

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

PHA Plans

5 Year Plan for Fiscal Years 2000 - 2004
Annual Plan for Fiscal Year 2004

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

**PHA Plan
Agency Identification**

PHA Name: Housing Authority of the City of Elizabeth

PHA Number: NJ003

PHA Fiscal Year Beginning: (07/2004)

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 2000 - 2004
[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)

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

B. Goals

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

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

- X PHA Goal: Expand the supply of assisted housing
Objectives:
X Apply for additional rental vouchers:
X Reduce public housing vacancies:
X Leverage private or other public funds to create additional housing opportunities:
X Acquire or build units or developments
X Other (list below) Provide Assisted Living Services at Senior Sites
- X PHA Goal: Improve the quality of assisted housing
Objectives:
X Improve public housing management: (PHAS score)
X Improve voucher management: (SEMAP score)
X Increase customer satisfaction:
X Concentrate on efforts to improve specific management functions:
(list; e.g., public housing finance; voucher unit inspections)
X Renovate or modernize public housing units:
X Demolish or dispose of obsolete public housing:

- X Provide replacement public housing:
- X Provide replacement vouchers:
- Other: (list below)

X PHA Goal: Increase assisted housing choices

Objectives:

- X Provide voucher mobility counseling:
- X Conduct outreach efforts to potential voucher landlords
- X Increase voucher payment standards
- X Implement voucher homeownership program:
- X Implement public housing or other homeownership programs:
- X 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

X PHA Goal: Provide an improved living environment

Objectives:

- X 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:
- X Implement public housing security improvements:
- Designate developments or buildings for particular resident groups (elderly, persons with disabilities)
- Other: (list below)

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

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

Objectives:

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

- X PHA Goal: Ensure equal opportunity and affirmatively further fair housing Objectives:
 - X Undertake affirmative measures to ensure access to assisted housing regardless of race, color, religion national origin, sex, familial status, and disability:
 - X 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:
 - X Undertake affirmative measures to ensure accessible housing to persons with all varieties of disabilities regardless of unit size required:
 - Other: (list below)

Other PHA Goals and Objectives: (list below)

1. The Housing Authority of the City of Elizabeth will pursue expanding the Section 8 Rental Assistance Program to encompass some of the new facets of the flexible voucher program while maintaining its service to those most in need.
2. Reduce Public Housing Vacancies.
3. Leverage public and/or private funds to create additional housing opportunities.
4. Improve the quality of both the housing stock and housing related service to the residents.
5. Maintain P.H.A.S. High performance score.
6. Improve SEMAP.
7. Complete demolition of obsolete housing units.
8. Continue with HOPE VI Program and construct 167 units on footprint of Pioneer, 84 Senior units.
9. Implement Section 8 Homeownership program.

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

i. Annual Plan Type:

Select which type of Annual Plan the PHA will submit.

Standard Plan

Streamlined Plan:

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

Troubled Agency Plan

ii. Executive Summary of the Annual PHA Plan

[24 CFR Part 903.7 9 (r)]

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

The Housing Authority of the City of Elizabeth is successful authority in an urban environment. The Authority runs many different programs designed to enhance the potentials and living accommodations of its residents. The cornerstone program is a 90-million-dollar HOPE VI program. Under HOPE VI 650 units of obsolete public housing will be demolished producing a new neighborhood of 557 townhouse structure type units. Additionally residents of the effected complexes will receive self-sufficiency classroom training and related supportive services.

The authority has five other complexes within its inventory, all of which have undergone substantial modernizational work, including 504 rehabilitation, during the past recent years.

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

Page #

Annual Plan

- i. Executive Summary
- ii. Table of Contents
 - 1. Housing Needs
 - 2. Financial Resources

3. Policies on Eligibility, Selection and Admissions
4. Rent Determination Policies
5. Operations and Management Policies
6. Grievance Procedures
7. Capital Improvement Needs
8. Demolition and Disposition
9. Designation of Housing
10. Conversions of Public Housing
11. Homeownership
12. Community Service Programs
13. Crime and Safety
14. Pets (Inactive for January 1 PHAs)
15. Civil Rights Certifications (included with PHA Plan Certifications)
16. Audit
17. Asset Management
18. Other Information

Attachments

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

Required Attachments:

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

Optional Attachments:

- PHA Management Organizational Chart
- FY 2004 Capital Fund Program 5 Year Action Plan
- Public Housing Drug Elimination Program (PHDEP) Plan
- Comments of Resident Advisory Board or Boards (must be attached if not included in PHA Plan text)
- Other (List below, providing each attachment name)

Supporting Documents Available for Review

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

List of Supporting Documents Available for Review		
Applicable & On Display	Supporting Document	Applicable Plan Component
X	PHA Plan Certifications of Compliance with the PHA Plans and Related Regulations	5 Year and Annual Plans

List of Supporting Documents Available for Review		
Applicable & On Display	Supporting Document	Applicable Plan Component
X	State/Local Government Certification of Consistency with the Consolidated Plan	5 Year and Annual Plans
X	Fair Housing Documentation: Records reflecting that the PHA has examined its programs or proposed programs, identified any impediments to fair housing choice in those programs, addressed or is addressing those impediments in a reasonable fashion in view of the resources available, and worked or is working with local jurisdictions to implement any of the jurisdictions' initiatives to affirmatively further fair housing that require the PHA's involvement.	5 Year and Annual Plans
X	Consolidated Plan for the jurisdiction/s in which the PHA is located (which includes the Analysis of Impediments to Fair Housing Choice (AI)) and any additional backup data to support statement of housing needs in the jurisdiction	Annual Plan: Housing Needs
X	Most recent board-approved operating budget for the public housing program	Annual Plan: Financial Resources;
X	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
X	Section 8 Administrative Plan	Annual Plan: Eligibility, Selection, and Admissions Policies
X	Public Housing Deconcentration and Income Mixing Documentation: 1. PHA board certifications of compliance with deconcentration requirements (section 16(a) of the US Housing Act of 1937, as implemented in the 2/18/99 <i>Quality Housing and Work Responsibility Act Initial Guidance; Notice</i> and any further HUD guidance) and 2. Documentation of the required deconcentration and income mixing analysis	Annual Plan: Eligibility, Selection, and Admissions Policies
X	Public housing rent determination policies, including the methodology for setting public housing flat rents X check here if included in the public housing A & O Policy	Annual Plan: Rent Determination
X	Schedule of flat rents offered at each public housing development X check here if included in the public housing A & O Policy	Annual Plan: Rent Determination
X	Section 8 rent determination (payment standard) policies X check here if included in Section 8 Administrative Plan	Annual Plan: Rent Determination
X	Public housing management and maintenance policy documents, including policies for the prevention or eradication of pest infestation (including cockroach infestation)	Annual Plan: Operations and Maintenance

List of Supporting Documents Available for Review		
Applicable & On Display	Supporting Document	Applicable Plan Component
X	Public housing grievance procedures X check here if included in the public housing A & O Policy	Annual Plan: Grievance Procedures
X	Section 8 informal review and hearing procedures X check here if included in Section 8 Administrative Plan	Annual Plan: Grievance Procedures
X	The HUD-approved Capital Fund/Comprehensive Grant Program Annual Statement (HUD 52837) for the active grant year	Annual Plan: Capital Needs
N/A	Most recent CIAP Budget/Progress Report (HUD 52825) for any active CIAP grant	Annual Plan: Capital Needs
X	Most recent, approved 5 Year Action Plan for the Capital Fund/Comprehensive Grant Program, if not included as an attachment (provided at PHA option)	Annual Plan: Capital Needs
X	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
X	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
X	Approved or submitted public housing homeownership programs/plans	Annual Plan: Homeownership
X	Policies governing any Section 8 Homeownership program X check here if included in the Section 8 Administrative Plan	Annual Plan: Homeownership
X	Any cooperative agreement between the PHA and the TANF agency	Annual Plan: Community Service & Self-Sufficiency
X	FSS Action Plan/s for public housing and/or Section 8	Annual Plan: Community Service & Self-Sufficiency
X	Most recent self-sufficiency (ED/SS, TOP or ROSS or other resident services grant) grant program reports	Annual Plan: Community Service & Self-Sufficiency
X	The most recent Public Housing Drug Elimination Program (PHEDEP) semi-annual performance report for any open grant and most recently submitted PHDEP application (PHDEP Plan)	Annual Plan: Safety and Crime Prevention
X	The most recent fiscal year audit of the PHA conducted under section 5(h)(2) of the U.S. Housing Act of 1937 (42 U.S.C. 1437c(h)), the results of that audit and the PHA's response to any findings	Annual Plan: Annual Audit
N/A	Troubled PHAs: MOA/Recovery Plan	Troubled PHAs
N/A	Other supporting documents (optional) (list individually; use as many lines as necessary)	(specify as needed)

1. Statement of Housing Needs

[24 CFR Part 903.7 9 (a)]

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

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

Housing Needs of Families in the Jurisdiction by Family Type							
Family Type	Overall	Afford-ability	Supply	Quality	Access-ibility	Size	Loca-tion
Income <= 30% of AMI	6567	5	5	5	5	5	5
Income >30% but <=50% of AMI	4422	5	5	5	5	5	5
Income >50% but <80% of AMI	2170	5	5	5	5	5	5
Elderly	3253	5	5	5	5	5	3
Families with Disabilities	N/A						
Race/Ethnicity W	5039	5	5	5	5	5	3
Race/Ethnicity B	2563	5	5	5	5	5	5
Race/Ethnicity H	5124	5	5	5	5	5	4
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:
- U.S. Census data: the Comprehensive Housing Affordability Strategy ("CHAS") dataset
- American Housing Survey data
Indicate year:
- Other housing market study
Indicate year:
- Other sources: (list and indicate year of information)

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

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

Housing Needs of Families on the Waiting List			
Waiting list type: (select one)			
<input type="checkbox"/> Section 8 tenant-based assistance			
<input checked="" type="checkbox"/> Public Housing			
<input type="checkbox"/> Combined Section 8 and Public Housing			
<input type="checkbox"/> Public Housing Site-Based or sub-jurisdictional waiting list (optional)			
If used, identify which development/subjurisdiction:			
	# of families Public Housing	% of total families	Annual Turnover
Waiting list total	714		
Extremely low 45% income <=30% AMI	334		
Very low income (>30% but <=50% AMI)	280		
Low income (>50% but <80% AMI)	100		
Families with children	485		
Elderly families	229		
Families with Disabilities 35%	170		
Race/ethnicity			

Characteristics by Bedroom Size (Public Housing Only)	0BR	150		
1BR		113		
2 BR		451		
3 BR		0		
4 BR		0		
5 BR		0		
5+ BR		0		
Is the waiting list closed (select one)? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes				
If yes:				
How long has it been closed (# of months)? One (1) Month				
Does the PHA expect to reopen the list in the PHA Plan year? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes				
Does the PHA permit specific categories of families onto the waiting list, even if generally closed? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes				

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

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

Housing Needs of Families on the Waiting List			
Waiting list type: (select one)			
<input 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 SECTION 8	% of total families	Annual Turnover
Waiting list total	2732		
Extremely low 45% income <=30% AMI	1694		

