

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

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# PHA Plans

5 Year Plan for Fiscal Years 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 Pawtucket

**PHA Number:** RI002

**PHA Fiscal Year Beginning: (mm/yyyy)** 04/2005

**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 2000 - 2004**  
[24 CFR Part 903.5]

**A. Mission**

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

- 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)  
***Mission Statement: The mission of the Pawtucket Housing Authority is to provide safe, decent and affordable housing and to establish programs that will educate, enhance and empower the lives of all the people in the community we serve.***

**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: ***With the ever-increasing rental market in the Pawtucket community, the PHA is committed to maintaining affordable housing within the city for eligible families.***
  - Reduce public housing vacancies: **Vacancies have been reduced from 84 on September 30, 1999 to 25 on September 30, 2004 a reduction of 70%**
  - Leverage private or other public funds to create additional housing opportunities:
  - Acquire or build units or developments
  - Other (list below)
- PHA Goal: Improve the quality of assisted housing  
Objectives:
- Improve public housing management: (PHAS score) 87

- Improve voucher management: (SEMAP score) 93 *Continue to maintain High Performer status for the fourth year.*
  - Increase customer satisfaction: *We have and are still in the process of updated our community space for the residents to enjoy.*
  - Concentrate on efforts to improve specific management functions: (list; e.g., public housing finance; voucher unit inspections)
  - Renovate or modernize public housing units: **Renovations and modernization is completed annually through the Capital Fund Program.**
  - Demolish or dispose of obsolete public housing:
  - Provide replacement public housing:
  - Provide replacement vouchers:
  - Other: (list below)
- PHA Goal: Increase assisted housing choices
- Objectives:
- Provide voucher mobility counseling:
  - Conduct outreach efforts to potential voucher landlords  
*Continue to market program to entice new landlords to participate in the Section 8 Program.*
  - Increase voucher payment standards  
*The PHA has increased it's payment standards between 95% and 98% of the FMR's published on October 1, 2004.*
  - Implement voucher homeownership program:  
*The PHA has implemented a Section 8 Homeownership Program. We have one participant who closed in October, 2003.*
  - Implement public housing or other homeownership programs:
  - Implement public housing site-based waiting lists:
  - Convert public housing to vouchers:
  - Other: (list below)

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

- PHA Goal: Provide an improved living environment
- Objectives:
- Implement measures to deconcentrate poverty by bringing higher income public housing households into lower income developments: *Flat rents have been established for newly employed residents; waiting list preference established for working individuals*
  - Implement measures to promote income mixing in public housing by assuring access for lower income families into higher income developments:

- Implement public housing security improvements: *Additional security cameras have been added and improved at our developments and recording devices have been updated and enhanced as well.*
- Designate developments or buildings for particular resident groups (elderly, persons with disabilities)
- Other: (list below)

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

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

Objectives:

- Increase the number and percentage of employed persons in assisted families:
- Provide or attract supportive services to improve assistance recipients' employability:
- Provide or attract supportive services to increase independence for the elderly or families with disabilities.
- Other: (list below)

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

PHA Goal: Ensure equal opportunity and affirmatively further fair housing

Objectives:

- Undertake affirmative measures to ensure access to assisted housing regardless of race, color, religion national origin, sex, familial status, and disability: *The PHA advertised in the local minority papers.*
- Undertake affirmative measures to provide a suitable living environment for families living in assisted housing, regardless of race, color, religion national origin, sex, familial status, and disability:
- Undertake affirmative measures to ensure accessible housing to persons with all varieties of disabilities regardless of unit size required:
- Other: (list below)

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

**Increase security equipment at family and elderly developments**

**Annual PHA Plan**  
**PHA Fiscal Year 2000**  
[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.

*Maximize the number of housing units by employing effective maintenance and management policies to minimize the number of public housing units off-line, reducing turn-over time for vacated public housing units, and by reducing the time needed to renovate public housing units.*

*Increase the number of affordable housing units by applying for additional Section 8 units, should they become available and by pursuing housing resources other than public housing or Section 8 tenant-based assistance.*

*Target available assistance to families at or above 30% of AMI by adopting rent policies to support and encourage work.*

*Target available assistance to families with disabilities by applying for special-purpose vouchers to families with disabilities, should they become available, and to affirmatively market to local non-profit agencies that assist families with disabilities.*

## 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
- FY 2000 Capital Fund Program Annual Statement
- Most recent board-approved operating budget (Required Attachment for PHAs that are troubled or at risk of being designated troubled ONLY)

#### Optional Attachments:

- PHA Management Organizational Chart
- FY 2000 Capital Fund Program 5 Year Action Plan
- Public Housing Drug Elimination Program (PHDEP) Plan

- Comments of Resident Advisory Board or Boards (must be attached if not included in PHA Plan text)
- Other (List below, providing each attachment name)

### Supporting Documents Available for Review

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

<b>List of Supporting Documents Available for Review</b>		
<b>Applicable &amp; On Display</b>	<b>Supporting Document</b>	<b>Applicable Plan Component</b>
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
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	Annual Plan: Rent Determination

<b>List of Supporting Documents Available for Review</b>		
<b>Applicable &amp; On Display</b>	<b>Supporting Document</b>	<b>Applicable Plan Component</b>
	A & O Policy	
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
N/A	Most recent CIAP Budget/Progress Report (HUD 52825) for any active CIAP grant	Annual Plan: Capital Needs
X	Most recent, approved 5 Year Action Plan for the Capital Fund/Comprehensive Grant Program, if not included as an attachment (provided at PHA option)	Annual Plan: Capital Needs
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
N/A	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
X	Approved or submitted assessments of reasonable revitalization of public housing and approved or submitted conversion plans prepared pursuant to section 202 of the 1996 HUD Appropriations Act	Annual Plan: Conversion of Public Housing
X	Approved or submitted public housing homeownership programs/plans	Annual Plan: Homeownership
X	Policies governing any Section 8 Homeownership program <input checked="" 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
X	FSS Action Plan/s for public housing and/or Section 8	Annual Plan: Community Service & Self-Sufficiency
X	Most recent self-sufficiency (ED/SS, TOP or ROSS or other resident services grant) grant program reports	Annual Plan: Community Service & Self-Sufficiency

<b>List of Supporting Documents Available for Review</b>		
<b>Applicable &amp; On Display</b>	<b>Supporting Document</b>	<b>Applicable Plan Component</b>
X	The most recent Public Housing Drug Elimination Program (PHEDEP) semi-annual performance report for any open grant and most recently submitted PHDEP application (PHDEP Plan)	Annual Plan: Safety and Crime Prevention
X	The most recent fiscal year audit of the PHA conducted under section 5(h)(2) of the U.S. Housing Act of 1937 (42 U.S.C. 1437c(h)), the results of that audit and the PHA's response to any findings	Annual Plan: Annual Audit
	Troubled PHAs: MOA/Recovery Plan	Troubled PHAs
	Other supporting documents (optional) (list individually; use as many lines as necessary)	(specify as needed)

## **1. Statement of Housing Needs**

[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.

<b>Housing Needs of Families in the Jurisdiction by Family Type</b>							
<b>Family Type</b>	<b>Overall</b>	<b>Afford-ability</b>	<b>Supply</b>	<b>Quality</b>	<b>Access-ibility</b>	<b>Size</b>	<b>Loca-tion</b>
Income <= 30% of AMI	2,581	5	3	5	2	5	3
Income >30% but <=50% of AMI	5,042	5	3	5	2	4	3
Income >50% but <80% of AMI	773	4	4	4	2	4	3
Elderly	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Families with Disabilities	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Race/Ethnicity	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Race/Ethnicity	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Race/Ethnicity	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Race/Ethnicity	N/A	N/A	N/A	N/A	N/A	N/A	N/A

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

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

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

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

Housing Needs of Families on the Waiting List			
Waiting list type: (select one)			
<input type="checkbox"/>	Section 8 tenant-based assistance		
<input checked="" type="checkbox"/>	Public Housing		
<input type="checkbox"/>	Combined Section 8 and Public Housing		
<input type="checkbox"/>	Public Housing Site-Based or sub-jurisdictional waiting list (optional)		
If used, identify which development/subjurisdiction:			
	# of families	% of total families	Annual Turnover
Waiting list total	444		180
Extremely low income <=30% AMI	376	85%	
Very low income (>30% but <=50% AMI)	57	13%	
Low income (>50% but <80% AMI)	11	2%	
Families with children			
Elderly families			
Families with Disabilities			

Housing Needs of Families on the Waiting List			
Race/ethnicity-White	340	76%	
Race/ethnicity-Black	87	20%	
Race/ethnicity-American Indian	10	2%	
Race/ethnicity-Asian	7	2%	
Characteristics by Bedroom Size (Public Housing Only)			
0 BR	147	33%	
1 BR	152	34%	
2 BR	59	13%	
3 BR	69	16%	
4 BR	10	2%	
5 BR	7	2%	
Is the waiting list closed (select one)? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes If yes: <b>Family: 1,2 3,4 bedroom list and Eld/Dis- 1 bedroom list is closed</b> How long has it been closed (#months)? Does the PHA expect to reopen the list in the PHA Plan year? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes Does the PHA permit specific categories of families onto the waiting list, even if generally closed? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			

Housing Needs of Families on the Waiting List			
Waiting list type: (select one) <input checked="" type="checkbox"/> <b>Section 8 tenant-based assistance</b> <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	306		50
Extremely low income <=30% AMI	263	86%	
Very low income (>30% but <=50%)	43	14%	

<b>Housing Needs of Families on the Waiting List</b>			
AMI)			
Low income (>50% but <80% AMI)	0	0%	
Families with children	282	92	
Elderly families	14	.05%	
Families with Disabilities	36	1%	
Race/ethnicity-White	220	72%	
Race/ethnicity-Black	80	26%	
Race/ethnicity-American Indian	4	1%	
Race/ethnicity-Asian	2	1%	
Characteristics by Bedroom Size (Public Housing Only)			
0 & 1BR			
2 BR			
3 BR			
4 BR			
5 BR			
5+ BR			
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)? 41			
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.

**(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)  
**The Rhode Island Executive Directors Association for Housing, or which we are an active member, and the Pawtucket Housing Authority has helped fund housing testing programs throughout the State of Rhode Island. Once**

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

**(2) Reasons for Selecting Strategies**

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

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

**2. Statement of Financial Resources**

[24 CFR Part 903.7 9 (b)]

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

public housing capital improvements, public housing safety/security, public housing supportive services, Section 8 tenant-based assistance, Section 8 supportive services or other.

