

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

PHA Plans for the Housing Authority of the Village of Freeport

5 Year Plan for Fiscal Years 2005 - 2009
Annual Plan for Fiscal Year 2005

**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 Freeport

PHA Number: NY023

PHA Fiscal Year Beginning: (mm/yyyy) 1/2005

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 2005 - 2009
[24 CFR Part 903.5]

A. Mission

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

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

It is the mission of the Housing Authority of the Village of Freeport, New York to (1) increase the availability of decent, safe and affordable housing in meeting the area housing needs; (2) ensure equal opportunity in housing for all; (3) promote self-sufficiency and asset development of families and individuals; and (4) improve community quality of life and economic viability. In order to achieve this mission the Housing Authority will:

- *Recognize the residents as our ultimate customer.*
- *Strive for improvement of the physical conditions of it's housing developments.*
- *Continually upgrade the management and operations of the public housing agency.*
- *Develop and enhance a stronger, healthier and viable economic initiative-related to low-income housing assistance.*
- *Include any other housing opportunities available to public housing or assisted residents.*

FHA accomplishments: *The FHA dissolved its relationship with the Durham Housing Authority and is soliciting a Builder/Developer through the procurement process. The PHA withdrew its application to the Special Applications Center to remove 100 Senior Citizen apartments from it HUD inventory. The application will be reassessed and resubmitted.*

During 2004, the FHA submitted a new application to SAC and received conditional approval to hire a developer/partner to coordinate the process. The FHA is in the final stages of engaging a developer/partner. The FHA will have a developer in place by November 2004.

B. Goals

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

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

- PHA Goal: Expand the supply of assisted housing
Objectives:
- Apply for additional rental vouchers: *When NOFA's are published.*
 - Reduce public housing vacancies:
 - Leverage private or other public funds to create additional housing opportunities:
 - Acquire or build units or developments
 - Other (list below)
 - *Broaden curb and market appeal of our public housing developments by disposing of obsolete units and creating mixed-income housing developments*

FHA Accomplishments: *During 2004, the FHA sold three houses through its nonprofit corporation to first-time homebuyers. We hope to sell three to four in 2005. The FHA is moving forward with the mixed finance project. A final decision regarding feasibility will be made in 2005.*

- PHA Goal: Improve the quality of assisted housing
Objectives:
- Improve public housing management: (PHAS score)
Strive towards passing PHAS score
 - Improve voucher management: (SEMAP score)
 - Increase customer satisfaction: *This is an on-going activity.*
 - Concentrate on efforts to improve specific management functions: (list; e.g., public housing finance; voucher unit inspections)
 - Renovate or modernize public housing units: *This goal was achieved and noted on previous PHA Plan updates.*
 - Demolish or dispose of obsolete public housing
 - Provide replacement public housing:
 - Provide replacement vouchers:
 - Other: (list below)

FHA Accomplishments: Because of changes in the mobility of Housing Choice Vouchers, we no longer plan to dispose of any units.

- PHA Goal: Increase assisted housing choices
- Objectives:
- Provide voucher mobility counseling: *This is an on-going activity*
 - Conduct outreach efforts to potential voucher landlords: *The Housing Authority will recruit landlords by 12-31-04, if new vouchers received*
 - Increase voucher payment standards
 - Implement voucher homeownership program:
 - Implement public housing or other homeownership programs: *This will be done by 12-31-04 through the not-for-profit program*
 - Implement public housing site-based waiting lists:
 - Convert public housing to vouchers:
 - Other: (list below)

FHA accomplishments: *The luncheon hosted for real estate agents and landlords to explain the Housing Choice Voucher program never came to fruition. This PHA is pursuing its goal of purchasing foreclosures with HOME Funds. No homes have been purchased at time of this update. The FHA has dissolved its relationship with Durham Housing Authority and its joint effort. The Goals for the FHA remain the same.*

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

- PHA Goal: Provide an improved living environment
- Objectives:
- Implement measures to deconcentrate poverty by bringing higher income public housing households into lower income developments: *E. Mitchell Malette and John J. Madden Senior Developments by the end of FY 2003*
 - Implement measures to promote income mixing in public housing by assuring access for lower income families into higher income developments: *This is an ongoing activity*
 - Implement public housing security improvements: *The Housing Authority will install closed circuit TV cameras, card access system, and delay egress system by 12-31-04.*
 - Designate developments or buildings for particular resident groups (elderly, persons with disabilities)
 - Other: (list below)

FHA accomplishments: *We still have not implemented security measures addressed in objectives. We have not received any funding of any sort. We will continue to pursue all opportunities for funding sources.*

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

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

Objectives:

- Increase the number and percentage of employed persons in assisted families:
- Provide or attract supportive services to improve assistance recipients' employability:
- Provide or attract supportive services to increase independence for the elderly or families with disabilities.
- Other: (list below)
 - *Creating mixed-income, drug-free communities in our public housing communities with strong economic development programming.*

FHA accomplishments: *Very little progress was made in the area during the past year. The objective will continue on an on-going basis.*

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

PHA Goal: Ensure equal opportunity and affirmatively further fair housing

Objectives:

- Undertake affirmative measures to ensure access to assisted housing regardless of race, color, religion national origin, sex, familial status, and disability: *This is an ongoing activity. The H. A. will try to refer participants to the appropriate agency for assistance when this matter is brought to our attention.*
- 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: *This is an ongoing activity*
- Undertake affirmative measures to ensure accessible housing to persons with all varieties of disabilities regardless of unit size required: *This is an ongoing activity. The H. A. will try to refer participants to the appropriate agency for assistance when this matter is brought to our attention.*
- Other: (list below)

FHA accomplishments: *The Nassau County Office of Senior Citizens' Affairs put on several workshops. Many pamphlets and other literature was given and displayed on bulletin boards and in community rooms of the developments.*

Other PHA Goals and Objectives: (list below)

Annual PHA Plan
PHA Fiscal Year 2005
[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 Village of Freeport, New York has prepared this Annual PHA Plan in compliance with Section 511 of the Quality Housing and Work Responsibility Act of 1998 and the ensuing HUD requirements.

The purpose of this Annual Plan is to provide a framework for local accountability and an easily identifiable source by which public housing residents, participants in the tenant-based assistance program and other members of the public may locate basic PHA policies, rules and requirements related to the operations, programs and services of the agency.

The Mission Statement and the Goals and Objectives were based on information contained in our jurisdiction's Consolidated Plan and will assure that our residents will receive the best customer service.

Excellent customer service and fulfillment of the Mission Statement and Goals and Objectives is ensured by implementation of a series of policies that are on display with this Plan. The Admissions and Occupancy Policy and Section 8 Administrative Plan are the two primary policies on display. These important documents cover the public housing tenant selection and assignment plan, outreach services, PHA's responsibility to Section 8 owner/landlords, grievance procedures, etc.

The most important challenges to be met by the Housing Authority of the Village of Freeport during FYB 2005 include:

- *Strive to achieve passing PHAS scores to return the PHA to Standard Performer status.*
- *Improvement of the physical conditions of the housing developments through the Capital Funds activities;*
- *Involve the public housing residents and the Section 8 participants through the Annual Plan Resident Advisory Board;*
- *Train staff and commissioners to fully understand and take advantage of opportunities in the new law and regulations to better serve our residents and the community; and*
- *Identify, develop and leverage services to enable low-income families to become self-sufficient.*

In closing, this Annual Plan exemplifies the commitment of the Housing Authority of the Village of Freeport to meet the housing needs of the full range of low-income residents. The Housing Authority of the Village of Freeport, in partnership with agencies from all levels of government, the business community, non-profit community groups, and residents will use this plan as a road map to reach the “higher quality of life” destination for the Village of Freeport and Nassau County.

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.

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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 (*ny023a01*)
- FY 2005 Capital Fund Program Annual Statement (*ny023b01*)
- Most recent board-approved operating budget (Required Attachment for PHAs that are troubled or at risk of being designated troubled ONLY)
- Other (List below, providing each attachment name)
 - *Deconcentration and Income Mixing analysis results (ny023c01)*
 - *Description of Community Service Requirements Implementation (ny023d01)*
 - *Pet Ownership Policy (ny02e01)*
 - *Progress in meeting 5-Year Plan Goals (ny023f01)*

- *Criteria for Substantial Deviation and Significant Amendments (ny023g01)*

Optional Attachments:

- PHA Management Organizational Chart
- FY 2005 Capital Fund Program 5 Year Action Plan: *(ny023h01)*
- 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)
 - *2003 Performance and Evaluation Report (ny023i01)*
 - *2003 Performance and Evaluation Report- Supplement (ny023j01)*
 - *2002 Performance and Evaluation Report (ny023k01)*
 - *2001 Performance and Evaluation Report (ny023l01)*
 - *2000 Performance and Evaluation Report (ny023m01)*

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
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

List of Supporting Documents Available for Review		
Applicable & On Display	Supporting Document	Applicable Plan Component
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 <input checked="" type="checkbox"/> check here if included in the public housing A & O Policy	Annual Plan: Rent Determination
X	Schedule of flat rents offered at each public housing development <input checked="" type="checkbox"/> check here if included in the public housing A & O Policy	Annual Plan: Rent Determination
X	Section 8 rent determination (payment standard) policies <input checked="" type="checkbox"/> check here if included in Section 8 Administrative Plan	Annual Plan: Rent Determination
X	Public housing management and maintenance policy documents, including policies for the prevention or eradication of pest infestation (including cockroach infestation)	Annual Plan: Operations and Maintenance
X	Public housing grievance procedures <input checked="" type="checkbox"/> check here if included in the public housing A & O Policy	Annual Plan: Grievance Procedures
X	Section 8 informal review and hearing procedures <input checked="" type="checkbox"/> check here if included in Section 8 Administrative Plan	Annual Plan: Grievance Procedures
X	The HUD-approved Capital Fund/Comprehensive Grant Program Annual Statement (HUD 52837) for the active grant year	Annual Plan: Capital Needs
X	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
N/A	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
X	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	Annual Plan: Conversion of Public Housing

List of Supporting Documents Available for Review		
Applicable & On Display	Supporting Document	Applicable Plan Component
	1996 HUD Appropriations Act	
X	Approved or submitted public housing homeownership programs/plans	Annual Plan: Homeownership
N/A	Policies governing any Section 8 Homeownership program <input type="checkbox"/> 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
N/A	FSS Action Plan/s for public housing and/or Section 8	Annual Plan: Community Service & Self-Sufficiency
N/A	Most recent self-sufficiency (ED/SS, TOP or ROSS or other resident services grant) grant program reports	Annual Plan: Community Service & Self-Sufficiency
N/A	The most recent Public Housing Drug Elimination Program (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	19,773	5	5	5	5	5	5
Income >30% but <=50% of AMI	12,463	5	5	5	5	5	5
Income >50% but <80% of AMI	10,618	5	5	5	5	5	5
Elderly	12,492	5	5	5	5	5	5
Families with Disabilities	2,449	5	5	5	5	5	5
<i>Caucasian</i>	23,100	5	5	5	5	5	5
<i>African American</i>	8,103	5	5	5	5	5	5
<i>Hispanic</i>	9,883	5	5	5	5	5	5
<i>Asian/Pacific Islander</i>	*						
<i>Other</i>	*						