Very low income (>30% but <=50% AMI)	765		
Low income (>50% but <80% AMI)	183		
Families with children	1939		
Elderly families	546		
Families with Disabilities 35%	1519		
Race/ethnicity			

Characteristics by Bedroom Size (Public Housing Only) 0BR	150		
1BR	113		
2 BR	451		
3 BR	0		
4 BR	0		
5 BR	0		
5+ BR	0		
<p>Is the waiting list closed (select one)? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes</p> <p>If yes:</p> <p>How long has it been closed (# of months)? 2 ½ Years.</p> <p>Does the PHA expect to reopen the list in the PHA Plan year? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p> <p>Does the PHA permit specific categories of families onto the waiting list, even if generally closed? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes</p>			

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

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

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

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

- X Exceed HUD federal targeting requirements for families at or below 30% of AMI in public housing
- X Exceed HUD federal targeting requirements for families at or below 30% of AMI in tenant-based section 8 assistance
- X Employ admissions preferences aimed at families with economic hardships
- X 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
- X 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
- X Apply for special-purpose vouchers targeted to the elderly, should they become available
- Other: (list below)

Need: Specific Family Types: Families with Disabilities

Strategy 1: Target available assistance to Families with Disabilities:

Select all that apply

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

X 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

X Counsel section 8 tenants as to location of units outside of areas of poverty or minority concentration and assist them to locate those units

X 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:

X Funding constraints

X Staffing constraints

Limited availability of sites for assisted housing

X Extent to which particular housing needs are met by other organizations in the community

X Evidence of housing needs as demonstrated in the Consolidated Plan and other information available to the PHA

X Influence of the housing market on PHA programs

X Community priorities regarding housing assistance

X Results of consultation with local or state government

X Results of consultation with residents and the Resident Advisory Board

X 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.

Financial Resources: Planned Sources and Uses		
Sources	Planned \$	Planned Uses
1. Federal Grants (FY 2000 grants)		
a) Public Housing Operating Fund	\$5,707,614.00	\$5,707,614.00
b) Public Housing Capital Fund	\$2,548,705.00	\$2,548,705.00
c) HOPE VI Revitalization		
d) HOPE VI Demolition		
e) Annual Contributions for Section 8 Tenant-Based Assistance	\$6,683,881.00	\$6,683,881.00
f) Public Housing Drug Elimination Program (including any Technical Assistance funds)	0	
g) Resident Opportunity and Self-Sufficiency Grants	0	
h) Community Development Block Grant	0	
i) HOME		
Other Federal Grants (list below)		
2. Prior Year Federal Grants (unobligated funds only) (list below)		
3. Public Housing Dwelling Rental Income	\$2,397,044.00	\$2,397,044.00
4. Other income (list below)	\$ 57,589.00	\$ 57,589.00
4. Non-federal sources (list below)	\$ 51,181.00	\$ 51,181.00

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

3. PHA Policies Governing Eligibility, Selection, and Admissions

[24 CFR Part 903.7 9 (c)]

A. Public Housing

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

(1) Eligibility

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

When families are within a certain number of being offered a unit: (state number)

When families are within a certain time of being offered a unit: (state time)

X Other: (describe) Eligibility is determined at the interview of the prospective tenant.

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

X Criminal or Drug-related activity

X Rental history

X Housekeeping

X Other (describe) Credit Check

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

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

e. Yes X 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?

The HOPE VI Property Manager Namely Conifer Realty and Magill Inc. will each maintain their site-based waiting lists for their respective developments with the Housing Authority providing oversight.

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? 3

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:

The Management of the HOPE VI Properties and their waiting lists is the responsibility of private companies that the Housing Authority has contracted with. The variations in the administration of the site based waiting lists is a direct result to different management plans established by these companies.

(4) Admissions Preferences

a. Income targeting:

Yes No: Does the PHA plan to exceed the federal targeting requirements by targeting more than 40% of all new admissions to public housing to families at or below 30% of median area income?

b. Transfer policies:

In what circumstances will transfers take precedence over new admissions? (list below)

Emergencies

Overhoused

Underhoused

Medical justification

Administrative reasons determined by the PHA (e.g., to permit modernization work)

Resident choice: (state circumstances below)

Other: (list below)

c. Preferences

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

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

Former Federal preferences:

Involuntary Displacement (Disaster, Government Action, Action of Housing Owner, Inaccessibility, Property Disposition)

Victims of domestic violence

Substandard housing

- Homelessness
- High rent burden (rent is > 50 percent of income)

Other preferences: (select below)

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

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

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)

4. Relationship of preferences to income targeting requirements:

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

(5) Occupancy

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

- X The PHA-resident lease
- X The PHA's Admissions and (Continued) Occupancy policy
- X PHA briefing seminars or written materials
- X Other source (list)
Truth in Renting Booklet

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

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

(6) Deconcentration and Income Mixing

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

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

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

- Employing new admission preferences at targeted developments
If selected, list targeted developments below:
- Other (list policies and developments targeted below)
- d. Yes No: Did the PHA adopt any changes to **other** policies based on the results of the required analysis of the need for deconcentration of poverty and income mixing?
- e. If the answer to d was yes, how would you describe these changes? (select all that apply)
- Additional affirmative marketing
- Actions to improve the marketability of certain developments
- Adoption or adjustment of ceiling rents for certain developments
- Adoption of rent incentives to encourage deconcentration of poverty and income-mixing
- Other (list below)
- f. Based on the results of the required analysis, in which developments will the PHA make special efforts to attract or retain higher-income families? (select all that apply)
- Not applicable: results of analysis did not indicate a need for such efforts
- List (any applicable) developments below:
- g. Based on the results of the required analysis, in which developments will the PHA make special efforts to assure access for lower-income families? (select all that apply)
- Not applicable: results of analysis did not indicate a need for such efforts
- List (any applicable) developments below:

B. Section 8

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

(1) Eligibility

- a. What is the extent of screening conducted by the PHA? (select all that apply)
- X 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)
X Other (list below) Criminal Court & Credit background checks are conducted.

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

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

d. Yes X 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)

- X 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)

- X PHA main administrative office
 Other (list below)

(3) Search Time

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

If yes, state circumstances below:

If applicant has worked with his/her case worker and has demonstrated his/her attempts at finding unit, the Housing Authority will grant an extension of 60 days and allowing for a total of 120 days as permitted by the Section 8 Administration Plan.

(4) Admissions Preferences

a. Income targeting

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

b. Preferences

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

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

Former Federal preferences

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

Other preferences (select all that apply)

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

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

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

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) Notices to local agencies.

4. PHA Rent Determination Policies

[24 CFR Part 903.7 9 (d)]

A. Public Housing

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

(1) Income Based Rent Policies

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

a. Use of discretionary policies: (select one)

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

---or---

- The 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:

See below Resolution establishing Flat Rents, listing annuities and circumstances.

RESOLUTION TO ESTABLISH FLAT RENTS IN PUBLIC HOUSING

Flat rents shall be established for all units based on a rent comparability survey. Flat rents will be reviewed and adjusted periodically. The Flat Rents are as follows:

0 Bedroom:	\$400.00
1 Bedroom:	\$525.00
2 Bedroom:	\$650.00
3 Bedroom:	\$825.00

Upon adoption of this policy, residents will be notified of their right to request to pay a flat rent instead of an income-based rent. After this initial implementation period this option will be offered once each year at recertification, or at the request of the resident.

A resident may request to return to paying an income-based rent if there has been a financial hardship on the family of if the resident feels they can no longer afford the flat rent.

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
X No

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

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

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

- Market comparability study
 Fair market rents (FMR)
 95th percentile rents
 75 percent of operating costs
 100 percent of operating costs for general occupancy (family) developments
 Operating costs plus debt service
 The "rental value" of the unit
 Other (list below)

f. Rent re-determinations:

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

- Never
- At family option
- Any time the family experiences an income increase
- Any time a family experiences an income increase above a threshold amount or percentage: (if selected, specify threshold)_____
- 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
- X 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
- X To increase housing options for families
- Other (list below)

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

- X 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)

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

(2) Minimum Rent

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

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

- b. Yes X 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)

- X An organization chart showing the PHA's management structure and organization is attached.
- A brief description of the management structure and organization of the PHA follows:

B. HUD Programs Under PHA Management

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

Program Name	Units or Families Served at Year Beginning	Expected Turnover
Public Housing	1023	51
Section 8 Vouchers	1200	60
Section 8 Certificates	-	-
Section 8 Mod Rehab		
Special Purpose Section 8 Certificates/Vouchers (list individually)		
Public Housing Drug Elimination Program (PHDEP)		
Other Federal Programs(list individually)		

C. Management and Maintenance Policies

List the PHA's public housing management and maintenance policy documents, manuals and handbooks that contain the Agency's rules, standards, and policies that govern maintenance and management of public housing, including a description of any measures necessary for the prevention or eradication of pest infestation (which includes cockroach infestation) and the policies governing Section 8 management.

(1) Public Housing Maintenance and Management: (list below)
Admissions and Occupancy Policy Procurements Manual, Preventive Maintenance Manual.

(2) Section 8 Management: (list below)
Section 8 Administrative Plan
Section 8 Desk Guide

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)

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 (state name)

-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 (state name)

-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.

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

1. Development name: Migliore Manor
2. Development (project) number: NJ39URD003D299
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
 - X Activities pursuant to an approved Revitalization Plan underway

- Yes X 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 X No: d) Will the PHA be engaging in any mixed-finance development activities for public housing in the Plan year?
If yes, list developments or activities below:

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

8. Demolition and Disposition

[24 CFR Part 903.7 9 (h)]

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

1. X 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 X 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.)

Demolition/Disposition Activity Description
1a. Development name: Migliore Manor 1b. Development (project) number: NJ39URD003D299
2. Activity type: Demolition <input checked="" type="checkbox"/> Disposition <input type="checkbox"/>
3. Application status (select one) Approved <input checked="" type="checkbox"/> Submitted, pending approval <input type="checkbox"/> Planned application <input type="checkbox"/>
4. Date application approved, submitted, or planned for submission: (DD/MM/YY)
5. Number of units affected: 126
6. Coverage of action (select one) <input checked="" type="checkbox"/> Part of the development <input type="checkbox"/> Total development
7. Timeline for activity: a. Actual or projected start date of activity: March 2004 b. Projected end date of activity: June 2004

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

[24 CFR Part 903.7 9 (i)]

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

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

2. Activity Description

- Yes No: Has the PHA provided all required activity description information for this component in the **optional** Public Housing

Asset Management Table? If “yes”, skip to component 10. If “No”, complete the Activity Description table below.

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

10. Conversion of Public Housing to Tenant-Based Assistance

[24 CFR Part 903.7 9 (j)]

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

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

1. Yes X 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 X No: Has the PHA provided all required activity description information for this component in the **optional** Public Housing

Asset Management Table? If “yes”, skip to component 11. If “No”, complete the Activity Description table below.