<b>Financial Resources: Planned Sources and Uses</b>		
<b>Sources</b>	<b>Planned \$</b>	<b>Planned Uses</b>
<b>1. Federal Grants (FY 2000 grants)</b>		
a) Public Housing Operating Fund	2,600,000	Public Housing Operations
b) Public Housing Capital Fund	1,750,000	PH Capital Improvements
c) HOPE VI Revitalization		
d) HOPE VI Demolition		
e) Annual Contributions for Section 8 Tenant-Based Assistance	4,113,760	
f) Public Housing Drug Elimination Program (including any Technical Assistance funds)		
g) Resident Opportunity and Self-Sufficiency Grants	150,000	Tenant Services
h) Community Development Block Grant		
i) HOME		
Other Federal Grants (list below)		
<b>2. Prior Year Federal Grants (unobligated funds only) (list below)</b>		
Capital Fund Program	1,500,000	PH Capital Improvements
<b>3. Public Housing Dwelling Rental Income</b>	<b>3,000,000</b>	PH Operations
<b>4. Other income (list below)</b>		
Interest	10,000	PH Operations
<b>Other</b>	<b>50,000</b>	PH Operations
<b>4. Non-federal sources (list below)</b>		
Dept of Elderly Affairs	20,000	Security
<b>Total resources</b>	<b>13,193,760</b>	

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

[24 CFR Part 903.7 9 (c)]

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

2.  Yes  No: Are any or all of the PHA's site-based waiting lists new for the upcoming year (that is, they are not part of a previously-HUD-approved site based waiting list plan)?  
If yes, how many lists?

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

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

- PHA main administrative office
- All PHA development management offices
- Management offices at developments with site-based waiting lists
- At the development to which they would like to apply
- Other (list below)

### **(3) Assignment**

a. How many vacant unit choices are applicants ordinarily given before they fall to the bottom of or are removed from the waiting list? (select one)

- One
- Two
- Three or More

b.  Yes  No: Is this policy consistent across all waiting list types?

c. If answer to b is no, list variations for any other than the primary public housing waiting list/s for the PHA:

### **(4) Admissions Preferences**

a. Income targeting:

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

b. Transfer policies:

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

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

***Resident can choose to transfer to another development after one year of occupancy. They may be put on the transfer list.***

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)

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

3. If the PHA will employ admissions preferences, please prioritize by placing a “1” in the space that represents your first priority, a “2” in the box representing your second

priority, and so on. If you give equal weight to one or more of these choices (either through an absolute hierarchy or through a point system), place the same number next to each. That means you can use "1" more than once, "2" more than once, etc.

Date and Time

Former Federal preferences:

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

Other preferences (select all that apply)

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

**(6) Deconcentration and Income Mixing**

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

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

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

- Adoption of site based waiting lists  
If selected, list targeted developments below:
- Employing waiting list "skipping" to achieve deconcentration of poverty or income mixing goals at targeted developments  
If selected, list targeted developments below:
- Employing new admission preferences at targeted developments  
If selected, list targeted developments below:
- Other (list policies and developments targeted below)

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

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

- Additional affirmative marketing
- Actions to improve the marketability of certain developments
- Adoption or adjustment of ceiling rents for certain developments
- Adoption of rent incentives to encourage deconcentration of poverty and income-mixing
- Other (list below)

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)

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

- Criminal or drug-related activity  
 Other (describe below)

***The PHA provides the following information about a prospective tenant to a prospective landlord:***

***1) Names of previous landlords***

- 2) *Addresses of previous landlords*
- 3) *Telephone numbers of previous landlords*

**(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:

**(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)

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

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

Date and Time

Former Federal preferences

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

Other preferences (select all that apply)

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

- Those previously enrolled in educational, training, or upward mobility programs
- Victims of reprisals or hate crimes
- Other preference(s) (list below)

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

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

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

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

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

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

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

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

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

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

- Through published notices
- Other (list below)

*Notices are sent to social service agencies that target special admissions for Special Purpose Section 8 Assistance Programs.*

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

[24 CFR Part 903.7 9 (d)]

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

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

**(1) Income Based Rent Policies**

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

a. Use of discretionary policies: (select one)

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

---or---

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

b. Minimum Rent

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

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

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

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

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

1.  Yes  No: Does the PHA plan to charge rents at a fixed amount or percentage less than 30% of adjusted income?

2. If yes to above, list the amounts or percentages charged and the circumstances under which these will be used below:

***Flat rent options for residents***

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

- For the earned income of a previously unemployed household member
- For increases in earned income

- Fixed amount (other than general rent-setting policy)  
If yes, state amount/s and circumstances below:
- Fixed percentage (other than general rent-setting policy)  
If yes, state percentage/s and circumstances below:
- For household heads
- For other family members
- For transportation expenses
- For the non-reimbursed medical expenses of non-disabled or non-elderly families
- Other (describe below)

e. Ceiling rents

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

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

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

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

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

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

f. Rent re-determinations:

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

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

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

**(2) Flat Rents**

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

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

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

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

**(1) Payment Standards**

Describe the voucher payment standards and policies.

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

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

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

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

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

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

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

- Annually
- Other (list below)

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

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

***PHA will use the rent reasonableness survey to determine how and at what level the Payment Standards will be set.***

## **(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:

**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.)

<b>Program Name</b>	<b>Units or Families Served at Year Beginning</b>	<b>Expected Turnover</b>
Public Housing	1049	180
Section 8 Vouchers	721	50
Section 8 Certificates		
Section 8 Mod Rehab		
Special Purpose Section 8 Certificates/Vouchers (list individually)		
Public Housing Drug Elimination Program (PHDEP)	N/A	
Other Federal Programs(list individually)		

**C. Management and Maintenance Policies**

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

- (1) Public Housing Maintenance and Management: (list below)  
***Public Housing Maintenance Plan***  
***Admissions and Occupancy Policy***
- (2) Section 8 Management: (list below)

## *Section 8 Administrative Plan*

### **6. PHA Grievance Procedures**

[24 CFR Part 903.7 9 (f)]

Exemptions from component 6: High performing PHAs are not required to complete component 6. Section 8-Only PHAs are exempt from sub-component 6A.

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

1.  Yes  No: Has the PHA established any written grievance procedures in addition to federal requirements found at 24 CFR Part 966, Subpart B, for residents of public housing?

If yes, list additions to federal requirements below:

2. Which PHA office should residents or applicants to public housing contact to initiate the PHA grievance process? (select all that apply)
- PHA main administrative office
  - PHA development management offices
  - Other (list below)

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

1.  Yes  No: Has the PHA established informal review procedures for applicants to the Section 8 tenant-based assistance program and informal hearing procedures for families assisted by the Section 8 tenant-based assistance program in addition to federal requirements found at 24 CFR 982?

If yes, list additions to federal requirements below:

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

### **7. Capital Improvement Needs**

[24 CFR Part 903.7 9 (g)]

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

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

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

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

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

Select one:

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

-or-

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

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

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

a.  Yes  No: Is the PHA providing an optional 5-Year Action Plan for the Capital Fund? (if no, skip to sub-component 7B)

b. If yes to question a, select one:

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

-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:
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.)

<b>Demolition/Disposition Activity Description</b>
1a. Development name:
1b. Development (project) number:
2. Activity type: Demolition <input type="checkbox"/>
Disposition <input type="checkbox"/>

<p>3. Application status (select one)</p> <p>Approved <input type="checkbox"/></p> <p>Submitted, pending approval <input type="checkbox"/></p> <p>Planned application <input type="checkbox"/></p>
<p>4. Date application approved, submitted, or planned for submission: <u>(DD/MM/YY)</u></p>
<p>5. Number of units affected:</p> <p>6. Coverage of action (select one)</p> <p><input type="checkbox"/> Part of the development</p> <p><input type="checkbox"/> Total development</p>
<p>7. Timeline for activity:</p> <p>a. Actual or projected start date of activity:</p> <p>b. Projected end date of activity:</p>

**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.

<b>Designation of Public Housing Activity Description</b>	
1a. Development name:	John F. Fogarty Manor/Robert Burns Manor
1b. Development (project) number:	RI430002004 RI43P002007
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 checked="" type="checkbox"/> Submitted, pending approval <input type="checkbox"/> Planned application <input type="checkbox"/>
4. Date this designation approved, submitted, or planned for submission:	<b><u>Original: 5/5/97</u></b> <b><u>Extension: 5/5/04</u></b>
5. If approved, will this designation constitute a (select one)	<input type="checkbox"/> New Designation Plan <input checked="" type="checkbox"/> Revision of a previously-approved Designation Plan?
6. Number of units affected:	342
7. Coverage of action (select one)	<input type="checkbox"/> Part of the development <input checked="" type="checkbox"/> Total development

## **10. Conversion of Public Housing to Tenant-Based Assistance**

[24 CFR Part 903.7 9 (j)]

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

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

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

#### 2. Activity Description

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

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

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

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

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

# 11. Homeownership Programs Administered by the PHA

[24 CFR Part 903.7 9 (k)]

## A. Public Housing

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

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

### 2. Activity Description

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

<b>Public Housing Homeownership Activity Description (Complete one for each development affected)</b>
1a. Development name: Scattered Site Development 1b. Development (project) number: RI43P00216
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 checked="" type="checkbox"/> Approved; included in the PHA’s Homeownership Plan/Program <input type="checkbox"/> Submitted, pending approval <input type="checkbox"/> Planned application
4. Date Homeownership Plan/Program approved, submitted, or planned for submission: (02/23/2002)
5. Number of units affected: 20 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:

#### a. Size of Program

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

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

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

#### b. PHA-established eligibility criteria

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

If yes, list criteria below:

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

[24 CFR Part 903.7 9 (1)]

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? DD/MM/YY

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

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

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

**(1) General**

a. Self-Sufficiency Policies

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

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

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. )

<b>Services and Programs</b>				
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)
<i>Homeownership Program</i>	<i>20 per class</i>	<i>Mailings to residents</i>	<i>All PHA Offices</i>	<i>Both</i>
Computer Training	20 per class	Mailing to residents	All PHA Offices	Both
YWCA – Job Readiness	20 per class	Mailing to residents	All PHA Offices	Both
Pawtucket Credit Union – Money Matters program	10 per class	Mailing to residents	All PHA Offices	Both
Reading Buddies – reading program for children/adults	10 per program	Mailing to residents	All PHA Offices	Public Housing

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

a. Participation Description

<b>Family Self Sufficiency (FSS) Participation</b>		
Program	Required Number of Participants (start of FY 2000 Estimate)	Actual Number of Participants (As of: 10/31/04)
Public Housing	10	15
Section 8	34	47

- 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**

Community Service Requirement Component #12

In accordance to section 512 of the Quality Housing and Work Responsibility Act the Authority amended it lease agreement effective April 1, 2000 to include the community service requirement for all nonexempt public housing residents. The Authority will hire two additional resident service coordinators to coordinate the community service requirement, and help direct residents to the various educational, job training and community service programs currently offered at the Authority or in the local area. If the number of residents required to perform community service is to large for the two resident service coordinators to administer, the Authority will enter into a contract with and outside vendor to help administer the program. If a for-profit third party contractor is used the Authority will ensure that the administrators overseeing the program do not have a financial interest in the entity where community service participants are assigned. The Authority will also ensure that the conditions under which the work is to be performed are not otherwise hazardous. The Authority will ensure that the work to be performed is not labor that would be performed by the Authority's employees responsible for essential maintenance and property services, or that the work is otherwise unacceptable.