* Data not available

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

- Consolidated Plan of the Jurisdiction/s
Indicate year: 2000
Note: PHA estimates that 3% of population consists of "Families with Disabilities." We were unable to obtain this information from any agencies in the area.
- 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 - <i>Senior</i>			
<input type="checkbox"/> Combined Section 8 and Public Housing			
<input type="checkbox"/> Public Housing Site-Based or sub-jurisdictional waiting list (optional)			
If used, identify which development/subjurisdiction:			
	# of families	% of total families	Annual Turnover
Waiting list total	223		
Extremely low income <=30% AMI	208	93%	
Very low income (>30% but <=50% AMI)	13	6%	
Low income (>50% but <80% AMI)	2	1%	
Families with children	0	0	
Elderly families	95	43%	
Families with Disabilities	32	59%	
<i>Caucasian</i>	28	13%	
<i>African American</i>	131	59%	
<i>Hispanic</i>	64	29%	
<i>Other</i>	0	0	
Characteristics by Bedroom Size (Public Housing Only)			
1BR	211	95%	
2 BR	12	5%	
3 BR	0	0	
4 BR	0	0	
5 BR	0	0	
5+ BR	0	0	
Is the waiting list closed (select one)? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
If yes:			
How long has it been closed (# of months)?			
Does the PHA expect to reopen the list in the PHA Plan year? <input type="checkbox"/> No <input type="checkbox"/> Yes			
Does the PHA permit specific categories of families onto the waiting list, even if generally closed?			
<input type="checkbox"/> No <input type="checkbox"/> Yes			

Housing Needs of Families on the Waiting List

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 - <i>Family</i>			
<input type="checkbox"/> Combined Section 8 and Public Housing			
<input type="checkbox"/> Public Housing Site-Based or sub-jurisdictional waiting list (optional)			
If used, identify which development/subjurisdiction:			
	# of families	% of total families	Annual Turnover
Waiting list total	74		
Extremely low income <=30% AMI	60	81	
Very low income (>30% but <=50% AMI)	12	16	
Low income (>50% but <80% AMI)	2	3	
Families with children	54	73	
Elderly families	1	1	
Families with Disabilities	8	11	
<i>Caucasian</i>	3	4	
<i>African American</i>	42	57	
<i>Hispanic</i>	29	39	
<i>Other</i>	0	0	
Characteristics by Bedroom Size (Public Housing Only)			
1BR	20	27	
2 BR	34	46	
3 BR	18	24	
4 BR	2	3	
5 BR	0	0	
5+ BR	0	0	
Is the waiting list closed (select one)? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes			
If yes:			
How long has it been closed (# of months)? 24 months			
Does the PHA expect to reopen the list in the PHA Plan year? <input checked="" type="checkbox"/> No <input 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			

Housing Needs of Families on the Waiting List
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Housing Needs of Families on the Waiting List			
Waiting list type: (select one)			
<input checked="" type="checkbox"/> Section 8 tenant-based assistance			
<input type="checkbox"/> Public Housing			
<input type="checkbox"/> Combined Section 8 and Public Housing			
<input type="checkbox"/> Public Housing Site-Based or sub-jurisdictional waiting list (optional)			
If used, identify which development/subjurisdiction:			
	# of families	% of total families	Annual Turnover
Waiting list total	607		
Extremely low income <=30% AMI	459	76	
Very low income (>30% but <=50% AMI)	142	23	
Low income (>50% but <80% AMI)	6	1	
Families with children	401	66	
Elderly families	12	2	
Families with Disabilities	11	2	
<i>Caucasian</i>	244	40	
<i>African American</i>	357	59	
<i>Hispanic</i>	179	29	
<i>Other</i>	6	1	
Characteristics by Bedroom Size (Public Housing Only)			
1BR	N/A	N/A	N/A
2 BR	N/A	N/A	N/A
3 BR	N/A	N/A	N/A
4 BR	N/A	N/A	N/A
5 BR	N/A	N/A	N/A
5+ BR	N/A	N/A	N/A
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)? 36 months			
Does the PHA expect to reopen the list in the PHA Plan year? <input checked="" type="checkbox"/> No <input 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. 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.

The PHA will continue to house families as Section 8 funds become available. In today's climate we may be forced to reduce assistance or terminate some families from our program.

(1) Strategies

Need: Shortage of affordable housing for all eligible populations

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

Select all that apply

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

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

Select all that apply

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

Need: Specific Family Types: Families at or below 30% of median

Strategy 1: Target available assistance to families at or below 30 % of AMI

Select all that apply

- Exceed HUD federal targeting requirements for families at or below 30% of AMI in public housing
- Exceed HUD federal targeting requirements for families at or below 30% of AMI in tenant-based section 8 assistance
- Employ admissions preferences aimed at families with economic hardships
- Adopt rent policies to support and encourage work
- Other: (list below)

Need: Specific Family Types: Families at or below 50% of median

Strategy 1: Target available assistance to families at or below 50% of AMI

Select all that apply

- Employ admissions preferences aimed at families who are working
- Adopt rent policies to support and encourage work
- Other: (list below)

Need: Specific Family Types: The Elderly

Strategy 1: Target available assistance to the elderly:

Select all that apply

- Seek designation of public housing for the elderly
- Apply for special-purpose vouchers targeted to the elderly, should they become available
- Other: (list below)

Need: Specific Family Types: Families with Disabilities

Strategy 1: Target available assistance to Families with Disabilities:

Select all that apply

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

Other: (list below)

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

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

Select if applicable

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

Strategy 2: Conduct activities to affirmatively further fair housing

Select all that apply

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

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

(2) Reasons for Selecting Strategies

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

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

2. Statement of Financial Resources

[24 CFR Part 903.7 9 (b)]

List the financial resources that are anticipated to be available to the PHA for the support of Federal public housing and tenant-based Section 8 assistance programs administered by the PHA during the Plan year. Note: the table assumes that Federal public housing or tenant based Section 8 assistance grant funds are expended on eligible purposes; therefore, uses of these funds need not be stated. For other funds, indicate the use for those funds as one of the following categories: public housing operations, public housing capital improvements, public housing safety/security, public housing supportive services, Section 8 tenant-based assistance, Section 8 supportive services or other.

Financial Resources: Planned Sources and Uses		
Sources	Planned \$	Planned Uses
1. Federal Grants (FY 2005 grants)		
a) Public Housing Operating Fund	333,996.00	
b) Public Housing Capital Fund	568,391.00	
c) HOPE VI Revitalization		
d) HOPE VI Demolition		
e) Annual Contributions for Section 8 Tenant-Based Assistance	2,618,452.00	
f) Public Housing Drug Elimination Program (including any Technical Assistance funds)		
g) Resident Opportunity and Self-Sufficiency Grants		
h) Community Development Block Grant		
i) HOME		
Other Federal Grants (list below)		
2. Prior Year Federal Grants (unobligated funds only) (list below)		
- NY36P023501-4	568,391.00	Public housing capital improvements
- NY36P023501-3	308,727.00	Public housing capital improvements
- NY36P023502-3	54,590.00	Public housing capital improvements
3. Public Housing Dwelling Rental Income	1,413,700.00	Public housing operations
4. Other income (list below)		
-Interest on investments	280.00	Public housing operations
- Other income: Legal fees, maintenance charged to tenants, late fees, NSF check charges, etc.	3,000.00	Public housing operations
- Late fees	18,000.00	Public housing operations
- Laundry commissions	6,000.00	Public housing operations
- Excess utilities	13,920.00	Public housing operations
4. Non-federal sources (list below)		
Total resources	5,907,447.00	

3. PHA Policies Governing Eligibility, Selection, and Admissions

A. Public Housing

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

(1) Eligibility

a. When does the 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)
▪ *Within 30 individuals of being offered a unit*
- When families are within a certain time of being offered a unit: (state time)
- Other: (describe)

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

- Criminal or Drug-related activity
- Rental history
- Housekeeping
- Other (describe)
▪ *Social workers*
▪ *Employers*
▪ *Parole Officers*
▪ *Physicians*

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

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

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

(2) Waiting List Organization

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

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

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

- PHA main administrative office

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

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

The Housing Authority of the Village of Freeport does not operate site-based waiting lists.

1. How many site-based waiting lists will the PHA operate in the coming year?
N/A

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)? *N/A*
If yes, how many lists?

3. Yes No: May families be on more than one list simultaneously
If yes, how many lists? *N/A*

4. Where can interested persons obtain more information about and sign up to be on the site-based waiting lists (select all that apply)? *N/A*

- 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: *N/A*

(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.

6 Date and Time

Former Federal preferences:

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

Other preferences (select all that apply)

- 1 Working families and those unable to work because of age or disability
- 3 Veterans and veterans’ families
- 2 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)

- The PHA-resident lease
- The PHA’s Admissions and (Continued) Occupancy policy
- PHA briefing seminars or written materials
- Other source (list)

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

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

▪ *All changes must be reported within 10 days of occurrence*

(6) Deconcentration and Income Mixing

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

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

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

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) *N/A*

- 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)

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

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

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

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

NOTE: *The FHA utilizes RAPSHEET out of Washington D. C.*

e. Indicate what kinds of information you share with prospective landlords? (select all that apply)

- Criminal or drug-related activity
- Other (describe below)
- Resident mailing address or last known address on file (if no longer current participants).
 - Current landlord name and mailing address.
 - Prior landlords name and mailing address.

(2) Waiting List Organization

a. With which of the following program waiting lists is the section 8 tenant-based assistance waiting list merged? (select all that apply)

- None
- Federal public housing
- Federal moderate rehabilitation
- Federal project-based certificate program
- Other federal or local program (list below)

b. Where may interested persons apply for admission to section 8 tenant-based assistance? (select all that apply)

- PHA main administrative office
- Other (list below)

(3) Search Time

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

If yes, state circumstances below:

- *Proof that participant has attempted to locate housing in town or village and was unsuccessful*

(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.

6 Date and Time

Former Federal preferences

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

4 High rent burden

Other preferences (select all that apply)

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

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

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

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

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

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

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

(5) Special Purpose Section 8 Assistance Programs

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

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

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

- Through published notices
- Other (list below)

4. PHA Rent Determination Policies

[24 CFR Part 903.7 9 (d)]

A. Public Housing

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

(1) Income Based Rent Policies

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

a. Use of discretionary policies: (select one)

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

---or---

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

b. Minimum Rent

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

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

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

3. If yes to question 2, list these policies below: *N/A*

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: *N/A*

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)
 - *The Housing Authority of the Village of Freeport does not plan to implement any discretionary deductions and/or exclusions.*

e. Ceiling rents

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

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

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

- 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) *N/A*

- 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)
 - *All changes must be reported within 10 days of occurrence. After verification, the PHA will determine if the change will result in an adjustment to rent.*

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

(2) Flat Rents

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

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

B. Section 8 Tenant-Based Assistance

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

(1) Payment Standards

Describe the voucher payment standards and policies.

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

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

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

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

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

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

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

- Annually
- Other (list below)

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

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

(2) Minimum Rent

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

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

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

5. Operations and Management

[24 CFR Part 903.7 9 (e)]

Exemptions from Component 5: High performing and small PHAs are not required to complete this section. Section 8 only PHAs must complete parts A, B, and C(2)

A. PHA Management Structure

Describe the PHA's management structure and organization.