Conversion of Public Housing Activity Description	
1a. Development name:	
1b. Development (project) number:	
2. What is the status of the required assessment?	<input type="checkbox"/> Assessment underway <input type="checkbox"/> Assessment results submitted to HUD <input type="checkbox"/> Assessment results approved by HUD (if marked, proceed to next question) <input type="checkbox"/> Other (explain below)
3. <input type="checkbox"/> Yes <input type="checkbox"/> No: Is a Conversion Plan required? (If yes, go to block 4; if no, go to block 5.)	
4. Status of Conversion Plan (select the statement that best describes the current status)	<input type="checkbox"/> Conversion Plan in development <input type="checkbox"/> Conversion Plan submitted to HUD on: (DD/MM/YYYY) <input type="checkbox"/> Conversion Plan approved by HUD on: (DD/MM/YYYY) <input type="checkbox"/> Activities pursuant to HUD-approved Conversion Plan underway
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

Section 8 Homeownership program to be implemented – See attached plan.

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.)

Public Housing Homeownership Activity Description (Complete one for each development affected)	
1a. Development name:	
1b. Development (project) number:	
2. Federal Program authority:	
<input type="checkbox"/> HOPE I <input type="checkbox"/> 5(h) <input type="checkbox"/> Turnkey III <input type="checkbox"/> Section 32 of the USHA of 1937 (effective 10/1/99)	
3. Application status: (select one)	
<input type="checkbox"/> Approved; included in the PHA’s Homeownership Plan/Program <input type="checkbox"/> Submitted, pending approval <input type="checkbox"/> Planned application	
4. Date Homeownership Plan/Program approved, submitted, or planned for submission: (DD/MM/YYYY)	
5. Number of units affected:	
6. Coverage of action: (select one)	

- | |
|--|
| <input type="checkbox"/> Part of the development |
| <input type="checkbox"/> Total development |

B. Section 8 Tenant Based Assistance

1. X 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: See attached

a. Size of Program

X 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)

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

b. PHA-established eligibility criteria

Yes X 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:

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

If yes, what was the date that agreement was signed? DD/MM/YY

2. Other coordination efforts between the PHA and TANF agency (select all that apply)

- X Client referrals
- X Information sharing regarding mutual clients (for rent determinations and otherwise)
- X Coordinate the provision of specific social and self-sufficiency services and programs to eligible families
- X Jointly administer programs
- Partner to administer a HUD Welfare-to-Work voucher program
- Joint administration of other demonstration program
- Other (describe)

B. Services and programs offered to residents and participants

(1) General

a. Self-Sufficiency Policies

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

- X Public housing rent determination policies
- X Public housing admissions policies
- X 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
- X Preference/eligibility for section 8 homeownership option participation
- Other policies (list below)

b. Economic and Social self-sufficiency programs

X 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

1. The PHA is complying with the statutory requirements of section 12(d) of the U.S. Housing Act of 1937 (relating to the treatment of income changes resulting from welfare program requirements) by: (select all that apply)
 - Adopting appropriate changes to the PHA's public housing rent determination policies and train staff to carry out those policies
 - Informing residents of new policy on admission and reexamination
 - Actively notifying residents of new policy at times in addition to admission and reexamination.
 - Establishing or pursuing a cooperative agreement with all appropriate TANF agencies regarding the exchange of information and coordination of services
 - Establishing a protocol for exchange of information with all appropriate TANF agencies
 - Other: (list below)

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

13. PHA Safety and Crime Prevention Measures

[24 CFR Part 903.7 9 (m)]

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

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

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

2. What information or data did the PHA used to determine the need for PHA actions to improve safety of residents (select all that apply).
 - Safety and security survey of residents

- X Analysis of crime statistics over time for crimes committed “in and around” public housing authority
- X Analysis of cost trends over time for repair of vandalism and removal of graffiti
- X Resident reports
- PHA employee reports
- X Police reports
- Demonstrable, quantifiable success with previous or ongoing anticrime/anti drug programs
- Other (describe below)
NJ 3-1 Mravlag Manor

2. Which developments are most affected? (list below)
NJ 3-1 Mravlag Manor

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
- X Crime Prevention Through Environmental Design
- X Activities targeted to at-risk youth, adults, or seniors
- Volunteer Resident Patrol/Block Watchers Program
- Other (describe below)

2. Which developments are most affected? (list below)
NJ 3-1 Mravlag Manor

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)

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

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

D. Additional information as required by PHDEP/PHDEP Plan

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

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

14. RESERVED FOR PET POLICY

[24 CFR Part 903.7 9 (n)]

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. X 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. X Yes No: Was the most recent fiscal audit submitted to HUD?
- 3. Yes X No: Were there any findings as the result of that audit?
- 4. Yes X No: If there were any findings, do any remain unresolved? If yes, how many unresolved findings remain? ____
- 5. Yes X No: Have responses to any unresolved findings been submitted to HUD? If not, when are they due (state below)?

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?

18. Other Information

[24 CFR Part 903.7 9 (r)]

A. Resident Advisory Board Recommendations

1. X 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)
 - X Attached at Attachment (File name)
 - Provided below:

3. In what manner did the PHA address those comments? (select all that apply)
 - X 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 X 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 X 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: (provide name here) City of Elizabeth.
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)
 - X The PHA has based its statement of needs of families in the jurisdiction on the needs expressed in the Consolidated Plan/s.
 - X The PHA has participated in any consultation process organized and offered by the Consolidated Plan agency in the development of the Consolidated Plan.

- X The PHA has consulted with the Consolidated Plan agency during the development of this PHA Plan.
- X 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)

D. Other Information Required by HUD

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

ATTACHMENTS:

Attachments

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

No. 1 Resident Advisory Board Membership

Name	Represented Site
Wynona Ancrum	Portside Commons- HOPE VI
Elizabeth Pollard	Portside Commons
Cecelia Frazier	Migliore Manor
Ella McIntosh	Kennedy Arms
Audrey Washington	Portside Commons

No. 6 PET POLICY

The following provision became effective July 1, 2001:

Dogs, cats, birds, and fish are now permitted

Dogs and cats have to be register with Management

Dogs may not be more than 40 pounds when fully grown

Tenants must post a \$200.00 security for Dogs and Cats and \$50.00 for Fish and Birds.

Vicious dogs and potentially vicious dogs are not allowed (No Pit Bulls, Doberman Pinchers, Rottweillers or the like)

EXCEPTIONS: Any animal that is specifically trained to assist, support or provide service to persons with disability may be kept.

No. 7 Section Homeownership Capacity Statement

The Housing Authority of the City of Elizabeth has met with other local agencies to develop operating plans and procedures under this initiative.

In the event the program becomes operational within the next annual plan period capacity is here by set forth by the following, which demonstrates the ability to operate the program.

Significant Section 8 operating reserves

Recent staff

Reliance on HOPE VI developed Homeownership programs and services.

No. 8 Resident Advisory Board Comments

Increase parking spaces for both guests and tenant at all Senior Sites.

Provide Social Service programs for seniors.

NJ3-8 (O'Donnell Dempsey) requested pin-pong tables.

Additional Security at NJ3-4 – Farley Towers; NJ3-6 Ford Leonard

Drug Elimination activities should continue.

Mravlag Manor kitchen upgrading.

Improve elevator operations at all senior sites

Landscape maintenance

No. 9 Voluntary Conversion

	Name	Units	Assessments	Result
1.	Pioneer Homes	407	N/A	Hope VI
2.	Mravlag Manor	425	Conversion inappropriate	
3.	Migliore Manor	250	N/A	Hope VI
4.	Farley Towers	250	Conversion inappropriate	
5.	Kennedy Arms	125	Conversion inappropriate	
6.	Ford Leonard	126	Conversion inappropriate	
7.	O'Donnell Dempsey	100	Conversion inappropriate	
8.	Portside Commons	57	N/A	Hope VI
9.	Westport Homes	79	N/A	Hope VI
10.	Marina Village	20	N/A	Hope VI

A certification dated September 25, 2001 was executed and submitted to HUD concluded that for 2,4,5,6,7 above conversion would be inappropriate according to guidelines set forth at 24CFR972.

Section 8 Homeownership Option

A. DETERMINING ELIGIBILITY:

1) New or existing participants in HACE's Section 8 Program

There are essentially two levels of qualification. The family must initially qualify for the HACE's Section 8 Voucher Program. The second layer of qualification is those requirements specific to the Section 8 Homeownership Program, as herein detailed.

The family must be in good standing with the Authority (no major lease or family obligation violations within past six months).

Family has signed the Statement of Family Obligations form for the program.

The Housing Authority reserves the right to limit participation in the Section 8 Homeownership Program.

2) Credit History & Readiness

Family has an acceptable credit history (Families unable to meet this criteria initially will be referred to credit counseling, and then reconsidered for the program).

Family is determined "mortgage ready." This means based on a review by HACE staff, the family would likely qualify for a mortgage based on its income and housing prices applicable to the size house the family requires.

3) First Time Homebuyer

The program is available to families who qualify as "first time homebuyers." The assisted family cannot include anyone who has had a "present ownership interest" for three years prior to the beginning of the homeownership assistance. A first time homebuyer can include a single parent who when married owned a home with their spouse. **NOTE:** The first time requirement may be waived for a family with a disabled member if it is necessary to make a reasonable accommodation.

4) Family Income

Minimum Income Requirement:

All adults who will own the home must have a gross annual income equal to or greater than:

- _____

Minimum income standard for elderly or disabled family:

- The monthly SSI payment for an individual living alone * 12

Eligible Income:

A family (not elderly or disabled) cannot count welfare assistance income when trying to meet the minimum income requirement, but can count welfare assistance income in determining eligibility for the Section 8 voucher program, in determining total tenant payment (gross family contribution), and in determining amount of HAP. **NOTE:** Elderly or disabled family CAN count welfare assistance income for those family members that hold an ownership interest in the home.

5) Employment

HACE will require that a member of the family who will have an ownership interest must demonstrate a minimum of one-year full time employment. Please be aware that there is a good chance that your lender will require a history of two-years full time employment. There also instances where a lender may consider a full or partial waiver on the second year employment if the family participates in a FSS program. **NOTE:** The minimum employment requirement does not apply to an elderly or disabled family.

B. REQUIREMENTS FOR PARTICIPATION IN THE PROGRAM

1) Pre-purchase Homeownership Counseling

The family must complete homeownership counseling before purchasing a home. The family may choose from any of the HUD approved housing counseling agencies in New Jersey. While working on their monthly budget during counseling, the family must be able to demonstrate to HACE that they will be able to finance regular maintenance, major repairs, and replacements.

2) Downpayment

Family has sufficient resources to pay a down payment equal to 3% of the purchase price of a typical home that meets their family household size, and closing costs. At least 1% of these funds must come from the family's personal resources. **Note:** At the discretion of the Housing Authority, elderly or disabled persons may be exempt from this requirement.

3) Approval of Seller

HACE reserves the right to disapprove of a seller if he/she has been debarred, suspended, or subject to limited denial under (citation).

4) Compliance with Section 8 Voucher Program Regulations

In general the family will be required to comply with the regulations governing the Section 8 Voucher Program as stated in 24 CFR 982.551.

C. CONSIDERATIONS FOR SELECTING A HOME

- Participant may choose a newly constructed home provided that the house was under construction at the time HACE determined the participant eligible for the program.
- The unit must be a single family unit, which includes condominiums and co-ops.
- The unit passes a HACE Housing Quality Standards (HQS) inspection.
- The unit also passes an independent inspection performed by a New Jersey certified housing inspector selected by the family. The family is responsible for covering the cost of the inspection.
- HACE must receive and review a copy of the independent inspection. HACE reserves the right to disapprove the unit based on the inspection report, even if the unit passes the HQS inspection.

