFS Adjustments (net):						
660		Other (specify): 2004 Capital Fund, line 140	31.49	31.77	29.25	129,870		
670		<b>Total Year-end Adjustments/Other (plus or minus lines 640 thru 660)</b>						
680	8020	<b>Total Operating Subsidy-current year (line 630 plus or minus line 670)</b>						
690		<b>Total HUD Contributions (sum of lines 620 and 680)</b>	<b>198.35</b>	<b>199.00</b>	<b>241.26</b>	<b>1,071,188</b>		
700		Residual Receipts (or Deficit) (sum of line 590 plus line 690) Enter here and on line B10	(29.24)	(77.38)	(33.49)	(148,702)		

Name of PHA/IHA <b>BENTON HARBOR HOUSING COMM.</b>		Fiscal Year Ending <b>SEPT. 30, 2005</b>
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		Operating Reserve	PHA/IHA Estimates	HUD Modifications
<b>Part I - Maximum Operating Reserve - End of Current Budget Year</b>				
740	2821	PHA/IHA Leased Housing - Section 23 or 10(c) 50% of Line 480, column 5, form HUD-52584	N/A	

<b>Part II - Provision for and Estimated and Actual Operating Reserve at Fiscal Year End</b>				
780		Operating Reserve at End of Previous Fiscal year - Actual for FYE (date): 9/30/03	241,186	* see calculation below
790		Provision for Operating Reserve - Current Budget Year (check one) ____ Estimated for FYE <input checked="" type="checkbox"/> Actual for FYE Sep-04	(195,372)	
800		Operating Reserve and end of Current Budget Year (check one) ____ Estimated for FYE <input checked="" type="checkbox"/> Actual for FYE 134) 9/30/04	45,814	
810		Provision for Operallon Reserve - Requested Budget Year Estimated for FYE Enter Amount from line 700	(148,702)	
820		Operalling Reserve at End of Requested Budget Year Estimated for FYE (Sum of lines 800 and 810)	(102,888)	
830		Cash Reserve Requirement - ____ % of line 480	N/A	

Comments:

\* NOTE: ACTUAL AUDITED OPERATING RESERVE AT 9/30/03: 172,774  
 PLUS NOW VOIDED CHECKS TO CITY FOR TRASH  
 REMOVAL; AT 8/25/04 CITY DOES NOT SHOW THAT WE  
 OWE THESE CHARGES: 68,412  
 REVISED OPERATING RESERVE LEVEL AT 9/30/03: 241,186

**PHA/IHA Approval**

Name Danethel O. Whitfield

Title Executive Director

Signature \_\_\_\_\_ Date \_\_\_\_\_

**Field Office Approval**

Name \_\_\_\_\_

Title \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

Public reporting burden for this collection of information is estimated to average 1.0 hour per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the Reports Management Officer, Office of Information Policies and Systems, U.S. Department of Housing and Urban Development, Washington, D.C. 20410-3800 and to the Office of Management and Budget, Paperwork Reduction Project (2577-0026), Washington, D.C. 20503. Do Not send this completed form to either of the above addresses.

Name of Housing Authority:		Locality:		Fiscal Year End:	
BENTON HARBOR HOUSING COMM.		Benton Harbor, MI 49022		SEPT. 30, 2005	
(1)	(2)	(3)	(5)	(6)	
Description	Total	Management	Section 8	Other	
1	Legal Expense (see Special Note in instructions)	0			
2	Training (list and provide justification)				
3	Travel				
	Trips to Conventions and Meetings (list and provide justification)	10,000	10,000		
4	Other Travel:				
	Outside Area of Jurisdiction	0			
5	Within Area of Jurisdiction	0			
6	Total Travel	10,000	10,000		
7	Accounting	23,100	23,100		
8	Auditing	6,750	6,750		
9	Sundry				
	Rental of Office Space				
10	Telephone, Fax, Electronic Communications	25,000	25,000		
11	Postage	4,000	4,000		
12	Forms, Stationery and Office Supplies	20,000	20,000		
13	Dues, Books, Fees, Advertising	18,000	18,000		
14	Collection Agent Fees and Court Costs	40,000	40,000		
15	Court/Election Costs charged back to tenants	(25,000)	(25,000)		
16	Tenant Screening	500	500		
17	Computer Expense	12,000	12,000		
18	Other Sundry Expense (provide breakdown)	4,500	4,500		
19	Total Sundry	99,000	99,000		
20	Total Administrative Expense Other Than Salaries	138,850	138,850		

To the best of my knowledge, all the information stated herein, as well as any information provided in the accompaniment herewith, is true and accurate.