(select one)

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

Executive Director

Housing Assistant (2)

Maintenance Supervisor

Accounts Receivable

Maintenance Mechanics (3)

Accounts Payable

Maintenance Helpers (4)

Receptionist

File Clerk

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	<i>361</i>	<i>50</i>
Section 8 Vouchers	<i>211</i>	<i>30</i>
Section 8 Certificates	<i>N/A</i>	<i>N/A</i>
Section 8 Mod Rehab	<i>N/A</i>	<i>N/A</i>
Special Purpose Section 8 Certificates/Vouchers (list individually)		
Public Housing Drug Elimination Program (PHDEP)	<i>N/A</i>	<i>N/A</i>
Other Federal Programs(list individually)	<i>N/A</i>	<i>N/A</i>

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)

- *Work Order System*
- *Pest Eradication Policy*
- *Maintenance Plan*
- *Uniform Inspection System*
- *Admissions and Occupancy Policy*
- *Admissions and Occupancy Procedures Manual*
- *Fair Housing Policy*
- *Grievance Procedures*
- *Tenant Selection and Assignment Plan*
- *Handicapped Policy*
- *Termination and Eviction*
- *Transfer and Transfer Waiting List*
- *Resident Initiative*
- *Section 3 Plan*
- *Pet Policy for Families*
- *Pet Policy for Elderly*
- *Procurement Policy and Procedures*
- *Personnel Policy*

(2) Section 8 Management: (list below)

- *Section 8 Administrative Plan*
- *Section 8 HCV and SEMAP Procedures Manual*

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: *N/A*

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: *N/A*

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) *ny023b01*

-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) *ny023j01*

-or-

The Capital Fund Program 5-Year Action Plan is provided below: (if selected, copy the CFP optional 5 Year Action Plan from the Table Library and insert here)

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

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

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

1. Development name: *N/A*
2. Development (project) number:

3. Status of grant: (select the statement that best describes the current status)

- Revitalization Plan under development
- Revitalization Plan submitted, pending approval
- Revitalization Plan approved
- Activities pursuant to an approved Revitalization Plan underway

Yes No: c) Does the PHA plan to apply for a HOPE VI Revitalization grant in the Plan year?

If yes, list development name/s below:

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

If yes, list developments or activities below:

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

If yes, list developments or activities below:

8. Demolition and Disposition

[24 CFR Part 903.7 9 (h)]

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

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

2. Activity Description

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

Demolition/Disposition Activity Description
1a. Development name: <i>John J. Madden Senior Developments</i>
1b. Development (project) number: <i>NY23-2</i>
2. Activity type: Demolition <input type="checkbox"/> Disposition <input checked="" type="checkbox"/>
3. Application status (select one)

Approved <input type="checkbox"/> Submitted, pending approval <input type="checkbox"/> Planned application <input checked="" type="checkbox"/>
4. Date application approved, submitted, or planned for submission: <u>(9/2002)</u>
5. Number of units affected: 50
6. Coverage of action (select one) <input type="checkbox"/> Part of the development <input checked="" type="checkbox"/> Total development
7. Timeline for activity: a. Actual or projected start date of activity: <i>Summer of FY 2003</i> b. Projected end date of activity: <i>Summer of FY 2004</i>

Demolition/Disposition Activity Description
1a. Development name: <i>John J. Madden Senior Housing</i>
1b. Development (project) number: <i>NY23-2</i>
2. Activity type: Demolition <input type="checkbox"/> Disposition <input checked="" type="checkbox"/>
3. Application status (select one) Approved <input type="checkbox"/> Submitted, pending approval <input type="checkbox"/> Planned application <input checked="" type="checkbox"/>
4. Date application approved, submitted, or planned for submission: <u>(9/2002)</u>
5. Number of units affected: 16
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: <i>Summer of FY 2003</i> b. Projected end date of activity: <i>Summer of FY 2004</i>

Demolition/Disposition Activity Description
1a. Development name: <i>E. Mitchell Malette Senior Development</i>
1b. Development (project) number: <i>NY23-5</i>
2. Activity type: Demolition <input type="checkbox"/> Disposition <input checked="" type="checkbox"/>
3. Application status (select one) Approved <input type="checkbox"/> Submitted, pending approval <input type="checkbox"/> Planned application <input checked="" type="checkbox"/>
4. Date application approved, submitted, or planned for submission: <u>(9/2002)</u>
5. Number of units affected: 50
6. Coverage of action (select one)

<input type="checkbox"/> Part of the development <input checked="" type="checkbox"/> Total development
7. Timeline for activity: a. Actual or projected start date of activity: <i>Summer of FY 2003</i> b. Projected end date of activity: <i>Summer of FY 2004</i>

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: <i>E. Mitchell Malette</i> 1b. Development (project) number: <i>NY23-5</i>
2. Designation type: Occupancy by only the elderly <input checked="" 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 checked="" type="checkbox"/>
4. Date this designation approved, submitted, or planned for submission: <i>(15/01/02)</i>

<p>5. If approved, will this designation constitute a (select one)</p> <p><input checked="" type="checkbox"/> New Designation Plan</p> <p><input type="checkbox"/> Revision of a previously-approved Designation Plan?</p>
<p>6. Number of units affected: 100</p> <p>7. Coverage of action (select one)</p> <p><input type="checkbox"/> Part of the development</p> <p><input checked="" type="checkbox"/> Total development</p>

10. Conversion of Public Housing to Tenant-Based Assistance

[24 CFR Part 903.7 9 (j)]

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

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

1. Yes No: Have any of the 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 *N/A*

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

Conversion of Public Housing Activity Description
<p>1a. Development name:</p> <p>1b. Development (project) number:</p>
<p>2. What is the status of the required assessment?</p> <p><input type="checkbox"/> Assessment underway</p> <p><input type="checkbox"/> Assessment results submitted to HUD</p> <p><input type="checkbox"/> Assessment results approved by HUD (if marked, proceed to next question)</p> <p><input type="checkbox"/> Other (explain below)</p>
<p>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.)</p>

4. Status of Conversion Plan (select the statement that best describes the current status)

- Conversion Plan in development
- Conversion Plan submitted to HUD on: (DD/MM/YYYY)
- Conversion Plan approved by HUD on: (DD/MM/YYYY)
- 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)

- Units addressed in a pending or approved demolition application (date submitted or approved:)
- Units addressed in a pending or approved HOPE VI demolition application (date submitted or approved:)
- Units addressed in a pending or approved HOPE VI Revitalization Plan (date submitted or approved:)
- Requirements no longer applicable: vacancy rates are less than 10 percent
- Requirements no longer applicable: site now has less than 300 units
- Other: (describe below)

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

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

11. Homeownership Programs Administered by the PHA

[24 CFR Part 903.7 9 (k)]

A. Public Housing

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

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

PHA status. PHAs completing streamlined submissions may skip to component 11B.)

2. Activity Description

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

Public Housing Homeownership Activity Description (Complete one for each development affected)
1a. Development name: <i>Scattered Site</i> 1b. Development (project) number: <i>NY023-4</i>
2. Federal Program authority: <input type="checkbox"/> HOPE I <input checked="" 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 checked="" type="checkbox"/> Planned application
4. Date Homeownership Plan/Program approved, submitted, or planned for submission: <i>(15/01/2001)</i>
5. Number of units affected: 11 6. Coverage of action: (select one) <input type="checkbox"/> Part of the development <input checked="" type="checkbox"/> Total development

B. Section 8 Tenant Based Assistance

1. Yes No: Does the PHA plan to administer a Section 8 Homeownership program pursuant to Section 8(y) of the U.S.H.A. of 1937, as implemented by 24 CFR part 982 ? (If “No”, skip to component 12; if “yes”, describe each program using the table below (copy and complete questions for each program identified), unless the PHA is eligible to complete a streamlined submission due to high performer status. **High performing PHAs** may skip to component 12.)

2. Program Description: *N/A*

a. Size of Program

Yes No: Will the PHA limit the number of families participating in the section 8 homeownership option?

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

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

b. PHA-established eligibility criteria **N/A**

Yes No: Will the PHA's program have eligibility criteria for participation in its Section 8 Homeownership Option program in addition to HUD criteria?

If yes, list criteria below:

12. PHA Community Service and Self-sufficiency Programs

[24 CFR Part 903.7 9 (l)]

Exemptions from Component 12: High performing and small PHAs are not required to complete this component. Section 8-Only PHAs are not required to complete sub-component C.

A. PHA Coordination with the Welfare (TANF) Agency

1. Cooperative agreements:

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

If yes, what was the date that agreement was signed? 01/09/98

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

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

B. Services and programs offered to residents and participants

(1) General

a. Self-Sufficiency Policies

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

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

b. Economic and Social self-sufficiency programs

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

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

(2) Family Self Sufficiency program/s

a. Participation Description

Family Self Sufficiency (FSS) Participation		
Program	Required Number of Participants (start of FY 2005 Estimate)	Actual Number of Participants (As of: DD/MM/YY)
Public Housing		
Section 8		

- b. Yes No: If the PHA is not maintaining the minimum program size required by HUD, does the most recent FSS Action Plan address the steps the PHA plans to take to achieve at least the minimum program size?
If no, list steps the PHA will take below:

C. Welfare Benefit Reductions

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

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

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

Description of Community Service Requirements Implementation (ny023d01)

13. PHA Safety and Crime Prevention Measures

[24 CFR Part 903.7 9 (m)]

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

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

1. Describe the need for measures to ensure the safety of public housing residents

(select all that apply)

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

2. What information or data did the PHA use to determine the need for PHA actions to improve safety of residents (select all that apply).

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

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

- *Moxey Rigby*

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

1. List the crime prevention activities the PHA has undertaken or plans to undertake:

(select all that apply)

- Contracting with outside and/or resident organizations for the provision of crime- and/or drug-prevention activities

- Crime Prevention Through Environmental Design
- Activities targeted to at-risk youth, adults, or seniors
- Volunteer Resident Patrol/Block Watchers Program
- Other (describe below)
 - *Increased security*
 - *Installed closed circuit TV*
 - *Installed new entry and fire escape doors*
 - *Installed new card access system*
 - *Improved exterior lighting*

3. Which developments are most affected? (list below)
- *Moxey Rigby*

C. Coordination between PHA and the police

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

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

4. Which developments are most affected? (list below)
- *Moxey Ribgy*

D. Additional information as required by PHDEP/PHDEP Plan *Not Required*

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)]

Pet Ownership Policy - ny023f01

15. Civil Rights Certifications

[24 CFR Part 903.7 9 (o)]

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

16. Fiscal Audit

[24 CFR Part 903.7 9 (p)]

1. Yes No: Is the PHA required to have an audit conducted under section 5(h)(2) of the U.S. Housing Act of 1937 (42 U.S.C. 1437c(h))?
(If no, skip to component 17.) *1999 Audit*
2. Yes No: Was the most recent fiscal audit submitted to HUD?
3. Yes No: Were there any findings as the result of that audit?
4. Yes No: If there were any findings, do any remain unresolved? *N/A*
If yes, how many unresolved findings remain? _____
5. Yes No: Have responses to any unresolved findings been submitted to HUD? *N/A*
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) *N/A*
 - Not applicable
 - Private management
 - Development-based accounting
 - Comprehensive stock assessment

Other: (list below)

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

18. Other Information

[24 CFR Part 903.7 9 (r)]

A. Resident Advisory Board Recommendations

1. Yes No: Did the 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) *N/A*

Attached at Attachment (File name)

Provided below:

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

Considered comments, but determined that no changes to the PHA Plan were necessary.

The PHA changed portions of the PHA Plan in response to comments
List changes below:

Other: (list below)

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

1. Yes No: Does the PHA meet the exemption criteria provided section 2(b)(2) of the U.S. Housing Act of 1937? (If no, continue to question 2; if yes, skip to sub-component C.)

2. Yes No: Was the resident who serves on the PHA Board elected by the residents? (If yes, continue to question 3; if no, skip to sub-component C.)