D. TIMEFRAME FOR HOUSE HUNTING

The family will be given six months to locate and purchase a home. Extensions to this will be given on a case-by-case basis depending on the effort made by the family to find a suitable home. The family will be required to provide the Authority with bi-weekly reports on their progress.

If the six-month period expires, the participant may re-apply to the Section 8 Homeownership Program based upon program availability. Re-application will be contingent upon meeting specific criteria, i.e. failure to locate a home was of no fault of the participant. Failure to locate a home due to negligence or default on program requirements will require a one year waiting period for re-application.

1) Issuing a Voucher in Lieu of Homeownership Assistance

The family will be provided a voucher for rental assistance if they are unable to find and purchase a home under this program. If you are already on the program and receiving rental assistance benefits, your assistance remains intact. If you have qualified for the Section 8 Program but have not received rental assistance a Voucher will be issued to you for rental assistance.

E. CONTRACT OF SALE

HACE must receive and review a copy of the contract of sale entered into by one or more members of the family.

The Contract must specify the price and the seller's terms of sale.

The Contract must provide that the purchaser will arrange for an independent inspection by an inspector selected by the purchaser.

The Contract must state the purchaser is not obligated to purchase the unit unless the inspection is satisfactory to the purchaser.

The Contract must state that the purchaser is not responsible for any required repairs.

The Contract must provide a certification from the seller that the seller has not been debarred, suspended, or subject to a limited denial of participation under part 24 (correct citation).

F. FINANCING THE PURCHASE OF A HOME

1) Qualified Lender

The mortgage must be provided, insured, or guaranteed by the state or federal government; comply with secondary mortgage market underwriting requirements; or comply with generally accepted private sector underwriting standards.

2) Affordability

The mortgage must be affordable to the family. The Authority will determine affordability by taking into consideration the monthly homeownership expense plus all other monthly financial obligations of the family. HACE reserves the right to disapprove proposed financing.

3) Prohibited Financing

HACE will not approve balloon payment mortgages and variable rate mortgages.

4) Three Ways to Qualify with HAP

- Borrower's net housing obligation is calculated based on their earned income and the HAP deduction from the PITI - this option reduces the borrower's debt to income ratio because the monthly debt service is lower (from the HAP deduction).

- Borrower's income is calculated by adding the monthly HAP payment to their earned income, and can be grossed-up 25%
- Two Mortgage Option: The borrower qualifies using only earned income and the HAP is used to pay the principal and interest on the second mortgage exclusively. Their earned income pays the first mortgage and the second mortgage is paid off when the 15 years of assistance expires eliminating any shock to the borrower when the HAP stops.

G. HOMEOWNERSHIP ASSISTANCE PAYMENT

1) Maximum Monthly Obligation

HACE will use the payment standard (maximum rent) schedule applicable to the Section 8 Voucher Program to determine the maximum allowable monthly obligation under the Homeownership Program. This payment standard will be the lesser of: the payment standard for the family unit size OR the payment standard for the size of the home.

2) Homeownership Expenses

The monthly homeownership obligation can include, and is limited to, the following expenses: principal and interest on mortgage debt, mortgage insurance, real estate taxes, an allowance for maintenance costs and repairs, HACE determined utility allowance, principal and interest on debt incurred to finance major capital improvements or replacements.

3) Total Family Contribution

The family's monthly contribution to the PITI payment cannot exceed 30% of their income.

4) Monthly Payment

The maximum monthly obligation cannot exceed HACE's Section 8 Voucher Program payment standard. The HAP will be the lower of: the payment standard less the total family contribution OR the family's monthly homeownership expenses less the total family contribution.

HACE will send the HAP directly to the Mortgage Company

Per Section 982.635 (e), homeownership assistance for a family terminates automatically 180 calendar days after the last homeownership assistance payment on behalf of the family.

5) Two Ways to Use Section 8 Assistance:

- Continuing Homeownership Assistance Payments: HACE can offer Homeownership Assistance Payments to a qualifying family, guaranteed for 15 years for a 30 year mortgage (10 years for a 20 year mortgage). **NOTE:** The maximum term of assistance does not apply to elderly or disabled families.

- Downpayment Assistance Grant: In lieu of continuing homeownership assistance payments, HACE may make a one-time grant to the purchasing family equal to the sum of 12 months of the Housing Assistance Payment that would be paid to that particular family. This option is not yet available but will become available when HUD releases notice that it has appropriated funds for this purpose.

H. POST-PURCHASE REQUIREMENTS

1) Post Purchase Counseling

The family will be required to participate in ongoing homeownership counseling after they have purchased the home. This requirement will help to ensure that the family is able to retain ownership of their home and meet the daily demands of homeownership.

2) Continued Occupancy

HACE will make the HAP available only when the family is residing in the unit.

3) Mortgage Compliance

The family must comply with the terms of the mortgage. In the event of default the family has an obligation to notify HACE immediately.

4) Continued Communication with HACE

- The family must notify HACE of its monthly homeownership expenses including any temporary or permanent changes in those expenses.
- The family must also notify HACE if it decides to refinance their home or if they satisfy the terms of their mortgage.
- In accordance with 24 CFR 982.551 (h) and (i) the family must notify HACE if there is any sale or transfer of ownership interest in the home.
- The family must notify HACE of default on any debt incurred to finance the purchase of the home.

5) Ownership of Second Residence

While the family is receiving homeownership assistance from HACE they are prohibited from owning a second residence.

4) Death of a Family Member with an Ownership Interest

In the event that a family member with an ownership interest dies, the remaining family members may retain ownership and occupancy of the

unit pending the settlement of the deceased members estate. This provision assumes that settlement of the estate will not involve transfer of title.

I. PORTABILITY

A family that qualifies for Section 8 Homeownership Assistance may purchase a home outside of HACE's jurisdiction if the Housing Authority in the jurisdiction that they select administers a Section 8 Homeownership Program and is accepting new families.

The family must attend a briefing and counseling session with the receiving PHA. The receiving PHA will have the right to reject a unit that the family may select.

J. DENIAL OR TERMINATION OF ASSISTANCE

HACE may terminate homeownership assistance under the same guidelines that govern the Section 8 Voucher program, including but not limited to fraud in connection with Federally assisted housing and criminal activity.

HACE will terminate homeownership assistance to a family if they default on their mortgage. HACE may provide rental assistance to the family if the default was not on an FHA-insured mortgage, can demonstrate that they conveyed title to the home to HUD or HUD's designee, and can demonstrate that they moved from the home within a specified time period.

PHA Plan
Table Library

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

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

Capital Fund Grant Number FFY of Grant Approval: (07/01/04)

(X) Revised Annual Statement

Line No.	Summary by Development Account	Total Estimated Cost
1	Total Non-CGP Funds	0
2	1406 Operations	0
3	1408 Management Improvements	\$382,305.75
4	1410 Administration	\$254,870.50
5	1411 Audit	0
6	1415 Liquidated Damages	0
7	1430 Fees and Costs	\$20,000.00
8	1440 Site Acquisition	0
9	1450 Site Improvement	0
10	1460 Dwelling Structures	\$1,680,333.50
11	1465.1 Dwelling Equipment-Nonexpendable	39,195.25
12	1470 Nondwelling Structures	\$143,000.00
13	1475 Nondwelling Equipment	29,000.00
14	1485 Demolition	0
15	1490 Replacement Reserve	0
16	1492 Moving to Work Demonstration	0
17	1495.1 Relocation Costs	0
18	1498 Mod Used for Development	0
19	1502 Contingency	0
20	Amount of Annual Grant (Sum of lines 2-19)	\$2,548,705.00
21	Amount of line 20 Related to LBP Activities	0
22	Amount of line 20 Related to Section 504 Compliance	0
23	Amount of line 20 Related to Security	0
24	Amount of line 20 Related to Energy Conservation Measures	0

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

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

Development Number/Name HA-Wide Activities	General Description of Major Work Categories	Development Account Number	Quantity	Total Estimated Cost		Total Funds Obligated
				Original	Revised ¹	
HA-Wide Mgmt. Improvements	Resident Training	1408		\$ 100,000.00		
	Family Site Security			\$ 53,305.75		
	Senior Site Security			\$ 106,000.00		
	Apprenticeship Program			\$ 71,000.00		
	Resident Social Program			\$ 15,000.00		
	Staff Training			\$ 15,000.00		
	Computerization			\$ 10,000.00		
	Common Areas Clean-Up Program			\$ 12,000.00		
Total	1408		\$ 382,305.75			

Signature of Executive Director & Date:

Signature of Public Housing Director/C

X

X

¹ To be completed for the Performance and Evaluation Report or a Revised Annual Statement (10/96)

² To be completed for the Performance and Evaluation Report.
 7485.3

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

Development Number/ Name HA Wide Activities	General Description of Major Work	Development Account Number	Total Estimated Cost
NJ 3-1	Consultant Services	1430	\$ 20,000.00
Mravlag Manor	Maintenance Equipment	1475	\$ 10,000.00
	Replace Appliances	1465.1	\$ 7,000.00
	Landscaping/Replace Concrete	1470	\$ 6,000.00
	Upgrade Kitchens	1460	\$ 495,333.50
	Replace Hallway Stairs	1470	\$ 70,000.00
	Paint Apartments	1470	<u>\$ 10,000.00</u>
	Total		

Table Library

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

Development Number/ Name HA Wide Activities	General Description of Major Work	Development Account Number	Total Estimated Cost
NJ 3-4 Farley Towers	Paint Apartments	1470	\$ 13,000.00
	Maintenance Equipment	1475	\$ 6,000.00
	Replace Appliances	1465.1	\$ 14,000.00
	Upgrade Bathrooms	1460	<u>\$ 855,000.00</u>
	Total:		\$ 888,000.00

Table Library

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

Development Number/ Name HA Wide Activities	General Description of Major Work	Development Account Number	Total Estimated Cost
NJ 3-5 Kennedy Arms	Paint Apartments & Common Areas	1470	\$ 14,000.00
	Replace Appliances	1465.1	\$ 7,000.00
	Maintenance Equipment	1475	<u>\$ 4,000.00</u>
	Total:		\$ 25,000.00

Table Library

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

Development Number/ Name HA Wide Activities	General Description of Major Work	Development Account Number	Total Estimated Cost
NJ 3-6 Ford-Leonard Towers	Upgrade Bathrooms	1460	\$ 330,000.00
	Maintenance Equipment	1475	\$ 4,000.00
	Paint Apartments and Common Areas	1470	\$ 15,000.00
	Replace Appliances	1465.1	<u>\$ 5,000.00</u>
	Total:		\$ 354,000.00

Table Library

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

Development Number/ Name HA Wide Activities	General Description of Major Work	Development Account Number	Total Estimated Cost
NJ 3-8 O'Donnell Dempsey	Maintenance Equipment	1475	\$ 5,000.00
	Paint Apartments	1470	\$ 15,000.00
	Replace Appliances	1465.1	<u>\$ 6,195.25</u>
	Total:		\$ 26,195.25