**13. PHA Safety and Crime Prevention Measures**

[24 CFR Part 903.7 9 (m)]

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

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

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

(select all that apply)

- High incidence of violent and/or drug-related crime in some or all of the PHA's developments
- High incidence of violent and/or drug-related crime in the areas surrounding or adjacent to the PHA's developments
- Residents fearful for their safety and/or the safety of their children

- Observed lower-level crime, vandalism and/or graffiti
- People on waiting list unwilling to move into one or more developments due to perceived and/or actual levels of violent and/or drug-related crime
- Other (describe below)

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

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

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

*560 Prospect Street, Galego Court*

**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)

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

*560 Prospect Street, Galego Court*

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

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

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

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

*560 Prospect Street, Galego Court*

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

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

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

**14. RESERVED FOR PET POLICY**

[24 CFR Part 903.7 9 (n)]

**PET POLICY  
THE HOUSING AUTHORITY OF THE  
CITY OF PAWTUCKET, RHODE ISLAND**

Date of Adoption: 6/18/02  
Resolution # 851

Tenant: \_\_\_\_\_ Telephone No. \_\_\_\_\_

Development \_\_\_\_\_ Apartment No. \_\_\_\_\_

Description of Pet: \_\_\_\_\_

City License No. \_\_\_\_\_ Vet Vac. Date: \_\_\_\_\_

I agree to accept full responsibility for my pet as follows:

#### **CERTIFICATE OF APPROVAL**

1. My pet will be approved in writing by the Housing Authority prior to moving upon Authority grounds and I will keep my written approval available. Once a year on the anniversary date of my leasing, I will update my pet registration. I understand that I must renew my approval with the Authority yearly.
2. That certificate of annual licensing by the City of Pawtucket will be provided to the Authority prior to approval of the pet and I shall file all renewals annually.
3. I agree to abide by all local animal regulations.
4. My pet is neutered or spayed and I will provide written veterinary certificate of such to the Authority prior to bringing the animal on to the premises. If the animal is too young, I agree to have it neutered or spayed when it reaches the age of six months.
5. I will provide written proof of yearly distemper boosters and rabies boosters. I understand that my pet is required to be inoculated in accordance with State and local laws and will provide written proof of such inoculations.

#### **DEPOSIT**

1. I agree to pay a pet deposit upon leasing or if after leasing I receive approval from the Authority to bring a pet into my apartment. This deposit shall be paid in advance. The initial deposit will be \$50.00 and an additional \$10.00 will be paid monthly until a total of \$200 or one month's rent. In no event will the deposit be more than one month's rent. This deposit pertains to dogs and cats only.

Pet deposit will be used toward repairs, cleaning, treatment for flea infestation or replacement of any part of apartment or premises damaged by my pet and/or removal, care and nurture of the animal. This deposit is refundable if no damage is done as certified by the Authority, after either my pet or I vacate the premises.

#### **PET RESTRAINT**

1. Cats and dogs will be kept inside the apartment and not allowed to roam freely. They must be walked on a leash at all times and away from the apartment grounds. **They must be on a leash when entering or exiting the building.**
2. Pets shall not use common areas inside of building, **including community rooms**, except for the purpose of passing to the outside of the buildings affected in an elevator designated for pets and transported to and from apartment to the outdoors in pet carrying cases (except for seeing eye dogs).
3. A litter box will be provided, by me, if my pet is a cat and sanitary conditions must be maintained at all times. Litter box must be cleaned twice a week and disposed of in the area designated by the Authority.
4. The litter box must be kept in the apartment at all times.

5. Fecal droppings outside of the building, if any, shall be picked up and disposed of immediately in a sanitary manner by pet owner in the area designated by the Authority. Failure to remove pet waste as required will result in a \$5.00 charge for removal.
6. I shall take adequate precautions to eliminate any pet odor within the apartment and to maintain the apartment in a sanitary condition at all times.
7. I shall take adequate precautions to prevent pets from disturbing neighbors (e.g. barking, howling, loud meowing, scratching, biting, etc...)
8. I shall not alter the apartments, patios or any other portion of the premises to create an enclosure for an animal.
9. No pet may be kept in violation of humane or health laws.
10. The types of animals allowed as pets shall be limited as follows:
  - a. One (1) dog not exceeding 20 pounds in weight or 12 inches in height at maturity.
  - b. One (1) cat.
  - c. No more than two (2) small caged birds (i.e. canaries, parakeets, finches, etc...). Birds must be confined to a cage at all times.
  - d. Aquariums may be no larger than 20 gallons and must be sealed against leakage.
  - e. One (1) gerbil, or one (1) hamster, or one (1) rabbit.
  - f. No birds of prey or other dangerous species may be kept.
1. Only one pet per tenant at any one time.
2. Tenants are prohibited from feeding stray animals and birds. Feeding of strays or birds shall constitute having a pet without permission from the Housing Authority.
3. Visitors or guests are prohibited from bringing any unauthorized pets on to the grounds or into a unit.

**PET CARE**

4. In case of an emergency or illness, the following person will remove my pet from my apartment and be responsible for its care.

Name \_\_\_\_\_

Address \_\_\_\_\_

Relation to Resident \_\_\_\_\_ Telephone # \_\_\_\_\_

Signature of Responsible Person \_\_\_\_\_

The pet will be removed by the Pawtucket Housing Authority if:

- a. The pet becomes a threat to health and safety.
  - b. The owner becomes incapacitated and the responsible person named is not available.
1. I understand that if for any reason, my per is left unattended for 24 hours or more, the Authority has the right to enter the apartment to remove the pet and transfer it to the proper authorities,

e.g. the local animal shelter, or humane society. I will hold harmless the Authority in such circumstances.

2. If the Authority determines that a pet is a nuisance or threat to the safety or security of person or property, it may request the removal of the pet from the premises. A copy of the Housing Authority's Grievance Procedures will be made available to you upon request.
3. The Authority will be entering your apartment within sixty (60) days or at all reasonable times thereafter after you have signed this agreement to see that the pet and the apartment are being cared for. Should we find any damages to your apartment resulting from the pet, you will be responsible for the damages.
4. I agree to abide by all Rules and Policies regarding pets established by the Authority now and in the future.
5. Tenants who violate these rules are subject to:
  - a. Being required to get rid of the pet within ten (10) days of notice by the Housing Authority and/or
  - b. Eviction
1. I agree to move to a designated area of the complex, for those residents with pets, should the Housing Authority deem this necessary. The Authority will assist in the moving effort.
2. I agree to renew this Agreement at the expiration date and at the expiration of the City License.
3. Pet rule violation procedures:

A. Notice of Pet Rule Violation:

If the Authority determines on the basis of objective facts supported by written statements, that a pet owner has violated a rule governing the owning or keeping of pets; the Authority may serve a written notice of pet rule violation on the pet owner. The notice must:

- (1) Contain a brief statement of the factual basis for the determination and the pet rule or rules alleged to be violated.
- (2) State the pet owner has 10 days from the effective date of service of the notice to correct the violation (including, in appropriate circumstances, removal of the pet) or to make a written request for a meeting to discuss the violation.
- (3) State that the pet owner is entitled to be accompanied by another person of his/her choice at the meeting.
- (4) State that the pet owner's failure to correct the violation, to request a meeting, or to appear at a requested meeting may result in initiation of procedures to terminate the pet owner's tenancy.

A. Pet Rule Violation Meeting

If the pet Owner makes a timely request for a meeting to discuss alleged pet rule violation, the Authority shall establish a mutually agreeable time and place for the meeting but not later than 15 days from the effective day of service of the notice of pet rule violation. At the meeting, the pet owner and the

Authority shall discuss any alleged pet rule violation and attempt to correct it. The Authority may, as a result of the meeting, give the pet owner additional time to correct the violation.

B. Notice for Pet Removal

If the pet owner and Authority are unable to resolve the pet rule violation at the pet rule violation meeting, or if the Authority determines that the pet owner has failed to correct the pet rule violation within any additional time provided, the Authority may serve a written notice on the pet owner to remove the pet. This notice must contain a brief statement of the factual basis for the determination and the pet rule or rules that have been violated and state the effective date of service of the notice of pet removal and state that failure to remove the pet may result in initiation of procedures to terminate the pet owner's tenancy.

C. Initiation of procedures to remove a pet or terminate the pet owner's tenancy.

The Authority may not initiate procedures to terminate a pet owner's tenancy based on a pet rule violation, unless; the pet owner has failed to remove the pet or correct a pet rule violation within the applicable time period specified in this section and the pet rule violation is sufficient to begin procedures to terminate the pet owner's tenancy under the terms of the lease and applicable regulations. The Authority may initiate procedures to remove a pet under Section 22 at any time, in accordance with the provisions of applicable State or local law.