3. Description of Resident Election Process

a. Nomination of candidates for place on the ballot: (select all that apply)

Candidates were nominated by resident and assisted family organizations

Candidates could be nominated by any adult recipient of PHA assistance

Self-nomination: Candidates registered with the PHA and requested a place on ballot

Other: (describe)

- *Residents must solicit 30 names on petition of PHA residents*
- *Must be 21 years of age or older*
- *Must be receiving PHA assistance*

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: *Nassau County*

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

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

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

- *Housing rehabilitation assistance for extremely low, low and moderate-income households. Activities will be undertaken consortium-wide to maintain existing housing stock.*
- *New construction of rental housing for extremely low-income and very low-income senior citizens.*

- *Provision of housing and support services for others with special needs. The Nassau County will continue to provide assistance to senior citizens and other special needs populations through a range of CDBG public service activities.*
- *The Housing Authority of the Village of Freeport as developed a not-for-profit corporation. The corporations' mission is to explore all avenues and to develop affordable housing for low-income and very low-income households within the PHA's jurisdiction.*

D. Other Information Required by HUD

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

Attachments

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

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: (MM/YYYY)

Original Annual Statement

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

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

Development Number/Name HA-Wide Activities	General Description of Major Work Categories	Development Account Number	Total Estimated Cost

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	
Description of Needed Physical Improvements or Management Improvements			Estimated Cost	Planned Start Date (HA Fiscal Year)
Total estimated cost over next 5 years				

Attachment: ny023a01
DE-CONCENTRATION AND INCOME TARGETING POLICY
FOR THE
HOUSING AUTHORITY OF THE VILLAGE OF FREEPORT
FREEPORT, NEW YORK

<p>Adopted by Board of Commissioners</p> <p>Resolution No.: _____</p> <p>Date of Adoption: _____</p>

DE-CONCENTRATION AND INCOME TARGETING POLICY
(of the Public Housing Admissions and Occupancy Policy)

Sub-Title A, Section 513 of the Quality Housing and Work Responsibility Act of 1998 (QHWRA), establishes two interrelated requirements for implementation by Public Housing Authorities: (1) Economic De-concentration of public housing developments and (2) Income Targeting to assure that families in the “extremely low” income category are proportionately represented in public housing and that pockets of poverty are reduced or eliminated. In order to implement these new requirements the PHA must promote these provisions as policies and revise their Admission and Occupancy policies and procedures to comply.

Therefore, the Housing Authority of the Village of Freeport, Freeport, NY (hereinafter referred to as PHA) hereby affirms its commitment to implementation of the two requirements by adopting the following policies:

A. Economic De-concentration:

Admission and Continued Occupancy Policies are revised to include the PHA’s policy of promoting economic de-concentration. Implementation of this program may require the PHA to determine the median income of residents in each development, determine the average income of residents in all developments, compute the Established Income Range (EIR), determine developments outside the EIR, and provide adequate explanations and/or policies as needed to promote economic de-concentration.

Implementation may include one or more of the following options:

- Skipping families on the waiting list based on income;
- Establishing preferences for working families;
- Establish preferences for families in job training programs;
- Establish preferences for families in education or training programs;
- Marketing campaign geared toward targeting income groups for specific developments;
- Additional supportive services;
- Additional amenities for all units;
- Flat rents for developments and unit sizes;
- Different tenant rent percentages per development;
- Different tenant rent percentages per bedroom size;
- Saturday and evening office hours;
- Security Deposit waivers;
- Revised transfer policies;
- Site-based waiting lists;
- Mass Media advertising/Public service announcements; and
- Giveaways.

B. Income Targeting

As public housing dwelling units become available for occupancy, responsible PHA employees will offer units to applicants on the waiting list. In accordance with the Quality Housing and Work Responsibility Act of 1998, the PHA encourages occupancy of its developments by a broad range of families with incomes up to eighty percent (80%) of the median income for the jurisdiction in which the PHA operates. Depending on the availability of applicants with proper demographics, at a minimum, 40% of all new admissions to public housing **on an annual basis** may be families with incomes at or below thirty percent (30%)(extremely low-income) of the area median income. The offer of assistance will be made without discrimination because of race, color, religion, sex, national origin, age, handicap or familial status.

In order to implement the income targeting program, the following policy is adopted:

- ▶ The PHA may select, based on date and time of application and preferences, two (2) families in the extremely low-income category and two (2) families from the lower/very low-income category alternately until the forty percent (40%) admission requirement of extremely low-income families is achieved (2 plus 2 policy).
- ▶ After the minimum level is reached, all selections may be made based solely on date, time and preferences. Any applicants passed over as a result of implementing this 2 plus 2 policy will retain their place on the waiting list and will be offered a unit in order of their placement on the waiting list.
- ▶ To the maximum extent possible, the offers will also be made to effect the PHA's policy of economic de-concentration.
- ▶ The PHA reserves the option, at any time, to reduce the targeting requirement for public housing by no more than ten percent (10%), if it increases the target figure for its Section 8 program from the required level of seventy-five percent (75%) of annual new admissions to no more than eighty-five percent (85%) of its annual new admissions. (Optional for PHAs with both Section 8 and Public Housing programs)

CAPITAL FUND PROGRAM TABLES START HERE

Attachment: ny023b01

Annual Statement /Performance and Evaluation Report	10/13/2004
Capital Funds Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary	

PHA Name: <p style="text-align: center;">FREEPORT HOUSING AUTHORITY</p>	Grant Type and Number: Capital Fund Program No: NY36PO2350105 Replacement Housing Factor Grant No:	Federal FY of Grant: <p style="text-align: center;">2005</p>
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<input checked="" type="checkbox"/> Original Annual Statement	<input type="checkbox"/> Reserved for Disasters/Emergencies	<input type="checkbox"/> Revised Annual Statement/Revision Number _____
<input type="checkbox"/> Performance and Evaluation Report for Program Year Ending _____	<input type="checkbox"/> Final Performance and Evaluation Report for Program Year Ending _____	

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total Non-Capital Funds				
2	1406 Operating Expenses	113,678.00			
3	1408 Management Improvements	50,000.00			
4	1410 Administration	1,900.00			
5	1411 Audit	0.00			
6	1415 Liquidated Damages	0.00			
7	1430 Fees and Costs	98,000.00			
8	1440 Site Acquisition	0.00			
9	1450 Site Improvement	0.00			
10	1460 Dwelling Structures	238,342.00			
11	1465.1 Dwelling Equipment-Nonexpendable	10,000.00			
12	1470 Nondwelling Structures	0.00			
13	1475 Nondwelling Equipment	11,000.00			
14	1485 Demolition	0.00			
15	1490 Replacement Reserve	0.00			
16	1492 Moving to Work Demonstration	0.00			
17	1495.1 Relocation Costs	0.00			
18	1499 Development Activities	0.00			
19	1501 Collateralization or Debt Service	0.00			
20	1502 Contingency (Limited to 8% of total grant)	45,471.00			
21	Amount of Annual Grant (sums of lines 2-20)	\$568,391.00			
22	Amount of line 21 Related to LBP Activities	0.00			
23	Amount of Line 21 Related to Section 504 Compliance	0.00			
24	Amount of Line 21 Related to Security - Soft Costs	0.00			
25	Amount of Line 21 Related to Security - Hard Costs	0.00			
26	Amount of Line 21 Related to Energy Conservation Measures	0.00			

Annual Statement/Performance and Evaluation Report

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

10/13/2004

Part II: Supporting Pages

PHA Name: FREEPORT HOUSING AUTHORITY		Grant Type and Number: Capital Fund Program No: NY36PO2350105 Replacement Housing Factor Grant No:				Federal FY of Grant: 2005		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
PHA-Wide	Operations	1406		113,678.00				
	Total 1406			113,678.00				
	Management Improvements:							
	Staff time	1408		50,000.00				
	Total 1408			50,000.00				
	Administration:							
	Printing and advertisements	1410		1,900.00				
	Total 1410			1,900.00				
	Fees and Costs:							
	A/E Services	1430		20,000.00				
	Advertisement/Printing	1430		48,000.00				
	Property Disposition Consultant	1430		30,000.00				
	Total 1430			98,000.00				
	Dwelling Structures:							
	New Kitchen Cabinets	1460		238,342.00				
	Total 1460			238,342.00				
	Dwelling Equipment:							
	Stoves	1465		5,000.00				
	Refrigerators	1465		5,000.00				
	Total 1465			10,000.00				
	Subtotal			\$511,920.00				

Attachment: ny023c01
Housing Authority of the Village of Freeport

Component 3, (6) Deconcentration and Income Mixing

a. Yes No: Does the PHA have any general occupancy (family) public housing developments covered by the deconcentration rule? If no, this section is complete. If yes, continue to the next question.
FHA only has one development of 100 units.

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

If yes, list these developments as follows:

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

Attachment: ny023d01
Community Service Requirements Implementation
Documentation of Compliance

- 1) Community Service Policy
- 2) Copy of Notice to all eligible or exempt residents
- 3) Copy of letter on Non-Compliance
- 4) PHA written process for verifying eligibility and informing residents of their status

**COMMUNITY SERVICE POLICY
FOR THE
HOUSING AUTHORITY OF THE VILLAGE OF
FREEPORT, NEW YORK**

Adopted by Board of Commissioners

Resolution No.: _____

Date of Adoption: _____

COMMUNITY SERVICE POLICY

Section 512 of the Quality Housing and Work Responsibility Act of 1998, which amends Section 12 of the Housing Act of 1937, established a new requirement for non-exempt residents of public housing to contribute eight (8) hours of community service each month or to participate in a self-sufficiency program for eight (8) hours each month. (24 CFR Subpart F §960.600-609) The Fiscal Year (FY) 2002 HUD/VA Appropriations Act temporarily suspended the community service and self-sufficiency requirement, except for residents of HOPE VI developments. The FY 2003 HUD/VA Appropriations Act reinstated this provision.

The Housing Authority of the Village of Freeport (hereinafter referred to as PHA) believes that the community service requirement should not be perceived by the resident to be a punitive or demeaning activity, but rather to be a rewarding activity that will benefit both the resident and the community. Community service offers public housing residents an opportunity to contribute to the communities that support them while gaining work experience.

In order to effectively implement this new requirement, the PHA establishes the following policy.

A. Community Service

The PHA will provide residents, identified as required to participate in community service, a variety of voluntary activities and locations where the activities can be performed. The PHA does not claim these activities to be appropriate for all participating tenants. Each tenant is responsible to determine the appropriateness of the voluntary service within guidelines in this policy. The activities may include, but are not limited to:

- Unpaid services at the PHA to help improve physical condition, including building clean-ups, neighborhood clean-ups, gardening and landscape work;
- Unpaid office related services in the development or Administrative Office;
- Assisting other residents through the resident organization;
- Unpaid services in local schools, day care centers, hospitals, nursing homes, youth or senior organizations, drug/alcohol treatment centers, recreation centers, etc.;
- Active participation in neighborhood group special projects;
- Assisting in after-school youth programs or literacy programs;

- Unpaid tutoring of elementary or high school age residents;
- Assisting in on-site computer training centers;
- Any other community service which includes the "performance of voluntary work or duties that are a public benefit, and that serve to improve the quality of life, enhance resident self-sufficiency, or increase resident self-responsibility in the community".

Note: Voluntary political activities are prohibited from being considered to meet the Community Service requirement.

B. Program Administration

The PHA may administer its own community service program in conjunction with the formation of cooperative relationships with other community based entities such as TANF, Social Services Agencies or other organizations which have as their goal, the improvement and advancement of disadvantaged families. The PHA may seek to contract its community service program out to a third-party.

The PHA may directly supervise community service activities and may develop and provide a directory of opportunities from which residents may select. When services are provided through partnering agencies, the PHA will confirm the resident's participation. Should contracting out the community service function be determined to be the most efficient method for the PHA to accomplish this requirement, the PHA will monitor the agency for contract compliance.

The PHA will assure that the service is not labor that would normally be performed by PHA employees responsible for the essential maintenance and property services.

In conjunction with its own or partnership program, the PHA will provide reasonable accommodations for accessibility to persons with disabilities.