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

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

Development Number/Name HA-Wide Activities	General Description of Major Work Categories	Development Account Number	Quantity	Total Estimated Cost		Total Funds Obligated
				Original	Revised ¹	
HA-Wide Mgmt. Improvements	Resident Training	1408		\$ 100,000.00		
	Family Site Security			\$ 53,305.75		
	Senior Site Security			\$ 106,000.00		
	Apprenticeship Program			\$ 71,000.00		
	Resident Social Program			\$ 15,000.00		
	Staff Training			\$ 15,000.00		
	Computerization			\$ 10,000.00		
	Common Areas Clean-up Program			\$ 12,000.00		
Total		1408		\$ 382,305.75		

Signature of Executive Director & Date: **X**

Signature of Public Housing Director/C: **X**

¹ To be completed for the Performance and Evaluation Report or a Revised Annual Statement (10/96)

² To be completed for the Performance and Evaluation Report.
 7485.3

Annual Statement

Capital Fund Program (CFP) Part III: Implementation Schedule

Development Number/Name HA-Wide Activities	All Funds Obligated (Quarter Ending Date)	All Funds Expended (Quarter Ending Date)
NJ 3-1 Mravlag Manor		
Consultant Services	3/30/05	3/30/06
Maintenance Equipment	3/30/05	9/30/06
Replace Appliances	3/30/05	9/30/06
Replace Concrete/ Landscaping	3/30/05	3/30/06
Upgrade Kitchens	3/30/05	3/30/06
Replace Hallway Stairs	3/30/05	9/30/06
Paint Apartments	6/30/05	9/30/06

Table Library

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

Development Number/Name HA-Wide Activities	All Funds Obligated (Quarter Ending Date)	All Funds Expended (Quarter Ending Date)
NJ 3-4 Farley Towers		
Upgrade Bathrooms	3/30/05	9/30/05
Paint Apartments and Common Areas	3/30/05	3/30/06
Maintenance Equipment	3/30/05	3/30/06
Replace Appliances	3/30/05	3/30/06

Table Library

Table Library

Annual Statement

Capital Fund Program (CFP) Part III: Implementation Schedule

Development Number/Name HA-Wide Activities	All Funds Obligated (Quarter Ending Date)	All Funds Expended (Quarter Ending Date)
NJ 3-5 Kennedy Arms		
Replace Appliances	11/30/03	9/30/06
Paint Apartments and Common Areas	3/30/05	9/30/06
Maintenance Equipment	3/30/05	9/30/06

Table Library

Annual Statement

Capital Fund Program (CFP) Part III: Implementation Schedule

Development Number/Name HA-Wide Activities	All Funds Obligated (Quarter Ending Date)	All Funds Expended (Quarter Ending Date)
NJ 3-6 Ford-Leonard Towers		
Upgrade Bathrooms	11/30/04	9/30/05
Replace Appliances	3/30/05	9/30/06
Paint Apartments and Common Areas	3/30/05	3/30/06
Maintenance Equipment	3/30/05	3/30/06

Annual Statement

Capital Fund Program (CFP) Part III: Implementation Schedule

Development Number/Name HA-Wide Activities	All Funds Obligated (Quarter Ending Date)	All Funds Expended (Quarter Ending Date)
NJ 3-8 O'Donnell Dempsey		
Replace Appliances	3/30/05	3/30/06
Paint Apartments and Common Areas	3/30/05	3/30/06
Maintenance Equipment	3/30/05	3/30/06

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

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

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

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

Optional 5-Year Action Plan Tables			
Development Number	Development Name (or indicate PHA wide)	Number Vacant Units	% Vacancies in Development
NJ 3-1	Mravlag Manor	8	2%
Description of Needed Physical Improvements or Management Improvements		Estimated Cost	Planned Start Date (HA Fiscal Year)
Consultant Services		\$ 80,000.00	2005-2008
Maintenance Equipment		\$ 36,000.00	2005-2008
Replace Appliances		\$ 28,000.00	2005-2008
Replace concrete/Landscaping		\$ 18,000.00	2005-2008
Paint apartments		\$ 50,000.00	2004-2006
Upgrade Kitchens		\$ 498,000.00	2005-2008
Replace Hallway Stairs		\$ 690,000.00	2005-2006
Replace Basement Doors		\$ 48,000.00	2005-2006
Upgrade Bathrooms		\$ 1,200,000.00	2005-2006
Separate Entrances for first floor apts.		\$ 650,000.00	2008
Remove Compacts		\$ 117,000.00	2007
Extend Hallway Handrails		\$ 50,000.00	2008
Total estimated cost over next 5 years		\$3,465,000.00	

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

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

Optional 5-Year Action Plan Tables				
Development Number	Development Name (or indicate PHA wide)	Number Vacant Units	% Vacancies in Development	
NJ 3-4	Farley Towers	5	2%	
Description of Needed Physical Improvements or Management Improvements			Estimated Cost	Planned Start Date (HA Fiscal Year)
Paint apartments			\$ 30,000.00	2005-2008
Replace Appliances			\$ 28,000.00	2005-2008
Maintenance Equipment			\$ 16,000.00	2005-2008
Upgrade Sprinkler Heads			\$ 50,000.00	2007
Install AC Boxes			\$ 200,000.00	2007
Upgrade/New Community Center			\$ 640,000.00	2008
Upgrade Kitchens			\$ 202,528.75	2008
Total estimated cost over next 5 years			\$1,166,528.75	

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

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

Optional 5-Year Action Plan Tables				
Development Number	Development Name (or indicate PHA wide)	Number Vacant Units	% Vacancies in Development	
NJ 3-5	Kennedy Arms	1	1%	
Description of Needed Physical Improvements or Management Improvements			Estimated Cost	Planned Start Date (HA Fiscal Year)
Paint apartments			\$ 20,000.00	2005-2008
Maintenance Equipment			\$ 20,000.00	2005-2008
Replace Appliances			\$ 24,000.00	2005-2008
Replace Interior Doors			\$ 244,916.12	2005-2006
Upgrade Sprinkler Heads			\$ 40,000.00	2007
Replace Roof			\$ 200,000.00	2005-2006
Upgrade Kitchens			\$ 625,528.75	2007-2008
Total estimated cost over next 5 years			\$ 1,174,444.87	

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

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

Optional 5-Year Action Plan Tables			
Development Number	Development Name (or indicate PHA wide)	Number Vacant Units	% Vacancies in Development
NJ 3-6	Ford-Leonard Towers	3	2%
Description of Needed Physical Improvements or Management Improvements		Estimated Cost	Planned Start Date (HA Fiscal Year)
Paint apartments		\$ 30,000.00	2005-2008
Maintenance Equipment		\$ 20,000.00	2005-2008
Replace Appliances		\$ 24,000.00	2005-2008
Replace Lift Elevator		\$ 50,000.00	2005
Replace Heating System		\$ 990,000.00	2007
Upgrade Kitchens		\$ 312,141.38	2006
Total estimated cost over next 5 years		\$1,426,141.38	

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

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

Optional 5-Year Action Plan Tables				
Development Number	Development Name (or indicate PHA wide)	Number Vacant Units	% Vacancies in Development	
NJ 3-8	O'Donnell-Dempsey	0	0%	
Description of Needed Physical Improvements or Management Improvements			Estimated Cost	Planned Start Date (HA Fiscal Year)
Paint apartments			\$ 55,000.00	2005-2008
Maintenance Equipment			\$ 20,000.00	2005-2008
Replace Appliances			\$ 14,000.00	2005-2008
Upgrade Kitchens			\$ 400,000.00	2005-2006
Replace Rails in Stairways			\$ 10,000.00	2007
Total estimated cost over next 5 years			\$ 499,000.00	

CAPITAL FUND PROGRAM TABLES START HERE

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary					
PHA Name: HOUSING AUTHORITY OF THE CITY OF ELIZABETH		Grant Type and Number Capital Fund Program Grant No: NJ39P00350100 Replacement Housing Factor Grant No:			Federal FY of Grant: 2000
<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: 12/31/2003 <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	45,832.00	45,832.00	45,832.00	45,832.00
3	1408 Management Improvements Soft Costs	485,976.00	485,976.00	485,976.00	485,976.00
	Management Improvements Hard Costs				
4	1410 Administration	278,491.00	330,482.00	330,482.00	330,482.00
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	20,000.00	20,000.00	20,000.00	20,000.00
8	1440 Site Acquisition				
9	1450 Site Improvement	18,000.00	18,000.00	18,000.00	18,000.00
10	1460 Dwelling Structures	2,328,755.00	2,150,726.00	2,150,726.00	2,023,058.00
11	1465.1 Dwelling Equipment—Nonexpendable	68,000.00	61,000.00	61,000.00	61,000.00
12	1470 Nondwelling Structures	426,491.00	562,529.00	562,529.00	562,529.00
13	1475 Nondwelling Equipment	54,000.00	51,000.00	51,000.00	51,000.00
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.....)	3,725,545.00	3,725,545.00	3,725,545.00	3,597,877.00
	Amount of line XX Related to LBP Activities	0.00	0.00	0.00	0.00
	Amount of line XX Related to Section 504 compliance	0.00	0.00	0.00	0.00
	Amount of line XX Related to Security –Soft Costs	250,000.00	250,000.00	250,000.00	250,000.00
	Amount of Line XX related to Security-- Hard Costs	0.00	0.00	0.00	0.00
	Amount of line XX Related to Energy Conservation Measures	0.00	0.00	0.00	0.00

Annual Statement/Performance and Evaluation Report

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

PHA Name: HOUSING AUTHORITY OF THE CITY OF ELIZABETH		Grant Type and Number Capital Fund Program Grant No: NJ39P00350100 Replacement Housing Factor Grant No:		Federal FY of Grant: 2000	
<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: 12/31/2003 <input type="checkbox"/> Final Performance and Evaluation Report					
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
	Collateralization Expenses or Debt Service				