Warning: HUD will prosecute false claims and statements. Conviction may result in criminal and/or civil penalties.  
 (18 U.S.C. 1001, 1010, 1012; 31 U.S.C. 3729, 3802)

Signature of authorized representative & Date:

**X**  
 Danethel O. Whitfield, Executive Director

**Operating Budget  
Summary of Budget Data  
and Justifications**

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

OMB Approval No. 2577-0026 (Exp. 10/31/87)

Public reporting burden for this collection of information is estimated to average 0.75 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the Reports Management Officer, Office of Information Policies and Systems, U.S. Department of Housing and Urban Development, Washington, D.C. 20410-3600 and to the Office of Management and Budget, Paperwork Reduction Project (2577-0026), Washington, D.C. 20503. Do Not send this completed form to either of the above addresses.

Name of Local Housing Authority:	Locality:	Fiscal Year Ending:
BENTON HARBOR HOUSING COMM.	Benton Harbor, MI 49022	SEPT. 30, 2005

**Operating Receipts**

**Dwelling Rental:** Explain basis for estimate. For HUD-aided low-rent housing, other than Section 23 Leased housing, state amount of latest available total HA monthly rent roll, the number of dwelling units available for occupancy and the number accepted for the same month end. Cite HA policy revisions and economic and other factors which may result in a greater or lesser average monthly rent roll during the Requested Budget Year. For Section 23 Leased housing, state the number of units under lease, the PUM lease price, and whether or not the cost of utilities is included. If not included, explain method for payment of utility costs by HA and/or tenant.

Based on estimated monthly rent roll:  
\$57,000 x 12 months = \$684,000

**Excess Utilities:** (Not for Section 23 Leased housing) Check appropriate spaces in Item 1, and explain "Other". Under Item 2, explain basis for determining excess utility consumption. For example, Gas: individual check meters at OH-100-1, proration of excess over allowances at OH-100-2, etc. Cite effective date of present utility allowances. Explain anticipated changes in allowances or other factors which will cause a significant change in the total amount of excess utility charges during the Requested Budget Year.

1. Utility Services Surcharged: Gas \_\_\_\_\_ Electricity \_\_\_\_\_ Other \_\_\_\_\_ (Specify) \_\_\_\_\_

2. Comments

**Non-dwelling Rent:** (Not for Section 23 Leased housing) Complete Item 1, specifying each space rented, to whom, and the rental terms. For example, Community Building Space - Nursery School - \$50 per month, etc. Cite changes anticipated during the Requested Budget Year affecting estimated Non-dwelling Rental Income.

1.	Space Rented	To Whom	Rental Terms
	_____	_____	_____
	_____	_____	_____
	_____	_____	_____
	_____	_____	_____

2. Comments

**Interest on General Fund Investments:** State the amount of present General Fund investment and the percentage of General Fund it represents. Explain circumstances such as increased or decreased operating reserves, dwelling rent, operating expenditures, etc., which will affect estimated average monthly total investments in the Requested Budget Year. Explain basis for distribution of interest income between housing programs.

**Other Comments on Estimates of Operating Receipts:** Give comments on all other significant sources of income which will present a clear understanding of the HA's prospective Operating Receipts situation during the Requested Budget Year. For Section 23 Leased housing explain basis for estimate of utility charges to tenants.

**Operating Expenditures**

**Summary of Staffing and Salary Data**

Complete the summary below on the basis of information shown on form HUD-52566, Schedule of All Positions and Salaries, as follows:

Column (1) Enter the total number of positions designated with the corresponding account line symbol as shown in Column (1), form HUD-52566.

Column (2) Enter the number of equivalent full-time positions allocable to HUD-aided housing in management. For example, A HA has three "A-NT" positions allocable to such housing at the rate of 80%, 70%, and 50% respectively. Thus, the equivalent full-time positions is two.  $(8/10 + 7/10 + 5/10)$ .

Column (3) Enter the portion of total salary expense shown in Column (5) or Column (6), form HUD-52566, allocable to HUD-aided housing in management, other than Section 23 Leased housing.

Column (4) Enter the portion of total salary expense shown in Column (5) or Column (10), form HUD-52566, allocable to Section 23 Leased housing in management.

Column (5) Enter the portion of total salary expense shown in Column (5) or Column (7), form HUD-52566, allocable to Modernization programs (Comprehensive Improvement Assistance Program or Comprehensive Grant Program).

Column (6) Enter the portion of total salary expense shown in Column (6) or column (9), form HUD-52566, allocable to Section 8 Programs.

**NOTE:** The number of equivalent full-time positions and the amount of salary expense for all positions designated "M" on form HUD-52566 must be equitably distributed to account lines Ordinary Maintenance and Operation-Labor, Extraordinary Maintenance Work Projects, and Betterments and Additions Work Projects.