C. Self-Sufficiency

The PHA will inform residents that participation in self-sufficiency activities for eight (8) hours each month can satisfy the community service requirement and encourage non-exempt residents to select such activities to satisfy the requirement. It should be noted that an individual may satisfy this requirement through a combination of community service and self-sufficiency activities totaling at least eight (8) hours per month. Such activities can include, but are not limited to:

- Apprenticeships and job readiness training;

- Voluntary substance abuse and mental health counseling and treatment;
- English proficiency classes, GED classes, adult education, college, technical schools or other formal education
- Household management, budget and credit counseling, or employment counseling
- Work placement program required by the TANF program
- Training to assist in operating a small business

The PHA may sponsor its own economic self-sufficiency program or coordinate with local social services, volunteer organizations and TANF agencies.

D. Geographic Location

The intent of this requirement is to have residents provide service to their own communities, either in the PHA's developments or in the broader community in which the PHA operates.

E. Exemptions

The following adult individuals, age 18 or older, of a household may claim an exemption from this requirement if the individual:

- Is age 62 years or older;
- Is blind or disabled (as defined under 216(i)(1) or 1614 of the Social Security Act (42 U.S.C. 416(i)(1); 1382c) and who certify that because of this disability they are unable to comply with the service provisions; or primary caretakers of such individuals;
- Is engaged in work activities (at least 30 hours per week) as defined in section 407(d) of the Social Security Act (42 U.S.C. 607(d)), specified below:
 1. Subsidized employment;
 2. Subsidized private-sector employment;
 3. Subsidized public-sector employment;
 4. Work experience (including work associated with the refurbishing of publicly assisted housing) only if sufficient private sector employment is not available;
 5. On-the-job-training;
 6. Job-search and job-readiness assistance;

7. Community service programs;
 8. Vocational educational training (not to exceed 12 months with respect to any individual);
 9. Job-skills training directly related to employment;
 10. Education directly related to employment in the case of a recipient who has not received a high school diploma or a certificate of high school equivalency;
 11. Satisfactory attendance at secondary school or in a course of study leading to a certificate of general equivalence, in the case of a recipient who has not completed secondary school or received such a certificate; and
 12. The provision of childcare services to an individual who is participating in a community service program.
- Meets the requirements for being exempt from having to engage in a work activity under the State program funded under part A of title IV of the Social Security Act (42 U.S.C. 601 et seq.) or under any other welfare program of the State in which the PHA is located, including a State-administered welfare-to-work program.
 - Is a member of a family receiving TANF assistance, benefits, or service under the State program funded under part A of title IV of the Social Security Act (42 U.S.C. 601 *et seq.*); or under any other welfare program of the State in which the PHA is located, including a State administered welfare-to-work program and has not been found by the State or other administering entity to be in non-compliance with such program.

F. Family Obligations

At the time of annual recertification, all public housing household members age eighteen (18) or older must:

- Receive a written description of the community service requirement, information on the process for verifying exemption status and the affect of noncompliance on their tenancy.
- Complete certification forms regarding their exempt or non-exempt status from the community service requirement and submit the executed forms within ten (10) days of their recertification appointment. If a household member claims an exemption from the requirement, he/she must submit written verification of the exemption or provide information for obtaining third-party verification along with their completed exemption form.

At the time of the annual recertification appointment, each non-exempt adult household member must present their completed monthly record and certification form (blank form to be provided by the PHA at time of certification or recertification) of activities performed over the past twelve (12) months.

If a family member is found to be noncompliant, either for failure to provide documentation of community service or for failure to perform community service, he/she and the head of household will sign an agreement with the PHA to make up the deficient hours over the next twelve (12)-month period. The entire household will be allowed to enter into such an agreement only once during the household's entire tenancy with the PHA.

If, during the twelve (12)-month period, a non-exempt person becomes exempt, it is his or her responsibility to report this to the PHA and to provide documentation with ten (10) calendar days of the occurrence. The community service requirement will remain in effect until such time as the exempt status is reported to the PHA and verified.

If, during the twelve (12)-month period, an exempt person becomes non-exempt, it is his or her responsibility to report this to the PHA within ten (10) calendar days of the change in status. He/she will be provided with appropriate forms and information for fulfilling the community service requirement. A household member who fails to report a change from exempt to non-exempt status will be required to enter into an agreement to complete an equivalent of eight (8) hours per month of community service for each month of unreported non-exempt status within ninety (90) days of discovery or the household's lease will be subject to termination.

Each household member must supply the PHA with accurate written information regarding exemption status. Failure to supply such information and/or misrepresentation of information is a serious violation of the terms of the lease and may result in termination of the lease.

G. PHA Obligations

To the greatest extent possible and practicable, the PHA will provide names and contacts at agencies that can provide opportunities for residents to fulfill their community service obligation.

The PHA will provide the household a written description of the community service requirement, the process for claiming status as an exempt person for PHA verification of such status in the notice of annual recertification. The PHA will provide the household with appropriate forms on which to claim exempt or

non-exempt status and for tracking the community service hours.

The PHA will make the final determination as to whether or not a household member is exempt and/or is compliance with the community service requirement.

As failure to complete the community service requirement constitutes noncompliance with the terms of the Lease, the family may use the PHA's Grievance Procedures if they disagree with the determination of exemption status or noncompliance.

The PHA will assure that procedures are in place and residents the opportunity to change status with respect to the community service requirement. Such changes include, but are not limited to:

- Going from unemployment to employment;
- Entering a self-sufficiency program;
- Entering a classroom educational program which exceeds eight (8) hours monthly.

All exemptions to the community service requirement will be verified and documented in the resident file. Required verifications may include, but not be limited to:

- Third-party verification of employment, enrollment in a training or education program, welfare to work program or other economic self sufficiency activities;
- Birth certificates to verify age 62 or older; or
- Third-party verification of disabilities preventing performance of community service.

Families who pay flat rents and live in public housing units or families who income was over income limits when they initially occupied such a public housing unit will not receive an automatic exception.

H. Cooperative Relationships with Welfare Agencies

The PHA may initiate cooperative relationships with local service agencies that provide assistance to its families to facilitate information exchange, expansion of community service/self-sufficiency program options and aid in the coordination of those activities.

I. Lease Requirements and Documentation

The PHA's lease has a twelve (12)-month term and is automatically renewable except for non-compliance with the community service requirement. The lease also provides for termination and eviction of the entire household for such non-compliance. The lease provisions will be implemented for current residents at the next regularly scheduled reexamination and for all new residents effective upon occupancy. The PHA will not renew or extend the lease if the household contains a non-exempt member who has failed to comply with the community service requirement.

Documentation of compliance or non-compliance will be placed in each resident file.

J. Noncompliance

A resident who was delinquent in community service hours under the lease in effect at the time of the suspension will still be obligated to fulfill his/her community service and self-sufficiency requirements for FY 2001, provided that the resident was given notice of noncompliance prior to the expiration of the lease in effect at that time.

A copy of that notice of noncompliance should be included with the written notice to residents about the reinstatement of the community service and self-sufficiency requirement. In order to obtain a lease renewal on the expiration of the current lease, residents must be in compliance both with any delinquent community service requirements and current requirements.

If the PHA determines that a resident who is not an "exempt individual" has not complied with the community service requirement, the PHA will notify the resident:

1. of the noncompliance;
2. that the determination is subject to the PHA's administrative grievance procedure;
3. that unless the resident enters into an agreement under paragraph 4. of this section, the lease of the family of which the non-compliant adult is a member may not be renewed. However, if the noncompliant adult moves from the unit, the lease may be renewed;
4. that before the expiration of the lease term, the PHA must offer the resident an opportunity to cure the noncompliance during the next twelve (12)-month period; such a cure includes a written agreement by the non-compliant adult and the head of household (as applicable) to complete as

many additional hours of community service or economic self-sufficiency activity needed to make up the total number of hours required over the twelve (12)-month term of the lease.

NOTICE TO RESIDENTS

COMMUNITY SERVICE REQUIREMENT

The Community Service requirement for residents of Public Housing has been reinstated.

All non-exempt residents of Public Housing, age 18 or older, are required to contribute eight (8) hours of community service each month or participate in a self-sufficiency program for eight (8) hours each month. This community service work is not a service for which the resident is paid; it is strictly volunteer work.

The Community Service Policy is available in the PHA office and describes in detail:

1. which household members may qualify for an exemption from the requirement to perform community service;
2. the types of activities that can be performed to meet the requirement;
3. the family's obligations;
4. the PHA's obligations; and
5. the penalties for non-compliance.

Resident Requirements:

1. If any household adult member is not elderly, disabled, or participating in a work activity for at least 30 hours per week you **must** contact your Community Service Contact listed below no later than:_____.
2. The PHA will inform you of all verifications needed.
3. The PHA will make the final determinations.

Community Service Contact:_____

Address of Contact:_____

Telephone:_____

Resident Community Service Compliance Certification

I/We have received a copy of and have read and understand the contents of the PHA's Community Service/Self Sufficiency Policy.

I/We understand that this is a requirement of the Quality Housing and Work Responsibility Act of 1998 and that if any non-exempt adult member of the household does not comply with this requirement, our lease will not be renewed and we may receive a 30-day notice of lease termination.

I/We have been given the opportunity to claim an exemption to the requirement for performance of community service and the following adult household members do not claim such exemption.

List name of each adult household member who does not claim an exemption below

I/We have been given the opportunity to claim an exemption and one or more adult household members will separately certify to his/her eligibility for an exemption.

List name of each adult household member who will separately certify to his/her eligibility for an exemption below

Signature Head of Household

Date

Signature Other Adult Household Member

Date

Signature Other Adult Household Member

Date

COMMUNITY SERVICE SELF-SUFFICIENCY PROGRAM EXEMPTION CERTIFICATION

I certify that I am eligible for an exemption from the Community Service requirement for the following reason:

- I am 62 or older.
 - I am blind or disabled, and as a result I cannot comply with the community service requirements. I am verifying my disability by:
 - My receipt of Supplemental Security Income (SSI) or Social Security Disability (SSDI) benefits for a disability recognized by the Social Security Administration (SSA).
 - My receipt of Transitional Assistance Disability benefits (have applied for SSI disability benefits and has been found by DHS to meet the SSI disability standards).
 - My receipt of Aid for Aged, Blind, or Disabled (AABD) benefits.
 - My receipt of worker's compensation for my disability with documentation provided by a medical provider.
 - I am providing documentation provided by a medical provider demonstrating that I meet the disability requirement.
 - I am providing documentation of medical assistance or interim SSDI benefits.
 - I am receiving no benefits but am able to submit documentation from a medical provider that my blindness or disability, as defined by the Social Security Act, prevents them from meeting the community or economic self-sufficiency requirement.
- I am the primary care provider of a (temporarily or permanently) blind or disabled person who meets the disability definition (as described above) and I am submitting the Community Service Exception Certification for verification;
- I am temporarily or chronically ill and am able to submit documentation from my medical provider.
- I am responsible for the full-time care to another household member due to that member's medical condition and am able to submit documentation from a medial provider.
- I am a student enrolled in a recognized school, training program, or school of higher education.
- I am working at least 30 hours per week (*Employment Verification form will serve*

**COMMUNITY SERVICE EXEMPTION
CARE PROVIDER VERIFICATION**

I, _____, certify that I am the primary care provider for
_____, a resident of the Housing Authority, who lives
at _____.
Address of Primary Care Provider

Signature Date

I certify that _____ is my primary care provider.

I certify that I receive:

- Supplemental Security Income (SSI) disability benefits;
- Social Security Disability Insurance (SSDI) disability benefits;
- Transitional Assistance Disability benefits (individual has applied for SSI disability benefits and has been found by DHS to meet the SSI disability standards);
- Aid for Aged, Blind, or Disabled (AABD) benefits; or
- No benefits but am able to submit documentation from a medical provider that my blindness or disability, as defined by the Social Security Act, prevents me from meeting the community or economic self-sufficiency requirement.
- Because of such disability, I cannot perform voluntary work or duties that are a public benefit, and serve to improve the quality of life, enhance resident self-sufficiency or increase resident self-responsibility in the community.