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

PHA Name: HOUSING AUTHORITY OF THE CITY OF ELIZABETH		Grant Type and Number Capital Fund Program Grant No: NJ39P00350100 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
NJ3-1	Replace Roofs		1460		1,427,375.00	1,391,182.38	1,391,182.38	1,390,745.08	Obligated
NJ3-1	Paint apartments & common areas		1460		20,000.00	20,000.00	20,000.00	20,000.00	Completed
NJ3-1	Replace Administration Building Roof		1460		291,578.00	320,009.00	320,009.00	320,009.00	Completed
NJ3-1	Upgrade Sump Pump		1460		18,123.00	18,123.00	18,123.00	2,155.00	Obligated
NJ3-1	Replace Appliances		1465.1		7,000.00	7,000.00	7,000.00	7,000.00	Completed
NJ3-1	Community Room / site improvements		1470		232,749.00	418,787.00	418,787.00	418,787.00	Completed
NJ3-1	Maintenance Equipment		1475		20,000.00	20,000.00	20,000.00	20,000.00	Completed
NJ3-2	Paint apartments & common areas		1460		20,000.00	20,000.00	20,000.00	20,000.00	Completed
NJ3-2	Replace Concrete		1460		6,877.00	6,877.00	6,877.00	6,877.00	Completed
NJ3-2	Replace Appliances		1465.1		20,000.00	20,000.00	20,000.00	20,000.00	Completed
NJ3-2	Maintenance Equipment		1475		11,000.00	11,000.00	11,000.00	11,000.00	Completed
NJ3-3	Paint apartments & common areas		1460		13,000.00	13,000.00	13,000.00	13,000.00	Completed
NJ3-3	Replace Concrete		1460		3,000.00	3,000.00	3,000.00	3,000.00	Completed
NJ3-3	Replace Appliances		1465.1		14,000.00	14,000.00	14,000.00	14,000.00	Completed
NJ3-3	Maintenance Equipment		1475		6,000.00	6,000.00	6,000.00	6,000.00	Completed
NJ3-4	Site Improvement		1450		9,000.00	9,000.00	9,000.00	9,000.00	Completed
NJ3-4	Replace Floor Tiles		1460		7,678.00	7,678.00	7,678.00	7,678.00	Completed
NJ3-4	Paint apartments & common areas		1460		7,000.00	7,000.00	7,000.00	7,000.00	Completed
NJ3-4	Upgrade closets		1460		173,546.00	14,758.00	14,758.00	14,758.00	Completed
NJ3-4	Elevator Upgrade		1460		117,411.00	65,932.00	65,932.00	65,932.00	Completed
NJ3-4	Upgrade Bathrooms		1460		.00	0.00	0.00	0.00	

Annual Statement/Performance and Evaluation Report

Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)

Part II: Supporting Pages

PHA Name: HOUSING AUTHORITY OF THE CITY OF ELIZABETH		Grant Type and Number Capital Fund Program Grant No: NJ39P00350100 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
NJ3-4	Maintenance Equipment		1475		6,000.00	6,000.00	6,000.00	6,000.00	Completed
NJ3-4	Replace Appliances		1465.1		7,000.00	7,000.00	7,000.00	7,000.00	Completed
NJ3-5	Upgrade Electrical system		1460		99,678.00	0.00	0.00	0.00	
NJ3-5	Elevator Replacement		1460		0.00	99,678.00	99,678.00	89,647.95	Obligated
NJ3-5	Upgrade Bathrooms		1460		0.00	0.00	0.00	0.00	
NJ3-5	Paint apartments & common areas		1460		20,000.00	20,000.00	20,000.00	20,000.00	Completed
NJ3-5	Replace Sump Pump		1460		11,000.00	11,000.00	11,000.00	10,980.00	Obligated
NJ3-5	Replace Appliances		1465.1		6,000.00	6,000.00	6,000.00	6,000.00	Completed
NJ3-5	Upgrade Security Access		1460		30,000.00	30,000.00	30,000.00	12,141.52	Obligated
NJ3-5	Maintenance Equipment		1475		4,000.00	4,000.00	4,000.00	4,000.00	Completed
NJ3-6	Replace catch basins / sanitary sewer		1460		30,000.00	20,000.00	20,000.00	0.00	Obligated
NJ3-6	Upgrade Bathrooms		1460		240,000.00	0.00	0.00	0.00	
NJ3-6	Replace Appliances		1465.1		7,000.00	7,000.00	7,000.00	7,000.00	Completed
NJ3-6	Upgrade Security Access		1460		10,000.00	10,000.00	10,000.00	0.00	Obligated
NJ3-6	Maintenance Equipment		1475		4,000.00	4,000.00	4,000.00	4,000.00	Completed
NJ3-8	Retaining Wall		1450		9,000.00	9,000.00	9,000.00	9,000.00	Completed
NJ3-8	Upgrade Electrical System		1460		32,489.00	32,489.00	32,489.00	1,634.00	Obligated
NJ3-8	Install Thermostatic Control Valves		1460		30,000.00	30,000.00	30,000.00	17,500.00	Obligated
NJ3-8	Replace Appliances		1465.1		7,000.00	0.00	0.00	0.00	
NJ3-8	Upgrade Security Access		1470		10,000.00	10,000.00	10,000.00	0.00	Obligated
NJ3-8	Maintenance Equipment		1475		3,000.00	0.00	0.00	0.00	
PHA-Wide	Resident Training		1408		100,000.00	100,000.00	100,000.00	100,000.00	Completed
PHA-Wide	Family Site Security		1408		125,000.00	125,000.00	125,000.00	125,000.00	Completed
PHA-Wide	Senior Site Security		1408		125,000.00	125,000.00	125,000.00	125,000.00	Completed

Annual Statement/Performance and Evaluation Report

Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)

Part III: Implementation Schedule

PHA Name: HOUSING AUTHORITY OF THE CITY OF ELIZABETH		Grant Type and Number Capital Fund Program No: NJ39P00350100 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		
NJ3-1	3/31/02	3/31/02		9/30/04	9/30/04			
NJ3-2	3/31/02	N/A		9/30/04	N/A			
NJ3-3	3/31/02	N/A		9/30/04	N/A			
NJ3-4	3/31/02	3/31/02		9/30/04	9/30/04			
NJ3-5	3/31/02	3/31/02		9/30/04	9/30/04			
NJ3-6	3/31/02	3/31/02		9/30/04	9/30/04			
NJ3-8	3/31/02	3/31/02		9/30/04	9/30/04			

CAPITAL FUND PROGRAM TABLES START HERE

Annual Statement/Performance and Evaluation Report					
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary					
PHA Name: HOUSING AUTHORITY OF THE CITY OF ELIZABETH		Grant Type and Number Capital Fund Program Grant No: NJ39P00350101 Replacement Housing Factor Grant No:			Federal FY of Grant: 2001
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 12/31/2003 <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				
3	1408 Management Improvements Soft Costs	396,531.00	396,531.00	396,531.00	392,352.00
	Management Improvements Hard Costs				
4	1410 Administration	380,995.00	373,658.00	373,658.00	373,658.00
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	20,000.00	20,000.00	20,000.00	20,000.00
8	1440 Site Acquisition				
9	1450 Site Improvement	15,000.00	15,000.00	15,000.00	15,000.00
10	1460 Dwelling Structures	2,063,162.00	1,953,558.00	997,682.00	519,174.00
11	1465.1 Dwelling Equipment—Nonexpendable	43,000.00	13,749.00	13,749.00	13,749.00
12	1470 Nondwelling Structures	865,258.00	993,280.00	993,280.00	688,236.00
13	1475 Nondwelling Equipment	26,000.00	44,170.00	44,170.00	44,170.00
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.....)	3,809,946.00	3,809,946.00	2,854,070.00	2,066,339.00
	Amount of line XX Related to LBP Activities	0.00	0.00	0.00	0.00
	Amount of line XX Related to Section 504 compliance	0.00	0.00	0.00	0.00
	Amount of line XX Related to Security –Soft Costs	217,061.00	217,061.00	217,061.00	217,061.00
	Amount of Line XX related to Security—Hard Costs	0.00	0.00	0.00	0.00
	Amount of line XX Related to Energy Conservation Measures	0.00	0.00	0.00	0.00
	Collateralization Expenses or Debt Service				

Annual Statement/Performance and Evaluation Report

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

PHA Name: HOUSING AUTHORITY OF THE CITY OF ELIZABETH	Grant Type and Number Capital Fund Program Grant No: NJ39P00350101 Replacement Housing Factor Grant No:	Federal FY of Grant: 2001
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Original Annual Statement
 Reserve for Disasters/ Emergencies
 Revised Annual Statement (revision no:)

 Performance and Evaluation Report for Period Ending: 12/31/2003
 Final Performance and Evaluation Report

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	

Annual Statement/Performance and Evaluation Report

Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)

Part II: Supporting Pages

PHA Name: HOUSING AUTHORITY OF THE CITY OF ELIZABETH		Grant Type and Number Capital Fund Program Grant No: NJ39P00350101 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
NJ3-1	Replace Apartment Windows		1460		20,000.00	2,625.00	2,625.00	2,625.00	Obligated
NJ3-1	Paint apartments & common areas		1460		20,000.00	20,000.00	20,000.00	20,000.00	Obligated
NJ3-1	Upgrade Kitchens		1460		0.00	0.00	0.00	0.00	
NJ3-1	Replace Concrete		1460		3,000.00	0.00	0.00	0.00	
NJ3-1	Replace Administration Building Roof		1460		39,000.00	39,000.00	39,000.00	39,000.00	Obligated
NJ3-1	Upgrade Bathrooms		1460		0.00	0.00	0.00	0.00	
NJ3-1	Electrical Upgrade		1460		0.00	0.00	0.00	0.00	
NJ3-1	Replace Appliances		1465.1		16,000.00	0.00	0.00	0.00	
NJ3-1	Community Room		1470		759,000.00	887,022.00	887,022.00	581,977.94	Obligated
NJ3-1	Maintenance Equipment		1475		10,000.00	0.00	0.00	0.00	
NJ3-2	Paint apartments & common areas		1460		0.00	0.00	0.00	0.00	
NJ3-2	Replace Concrete		1460		0.00	0.00	0.00	0.00	
NJ3-2	Replace Appliances		1465.1		0.00	0.00	0.00	0.00	
NJ3-2	Maintenance Equipment		1475		0.00	0.00	0.00	0.00	
NJ3-3	Paint apartments & common areas		1460		0.00	0.00	0.00	0.00	
NJ3-3	Replace Concrete		1460		0.00	0.00	0.00	0.00	
NJ3-3	Replace Appliances		1465.1		0.00	0.00	0.00	0.00	
NJ3-3	Maintenance Equipment		1475		0.00	0.00	0.00	0.00	
NJ3-4	Upgrade Electrical System		1460		20,000.00	0.00	0.00	0.00	
NJ3-4	Paint apartments & common areas		1460		13,502.00	13,502.00	13,502.00	13,502.00	Obligated
NJ3-4	Replace Concrete		1460		0.00	0.00	0.00	0.00	
NJ3-4	Replace Roofs		1460		392,000.00	340,271.00	340,271.00	340,271.00	Obligated
NJ3-4	Replace Floor Tiles		1460		60,000.00	60,000.00	60,000.00	32,725.31	Obligated
NJ3-4	Upgrade Bathrooms		1460		130,000.00	130,000.00	130,000.00	400.00	Obligated
NJ3-4	Replace Appliances		1465.1		6,000.00	0.00	0.00	0.00	
NJ3-5	Replace Floor Tiles		1460		5,000.00	5,000.00	5,000.00	0.00	Obligated
NJ3-5	Replace Elevators		1460		0.00	150,322.00	0.00	0.00	