Account Line	Total Number of Positions (1)	Equivalent Full-Time Positions (2)	HUD-Aided Management Program			
			Salary Expense			
			Management (3)	Section 23 Leased Housing Only (4)	Modernization Programs (5)	Section 8 Program (6)
Administration-Nontechnical Salaries <sup>1</sup>						
Administration-Technical Salaries <sup>1</sup>						
Ordinary Maintenance and Operation-Labor <sup>1</sup>						
Utilities-Labor <sup>1</sup>						
Other (Specify) (Legal, etc.) <sup>1</sup>						
Extraordinary Maintenance Work Projects <sup>2</sup>						
Betterments and Additions Work Projects <sup>2</sup>						

<sup>1</sup> Carry forward to the appropriate line on HUD-52564, the amount of salary expense shown in Column (3) on the corresponding line above. Carry forward to the appropriate line on HUD-52564 (Section 23 Leased Housing Budget), the amount of salary expense shown in Column (4) on the corresponding line above.

<sup>2</sup> The amount of salary expense distributed to Extraordinary Maintenance work Projects and to Betterments and Additions Work Projects is to be included in the cost of each individual project to be performed by the HA staff, as shown on form HUD-52567.

Specify all proposed new positions and all present positions to be abolished in the Requested Budget Year. Cite prior HUD concurrence in proposed staffing changes and present justification for such changes. Cite prior HUD concurrence in proposed salary increases for Administration Staff or give justification and pertinent comparability information. Cite effective date for current approved wage rates (form HUD-52158) and justify all deviations from these rates.

Travel, Publications, Membership Dues and Fees, Telephone and Telegraph, and Sundry: In addition to "Justification for Travel to Conventions and Meetings" shown on form HUD-52571, give an explanation of substantial Requested Budget Year estimated increases over the PUM rate of expenditure for these accounts in the Current Budget Year. Explain basis for allocation of each element of these expenses.

Utilities: Give an explanation of substantial Requested Budget Year estimated increases over the PUM rate of expenditure for each utility service in the Current Budget Year. Describe and state estimated cost of each element of "Other Utilities Expense".

Water	60,000
Electricity	150,000
Gas	<u>160,000</u>
Total	370,000

Ordinary Maintenance & Operation-Materials: Give an explanation of substantial Requested Budget Year estimated increases over the PUM rate of expenditures for materials in the Current Budget Year.

Ordinary Maintenance & Operation-Contract Costs: List each ordinary maintenance and operation service contracted for and give the estimated cost for each. Cite and justify new contract services proposed for the Requested Budget Year. Explain substantial Requested Budget Year increases over the PUM rate of expenditure for Contract Services in Current Budget Year. If LHA has contract for maintenance of elevator cabs, give contract cost per cab.

Heating, Electrical, Plumbing, repairs	25,000	Elevator	17,000
Unit Turnovers contracted		Cell Phones	5,000
Cable/ TV	1,000	Locksmith	25,000
Painting	15,000	City Reg./Inspection Fees	11,000
Fire Alarm, Security System, Safety	10,000	Answering Service	1,500
Trash Removal	70,000	Flooring	5,000
Pest control	15,000	Gate/Fence Repairs	2,000
Grounds Maintenance, incl. Snow Removal	4,500	Contract Summer Workers	5,000
Glass R&R	6,000	Sundry	<u>2,000</u>
Vehicle Maintenance	5,000		
Uniforms	6,500	Total	245,500
Equipment Leases & Maint. contracts	14,000		
		Less :	
		charged back to tenants:	(12,000)
			233,500

**Insurance:** Give an explanation of substantial Requested Budget Year estimated increases in the PUM rate of expenditures for insurance over the Current Budget Year. Cite changes in coverage, premium rates, etc.

Property, Boiler & Mach., Terrorism	84,000
General Liability	22,500
Crime, Honesty Bond	1,000
Official's Liability	3,000
Workers Compensation	<u>17,000</u>
	127,500

**Employee Benefit Contributions:** List all Employee Benefit plans participated in. Give justification for all plans to be instituted in the Requested Budget Year for which prior HUD concurrence has not been given.

FICA	48,500
Pension	67,000
Health Insurance	168,000
Dental	4,800
Life & Disability	<u>7,200</u>
	295,500
Less:	
Sec. 8 Voucher	(14,000)
CFP	<u>(16,000)</u>
Net Benefits	265,500

**Collection Losses:** State the number of tenants accounts receivable to be written off and the number and total amount of all accounts receivable for both present and vacated tenants as of the month in which the estimate was computed.

**Extraordinary Maintenance, Replacement of Equipment, and Betterments and Additions:** Cite prior HUD approval or give justification for each nonroutine work project included in the Requested Budget and for those future years which make up the estimate on form HUD-62570. Justifying information incorporated on or attached to form HUD-62567 need not be repeated here.

**Contracts:** List all contracts, other than those listed on page 3 of this form under Ordinary Maintenance & Operation (OMO). Cite the name of the contractor, type of contract, cost of contract, and contract period. Justification must be provided for all contract services proposed for the Requested Budget Year (RBY). Explain substantial RBY increases over the PUM rate of expenditure for these contracts in the Current Budget Year.