Signature of Resident Date

Address

NOTICE of NON-COMPLIANCE
COMMUNITY SERVICE/SELF-SUFFICIENCY REQUIREMENT

Name _____ Date _____

Address _____

Please be advised that the Housing Authority has not received verification or evidence of completion or exemption from the 96 hours of community service during the past 12 months for the following adult members of your household:

All non-exempt adult members of the household must complete the community service hours as a part of the annual recertification process. If you feel one or more of the above listed household members may be eligible for an exemption, please provide immediate verification to the management office.

If you or any household member were required to perform community service but failed to provide verification of the completion, then this action can be corrected by providing the verification information immediately to the management office. Complete and return the enclosed Exemption Certification with verification.

If you or any household member must fulfill the requirement and have failed to perform 8 hours of community service/self sufficiency per month, this action can be corrected by bringing your requirement current before the end of your lease year. You may be eligible to enter into an agreement to complete deficient service hours.

In the event service hours have not been completed for all non-exempt adult household members, your lease will not be renewed. If your lease is not renewed, you will be issued a 30-day notice to vacate. In accordance with community service policy, you may request a grievance for disputes arising under noncompliance with the community service requirements. You must file a grievance in the management office as stipulated in the PHA's Grievance Policy.

Your cooperation in this matter is needed to assist in preserving your housing opportunity.

Sincerely,

COMPLIANCE AGREEMENT

COMMUNITY SERVICE/SELF-SUFFICIENCY REQUIREMENT

A Compliance Agreement must be executed by each non-compliant household member. Each agreement must be signed by the Head of Household, the non-compliant household member and the PHA designee.

In accordance with the provisions of the PHA's Community Service/Self-Sufficiency policy:

- [] I/We, _____ (*name(s)*), agree to complete all deficient community service hours. The number of deficient service hours for the review year, _____ will be completed by _____.
(*insert #*)
- [] I/We, _____ (*name(s)*), further assure that all members of the family who are subject to the service requirement are currently complying with the service requirement.
- [] I/We, _____ (*name(s)*), understand that the PHA may issue a 30-day notice of lease termination if the service hour requirements of our lease are not brought into compliance by _____. I/We understand what types of volunteer work qualify as community service and what types of programs qualify for self-sufficiency participation.
- [] The non-compliant member of the household, _____, is no longer living in the unit and will duly be removed from the lease. I/We understand that a member of the household who is removed from the lease after failure to fulfill his/her community service/self-sufficiency requirements may not be added back to the lease in the future.

Signature Head of Household

Date

Signature Other Adult Household Member

Date

Signature Authorized PHA Representative

Date

Attachment: ny023e01
FREEPORT HOUSING AUTHORITY
Pet Policy

Section I.

- 1) Pet ownership: A tenant may own one or more common household pets or have one or more common household pets present in the dwelling unit of such tenant, subject to the following conditions:
 - a) Each Head of Household may own up to two pets. If one of the pets is a dog or cat, (or other four legged animal), the second pet must be contained in a cage or an aquarium for fish. Each bird or other animals, other than fish, shall be counted as one pet.
 - b) If the pet is a dog or cat, it must be neutered/spayed by the age of six (6) months, and cats must be declawed by the age of three (3) months. The evidence can be provided by a statement/bill from a veterinarian and/or staff of the humane society. The evidence must be provided prior to the execution of this agreement and/or within ten (10) days of the pet becoming of the age to be neutered/spayed or declawed. Tenant must provide waterproof litter boxes for cat waste, which must be kept inside the dwelling unit. Cardboard boxes are not acceptable and will not be approved. The Tenant shall not permit refuse from litter boxes to accumulate nor to become unsightly or unsanitary. Also, the weight of a cat cannot exceed 10 pounds (fully grown) and a dog may not exceed twenty (20) pounds in weight (fully grown). All other four legged animals are limited to ten (10) pounds (fully grown).
 - c) If the pet is a bird, it shall be housed in a birdcage and cannot be let out of the cage at any time.
 - d) If the pet is a fish, the aquarium must be twenty gallons or less, and the container must be placed in a safe location in the unit. The Tenant is limited to one container for the fish; however, there is no limit on the number of fish that can be maintained in the container as long as the container is maintained in a safe and non-hazardous manner.
 - e) If the pet is a cat or dog, it must have received rabies and distemper inoculations or boosters, applicable. Evidence of inoculations can be provided by a statement/bill from veterinarian or staff of the humane society and must be provided before the execution of this agreement.
 - f) All pets must be housed within the unit and no facilities can be constructed outside of the unit for any pet. No animal shall be permitted to be loose and if the pet is taken outside it must be taken outside on a leash and kept off other Tenant lawns. Also, all pets must wear collars with identification at all times. Pets without a collar will be

picked-up immediately and transported to the Humane Society or other appropriate facility.

- g) All authorized pet(s) must be under the control of an adult. An unleashed pet, or one tied to a fixed object, is not considered to be under the control of an adult. Pets which are unleashed, or leashed and unattended, on HA property may be impounded and taken to the Humane Society. It shall be the responsibility of the Tenant to reclaim the pet at the expense of the Tenant. Also, if a member of the HA staff has to take a pet to the Humane Society the Tenant will be charged \$50.00 to cover the expense of taking the pet(s) to the Humane Society.
- h) Pet(s) may not be left unattended for more than twenty-four consecutive hours. If it is reported to HA staff that a pet(s) has been left unattended for more than twenty-four (24) consecutive hour period, HA staff may enter the unit and remove the pet and transfer the pet to the humane society. Any expense to remove and reclaim the pet from any facility will be the responsibility of the Tenant. In the case of an emergency, the HA will work with the resident to allow more than twenty-four (24) hours for the resident to make accommodations for the pet.
- i) Pet(s), as applicable, must be weighed by a veterinarian or staff of the humane society. A statement containing the weight of the pet must be provided to the HA prior to the execution of this agreement and upon request be the HA.

Note:

Any pet that is not fully grown will be weighed every six months. Also, any pet that exceeds the weight limit at any time during occupancy will not be an eligible pet and must be removed from FHA property.

- 2) Responsible Pet Ownership: Each pet must be maintained responsibly and in accordance with this pet ownership lease addendum and in accordance with all applicable ordinances, state and not local public health, animal control, and animal anti-cruelty laws and regulations governing pet ownership. Any waste generated by a pet must be properly and promptly disposed of by the tenant to avoid any unpleasant and unsanitary odor from being in the unit.
- 3) Prohibited Animals: Animals or breeds of animals that are considered by the HA to be vicious and/or intimidating will not be allowed. Some examples of animals that have a reputation of a vicious nature are: reptiles, rottweiler, doberman pinscher, pit bulldog, and/or any animal that displays vicious behavior. This determination will be made by a HA representative prior to the execution of this addendum.

- 4) Pet(s) shall not disturb, interfere or diminish the peaceful enjoyment of other tenants. The terms, “disturb, interfere or diminish” shall include but not be limited to barking, howling, chirping, biting, scratching and other like activities. This includes any pets who make noise continuously and/or incessantly for a period of 10 minutes or intermittently for one-half hour or more and therefore disturbs any person any time of the day or night. The Housing Manager will terminate this authorization if a pet disturbs other tenants under this section of the lease addendum. The Tenant will be given one week to make other arrangements for the care of the pet or the dwelling lease will be terminated.
- 5) If the animal should become destructive, create a nuisance, represent a threat to the safety and security of other persons, or create a problem in the area of cleanliness and sanitation, the Housing Manager will notify the tenant, in writing, that the animal must be removed from the Public Housing Development, within ten (10) days of the date of the notice from the HA. The Tenant may request a hearing, which will be handled according to the HA’s established grievance procedure. The pet may remain with the tenant during the hearing process unless the HA has determined that the pet may be a danger or threat to the safety and security of other persons. If this determination has been made by the HA, the pet must be immediately removed from the unit upon receipt of the notice from the HA.
- 6) The Tenant is solely responsible for cleaning up the waste of the pet within the dwelling and on the premises of the public housing development. If the pet is taken outside it must be on a leash at all times. If there is any visible waste by the pet it must be disposed of in a plastic bag, security tied and placed in the garbage receptacle for their unit. If the HA staff is required to clean any waste left by a pet, the Tenant will be charged \$25.00 for the removal of the waste.
- 7) The Tenant shall have pets restrained so that maintenance can be performed in the apartment. The Tenant shall, whenever an inspection or maintenance is scheduled, either be at home or shall have all animals restrained or caged. If a maintenance person enters an apartment where an animal is not restrained, maintenance shall not be performed, and the Tenant shall be charged a fee of \$25.00. If this same situation again occurs, the pet shall be removed from the premises. Pets that are not caged or properly restrained may be impounded by animal control officers or by HA staff and taken to the local Humane Society. It shall be the responsibility of the Tenant to reclaim the pet at the expense of the Tenant. Also, if a member of the HA staff takes a pet to the Humane Society the Tenant will be charged additional \$50.00 to cover the expense of taking the pet(s) to the Humane Society. The housing authority shall not be responsible if any animal escapes from the resident due to maintenance, inspections or other activities of the landlord.
- 8) Pets may not be bred or used for any commercial purposes.

**Section II. SCHEDULE OF ANNUAL FEES AND INITIAL DEPOSIT
FEE AND DEPOSIT SCHEDULE**

(An annual Fee and Deposit is required for each pet)

Type of Pet	Fee	Deposit
Dog	\$150	\$250
Cat	\$100	\$150
Fish Aquarium	\$50	\$100
Fish Bowl (Requires no power and no larger than two gallons)	\$0	\$25
Caged Pets	\$100	\$150

Note: The above schedule is applicable for each pet; therefore, if a tenant has more than one pet he or she must pay the applicable annual fee and deposit for each pet.

The entire annual fee and deposit (subject to the exception listed below) must be paid prior to the execution of the lease addendum. No pet shall be allowed in the unit prior to the completion of the terms of this pet policy.

The annual fee shall be paid at the time of reexamination each year and all proof of inoculations and other requirements shall be made available to the HA at such time. The Annual Fee is not reimbursable. The deposit made shall be utilized to offset damages caused by the pet and/or tenant. Any balance, if any, from the deposit will be refunded to the tenant. **THERE SHALL BE NO REFUND OF THE ANNUAL FEE.**

It shall be a serious violation of the lease for any tenant to have a pet without proper approval and without having complied with the terms of this policy. Such violation shall be considered to be a violation of Paragraph E (4) (14) of the lease (a serious violation) and the HA will issue a termination notice. The tenant will be entitled to a grievance hearing in accordance with the provisions of Paragraph 5 of this Pet Policy or the Grievance Procedure, as applicable.

RESIDENT ACKNOWLEDGMENT

After reading and/or having read this lease addendum I, _____ Agree to the following: I agree to abide by the requirements outlined in this lease addendum for pet ownership and to keep the pet(s) in accordance with this lease addendum.

I agree and understand that I am liable for any damage or injury whatsoever caused by pet(s) and shall pay the landlord or applicable party for any damages or injury caused by the pet(s). I also realize that I should obtain liability insurance in the amount of \$10,000 property and \$50,000 personal liability for pet ownership and that paying for the insurance is my responsibility. Such insurance shall be in force at all times, with proof of same provided at each recertification or at such other times as the Freeport Housing Authority may request.

I agree to accept full responsibility and will indemnify and hold harmless the landlord for any claims by or injuries to third parties or their property caused by my pet(s).

I agree to pay a non-refundable annual fee of \$_____ to cover some of the additional operating cost incurred by the HA. I also understand that this fee is due and payable prior to the execution of this lease addendum and each twelve (12) months thereafter.