## **15. Civil Rights Certifications**

[24 CFR Part 903.7 9 (o)]

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

## **16. Fiscal Audit**

[24 CFR Part 903.7 9 (p)]

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

## **17. PHA Asset Management**

[24 CFR Part 903.7 9 (q)]

Exemptions from component 17: Section 8 Only PHAs are not required to complete this component. High performing and small PHAs are not required to complete this component.

1.  Yes  No: Is the PHA engaging in any activities that will contribute to the long-term asset management of its public housing stock, including how the Agency will plan for long-term operating, capital investment, rehabilitation, modernization, disposition, and other needs that have **not** been addressed elsewhere in this PHA Plan?
  
2. What types of asset management activities will the PHA undertake? (select all that apply)
  - Not applicable
  - Private management
  - Development-based accounting
  - Comprehensive stock assessment
  - Other: (list below)
    - Installing sprinkler systems in elderly/disabled developments over a 5 year period with debt services being financed through Capital Funds*
  
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)
  - Attached at Attachment (File name)
  - Provided below:

*Due to recent fires at elderly developments, the elderly are excited to see the PHA is addressing the fire alarms and sprinklers*

*Burns Manor residents would like to see their porch doors replaced. This is scheduled in the 5<sup>th</sup> year of the plan.*

*560 Prospect would like more parking – the PHA advised the residents this is being addressed next year but not through the CFP funds*

3. In what manner did the PHA address those comments? (Select all that apply)
- Considered comments, but determined that no changes to the PHA Plan were necessary.
  - The PHA changed portions of the PHA Plan in response to comments  
List changes below:
  - Other: (list below)

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

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

3. Description of Resident Election Process

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

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

b. Eligible candidates: (select one)

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

c. Eligible voters: (select all that apply)

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

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

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

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

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

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

The need for affordable housing is great and the PHA is working to maintain and preserve housing sources in our area.

#### **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.

### A

## NOTICE REQUIREMENTS

In compliance with federal statute regarding the development of the five-year plan, the agency conducted the following hearings.

Publication of proposed five-year and annual plans (Draft)	Date: 10/15/04
Family development meetings Galego Court 560 Prospect Street	Date: November 10, 2004, 7:30pm October 27, 2004 - 7:30pm
Senior/ handicapped development meetings Fogarty Manor Burns Manor Kennedy Manor St. Germain Manor	Date: October 25, 2004 – 10:30am October 22, 2004 – 2:00pm October 22, 2004 – 1:00pm October 25, 2004 – 2:30pm
Public hearing at Fogarty Manor	Date: November 12, 2004 – 1:00 pm
Board approval and submission to HUD	Date: December 13, 2004

Attendance sheets and responses to comments received are contained in the “Attachments” at the end of the One Year Plan.

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### B

## STATEMENT OF PROGRESS FOR MISSION AND GOALS

The Housing Authority of The City of Pawtucket has submitted its goals and objectives within the PHA Plan and certifies that it has submitted its progress report within the goals and objectives of the 5 year plan.

Signature on file

James J. Goff  
Acting Executive Director  
Pawtucket Housing Authority

**C**

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**NOTICE OF NO SIGNIFICANT DEVIATION, MODIFICATION  
OR ADMENDMENT TO THE  
FIVE-YEAR PLAN**

*Please be advised that for this submittal of our annual plan the Pawtucket Housing Authority has not made any significant deviations, modifications, or amendments to our five- year plan. The PHA does not foresee any need in the future to make any changes to the plan, such as a change in our preferences for our wait list or eligibility requirements for housing.*

*Sincerely*

*James J. Goff  
Acting Executive Director*

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**D**

**PHA Certifications of Compliance with the PHA Plans and Related Regulations Form**

This form has been completed and signed by Harvey E. Goulet, Jr., Chairman of the Board of Commissioners.

Signed copy will be sent with the hard copy of the Plan.

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**E**

**HOUSING AUTHORITY OF THE CITY OF PAWTUCKET.**

**DECONCENTRATION POLICY**

To deconcentrate poverty the Pawtucket Housing Authority in compliance with 24 CFR 903 will:

1. Determine average income of all families residing in all covered developments
  2. Determine average income of all families residing in each covered development
  3. Determine which developments are outside of the established income range. The established income range is defined as those covered developments where the average income is between 85 percent and 115 percent (inclusive of those percentages) of the PHA-wide average for covered developments.
-

## **F**

### **PHA Certifications of Compliance with the PHA Plans and Related Regulations Form**

This form has been completed and signed by Harvey E. Goulet, Jr., Chairman, Board of Commissioners. Signed copy will be sent with the hard copy.

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## **G**

**The Certification by State of Local Official of PHA Plans has been signed by James E. Doyle, Mayor of the City of Pawtucket.**

Signed copy will be sent with the hard copy of the Plan.

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## **H**

**The form, Certification for a Drug-Free Workplace has been signed by James J. Goff, Acting Executive Director of the Housing Authority of the City of Pawtucket.**

Signed copy will be sent with the hard copy of the Plan.

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## **I**

**The form, Disclosure of Lobbying Activities, has been completed and signed by James J. Goff, Acting Executive Director of the Housing Authority of the City of Pawtucket.**

A hard copy of this form will be enclosed with the Plan.

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## **J**

### **Resident Advisory Board**

#### **Members:**

Claire Melchert, Burns Manor  
Barbara Rogers, Fogarty Manor  
Donald Goss, Kennedy Manor  
Andrew Shrier, Kennedy Manor  
Marie Anna Desrochers, St. Germain Manor  
Nyisha Conry, Galego Court  
Carolina Lopes, Section 8  
Melaina Rosairo, Section 8  
Patricia Saballer, Section 8  
James J. Goff, PHA

Lourdes Mossor, Burns Manor  
Tom Ducharme, Kennedy Manor  
Juliette Goss, Kennedy Manor  
Stanley Baker, St. Germain Manor  
Connie Voisin, St. Germain Manor  
Hope Allen, Galego Court  
Jennea Burton, Section 8  
Michelle Rose, Section 8  
Arthur Eichholz, Fogarty Manor  
Kerrie Brown, PHA

A meeting of the Resident Advisory Board was held on Monday, October 18, 2004, beginning at 2:00 p.m. in the community room at Fogarty Manor. There were also meetings held at each development to discuss the PHA's Annual and Five Year Plan. The issues discussed are included within the plan.

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## K

### HOUSING AUTHORITY OF THE CITY OF PAWTUCKET BOARD OF COMMISSIONERS

December , 2004

Chairman, Harvey E. Goulet, Jr.  
Vice Chairman, Kevin J. Rabbitt  
Commissioner, Stella Carrera  
Commissioner, Hugh R. Monahan  
Resident Commissioner, Cristina Olivera

#### **Resident Membership on the Governing Board**

The Housing Authority of the City of Pawtucket notified residents in June of 1999 requesting that anyone interested in becoming a Resident Commissioner for the PHA must submit a letter of interest to the Executive Director. The residents of each development narrowed the list of interested candidates down to two members per development. This final list was forwarded to the Mayor for his final determination.

Ms. Cristina Olivera was selected and appointed to the Board of Commissioner in July, 2004. She will serve a term of 5 years.

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## L

### SECTION 8 HOMEOWNERSHIP PROGRAM CAPACITY STATEMENT

The Housing Authority of the City of Pawtucket certifies to the following in its demonstration to administer a Homeownership Program under its Section 8 Housing Voucher Program:

1. The PHA will establish a minimum homeowner down payment requirement of at least three percent and require that at least one percent of the down payment come from the family's resources;
2. The PHA plans to require that financing for purchase of a home under its Section 8 Homeownership Program will be provided, insured or guaranteed by the state or Federal government; comply with secondary mortgage market underwriting requirements; or comply with generally accepted private sector underwriting standards.

## M

### Community Service and Economic Self- Sufficiency POLICY

In accordance to section 512 of the Quality Housing and Work Responsibility Act the Authority amended it lease agreement effective April 1, 2000 to include the community service requirement for all nonexempt public housing residents. The Authority will hire a living skills coordinator to oversee the community service requirement, and help direct residents to the various educational, job training and community service programs currently offered at the Authority or in the local area. The Authority will also hire two additional resident service coordinators to assist the living skills coordinator living skills in this matter. If the number of residents required to perform community service is too large for these individuals to administer, the Authority will enter into a contract with and outside vendor to help administer the program. If a for-profit third party contractor is used the Authority will ensure that the administrators overseeing the program do not have a financial interest in the entity where community service participants are assigned. The Authority will also ensure that the conditions under which the work is to be performed are not otherwise hazardous. The Authority will ensure that the work to be performed is not labor that would be performed by the Authority's employees responsible for essential maintenance and property services, or that the work is otherwise unacceptable.

#### NOTIFICATION TO RESIDENTS

1. The Authority will send a general notice to all residents about the community service requirement.
2. The Authority will then send individual letters to all heads of household who the management feels is subject to the community service requirement. The determination will be based on information already in each resident's file.
3. The letter will identify the family members who are exempt and those we feel are subject to the requirement. A notice explaining the requirements of the program will be attached to the letter. An exemption form will be attached with an explanation of the process for claiming an exemption, and if required how it will be verified. The letter will also give the individual the right to a grievance hearing to challenge the determination by the Authority.
4. For individual households, who have signed the new lease agreement and have family members who are considered non-exempt individuals, the community service and economic self- sufficiency requirements will start upon receipt of the notification letter. Other residents will be phased into the program based on their recertification date.
5. In accordance to section CFR 960.605 (c) Existing documentation will be accepted as evidence of a disability, and disabled individuals will be permitted to self-certify that they can or cannot perform community service or self- sufficiency activities. For residents receiving assistance under the TANF Program, the Authority will verify with the welfare agency that the individual is complying with the work activities requirement of that program.
6. Non-exempt individuals will have to submit on a monthly basis a form certifying that they have performed the 8 hours of community service or self-sufficiency each month. The supervisor or director of the community service or self- sufficiency agency must also sign the form.

7. Noncompliance- On a quarterly basis the Living Skills Coordinator or Resident Service Coordinator will contact nonexempt individuals who are not in compliance. They will provide guidance on ways to cure the noncompliance.
8. The Development Manager will send a notice of noncompliance to the nonexempt individual and head of household thirty days before the expiration of the lease term. An agreement to cure the noncompliance will also be sent to each party. The notice will also inform the head of household and the individual family member of the right to request a grievance hearing on this determination.
9. If the head of household or family member refuses to enter into a written agreement with the Housing Authority to cure the noncompliance the lease will not be renewed upon expiration of the term.