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

PHA Name: HOUSING AUTHORITY OF THE CITY OF ELIZABETH		Grant Type and Number Capital Fund Program Grant No: NJ39P00350101 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
NJ3-5	Paint apartments & common areas		1460		20,000.00	20,000.00	20,000.00	20,000.00	Obligated
NJ3-5	Upgrade Bathrooms		1460		159,380.00	400,880.00	0.00	0.00	
NJ3-5	Upgrade Electrical System		1460		429,322.00	0.00	0.00	0.00	
NJ3-5	Replace Appliances		1465.1		7,000.00	13,749.00	13,749.00	13,749.00	Obligated
NJ3-5	Maintenance Equipment		1475		4,000.00	0.00	0.00	0.00	
NJ3-6	Upgrade Electrical System		1460		623,302.00	623,302.00	218,628.00	2,659.00	Obligated
NJ3-6	Replace Floor Tile		1460		60,000.00	60,000.00	60,000.00	11,525.75	Obligated
NJ3-6	Paint Apartments & Common Areas		1460		15,000.00	15,000.00	15,000.00	15,000.00	Obligated
NJ3-6	Replace Appliances		1465.1		7,000.00	0.00	0.00	0.00	
NJ3-6	Maintenance Equipment		1475		4,000.00	13,749.00	13,749.00	13,749.00	Obligated
NJ3-8	Paint apartments & common areas		1460		7,000.00	7,000.00	7,000.00	7,000.00	Obligated
NJ3-8	Replace boiler & hot water heaters		1460		5,656.00	5,656.00	5,656.00	0.00	Obligated
NJ3-8	Replace finish hardware		1460		31,000.00	31,000.00	31,000.00	0.00	Obligated
NJ3-8	Replace Appliances		1465.1		7,000.00	0.00	0.00	0.00	Obligated
NJ3-8	Maintenance Equipment		1475		3,000.00	25,421.00	25,421.00	25,421.00	Obligated
NJ3-9	Relocate Dumpster		1450		15,000.00	15,000.00	15,000.00	15,000.00	Obligated
NJ3-9	Install Window Guards		1460		20,000.00	20,000.00	20,000.00	14,466.67	Obligated
NJ3-9	Replace Finish Hardware		1460		10,000.00	10,000.00	10,000.00	0.00	Obligated
NJ3-9	Maintenance Equipment		1475		5,000.00	5,000.00	5,000.00	5,000.00	Obligated
PHA-Wide	Common Area Cleanup		1408		0.00	0.00	0.00	0.00	
PHA-Wide	Resident Training		1408		104,630.00	102,771.00	102,771.00	102,771.00	Obligated
PHA-Wide	Family Site Security		1408		114,101.00	114,101.00	114,101.00	114,101.00	Obligated
PHA-Wide	Senior Site Security		1408		102,960.00	102,960.00	102,960.00	102,960.00	Obligated

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

PHA Name: HOUSING AUTHORITY OF THE CITY OF ELIZABETH		Grant Type and Number Capital Fund Program Grant No: NJ39P00350101 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
PHA-Wide	Apprenticeship Program		1408		36,960.00	36,960.00	36,960.00	36,960.00	Obligated
PHA-Wide	Resident Social Programs		1408		8,021.00	9,880.00	9,880.00	9,880.00	Obligated
PHA-Wide	Staff Training		1408		0.00	0.00	0.00	0.00	
PHA-Wide	Computer Upgrade		1408		23,899.00	23,899.00	23,899.00	23,899.00	Obligated
PHA-Wide	Safety Compliance		1408		5,960.00	5,960.00	5,960.00	1,780.82	Obligated
PHA-Wide	Administration		1410		380,995.00	373,658.14	373,658.14	373,658.14	Obligated
PHA-Wide	Fees and Costs		1430		20,000.00	20,000.00	20,000.00	20,000.00	Obligated
PHA-Wide	Community Center		1470		106,258.00	106,258.00	106,258.00	106,258.00	Obligated

CAPITAL FUND PROGRAM TABLES START HERE

Annual Statement/Performance and Evaluation Report					
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary					
PHA Name: HOUSING AUTHORITY OF THE CITY OF ELIZABETH		Grant Type and Number Capital Fund Program Grant No: NJ39P00350102 Replacement Housing Factor Grant No:			Federal FY of Grant: 2002
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 12/31/2003 <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				
3	1408 Management Improvements Soft Costs	464,468.00	459,148.00	459,148.00	331,730.00
	Management Improvements Hard Costs				
4	1410 Administration	309,765.00	309,765.00	309,765.00	309,436.00
5	1411 Audit				
6	1415 Liquidated Damages				
07	1430 Fees and Costs	20,000.00	20,000.00	20,000.00	20,000.00
8	1440 Site Acquisition				
9	1450 Site Improvement	5,000.00	14,500.00	14,500.00	10,148.00
10	1460 Dwelling Structures	2,156,242.00	2,156,242.00	331,000.00	236,855.00
11	1465.1 Dwelling Equipment—Nonexpendable	34,000.00	34,000.00	34,000.00	15,417.00
12	1470 Nondwelling Structures	79,000.00	79,000.00	79,000.00	52,751.00
13	1475 Nondwelling Equipment	29,000.00	25,000.00	25,000.00	280.00
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.....)	3,097,655.00	3,097,655.00	1,272,413.00	976,617.00
	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	199,000.00	199,000.00	199,000.00	104,526.00
	Amount of Line XX related to Security-- Hard Costs				
	Amount of line XX Related to Energy Conservation Measures				
	Collateralization Expenses or Debt Service				

Annual Statement/Performance and Evaluation Report

Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)

Part II: Supporting Pages

PHA Name: HOUSING AUTHORITY OF THE CITY OF ELIZABETH		Grant Type and Number Capital Fund Program Grant No: NJ39P00350102 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
NJ3-1	Consultant		1430		20,000.00	20,000.00	20,000.00	20,000.00	
NJ3-1	Site improvements		1450		3,000.00	3,000.00	3,000.00	3,000.00	Obligated
NJ3-1	Replace Concrete		1450		2,000.00	11,500.00	11,500.00	7,148.20	
NJ3-1	Upgrade Kitchens		1460		545,000.00	545,000.00	0.00	0.00	
NJ3-1	Replace Stairs		1460		0.00	68,233.00	68,233.00	13,227.00	
NJ3-1	Paint Hallways & Common Areas		1470		20,000.00	20,000.00	20,000.00	20,000.00	Obligated
NJ3-1	Maintenance Equipment		1475		8,000.00	8,000.00	8,000.00	0.00	Obligated
NJ3-3	Paint apartments & common areas		1470		4,000.00	4,000.00	4,000.00	4,000.00	Obligated
NJ3-3	Maintenance Equipment		1475		4,000.00	0.00	0.00	0.00	
NJ3-4	Upgrade Electrical		1460		168,587.00	0.00	0.00	0.00	
NJ3-4	Replace Gate & Riser Valves		1460		11,000.00	11,000.00	11,000.00	0.00	Obligated
NJ3-4	Upgrade Bathrooms		1460		0.00	544,242.00	0.00	0.00	
NJ3-4	Upgrade Kitchens		1460		375,655.00	0.00	0.00	0.00	
NJ3-4	Replace Appliances		1465.1		12,000.00	12,000.00	12,000.00	12,000.00	Obligated
NJ3-4	Paint Hallways & Common Areas		1470		13,000.00	13,000.00	13,000.00	13,000.00	Obligated
NJ3-4	Maintenance Equipment		1475		6,000.00	6,000.00	6,000.00	0.00	Obligated
NJ3-5	Upgrade Kitchens		1460		400,000.00	4 00,000.00	0.00	0.00	
NJ3-5	Caulk Exterior Windows & Lintels		1460		25,000.00	25,000.00	25,000.00	0.00	Obligated
NJ3-5	Replace Appliances		1465.1		7,000.00	7,000.00	7,000.00	3,417.00	Obligated
NJ3-5	Paint Hallways & Common Areas		1470		20,000.00	20,000.00	20,000.00	15,751.39	Obligated
NJ3-5	Maintenance Equipment		1475		4,000.00	4,000.00	4,000.00	0.00	Obligated

Annual Statement/Performance and Evaluation Report

Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)

Part II: Supporting Pages

PHA Name: HOUSING AUTHORITY OF THE CITY OF ELIZABETH		Grant Type and Number Capital Fund Program Grant No: NJ39P00350102 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
NJ3-6	Upgrade Plumbing		1460		20,000.00	0.00	.00	0.00	
NJ3-6	Upgrade Kitchens		1460		316,000.00	0.00	0.00	0.00	
NJ3-6	Upgrade Bathrooms		1460		0.00	336,000.00	0.00	0.00	
NJ3-6	Replace Appliances		1465.1		7,000.00	7,000.00	7,000.00	0.00	Obligated
NJ3-6	Paint Apartments & Common Areas		1470		15,000.00	15,000.00	15,000.00	0.00	Obligated
NJ3-6	Maintenance Equipment		1475		4,000.00	4,000.00	4,000.00	0.00	Obligated
NJ3-8	Replace Roof		1460		295,000.00	226,767.00	226,767.00	223,627.82	Obligated
NJ3-8	Replace Appliances		1465.1		8,000.00	8,000.00	8,000.00	0.00	Obligated
NJ3-8	Paint Apartments & Common Areas		1470		7,000.00	7,000.00	7,000.00	0.00	Obligated
NJ3-8	Maintenance Equipment		1475		3,000.00	3,000.00	3,000.00	280.00	Obligated
PHA-Wide	Resident Training		1408		114,000.00	114,000.00	114,000.00	114,000.00	Obligated
PHA-Wide	Family Site Security		1408		73,000.00	73,000.00	73,000.00	25,070.81	Obligated
PHA-Wide	Senior Site Security		1408		126,000.00	126,000.00	126,000.00	79,454.86	Obligated
PHA-Wide	Apprenticeship Program		1408		72,000.00	67,645.00	67,645.00	67,645.00	Obligated
PHA-Wide	Resident Social Programs		1408		25,000.00	29,320.70	29,320.70	29,320.70	Obligated
PHA-Wide	Staff Training		1408		18,000.00	18,000.25	18,000.25	1,205.00	Obligated
PHA-Wide	Computer Upgrade		1408		15,000.00	15,034.05	15,034.05	13,034.05	Obligated
PHA-Wide	Common Area Clean-up		1408		16,648.00	11,148.00	11,148.00	0.00	Obligated
PHA-Wide	Safety Compliance		1408		5,000.00	5,000.00	5,000.00	0.00	Obligated
PHA-Wide	Administration		1410		309,765.00	309,765.00	309,765.00	309,435.57	Obligated

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

PHA Name: HOUSING AUTHORITY OF THE CITY OF ELIZABETH		Grant Type and Number Capital Fund Program No: NJ39P00350102 Replacement Housing Factor No:				Federal FY of Grant: 2002	
Development Number Name/HA-Wide Activities	All Fund Obligated (Quarter Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates
	Original	Revised	Actual	Original	Revised	Actual	
NJ3-1	9/30/04	9/30/04		9/30/06	9/30/06		
NJ3-2	9/30/04	9/30/04		9/30/06	9/30/06		
NJ3-3	9/30/04	9/30/04		9/30/06	9/30/06		
NJ3-4	9/30/04	9/30/04		9/30/06	9/30/06		
NJ3-5	9/30/04	9/30/04		9/30/06	9/30/06		
NJ3-6	9/30/04	9/30/04		9/30/06	9/30/06		
NJ3-8	9/30/04	9/30/04		9/30/06	9/30/06		