I agree to pay a refundable pet deposit of \$_____ to the FHA. The Annual Fee and Initial Deposit must be paid prior to the execution of this lease addendum. I also agree to have photographs taken by the Freeport Housing Authority for FHA files. The pet deposit may be used by the Landlord at the termination of the lease toward payment of any rent or toward payment of any other costs made necessary because of Tenant's occupancy of the premises. Otherwise, the pet deposit, or any balance remaining after final inspection, will be returned to the Tenant after the premises are vacated and all keys have been returned.

I AGREE AND UNDERSTAND THAT ALL INFORMATION CONCERNING MY PET(S) MUST BE UPDATED ANNUALLY AND PROVIDED TO THE HA AT THE ANNUAL REEXAMINATION. ANNUAL FEES SHALL BE PAYABLE IN FULL TWELVE MONTHS FROM THE APPROVAL DATE.

I AGREE AND UNDERSTAND THAT VIOLATING THIS LEASE ADDENDUM MAY RESULT IN THE REMOVAL OF THE PET(S) FROM THE PROPERTY OF THE HA AND/OR EVICTION. I, ALSO UNDERSTAND THAT I MAY NOT BE ALLOWED TO OWN ANY TYPE OF PET IN THE FUTURE WHILE BEING AN OCCUPANT OF THE HA.

I ALSO UNDERSTAND THAT I MUST OBTAIN PRIOR APPROVAL FROM THE HA BEFORE MAKING A CHANGE OF A PET FOR WHICH THIS POLICY WAS APPROVED OR ADDING A SECOND PET. ALSO, A PICTURE MAY BE TAKEN BY THE HA STAFF OF THE PET(S) FOR DOCUMENTATION.

Head of Household Signature

Date

Housing Authority Representative Signature

Date

Attachment: ny023f01
Housing Authority of the of the Village of Freeport
Progress in Meeting 5-Year Plan Goals (2000-2004)

The Housing Authority of the Village of Freeport has been successful in achieving its mission and 5 year plan goals during the period FY 2000-2004.

To ensure compliance with the Public Housing Reform Act of 1998 and the HUD Rental Housing Integrity Improvement Program (RHIP), every policy was reviewed and updated as needed. Most significant was the update to the Admissions and Occupancy Policy and the Section 8 Administrative Plan.

Concerning ensuring equal opportunity outreach efforts have been made by making renewed partnerships with community groups and medical facilities.

Attachment: ny023g01
Housing Authority of the Village of Freeport

A. Substantial Deviation from the 5-Year Plan:

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

B. Significant Amendment or Modification to the Annual Plan:

- Any increase or decrease over 50% in the funds projected in the Financial Resource Statement and/or the Capital Fund Program Annual Statement;
- Any change being submitted to HUD that requires a separate notification to residents, such as changes in the Hope VI, Public Housing Conversion, Demolition/Disposition, Designated Housing or Public Housing Homeownership programs; and
- Any change in policy or operation that is inconsistent with the applicable Consolidated Plan.

Capital Fund Program Five-Year Action Plan

Part I: Summary

10/13/2004

Attachment: [ny023h01](#)

HA Name: Freeport Housing Authority				■ Original	Revision No. ____
Development Number/Name/HA Wide	Year 1 2005	Work Statement for Year 2 FFY Grant: 2006 PHA FY: 2006	Work Statement for Year 3 FFY Grant: 2007 PHA FY: 2007	Work Statement for Year 4 FFY Grant: 2008 PHA FY: 2008	Work Statement for Year 5 FFY Grant: 2009 PHA FY: 2009
PHA-Wide	Annual	568,391.00	568,391.00	568,391.00	568,391.00
NY-038	Statement				
CFP Funds Listed for		\$568,391.00	\$568,391.00	\$568,391.00	\$568,391.00
5-Year Planning					
Replacement Housing					
Factor Funds					

Capital Funds Program Five Year Action Plan
Part II: Supporting Pages--Work Activities

Activities for Year 1 2005	Activities for Year: 2 FFY Grant: 2006 PHA FY: 2006			Activities for Year: 2 FFY Grant: 2006 PHA FY: 2006		
	Development Name/Number	Major Work Categories	Estimated Cost	Development Name/Number	Major Work Categories	Estimated Cost
See	PHA Wide	Dwelling Structures:		PHA Wide	Operations:	
		New Kitchen cabinets	239,519.72		Operations	113,500.00
					Subtotal	113,500.00
		Total	239,519.72		Management Improvements:	
					Staff Time	50,000.00
					Subtotal	50,000.00
					Administration:	
					Printing & Advertisement	1,900.00
					Subtotal	1,900.00
					Fees & Costs:	
					A/E Services	20,000.00
					Modernization Consultant Fee	48,000.00
					Property Disposition Consultant	30,000.00
					Subtotal	98,000.00
					Non-Dwelling Equipment:	
					Computer (Hardware)	10,000.00
					Tools	10,000.00
					Subtotal	20,000.00
					Contingency:	45,471.28
					Subtotal	45,471.28
					Total HA Wide	328,871.28
		Subtotal	239,519.72		Total of Estimated Cost for 2006	\$568,391.00

CAPITAL FUND PROGRAM TABLES START HERE

Attachment: ny023i01

Annual Statement /Performance and Evaluation Report					10/10/2004
Capital Funds Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary					
PHA Name: FREEPORT HOUSING AUTHORITY		Grant Type and Number: Capital Fund Program No: NY36PO2350103 Replacement Housing Factor Grant No:		Federal FY of Grant: 2003	
<input type="checkbox"/> Original Annual Statement	<input type="checkbox"/> Reserved for Disasters/Emergencies	<input type="checkbox"/> Revised Annual Statement/Revision Number _____			
<input checked="" type="checkbox"/> Performance and Evaluation Report for Program Year Ending 6/30/04	<input type="checkbox"/> Final Performance and Evaluation Report for Program Year Ending _____				
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total Non-Capital Funds				
2	1406 Operating Expenses	97,000.00		97,000.00	47,000.00
3	1408 Management Improvements	50,000.00		50,000.00	50,000.00
4	1410 Administration	1,900.00		0.00	0.00
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	98,000.00		30,000.00	0.00
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	223,827.00		0.00	0.00
11	1465.1 Dwelling Equipment-Nonexpendable				
12	1470 Nondwelling Structures				
13	1475 Nondwelling Equipment	15,000.00		0.00	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	1501 Collateralization or Debt Service				
20	1502 Contingency				
21	Amount of Annual Grant (sums of lines 2-20)	\$485,727.00		\$177,000.00	\$97,000.00
22	Amount of line 21 Related to LBP Activities				
23	Amount of Line 21 Related to Section 504 Compliance				
24	Amount of Line 21 Related to Security - Soft Costs				
25	Amount of Line 21 Related to Security - Hard Costs				
26	Amount of Line 21 Related to Energy Conservation Measures				

Annual Statement/Performance and Evaluation Report

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

10/10/2004

Part II: Supporting Pages

PHA Name:		Grant Type and Number:					Federal FY of Grant:	
FREEPORT HOUSING AUTHORITY		Capital Fund Program No: NY36PO2350103					2003	
		Replacement Housing Factor Grant No:						
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
PHA-Wide	Operations	1406		97,000.00		97,000.00	47,000.00	
	Total			97,000.00		97,000.00	47,000.00	48% Completed
	Management Improvements:	1408						
	Staff time			50,000.00		50,000.00	50,000.00	
	Total			50,000.00		50,000.00	50,000.00	100% Completed
	Administration:							
	Printing & Advertisement	1410		1,900.00		0.00	0.00	
	Total			1,900.00		0.00	0.00	0% Completed
	Fees & Costs:							
	A/E Services	1430		20,000.00		0.00	0.00	
	Modernization Consultant Fee	1430		48,000.00		0.00	0.00	
	Property Disposition Consultant	1430		30,000.00		30,000.00	0.00	
	Total			98,000.00		30,000.00	0.00	0% Completed
	Dwelling Structures:							
NY23-1	New Roof	1460		223,827.00		0.00	0.00	
	Total			223,827.00		0.00	0.00	0% Completed
PHA-Wide	Non-Dwelling Equipment:							
	Computer	1475		10,000.00		0.00	0.00	
	Tools	1475		5,000.00		0.00	0.00	
	Total			15,000.00		0.00	0.00	0% Completed
	2003 GRAND TOTAL			\$485,727.00		\$177,000.00	\$97,000.00	20% Completed

CAPITAL FUND PROGRAM TABLES START HERE

Attachment: ny023j01

Annual Statement /Performance and Evaluation Report	10/10/2004
Capital Funds Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary	

PHA Name: <p style="text-align: center;">FREEPORT HOUSING AUTHORITY</p>	Grant Type and Number: Capital Fund Program No: <p style="text-align: center;">NY36PO2350203</p> Replacement Housing Factor Grant No:	Federal FY of Grant: <p style="text-align: center;">2003</p>
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- Original Annual Statement
 Reserved for Disasters/Emergencies
 Revised Annual Statement/Revision Number _____
 Performance and Evaluation Report for Program Year Ending **6/30/04**
 Final Performance and Evaluation Report for Program Year Ending _____

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total Non-Capital Funds				
2	1406 Operating Expenses	20,500.00		0.00	0.00
3	1408 Management Improvements				
4	1410 Administration				
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs				
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	82,090.00		48,000.00	0.00
11	1465.1 Dwelling Equipment-Nonexpendable				
12	1470 Nondwelling Structures				
13	1475 Nondwelling Equipment				
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1499 Development Activities				
19	1501 Collateralization or Debt Service				
20	1502 Contingency				
21	Amount of Annual Grant (sums of lines 2-20)	\$102,590.00		\$48,000.00	\$0.00
22	Amount of line 21 Related to LBP Activities				
23	Amount of Line 21 Related to Section 504 Compliance				
24	Amount of Line 21 Related to Security - Soft Costs				
25	Amount of Line 21 Related to Security - Hard Costs				
26	Amount of Line 21 Related to Energy Conservation Measures				

CAPITAL FUND PROGRAM TABLES START HERE

Attachment: ny023k01

Annual Statement /Performance and Evaluation Report	10/10/2004
Capital Funds Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary	

PHA Name: <p style="text-align: center;">FREPORT HOUSING AUTHORITY</p>	Grant Type and Number: Capital Fund Program No: NY36PO2350102 Replacement Housing Factor Grant No:	Federal FY of Grant: 2002
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Original Annual Statement
 Reserved for Disasters/Emergencies
 Revised Annual Statement/Revision Number _____
 Performance and Evaluation Report for Program Year Ending **6/30/04**
 Final Performance and Evaluation Report for Program Year Ending _____

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total Non-Capital Funds				
2	1406 Operating Expenses	100,000.00	125,000.00	125,000.00	100,000.00
3	1408 Management Improvements	50,000.00	50,000.00	50,000.00	50,000.00
4	1410 Administration	1,900.00	0.00	0.00	0.00
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	110,000.00	110,000.00	110,000.00	25,500.00
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	348,731.00	315,631.00	315,631.00	169,485.08
11	1465.1 Dwelling Equipment-Nonexpendable				
12	1470 Nondwelling Structures				
13	1475 Nondwelling Equipment	15,000.00	25,000.00	25,000.00	13,793.63
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1499 Development Activities				
19	1501 Collateralization or Debt Service				
20	1502 Contingency				
21	Amount of Annual Grant (sums of lines 2-20)	\$625,631.00	\$625,631.00	\$625,631.00	\$358,778.71
22	Amount of line 21 Related to LBP Activities				
23	Amount of Line 21 Related to Section 504 Compliance				
24	Amount of Line 21 Related to Security - Soft Costs				
25	Amount of Line 21 Related to Security - Hard Costs				
26	Amount of Line 21 Related to Energy Conservation Measures				