# 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 RI43P002501 05 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	60,000
3	1408 Management Improvements	275,000
4	1410 Administration	125,000
5	1411 Audit	
6	1415 Liquidated Damages	
7	1430 Fees and Costs	95,000
8	1440 Site Acquisition	
9	1450 Site Improvement	34,890
10	1460 Dwelling Structures	801,194
11	1465.1 Dwelling Equipment-Nonexpendable	
12	1470 Nondwelling Structures	0
13	1475 Nondwelling Equipment	20,000
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	<b>Amount of Annual Grant (Sum of lines 2-19)</b>	
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
HA Wide	Operations	1406 <b>TOTAL 1406</b>	60,000 <b>60,000</b>
	Management Improvements	1408 <b>TOTAL 1408</b>	275,000 <b>275,000</b>
	Administration	1410 <b>TOTAL 1410</b>	125,000 <b>125,000</b>
	Other Fees	1430 <b>TOTAL 1430</b>	95,000 <b>95,000</b>
	Non Dwelling Equipment	1475 <b>TOTAL 1475</b>	20,000 <b>20,000</b>
	Debt Services	1501 <b>TOTAL 1501</b>	350,000 <b>350,000</b>
	Non Dwelling Structures	1470 <b>TOTAL 1470</b>	0 <b>0</b>
<b>DEVELOPMENT ACTIVITIES</b>			
560 Prospect Street	Roof Replacement	1460	300,000
560 Prospect Street	Basketball Court Replacement	1460	84,194
RI 2-1		<b>TOTAL</b>	<b>384,194</b>
Galego Court	Interior Improvements	1460	40,000
Galego Court	Roof Replacement	1460	135,000
RI 2-2		<b>TOTAL</b>	<b>175,000</b>
Kennedy Manor	Fire Alarms	1460	242,000
RI 2-3/5		<b>TOTAL</b>	<b>242,000</b>
Burns Manor	Site Improvements	1450	34,890
RI 2-7.2		<b>TOTAL</b>	<b>34,890</b>

**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)
<b>Total estimated cost over next 5 years</b>				



Annual Statement/Performance and Evaluation Report					
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I Summary					
PHA Name: <b>The Housing Authority of the City of Pawtucket</b>		Grant Type and Number Capital Fund Program Grant No. <b>RI43P002502 03</b> Replacement Housing Grant No.		2003	
<input type="checkbox"/> Original Annual Statement Reserve for Disasters/Emergencies			Revised Annual Statement (revision no: )		
<input checked="" type="checkbox"/> Performance and Evaluation Report Period Ending: 9/30/04			<input type="checkbox"/> Final Performance and Evaluation Report		
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations	0			
3	1408 Management Improvements	0			
4	1410 Administration	0			
5	1411 Audit	0			
6	1415 Liquidated Damages	0			
7	1430 Fees and Costs	0			
8	1440 Site Acquisition	0			
9	1450 Site Improvements	0			
10	1460 Dwelling Structures	303,060			
11	1465.1 Dwelling Equipment - Nonexpendable	0			
12	1470 Nondwelling Structures	0			
13	1475 Nondwelling Equipment	0			
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1499 Development Activities				
19	1501 Collaterization or Debt Services				
20	1502 Contingency				
21	Amount of Annual Grant: (sum of lines 2-20)	\$303,060	\$ -	\$ -	\$ -
22	Amount of line 21 Related to LBP Activities				
23	Amount of line 21 Related to Section 504 Compliance				
24	Amount of line 21 Related to Security - Soft Costs				
25	Amount of line 21 Related to Security - Hard Costs				
26	Amount of line 21 Related to Energy Conservation Measures				

Annual Statement/Performance and Evaluation Report									
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)									
Part II Supporting Pages									
PHA Name: <b>The Housing Authority of the City of Pawtucket</b>			Grant Type and Number Capital Fund Program Grant No. <b>RI43P002502 03</b> Replacement Housing Grant No.				Federal FY of Grant: <b>2003</b>		
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		
RI 2-7.1									
<b>St. Germain Manor</b>	Common Area Improvements	1460		303,060				in planning	
			<b>Total</b>	<b>303,060</b>					



<b>Annual Statement/Performance and Evaluation Report</b>					
<b>Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I Summary</b>					
PHA Name: <b>The Housing Authority of the City of Pawtucket</b>		Grant Type and Number Capital Fund Program Grant No. <b>RI43P002501 02</b> Replacement Housing Grant No.		2002	
<input type="checkbox"/> Original Annual Statement Reserve for Disasters/Emergencies			<input checked="" type="checkbox"/> Revised Annual Statement (revision no: 2 )		
<input checked="" type="checkbox"/> Performance and Evaluation Report Period Ending: 9/30/04			<input type="checkbox"/> Final Performance and Evaluation Report		
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations	150,470	178,729	178,729	150,470
3	1408 Management Improvements	344,000	369,000	369,000	177,404
4	1410 Administration	45,000	45,000	45,000	45,000
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	172,000	147,000	147,000	139,103
8	1440 Site Acquisition				
9	1450 Site Improvements	145,000	127,741	127,741	94,807
10	1460 Dwelling Structures	891,717	880,717	880,717	395,569
11	1465.1 Dwelling Equipment - Nonexpendable	0	0	0	0
12	1470 Nondwelling Structures	0			0
13	1475 Nondwelling Equipment	100,000	100,000	100,000	21,859
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1499 Development Activities				
19	1501 Collaterization or Debt Services	0	0		
20	1502 Contingency				
21	Amount of Annual Grant: (sum of lines 2-20)	\$ 1,848,187	\$ 1,848,187	\$ 1,848,187	\$ 1,024,212
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	177,000	213,000	213,000	44,689
25	Amount of line 21 Related to Security - Hard Costs	95,000	109,451	109,451	2,683
26	Amount of line 21 Related to Energy Conservation Measures				

Annual Statement/Performance and Evaluation Report									
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)									
Part II Supporting Pages									
PHA Name: <b>The Housing Authority of the City of Pawtucket</b>			Grant Type and Number Capital Fund Program Grant No. <b>RI43P002501 02</b> Replacement Housing Grant No.				Federal FY of Grant: <b>2002</b>		
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 Oligated	Funds Expended		
<b>PHA Wide</b>	Operations	1406		150,470	178,729	178,729	150,470	in progress	
		<b>1406</b>	<b>Total</b>	<b>\$150,470</b>	<b>\$178,729</b>	<b>\$178,729</b>	<b>\$150,470</b>		
<b>PHA Wide</b>	Resident Services Programs	1408		157,000	146,000	146,000	132,715	In Progress	
	Resident Services Coordinator	1408		0	0	0	-		
	Security Program	1408		177,000	213,000	213,000	44,689	In Progress	
	Assisted Living Study	1408		0	0	0	-		
	Computer Software & Training	1408		10,000	10,000	10,000	-	In Progress	
		<b>1408</b>	<b>Total</b>	<b>\$344,000</b>	<b>\$369,000</b>	<b>\$369,000</b>	<b>\$177,404</b>		
<b>PHA Wide</b>	Salaries	1410		45,000	45,000	45,000	45,000	Complete	
		<b>1410</b>	<b>Total</b>	<b>\$45,000</b>	<b>\$45,000</b>	<b>\$45,000</b>	<b>\$45,000</b>		
<b>PHA Wide</b>	Architectural Fees	1430		60,000	60,000	60,000	54,103	In Progress	
	Contract Fees	1430		87,000	87,000	87,000	85,000	In Progress	
	Assisted Living/Land Use	1430		25,000	0	0	-		
		<b>1430</b>	<b>Total</b>	<b>\$172,000</b>	<b>\$147,000</b>	<b>\$147,000</b>	<b>\$139,103</b>		
<b>HA_Wide</b>	Computer Hardware & Software	1475		10,000	20,000	20,000	19,176	In Progress	
	Security Equipment	1475		60,000	60,000	60,000	2,683	In Progress	
	Maintenance Equipment	1475		30,000	20,000	20,000	-	In Planning	

Annual Statement/Performance and Evaluation Report									
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)									
Part II Supporting Pages									
PHA Name: <b>The Housing Authority of the City of Pawtucket</b>			Grant Type and Number Capital Fund Program Grant No. <b>RI43P002501 02</b> Replacement Housing Grant No.				Federal FY of Grant: <b>2002</b>		
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 Oligated	Funds Expended		
		<b>1475</b>	<b>Total</b>	<b>\$100,000</b>	<b>\$100,000</b>	<b>\$100,000</b>	<b>\$21,859</b>		
RI 2-1	Landscaping/Site Impvts.	1450		10,000	10,000	10,000	-	In Progress	
<b>560 Prospect S</b>	Security Improvements	1460		0	0		-		
	Kitchen Repairs & Impvts.	1460		0	0		-		
	Lead Safe Program	1460		178,000	178,000	178,000	178,000	In Progress	
			<b>Total</b>	<b>\$188,000</b>	<b>\$188,000</b>	<b>\$188,000</b>	<b>\$178,000</b>		
RI 2-2	Site Improvements	1450		0	10,000	10,000	-	In Progress	
<b>Galego Court</b>	Playground/Recreat. Impvts.	1450		10,000	107,741	107,741	94,807	In Progress	
	Security Improvements	1460		10,000	14,451	14,451	-	In Progress	
			<b>Total</b>	<b>\$20,000</b>	<b>\$132,192</b>	<b>\$132,192</b>	<b>\$94,807</b>		
RI 2-16	Interior Improvements	1460		\$5,000	\$0		-		
<b>Scattered Sites</b>	Exterior Improvements	1460		\$15,000	\$20,000	\$20,000	19,807	In Progress	
			<b>Total</b>	<b>\$20,000</b>	<b>\$20,000</b>	<b>\$20,000</b>	<b>\$19,807</b>		
RI 2-3/5	Security Improvements	1460		10,000	10,000	10,000	-	In Progress	
	Elevators	1460		0	0		-		
<b>Kennedy Mano</b>	Interior Imprvts/existing units	1460		200,000	0		-		
			<b>Total</b>	<b>\$210,000</b>	<b>\$10,000</b>	<b>\$10,000</b>	<b>\$0</b>		