CAPITAL FUND PROGRAM TABLES START HERE

Annual Statement/Performance and Evaluation Report					
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary					
PHA Name: HOUSING AUTHORITY OF THE CITY OF ELIZABETH		Grant Type and Number Capital Fund Program Grant No: NJ39P00350103 Replacement Housing Factor Grant No:			Federal FY of Grant: 2003
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 12/31/2003 <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				
3	1408 Management Improvements Soft Costs	382,306.00	382,306.00	382,306.00	108,410.00
	Management Improvements Hard Costs				
4	1410 Administration	254,870.00	254,870.00	254,870.00	24,737.00
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	20,000.00	20,000.00	20,000.00	11,177.00
8	1440 Site Acquisition				
9	1450 Site Improvement	12,000.00	12,000.00	0.00	0.00
10	1460 Dwelling Structures	1,345,029.00	1,345,029.00	0.00	0.00
11	1465.1 Dwelling Equipment—Nonexpendable	19,000.00	19,000.00	19,000.00	0.00
12	1470 Nondwelling Structures	484,500.00	484,500.00	86,000.00	2,493.00
13	1475 Nondwelling Equipment	31,000.00	31,000.00	31,000.00	0.00
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.....)	2,548,705.00	2,548,705.00	793,176.00	146,817.00
	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	159,306.00	159,306.00	159,306.00	4,504.00
	Amount of Line XX related to Security-- Hard Costs				
	Amount of line XX Related to Energy Conservation Measures				
	Collateralization Expenses or Debt Service				

Annual Statement/Performance and Evaluation Report

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

PHA Name: HOUSING AUTHORITY OF THE CITY OF ELIZABETH	Grant Type and Number Capital Fund Program Grant No: NJ39P00350103 Replacement Housing Factor Grant No:	Federal FY of Grant: 2003
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Original Annual Statement
 Reserve for Disasters/ Emergencies
 Revised Annual Statement (revision no:)
 Performance and Evaluation Report for Period Ending: 12/31/2003
 Final Performance and Evaluation Report

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	

Annual Statement/Performance and Evaluation Report

Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)

Part II: Supporting Pages

PHA Name: HOUSING AUTHORITY OF THE CITY OF ELIZABETH		Grant Type and Number Capital Fund Program Grant No: NJ39P00350103 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
NJ3-1	Consultant		1430		20,000.00	20,000.00	20,000.00	11,177.50	Obligated
NJ3-1	Upgrade Kitchens		1460		415,000.00	415,000.00	0.00	0.00	
NJ3-1	Repoint Bricks & Waterproof		1470		68,000.00	68,000.00	0.00	0.00	
NJ3-1	Replace Apt. Windows		1470		150,000.00	150,000.00	0.00	0.00	
NJ3-1	Paint apartments & common areas		1470		15,000.00	15,000.00	15,000.00	0.00	Obligated
NJ3-1	Replace Concrete/Landscaping		1470		4,000.00	4,000.00	4,000.00	2,493.00	Obligated
NJ3-1	Maintenance Equipment		1475		8,000.00	8,000.00	8,000.00	0.00	Obligated
NJ3-3	Paint apartments & common areas		1470		4,000.00	4,000.00	4,000.00	0.00	Obligated
NJ3-3	Maintenance Equipment		1475		4,000.00	4,000.00	4,000.00	0.00	Obligated
NJ3-4	Upgrade Bathrooms		1460		250,000.00	250,000.00	0.00	0.00	
NJ3-4	Replace Elevator Lift		1470		20,000.00	20,000.00	0.00	0.00	
NJ3-4	Asbestos Floor Cleanup		1460		104,000.00	104,000.00	0.00	0.00	
NJ3-4	Paint Hallways & Common Areas		1470		13,000.00	13,000.00	13,000.00	0.00	Obligated
NJ3-4	Maintenance Equipment		1475		6,000.00	6,000.00	6,000.00	0.00	Obligated
NJ3-5	Upgrade Bathrooms		1460		225,000.00	225,000.00	0.00	0.00	
NJ3-5	Upgrade Elevators		1470		152,500.00	152,500.00	0.00	0.00	
NJ3-5	Replace Appliances		1465.1		7,000.00	7,000.00	7,000.00	0.00	Obligated
NJ3-5	Paint Hallways & Common Areas		1470		15,000.00	15,000.00	15,000.00	0.00	Obligated
NJ3-5	Install Water Softeners/Strain		1470		4,000.00	4,000.00	0.00	0.00	
NJ3-5	Maintenance Equipment		1475		4,000.00	4,000.00	4,000.00	0.00	Obligated

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

PHA Name: HOUSING AUTHORITY OF THE CITY OF ELIZABETH		Grant Type and Number Capital Fund Program Grant No: NJ39P00350103 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
NJ3-6	Upgrade Bathrooms		1460		300,000.00	300,000.00	0.00	0.00	
NJ3-6	Replace Appliances		1465.1		5,000.00	5,000.00	5,000.00	0.00	Obligated
NJ3-6	Paint Apartments & Common Areas		1470		15,000.00	15,000.00	15,000.00	0.00	Obligated
NJ3-6	Maintenance Equipment		1475		4,000.00	4,000.00	4,000.00	0.00	Obligated
NJ3-8	Build Retaining Wall		1450		12,000.00	12,000.00	0.00	0.00	
NJ3-8	Replace Door Hardware		1460		51,028.75	51,028.75	0.00	0.00	
NJ3-8	Replace Appliances		1465.1		7,000.00	7,000.00	7,000.00	0.00	Obligated
NJ3-8	Install Water Softeners/Strain		1470		4,000.00	4,000.00	0.00	0.00	
NJ3-8	Paint Apartments & Common Areas		1470		20,000.00	20,000.00	20,000.00	0.00	Obligated
NJ3-8	Maintenance Equipment		1475		5,000.00	5,000.00	5,000.00	0.00	Obligated
PHA-Wide	Resident Training		1408		100,000.00	100,000.00	100,000.00	41,768.50	Obligated
PHA-Wide	Family Site Security		1408		53,305.75	53,305.75	53,305.75	0.00	Obligated
PHA-Wide	Senior Site Security		1408		106,000.00	106,000.00	106,000.00	4,504.50	Obligated
PHA-Wide	Apprenticeship Program		1408		71,000.00	71,000.00	71,000.00	43,042.97	Obligated
PHA-Wide	Resident Social Programs		1408		15,000.00	15,000.00	15,000.00	15,000.00	Obligated
PHA-Wide	Staff Training		1408		15,000.00	15,000.00	15,000.00	0.00	Obligated
PHA-Wide	Computer Upgrade		1408		10,000.00	10,000.00	10,000.00	4,904.12	Obligated
PHA-Wide	Common Area Clean-up		1408		12,000.00	12,000.00	12,000.00	0.00	Obligated
PHA-Wide	Administration		1410		254,870.50	254,870.50	254,870.50	24,737.13	Obligated

Annual Statement/Performance and Evaluation Report

Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)

Part III: Implementation Schedule

PHA Name: HOUSING AUTHORITY OF THE CITY OF ELIZABETH		Grant Type and Number Capital Fund Program No: NJ39P00350103 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		
NJ3-1	9/30/05	9/30/05		9/30/07	9/30/07			
NJ3-2	9/30/05	9/30/05		9/30/07	9/30/07			
NJ3-3	9/30/05	9/30/05		9/30/07	9/30/07			
NJ3-4	9/30/05	9/30/05		9/30/07	9/30/07			
NJ3-5	9/30/05	9/30/05		9/30/07	9/30/07			
NJ3-6	9/30/05	9/30/05		9/30/07	9/30/07			
NJ3-8	9/30/05	9/30/05		9/30/07	9/30/07			

CAPITAL FUND PROGRAM TABLES START HERE

Annual Statement/Performance and Evaluation Report					
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary					
PHA Name: HOUSING AUTHORITY OF THE CITY OF ELIZABETH		Grant Type and Number Capital Fund Program Grant No: NJ39P00350203 Replacement Housing Factor Grant No:			Federal FY of Grant: 2003
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 12/31/2003 <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				
3	1408 Management Improvements Soft Costs	76,192.00	76,192.00	0.00	0.00
	Management Improvements Hard Costs				
4	1410 Administration	50,795.00	50,795.00	50,795.00	0.00
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs				
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	70,000.00	70,000.00	0.00	0.00
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Nondwelling Structures	310,960.00	310,960.00	0.00	0.00
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.....)	507,947.00	507,947.00	50,795.00	0.00
	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	0.00	0.00	0.00	0.00
	Amount of Line XX related to Security-- Hard Costs				
	Amount of line XX Related to Energy Conservation				

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

PHA Name: HOUSING AUTHORITY OF THE CITY OF ELIZABETH	Grant Type and Number Capital Fund Program Grant No: NJ39P00350203 Replacement Housing Factor Grant No:	Federal FY of Grant: 2003
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Original Annual Statement Reserve for Disasters/ Emergencies Revised Annual Statement (revision no:)
 Performance and Evaluation Report for Period Ending: 12/31/2003 Final Performance and Evaluation Report

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
	Measures				
	Collateralization Expenses or Debt Service				

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

PHA Name: HOUSING AUTHORITY OF THE CITY OF ELIZABETH		Grant Type and Number Capital Fund Program Grant No: NJ39P00350203 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
NJ3-1	Admin. Building Renovations		1460		50,000.00	50,000.00	0.00	0.00	
NJ3-1	Repoint Bricks & Waterproof		1470		220,960.25	220,960.25	0.00	0.00	
NJ3-1	Replace Apt. Windows		1470		50,000.00	50,000.00	0.00	0.00	
NJ3-4	Replace Elevator Lift		1470		20,000.00	20,000.00	0.00	0.00	
NJ3-5	Upgrade Elevators		1470		20,000.00	20,000.00	0.00	0.00	
NJ3-8	Replace Door Hardware		1460		20,000.00	20,000.00	0.00	0.00	
PHA-Wide	Management Improvements		1406		76,192.05	76,192.05	0.00	0.00	
PHA-Wide	Administration		1410		50,794.70	50,794.70	50,794.70	0.00	Obligated

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

PHA Name: HOUSING AUTHORITY OF THE CITY OF ELIZABETH	Grant Type and Number Capital Fund Program No: NJ39P00350203 Replacement Housing Factor No:	Federal FY of Grant: 2003
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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	
NJ3-1	9/30/05	9/30/05		9/30/07	9/30/07		
NJ3-2	9/30/05	9/30/05		9/30/07	9/30/07		
NJ3-3	9/30/05	9/30/05		9/30/07	9/30/07		
NJ3-4	9/30/05	9/30/05		9/30/07	9/30/07		
NJ3-5	9/30/05	9/30/05		9/30/07	9/30/07		
NJ3-6	9/30/05	9/30/05		9/30/07	9/30/07		
NJ3-8	9/30/05	9/30/05		9/30/07	9/30/07		

Capital Fund Program Five-Year Action Plan

Part I: Summary

PHA Name					
		<input type="checkbox"/> Original 5-Year Plan <input type="checkbox"/> Revision No:			
Development Number/Name/HA-Wide	Year 1	Work Statement for Year 2 FFY Grant: PHA FY:	Work Statement for Year 3 FFY Grant: PHA FY:	Work Statement for Year 4 FFY Grant: PHA FY:	Work Statement for Year 5 FFY Grant: PHA FY:
	Annual Statement				
Total CFP Funds (Est.)					
Total Replacement Housing Factor Funds					