Annual Statement/Performance and Evaluation Report

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

10/10/2004

Part II: Supporting Pages

PHA Name: FREEPORT HOUSING AUTHORITY		Grant Type and Number: Capital Fund Program No: NY36PO2350102 Replacement Housing Factor Grant No:						Federal FY of Grant: 2002	
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work	
				Original	Revised	Funds Obligated	Funds Expended		
PHA-Wide	Operations	1406		100,000.00	125,000.00	125,000.00	100,000.00		
	Total			100,000.00	125,000.00	125,000.00	100,000.00	80% Completed	
	Management Improvements:	1408							
	Staff time			50,000.00	50,000.00	50,000.00	50,000.00		
	Total			50,000.00	50,000.00	50,000.00	50,000.00	100% Completed	
	Administration:								
	Printing & Advertisement	1410		1,900.00	0.00	0.00	0.00		
	Total			1,900.00	0.00	0.00	0.00		
	Fees & Costs:								
	A/E Services	1430		32,000.00	32,000.00	32,000.00	0.00		
	Modernization Consultant Fee	1430		48,000.00	48,000.00	48,000.00	8,000.00		
	Property Disposition Consultant	1430		30,000.00	30,000.00	30,000.00	17,500.00		
	Total			110,000.00	110,000.00	110,000.00	25,500.00	23% Completed	
	Dwelling Structures:								
NY23-2/3	New Kitchen Cabinets	1460	150	118,176.00	51,051.79	51,051.79	0.00		
NY23-2/3	New Hallway Floor Tiles	1460	19590	30,555.00	65,652.58	65,652.58	64,652.58		
NY23-4	Houses Renovation	1460	3	150,000.00	84,942.50	84,942.50	84,942.50		
NY23-5	Elevator Renovation	1460	2	50,000.00	0.00	0.00	0.00		
	Apartment Painting	1460		0.00	48,000.00	48,000.00	0.00		
	New Floor Finish in Apartments	1460		0.00	46,094.13	46,094.13	0.00		
	New Door Locks	1460		0.00	19,890.00	19,890.00	19,890.00		
	Total			348,731.00	315,631.00	315,631.00	169,485.08	54% Completed	
PHA-Wide	Non-Dwelling Equipment:								
	Computer	1475		10,000.00	10,000.00	10,000.00	8,080.50		
	Tools	1475		5,000.00	15,000.00	15,000.00	5,713.13		
	Total			15,000.00	25,000.00	25,000.00	13,793.63		
	GRAND TOTAL			\$625,631.00	\$625,631.00	\$625,631.00	\$358,778.71	57% Completed	

CAPITAL FUND PROGRAM TABLES START HERE

Attachment: ny023101

Annual Statement /Performance and Evaluation Report	10/12/2004
Capital Funds Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary	

PHA Name: <p style="text-align: center;">FREEPORT HOUSING AUTHORITY</p>	Grant Type and Number: Capital Fund Program No: NY36PO2350101 Replacement Housing Factor Grant No:	Federal FY of Grant: 2001
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Original Annual Statement
 Reserved for Disasters/Emergencies
 Revised Annual Statement/Revision Number _____
 Performance and Evaluation Report for Program Year Ending **6/30/04**
 Final Performance and Evaluation Report for Program Year Ending _____

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total Non-Capital Funds				
2	1406 Operating Expenses	120,000.00	120,000.00	120,000.00	120,000.00
3	1408 Management Improvements	50,000.00	50,000.00	50,000.00	50,000.00
4	1410 Administration	1,900.00	753.97	753.97	753.97
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	80,000.00	75,935.50	75,935.50	55,685.50
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	339,404.00	339,404.00	339,404.00	320,934.50
11	1465.1 Dwelling Equipment-Nonexpendable	10,487.00	15,697.53	15,697.53	5,314.00
12	1470 Nondwelling Structures				
13	1475 Nondwelling Equipment	53,985.00	53,985.00	53,985.00	53,985.00
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1499 Development Activities				
19	1501 Collateralization or Debt Service				
20	1502 Contingency				
21	Amount of Annual Grant (sums of lines 2-20)	\$655,776.00	\$655,776.00	\$655,776.00	\$606,672.97
22	Amount of line 21 Related to LBP Activities				
23	Amount of Line 21 Related to Section 504 Compliance				
24	Amount of Line 21 Related to Security - Soft Costs				
25	Amount of Line 21 Related to Security - Hard Costs				
26	Amount of Line 21 Related to Energy Conservation Measures				

Annual Statement/Performance and Evaluation Report

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

10/12/2004

Part II: Supporting Pages

PHA Name: FREEMPORT HOUSING AUTHORITY		Grant Type and Number: Capital Fund Program No: NY36PO2350101 Replacement Housing Factor Grant No:						Federal FY of Grant: 2001	
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work	
				Original	Revised	Funds Obligated	Funds Expended		
PHA-Wide	Operations	1406		120,000.00	120,000.00	120,000.00	120,000.00		
	Total			120,000.00	120,000.00	120,000.00	120,000.00	100.00% Completed	
	Management Improvements:	1408							
	Staff time			50,000.00	50,000.00	50,000.00	50,000.00		
	Total			50,000.00	50,000.00	50,000.00	50,000.00	100.00% Completed	
	Administration:								
	Printing & Advertisement	1410		1,900.00	753.97	753.97	753.97	100.00% Completed	
	Total			1,900.00	753.97	753.97	753.97		
	Fees & Costs:								
	A/E Services	1430		32,000.00	34,985.00	34,985.00	14,735.00	42.12% Completed	
	Modernization Coordinator	1430		48,000.00	40,950.50	40,950.50	40,950.50	100.00% Completed	
	Total			80,000.00	75,935.50	75,935.50	55,685.50	73.33% Completed	
	Dwelling Structures:								
NY23-1	Renovate Basement at 17 Buffalo	1460		0.00	0.00	0.00	0.00		
NY23-1	Office Renovation	1460		1,088.00	1,088.00	1,088.00	1,088.00	100.00% Completed	
PHA-Wide	Boiler Work	1460		20,075.52	20,075.52	20,075.52	20,075.52	100.00% Completed	
NY23-4	Scattered Site Renovation	1460		82,674.48	82,674.48	82,674.48	82,674.48	100.00% Completed	
NY23-1	New Kitchen Cabinets	1460		190,780.40	190,780.40	190,780.40	174,060.90	91.24% Completed	
NY23-5	New Doors	1460		12,350.00	12,350.00	12,350.00	12,350.00	100.00% Completed	
PHA-Wide	Digital Recorders	1460		30,685.60	30,685.60	30,685.60	30,685.60	100.00% Completed	
PHA-Wide	Signs	1460		1,750.00	1,750.00	1,750.00	0.00	0.00% Completed	
	Total			339,404.00	339,404.00	339,404.00	320,934.50	94.56% Completed	

CAPITAL FUND PROGRAM TABLES START HERE

Attachment: ny023m01

10/10/2004

Annual Statement /Performance and Evaluation Report Capital Funds Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary						
PHA Name: FREPORT HOUSING AUTHORITY		Grant Type and Number: Capital Fund Program No: NY36PO2350100 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 Number _____ <input checked="" type="checkbox"/> Performance and Evaluation Report for Program Year Ending 6/30/04 <input type="checkbox"/> Final Performance and Evaluation Report for Program Year Ending _____						
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost		
		Original	Revised	Obligated	Expended	
1	Total Non-Capital Funds					
2	1406 Operating Expenses	127,299.00	127,299.00	127,299.00	127,299.00	
3	1408 Management Improvements	50,000.00	51,412.00	51,412.00	51,412.00	
4	1410 Administration	1,900.00	108.50	108.50	108.50	
5	1411 Audit					
6	1415 Liquidated Damages					
7	1430 Fees and Costs	80,000.00	79,158.00	79,158.00	79,158.00	
8	1440 Site Acquisition					
9	1450 Site Improvement	0.00	51,473.21	51,473.21	51,473.21	
10	1460 Dwelling Structures	303,241.00	302,677.79	302,677.79	302,677.79	
11	1465.1 Dwelling Equipment-Nonexpendable	28,000.00	29,221.50	29,221.50	29,221.50	
12	1470 Nondwelling Structures					
13	1475 Nondwelling Equipment					
14	1485 Demolition					
15	1490 Replacement Reserve					
16	1492 Moving to Work Demonstration					
17	1495.1 Relocation Costs					
18	1499 Development Activities					
19	1501 Collateralization or Debt Service					
20	1502 Contingency	50,910.00	0.00	0.00	0.00	
21	Amount of Annual Grant (sums of lines 2-20)	\$641,350.00	\$641,350.00	\$641,350.00	\$641,350.00	
22	Amount of line 21 Related to LBP Activities					
23	Amount of Line 21 Related to Section 504 Compliance					
24	Amount of Line 21 Related to Security - Soft Costs					
25	Amount of Line 21 Related to Security - Hard Costs					
26	Amount of Line 21 Related to Energy Conservation Measures					

**Annual Statement/Performance and Evaluation Report
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)**

10/10/2004

Part II: Supporting Pages

PHA Name: FREPORT HOUSING AUTHORITY		Grant Type and Number: Capital Fund Program No: NY36PO2350100 Replacement Housing Factor Grant No:						Federal FY of Grant: 2000
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
PHA-Wide	Operations	1406		127,299.00	127,299.00	127,299.00	127,299.00	
	Subtotal			127,299.00	127,299.00	127,299.00	127,299.00	100.0% Completed
	Management Improvements:	1408						
	Staff time	1408		50,000.00	50,000.00	50,000.00	50,000.00	
	Software			0.00	1,412.00	1,412.00	1,412.00	
	Subtotal			50,000.00	51,412.00	51,412.00	51,412.00	100.0% Completed
	Administration:							
	Printing & Advertisement	1410		1,900.00	108.50	108.50	108.50	
	Subtotal			1,900.00	108.50	108.50	108.50	100.0% Completed
	Fees & Costs:							
	A/E Services	1430		32,000.00	21,770.00	21,770.00	21,770.00	
	Modernization Coordinator	1430		48,000.00	52,108.00	52,108.00	52,108.00	
	Dataserve	1430		0.00	5,280.00	5,280.00	5,280.00	
	Subtotal			80,000.00	79,158.00	79,158.00	79,158.00	100.0% Completed
	Site Improvement: New Sidewalk	1450		0.00	51,473.21	51,473.21	51,473.21	
	Subtotal			0.00	51,473.21	51,473.21	51,473.21	100.0% Completed
	Dwelling Structures:							
	New windows and screens	1460	600	163,845.00	42,915.16	42,915.16	42,915.16	
	Roof repairs	1460	13000 sf	19,000.00	9,411.63	9,411.63	9,411.63	
	Install new TV antenna	1460	6	6,000.00	6,000.00	6,000.00	6,000.00	
	Sidewalk	1460		41,541.00	0.00	0.00	0.00	
	New kitchen cabinets	1460	130	72,855.00	244,351.00	244,351.00	244,351.00	
	Subtotal			303,241.00	302,677.79	302,677.79	302,677.79	100.0% Completed
	Dwelling Equipment:							
	Stoves	1465	35	10,500.00	11,721.50	11,721.50	11,721.50	
	Refrigerators	1465	35	17,500.00	17,500.00	17,500.00	17,500.00	
	Subtotal			28,000.00	29,221.50	29,221.50	29,221.50	100.0% Completed
PHA-Wide	Contingency	1502		50,910.00	0.00	0.00	0.00	
	Subtotal			50,910.00	0.00	0.00	0.00	
	2000 GRAND TOTAL			\$641,350.00	\$641,350.00	\$641,350.00	\$641,350.00	100.0% Completed