Annual Statement/Performance and Evaluation Report									
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)									
Part II Supporting Pages									
PHA Name: <b>The Housing Authority of the City of Pawtucket</b>			Grant Type and Number Capital Fund Program Grant No. <b>RI43P002501 02</b> Replacement Housing Grant No.				Federal FY of Grant: <b>2002</b>		
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 Oligated	Funds Expended		
RI 2-4	Security Improvements	1460		15,000	15,000	15,000	-	In Progress	
	Elevators	1460		240,000	387,266	387,266	92,894	In Progress	
	Common Areas	1460			0	0	-		
Fogarty Manor	Remodel Existing Units	1460		208,717	246,000	246,000	104,868	In Progress	
			<b>Total</b>	<b>\$463,717</b>	<b>\$648,266</b>	<b>\$648,266</b>	<b>\$197,762</b>		
RI 2-7.1	Site Improvements	1450		125,000	0	0	-		
<b>St. Germain Manor</b>	Security Improvements	1460		5,000	5,000	5,000	-	In Progress	
	Building Connector Construct	1460		0	0	0	-		
	Elevators	1460		0	0	0	-		
			<b>Total</b>	<b>\$130,000</b>	<b>\$5,000</b>	<b>\$5,000</b>	<b>\$0</b>		
RI 2-7.2									
<b>Burns Manor</b>	Security Improvements	1460		5,000	5,000	5,000	-	In Progress	
			<b>Total</b>	<b>\$5,000</b>	<b>\$5,000</b>	<b>\$5,000</b>	<b>\$0</b>		



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

PHA Name: <b>The Housing Authority of the City of Pawtucket</b>	Grant Type and Number Capital Fund Program Grant No. Replacement Housing Grant No.	<b>RI43P002501 00</b>	Federal FY of Grant: <b>2000</b>
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<input type="checkbox"/> Original Annual Statement	<b>Reserve for Disasters/Emergencies</b>	<input type="checkbox"/> Revised Annual Statement
<input checked="" type="checkbox"/> Performance and Evaluation Report Period Ending: 9/30/04		<input type="checkbox"/> Final Performance and Evaluation Report

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations				
3	1408 Management Improvements	134,986	136,430	136,430	136,430
4	1410 Administration	45,000	45,000	45,000	45,000
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	106,637	106,637	106,637	106,637
8	1440 Site Acquisition				
9	1450 Site Improvements	669,754	626,979	626,979	626,979
10	1460 Dwelling Structures	724,000	765,331	765,331	765,331
11	1465.1 Dwelling Equipment - Nonexpendable				
12	1470 Nondwelling Structures	160,000	160,000	160,000	160,000
13	1475 Nondwelling Equipment	35,000	35,000	35,000	35,000
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1499 Development Activities				
19	1501 Collaterization or Debt Services				
20	1502 Contingency				
21	Amount of Annual Grant: (sum of lines 2-20)	\$ 1,875,377	\$ 1,875,377	\$ 1,875,377	\$ 1,875,377
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	75,310	75,310	75,310	75,310
25	Amount of line 21 Related to Security - Hard Costs	143,395	143,395	143,395	143,395
26	Amount of line 21 Related to Energy Conservation Measures				

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

PHA Name: <b>The Housing Authority of the City of Pawtucket</b>		Grant Type and Number Capital Fund Program Grant No. Replacement Housing Grant No.		RI43P002501 00		Federal FY of Grant: <b>2000</b>		
Development Number Name/HA-Wide Activities	General Description of Maor Work Catagories	Dev. Acct	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Oligated	Funds Expended	
<b>PHA Wide</b>								
		<b>1406</b>	<b>Total</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	
<b>PHA Wide</b>	Resident Services Programs	1408		18,923	20,367	20,367	20,367	In Progress
	Resident Services Coordinator	1408		35,753	35,753	35,753	35,753	In Progress
	Security Program	1408		75,310	75,310	75,310	75,310	In Progress
	Computer Software & Training	1408		5,000	5,000	5,000	5,000	In Progress
		<b>1408</b>	<b>Total</b>	<b>\$134,986</b>	<b>\$136,430</b>	<b>\$136,430</b>	<b>\$136,430</b>	
<b>PHA Wide</b>	Salaries	1410		45,000	45,000	45,000	45,000	In Progress
		<b>1410</b>	<b>Total</b>		<b>\$45,000</b>	<b>\$45,000</b>	<b>\$45,000</b>	
<b>PHA Wide</b>	Architectural Fees	1430		47,300	47,300	47,300	47,300	In Progress
	Contract Fees	1430		59,337	59,337	59,337	59,337	In Progress
		<b>1430</b>	<b>Total</b>	<b>\$106,637</b>	<b>\$106,637</b>	<b>\$106,637</b>	<b>\$106,637</b>	
<b>PHA Wide</b>	Maintenance Garage	1470		\$0	\$0			
			<b>Total</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	
<b>PHA Wide</b>	Computer Hardware & Software	1475		0	0			
	Security Equipment	1475		28,395	28,395	28,395	28,395	In Progress
	Maintenance Equipment	1475		6,605	6,605	6,605	6,605	complete

		1475	<b>Total</b>	<b>\$35,000</b>	<b>\$35,000</b>	<b>\$35,000</b>	<b>\$35,000</b>	
RI 2-1	Interior Improvements (lead paint)	1460		110,000	110,000	110,000	110,000	In Progress
<b>560 Prospect S</b>	Laundry Facilities	1470		0	0			
			<b>Total</b>	<b>\$110,000</b>	<b>\$110,000</b>	<b>\$110,000</b>	<b>\$110,000</b>	
RI 2-2	Site Improvements	1450		344,754	302,313	302,313	302,313	In Progress
<b>Galego Court</b>	Laundry Facilities	1470		0	0			
			<b>Total</b>	<b>\$344,754</b>	<b>\$302,313</b>	<b>\$302,313</b>	<b>\$302,313</b>	
RI 2-3/5	Site Improvements	1450		135,000	134,666	134,666	134,666	In Progress
<b>Kennedy Manor</b>	Security Improvements	1460		65,000	65,000	65,000	65,000	In Progress
	Common Area Improvements	1460		90,000	85,539	85,539	85,539	In Progress
			<b>Total</b>	<b>\$290,000</b>	<b>\$285,205</b>	<b>\$285,205</b>	<b>\$285,205</b>	
RI 2-4	Site Improvements	1450		190,000	190,000	190,000	190,000	In Progress
<b>Fogarty Manor</b>	Security Improvements	1460		40,000	40,000	40,000	40,000	In Progress
	Balcony Improvements	1460		30,000	30,000	30,000	30,000	In Progress
	Floor Covering	1460		0	0		0	In Planning
			<b>Total</b>	<b>\$260,000</b>	<b>\$260,000</b>	<b>\$260,000</b>	<b>\$260,000</b>	
RI 2-7.1	Floor Covering	1460		0	0			
<b>St. Germain</b>	Security Improvements	1460		0	0			
<b>Manor</b>	Fire Alarm Upgrade	1460		0	0			
			<b>Total</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	
RI 2-7.2	Floor Covering	1460		11,875	11,875	11,875	11,875	In Progress
<b>Burns</b>	Security Improvements	1460		10,000	10,000	10,000	10,000	In Progress
<b>Manor</b>	Fire Alarm Upgrade	1460		137,000	182,792	182,792	182,792	In Progress
	Common Area Improvements	1460		230,125	230,125	230,125	230,125	In Progress
	Community Room Improvements	1470		160,000	160,000	160,000	160,000	In Progress
			<b>Total</b>	<b>\$549,000</b>	<b>\$594,792</b>	<b>\$594,792</b>	<b>\$594,792</b>	



<b>Annual Statement/Performance and Evaluation Report</b>					
<b>Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I Summary</b>					
PHA Name: <b>The Housing Authority of the City of Pawtucket</b>		Grant Type and Number Capital Fund Program Grant No. <b>RI43P002501 05</b> Replacement Housing Grant No.		2005	
<input checked="" type="checkbox"/> Original Annual Statement		Reserve for Disasters/Emergencies		Revised Annual Statement (revision no: )	
Performance and Evaluation Report Period Ending:		<input type="checkbox"/> Final Performance and Evaluation Report			
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations	60,000			
3	1408 Management Improvements	275,000			
4	1410 Administration	125,000			
5	1411 Audit	0			
6	1415 Liquidated Damages	0			
7	1430 Fees and Costs	95,000			
8	1440 Site Acquisition	0			
9	1450 Site Improvements	119,084			
10	1460 Dwelling Structures	717,000			
11	1465.1 Dwelling Equipment - Nonexpendable	0			
12	1470 Nondwelling Structures	0			
13	1475 Nondwelling Equipment	20,000			
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1499 Development Activities				
19	1501 Collaterization or Debt Services	350,000			
20	1502 Contingency				
21	Amount of Annual Grant: (sum of lines 2-20)	\$1,761,084	\$ -	\$ -	\$ -
22	Amount of line 21 Related to LBP Activities				
23	Amount of line 21 Related to Section 504 Compliance				
24	Amount of line 21 Related to Security - Soft Costs				
25	Amount of line 21 Related to Security - Hard Costs				
26	Amount of line 21 Related to Energy Conservation Measures				

Annual Statement/Performance and Evaluation Report								
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)								
Part II Supporting Pages								
PHA Name: <b>The Housing Authority of the City of Pawtucket</b>			Grant Type and Number Capital Fund Program Grant No. <b>RI43P002501 05</b> Replacement Housing Grant No.			Federal FY of Grant: <b>2005</b>		
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	
<b>PHA Wide</b>	Operations	1406		60,000				
		<b>1406</b>	<b>Total</b>	<b>60,000</b>				
<b>PHA-Wide</b>	Management Improvements							
	Resident Services Programs	1408		150,000				
	Security Program	1408		125,000				
		<b>1408</b>	<b>Total</b>	<b>275,000</b>				
<b>PHA Wide</b>	Administration							
	Executive Director	1410		20,000				
	Executive Secretary	1410		12,000				
	Administrative Assistant	1410		15,000				
	Director of Finance	1410		15,000				
	Dir of Modernization	1410		35,000				
	Bookkeeper	1410		6,500				
	Modernization Clerk	1410		21,500				
		<b>1410</b>	<b>Total</b>	<b>125,000</b>				
<b>PHA Wide</b>	Contract Fees	1430		35,000				
	A & E Fees	1430		60,000				
			<b>Total</b>	<b>95,000</b>				
<b>HA_Wide</b>	Non-Dwelling Equipment							
	Security Equipment	1475		20,000				
		<b>1475</b>	<b>Total</b>	<b>20,000</b>				
<b>HA Wide</b>	Debt Services	<b>1501</b>		<b>350,000</b>				
RI 2-1				-				

Annual Statement/Performance and Evaluation Report								
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)								
Part II Supporting Pages								
PHA Name: <b>The Housing Authority of the City of Pawtucket</b>			Grant Type and Number Capital Fund Program Grant No. <b>RI43P002501 05</b> Replacement Housing Grant No.			Federal FY of Grant: <b>2005</b>		
Development Number Name/HA-Wide Activities	General Description of Maor Work Catagories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Oligated	Funds Expended	
<b>560 Prospect St.</b>	Roof Replacement	1460		300,000				
	Site Work-Basketball Courts	1450		84,194				
			<b>Total</b>	<b>384,194</b>				
RI 2-2	Interior Improvements	1460		40,000				
<b>Galego Court</b>	Roof Replacement	1460		135,000				
			<b>Total</b>	<b>175,000</b>				
RI2-3/5								
<b>Kennedy Manor</b>	Fire Alarms	1460		242,000				
			<b>Total</b>	<b>242,000</b>				
RI 2-7.2								
<b>Burns Manor</b>	Site Improvements-lots & walkways	1450		34,890				
			<b>Total</b>	<b>34,890</b>				



Annual Statement/Performance and Evaluation Report					
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I Summary					
PHA Name: <b>The Housing Authority of the City of Pawtucket</b>		Grant Type and Number Capital Fund Program Grant No. <b>RI43P002501 01</b> Replacement Housing Grant No.		Federal FY of Grant: <b>2001</b>	
<input type="checkbox"/> Original Annual Statement		Reserve for Disasters/Emergencies		<input checked="" type="checkbox"/> Revised Annual Statement (revision no: 1 )	
<input checked="" type="checkbox"/> Performance and Evaluation Report		Period Ending: 9/30/04		<input type="checkbox"/> Final Performance and Evaluation Report	
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations	38,340	50,915	50,915	50,915
3	1408 Management Improvements	298,623	240,623	240,623	239,700
4	1410 Administration	45,000	45,000	45,000	45,000
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	147,000	134,425	134,425	118,646
8	1440 Site Acquisition				
9	1450 Site Improvements	100,000	100,000	100,000	97,237
10	1460 Dwelling Structures	1,230,000	1,288,000	1,288,000	1,204,921
11	1465.1 Dwelling Equipment - Nonexpendable	20,754	20,754	20,754	5,060
12	1470 Nondwelling Structures	0	0	0	0
13	1475 Nondwelling Equipment	34,000	34,000	34,000	32,520
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1499 Development Activities				
19	1501 Collaterization or Debt Services				
20	1502 Contingency		0		
21	Amount of Annual Grant: (sum of lines 2-20)	\$ 1,913,717	\$ 1,913,717	\$ 1,913,717	\$ 1,793,999
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	151,947	119,947	119,947	119,024
25	Amount of line 21 Related to Security - Hard Costs	52,690	82,690	82,690	51,210
26	Amount of line 21 Related to Energy Conservation Measures				

Annual Statement/Performance and Evaluation Report								
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)								
Part II Supporting Pages								
PHA Name: <b>The Housing Authority of the City of Pawtucket</b>		Grant Type and Number Capital Fund Program Grant No. <b>RI43P002501 01</b> Replacement Housing Grant No.			Federal FY of Grant: <b>2001</b>			
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Oligated	Funds Expended	
<b>PHA Wide</b>	Operations	1406		38,340	50,915	50,915	50,915	complete
		<b>1406</b>	<b>Total</b>	<b>\$38,340</b>	<b>\$50,915</b>	<b>\$50,915</b>	<b>\$50,915</b>	
<b>PHA Wide</b>	Resident Services Programs	1408		26,000			0	
	Resident Services Coordinator	1408		79,000	79,000	79,000	79,000	In Progress
	Security Program	1408		151,947	119,947	119,947	119,024	In Progress
	Grants Manager	1408		35,676	35,676	35,676	35,676	In Progress
	Assisted Living Study	1408		0	0	0	0	
	Computer Software & Training	1408		6,000	6,000	6,000	6,000	In Progress
		<b>1408</b>	<b>Total</b>	<b>\$298,623</b>	<b>\$240,623</b>	<b>\$240,623</b>	<b>\$239,700</b>	
<b>PHA WIDE</b>	Salaries	1410		45,000	45,000	45,000	45,000	Completed
		<b>1410</b>	<b>Total</b>	<b>\$45,000</b>	<b>\$45,000</b>	<b>\$45,000</b>	<b>\$45,000</b>	
<b>PHA WIDE</b>	Architectural Fees	1430		60,000	79,460	79,460	78,817	In Progress
	Contract Fees	1430		87,000	54,965	54,965	39,829	In Progress
		<b>1430</b>	<b>Total</b>	<b>\$147,000</b>	<b>\$134,425</b>	<b>\$134,425</b>	<b>\$118,646</b>	
<b>PHA Wide</b>	Equipment (Appliances)	1465.1		20,754	20,754	20,754	5,060	In progress
			<b>Total</b>	<b>\$20,754</b>	<b>\$20,754</b>	<b>\$20,754</b>	<b>\$5,060</b>	

Annual Statement/Performance and Evaluation Report								
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)								
Part II Supporting Pages								
PHA Name: <b>The Housing Authority of the City of Pawtucket</b>			Grant Type and Number Capital Fund Program Grant No. <b>RI43P002501 01</b> Replacement Housing Grant No.			Federal FY of Grant: <b>2001</b>		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Oligated	Funds Expended	
<b>PHA Wide</b>	Computer Hardware & Software	1475		4,395	4,395	4,395	4,395	Completed
	Security Equipment	1475		29,605	29,605	29,605	28,125	in progress
	Maintenance Equipment	1475		0	0	0	0	
		<b>1475</b>	<b>Total</b>	<b>\$34,000</b>	<b>\$34,000</b>	<b>\$34,000</b>	<b>\$32,520</b>	
RI 2-1	Interior Improvements	1460		0	0	0	0	
<b>560 Prospect S</b>	Security Improvements	1460		0	0	0	0	
	Lead Safe Program	1460		116,209	116,209	116,209	116,209	Completed
			<b>Total</b>	<b>\$116,209</b>	<b>\$116,209</b>	<b>\$116,209</b>	<b>\$116,209</b>	
RI 2-2	Site Improvements	1450		72,368	72,368	72,368	72,368	In Progress
<b>Galego Court</b>	Recreation Improvements	1450		27,632	27,632	27,632	24,869	In Progress
	Security Improvements	1460		30,000	30,000	30,000	30,000	In Progress
	Dwelling Improvements(CO Sh	1460		10,000	10,000	10,000	6,385	In Progress
			<b>Total</b>	<b>\$140,000</b>	<b>\$140,000</b>	<b>\$140,000</b>	<b>\$133,622</b>	
RI 2-16	Interior Improvements	1460		\$0	\$0	\$0	0	
<b>Scattered Sites</b>	Exterior Improvements	1460		\$0	\$0	\$0	0	
			<b>Total</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	

Annual Statement/Performance and Evaluation Report								
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)								
Part II Supporting Pages								
PHA Name: <b>The Housing Authority of the City of Pawtucket</b>			Grant Type and Number Capital Fund Program Grant No. <b>RI43P002501 01</b> Replacement Housing Grant No.			Federal FY of Grant: <b>2001</b>		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Oligated	Funds Expended	
RI 2-3/5	Security Improvements	1460		6,085	6,085	6,085	6,085	Completed
<b>Kennedy Manor</b>	Elevators	1460		278,000	347,200	347,200	347,200	In Progress
			<b>Total</b>	<b>\$284,085</b>	<b>\$353,285</b>	<b>\$353,285</b>	<b>\$353,285</b>	
RI 2-4	Security Improvements	1460		10,000	10,000	10,000	10,000	Completed
<b>Fogarty Manor</b>	Elevators	1460		218,842	133,534	133,534	85,462	In Progress
			<b>Total</b>	<b>\$228,842</b>	<b>\$143,534</b>	<b>\$143,534</b>	<b>\$95,462</b>	
RI 2-7.1								
<b>St. Germain Manor</b>	Security Improvements	1460		2,000	2,000	2,000	2,000	In Progress
			<b>Total</b>	<b>\$2,000</b>	<b>\$2,000</b>	<b>\$2,000</b>	<b>\$2,000</b>	
RI 2-7.2	Common Area Improvements	1460		553,864	553,864	553,864	520,650	complete
	Fire Alarms	1460		0	74,108	74,108	75,930	complete
<b>Burns Manor</b>	Security Improvements	1460		5,000	5,000	5,000	5,000	in progress
			<b>Total</b>	<b>\$558,864</b>	<b>\$632,972</b>	<b>\$632,972</b>	<b>\$601,580</b>	



Annual Statement/Performance and Evaluation Report					
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I Summary					
PHA Name: <b>The Housing Authority of the City of Pawtucket</b>		Grant Type and Number Capital Fund Program Grant No. <b>RI43P002501 03</b> Replacement Housing Grant No.		2003	
<input type="checkbox"/> Original Annual Statement		Reserve for Disasters/Emergencies		<input checked="" type="checkbox"/> Revised Annual Statement (revision no: 1 )	
<input checked="" type="checkbox"/> Performance and Evaluation Report		Period Ending: 9/30/04		<input type="checkbox"/> Final Performance and Evaluation Report	
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations	220,470	278,273	278,273	20,850
3	1408 Management Improvements	360,000	286,900	126,900	45,105
4	1410 Administration	125,000	125,000	125,000	75,000
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	95,000	95,000	0	0
8	1440 Site Acquisition				
9	1450 Site Improvements	175,000	175,000	0	0
10	1460 Dwelling Structures	439,420	429,717	0	0
11	1465.1 Dwelling Equipment - Nonexpendable				
12	1470 Nondwelling Structures				
13	1475 Nondwelling Equipment	20,000	45,000	0	0
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1499 Development Activities				
19	1501 Collaterization or Debt Services				
20	1502 Contingency				
21	Amount of Annual Grant: (sum of lines 2-20)	\$1,434,890	\$ 1,434,890	\$ 530,173	\$ 140,955
22	Amount of line 21 Related to LBP Activities				
23	Amount of line 21 Related to Section 504 Compliance	0			
24	Amount of line 21 Related to Security - Soft Costs	150,000	150,000	0	0
25	Amount of line 21 Related to Security - Hard Costs				
26	Amount of line 21 Related to Energy Conservation Measures				

Annual Statement/Performance and Evaluation Report									
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)									
Part II Supporting Pages									
PHA Name: <b>The Housing Authority of the City of Pawtucket</b>			Grant Type and Number Capital Fund Program Grant No. <b>RI43P002501 03</b> Replacement Housing Grant No.				Federal FY of Grant: <b>2003</b>		
Development Number Name/HA-Wide Activities	General Description of Maor Work Catagories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work	
				Original	Revised	Funds Oligated	Funds Expended		
<b>PHA Wide</b>	Operations	1406		220,470	278,273	278,273	20,850		
		<b>1406</b>	<b>Total</b>	<b>\$220,470</b>	<b>\$278,273</b>	<b>\$278,273</b>	<b>\$20,850</b>		
<b>PHA-Wide</b>									
	Resident Services Programs	1408		150,000	76,900	76,900	0	in progress	
	Resident Service Coord.	1408		50,000	50,000	50,000	45,105	in progress	
	Security Program	1408		150,000	150,000		0	in planning	
	Computer Software & Training	1408		10,000	10,000		0	in planning	
		1408	<b>Total</b>	<b>360,000</b>	<b>286,900</b>	<b>126,900</b>	<b>45,105</b>		
<b>PHA Wide</b>	Salaries	1410		\$125,000	125000	125000	75,000	in progress	
		1410	<b>Total</b>	<b>125,000</b>	<b>125,000</b>	<b>125,000</b>	<b>75,000</b>		
<b>PHA Wide</b>	Architectural Fees	1430		\$60,000	60000		0	in planning	
	Contract Fees	1430		35,000	35,000		0	in planning	
		1430	<b>Total</b>	<b>95,000</b>	<b>95,000</b>	<b>0</b>	<b>0</b>		
<b>PHA Wide</b>	Maintenance Equipment	1475		\$20,000	\$45,000		\$0	in planning	
		1475	<b>Total</b>	<b>\$20,000</b>	<b>\$45,000</b>	<b>\$0</b>	<b>0</b>		
<b>RI 2-1</b>	Site Improvements	1450		\$100,000	\$100,000		\$0	in planning	
<b>560 Prospect St.</b>							0		
			<b>Total</b>	<b>\$100,000</b>	<b>\$100,000</b>	<b>\$0</b>	<b>\$0</b>		
<b>RI 2-2</b>	Site Improvements	1450		75,000	75,000		0	in planning	
<b>Galego Court</b>	Security Improvements	1460		0			0		
			<b>Total</b>	<b>75,000</b>	<b>75,000</b>	<b>0</b>	<b>0</b>		

Annual Statement/Performance and Evaluation Report									
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)									
Part II Supporting Pages									
PHA Name: <b>The Housing Authority of the City of Pawtucket</b>			Grant Type and Number Capital Fund Program Grant No. <b>RI43P002501 03</b> Replacement Housing Grant No.				Federal FY of Grant: <b>2003</b>		
Development Number Name/HA-Wide Activities	General Description of Maor Work Catagories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work	
				Original	Revised	Funds Oligated	Funds Expended		
RI2-3/5									
Kennedy Manor	Unit Modifications	1460		\$0	125,000		0	in planning	
			Total		125,000	0	0		
RI 2-4	Common Area Improvements	1460		107,717	107,717		0	in progress	
Fogarty Manor	Unit Modifications	1460		\$100,000	\$0		\$0		
				\$122,266			0		
			Total	329,983	107,717	0	0		
RI 2-7.1									
St. Germain Manor	Common Area Improvements	1460		109,437	197,000		0	in planning	
			Total	\$109,437	\$197,000	\$0	\$0		



## **CAPITAL FUND PROGRAM TABLES START HERE**

### Capital Fund Program Five-Year Action Plan

#### Part I: Summary

PHA Name Housing Authority of the City of Pawtucket Housing Authority		<input checked="" type="checkbox"/> <b>Original 5-Year Plan</b> <input type="checkbox"/> <b>Revision No:</b>			
Development Number/Name/HA-Wide	Year 1	Work Statement for Year 2 FFY Grant: 06 PHA FY: 2006	Work Statement for Year 3 FFY Grant: 07 PHA FY: 2007	Work Statement for Year 4 FFY Grant: 08 PHA FY: 2008	Work Statement for Year 5 FFY Grant: 09 PHA FY: 2009
	Annual Statement				
HA Wide					
Operations		60,000	60,000	60,000	60,000
Management Improvements		275,000	275,00	275,000	275,000
Administration		125,000	125,000	125,000	125,000
Other Fees		95,000	95,000	95,000	95,000
Non Dwelling Structures		250,000			
Non Dwelling Equipment		70,000	70,000	80,000	80,000
Debt Services		350,000	350,000	350,000	350,000
RI 2-1 560 Prospect Street		100,000		75,000	
RI 2-2 Galego Court		65,000		75,000	20,000
RI 2-3/5 Kennedy Manor		170,000		441,194	30,000
RI 2-4 Fogarty Manor		170,000	601,194	150,000	15,000
RI 2-7.1 St. Germain			109,890	34,890	359,084
RI 2-7.2 Burns Manor		31,084	75,000		352,000
RI 2-16 Scattered Sites					
CFP Funds Listed for 5-year planning		1,761,084	1,761,084	1,761,084	1,761,084
Replacement Housing Factor Funds					

Capital Fund Program Five-Year Action Plan						
Part II: Supporting Pages—Work Activities						
Activities for Year 1	Activities for Year : <u>2</u> FFY Grant: 2006 PHA FY:			Activities for Year: <u>3</u> FFY Grant: 2007 PHA FY:		
	Development Name/Number	Major Work Categories	Estimated Cost	Development Name/Number	Major Work Categories	Estimated Cost
See	HA Wide	1406 Operations	60,000	HA Wide	1460 Operations	60,000
<i>Annual Statement</i>	HA Wide	1408 Management Improvements		HA Wide	1408 Management Improvements	
		Resident Services Program.	150,000		<i>Resident Services Program</i>	150,000
		Security Program	125,000		<i>Security Program</i>	125,000
	HA Wide	1410 Administration – Salaries	125,000	HA Wide	1410 Administration – Salaries	125,000
	HA Wide	1430 Other Fees		HA Wide	1430 Other Fees	
		A & E Fees	60,000		<i>A &amp; E Fees</i>	60,000
		Contract Fees	35,000		<i>Contract Fees</i>	35,000
	HA Wide	1470 Non Dwelling Structures		HA Wide	1475 Non Dwelling Equipment	
		Administration Building	250,000		Computer Hardware/Software	10,000
					Security Equipment	40,000
		1475 Non Dwelling Equipment			Maintenance Equipment	20,000
		Computer Hardware/Software	10,000			
		Security Equipment	50,000	HA Wide	1501 Debt Services	350,000
		Maintenance Equipment	10,000			
				RI 2-1		
	HA Wide	1501 Debt Services	350,000	560 Prospect St/		
	RI 2-1	1460 Interior Improvements	100,000	RI 2-2		
	560 Prospect St.			Galego Court		
	RI 2-2			RI 2-2		
	Galego Court	Interior Improvements	65,000	Galego Court		
	RI 2-3/5			RI 2-3/5		

	<b>Kennedy Manor</b>	1460 Fire Suppressions	170,000	<b>Kennedy Manor</b>		
	<b>RI 2-4</b>					
	<b>Fogarty Manor</b>	1460 Fire Suppressions	170,000	<b>RI 2-4</b>		
				<b>Fogarty Manor</b>	1460 Fire Suppressions	601,194
	<b>RI 2-7.1</b>			<b>RI 2-7.1</b>		
	<b>St. Germain Manor</b>	1460 Fire Suppressions		<b>St. Germain Manor</b>	1450 Site Improvements	34,890
					1460 Unit Modifications	75,000
	<b>RI 2-7.2</b>					
	<b>Burns Manor</b>	1450 Site Improvements	31,084	<b>RI 2-7.2</b>		
				<b>Burns Manor</b>	1460 Unit Modifications	75,000
<b>Total CFP Estimated Cost</b>			1,761,084			1,761,084

Capital Fund Program Five-Year Action Plan						
Part II: Supporting Pages—Work Activities						
Activities for Year 1	Activities for Year : 4____ FFY Grant: 2008 PHA FY:			Activities for Year: 5____ FFY Grant: 2009 PHA FY:		
	Development Name/Number	Major Work Categories	Estimated Cost	Development Name/Number	Major Work Categories	Estimated Cost
See	HA Wide	1406 Operations	60,000		1460 Operations	60,000
Annual Statement	HA Wide	1408 Management Improvements		HA Wide	1408 Management Improv.	
		Resident Services Program.	150,000		Resident Services Program	150,000
		Security Program	125,000		Security Program	125,000
	HA Wide	1410 Administration – Salaries	125,000	HA Wide	1410 Administration – Salaries	125,000
	HA Wide	1430 Other Fees		HA Wide	1430 Other Fees	
		A & E Fees	60,000		A & E Fees	60,000
		Contract Fees	35,000		Contract Fees	35,000
	HA Wide	1475 Non Dwelling Equipment		HA Wide	1475 Non Dwelling Equipment	
		Computer Hardware & Software	20,000		Computer Hardware & Software	20,000
		Security Equipment	40,000		Security Equipment	40,000
		Maintenance Equipment	20,000		Maintenance Equipment	20,000
	HA Wide	1501 Debt Services	350,000	HA Wide	1502 Debt Services	350,000
	RI 2-1			RI 2-1		
	560 Prospect Street	1450 Site Improvements	75,000	560 Prospect Street		
	RI 2-2			RI 2-2		
	Galego Court	1450 Site Improvements	75,000	Galego Court	1460 Bulk Heads Replaced	20,000
	RI 2-3/5					



