

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 2007 - 2011

Annual Plan for Fiscal Year 2007

**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:** Fall River Housing Authority

**PHA Number:** MA006

**PHA Fiscal Year Beginning:** (04/2007)

**PHA Programs Administered:**

**Public Housing and Section 8**   
  **Section 8 Only**   
  **Public Housing Only**  
 Number of public housing units: 1569   
 Number of S8 units:   
 Number of public housing units:  
 Number of S8 units: 2431

**PHA Consortia:** (check box if submitting a joint PHA Plan and complete table)

Participating PHAs	PHA Code	Program(s) Included in the Consortium	Programs Not in the Consortium	# of Units Each Program
Participating PHA 1:				
Participating PHA 2:				
Participating PHA 3:				

### 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)  
Fall River Community Development Agency

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)  
Fall River Community Development Agency

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

**A. Mission**

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

- The mission of the PHA is the same as that of the Department of Housing and Urban Development: To promote adequate and affordable housing, economic opportunity and a suitable living environment free from discrimination.
- The PHA's mission is: (state mission here)  
The mission of the Fall River Housing Authority is to assist low-income families with safe, decent, and affordable housing opportunities as they strive to achieve self-sufficiency and improve the quality of their lives. The Housing Authority is committed to operating in an efficient, ethical, and professional manner. The Housing Authority will create and maintain partnerships with its clients and appropriate community agencies in order to accomplish this mission.

**B. Goals**

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

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

- PHA Goal: Expand the supply of assisted housing  
Objectives:
- Apply for additional rental vouchers:
  - Reduce public housing vacancies:
  - Leverage private or other public funds to create additional housing opportunities:
  - Acquire or build units or developments
  - Other (list below)
- PHA Goal: Improve the quality of assisted housing  
Objectives:
- Improve public housing management: (PHAS score)
  - Improve voucher management: (SEMAP score)
  - Increase customer satisfaction:

- Concentrate on efforts to improve specific management functions:  
(list; e.g., public housing finance; voucher unit inspections)
- Renovate or modernize public housing units:
- Demolish or dispose of obsolete public housing:
- Provide replacement public housing:
- Provide replacement vouchers:
- Other: (list below)

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

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

- PHA Goal: Provide an improved living environment  
Objectives:
  - Implement measures to deconcentrate poverty by bringing higher income public housing households into lower income developments:
  - Implement measures to promote income mixing in public housing by assuring access for lower income families into higher income developments:
  - Implement public housing security improvements:
  - Designate developments or buildings for particular resident groups (elderly, persons with disabilities)
  - Other: (list below)

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

- PHA Goal: Promote self-sufficiency and asset development of assisted households  
Objectives:
  - Increase the number and percentage of employed persons in assisted families:

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

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

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

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

**Annual PHA Plan**  
**PHA Fiscal Year 2007**  
[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.

**iii. Annual Plan Table of Contents**

[24 CFR Part 903.7 9 (r)]

Provide a table of contents for the Annual Plan, including attachments, and a list of supporting documents available for public inspection.

**Table of Contents**

Page #

**Annual Plan**

- i. Executive Summary
- ii. Table of Contents
  - 1. Housing Needs
  - 2. Financial Resources
  - 3. Policies on Eligibility, Selection and Admissions
  - 4. Rent Determination Policies
  - 5. Operations and Management Policies
  - 6. Grievance Procedures
  - 7. Capital Improvement Needs
  - 8. Demolition and Disposition
  - 9. Designation of Housing
  - 10. Conversions of Public Housing
  - 11. Homeownership
  - 12. Community Service Programs
  - 13. Crime and Safety

- 14. Pets (Inactive for January 1 PHAs)
- 15. Civil Rights Certifications (included with PHA Plan Certifications)
- 16. Audit
- 17. Asset Management
- 18. Other Information

**Attachments**

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

**Required Attachments:**

- Admissions Policy for Deconcentration (MA006a01)
- FY 2007 Capital Fund Program Annual Statement (MA006b01)
- 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 2007 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) (MA006e01)
- 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>
Yes	PHA Plan Certifications of Compliance with the PHA Plans and Related Regulations	5 Year and Annual Plans
Yes	State/Local Government Certification of Consistency with the Consolidated Plan	5 Year and Annual Plans
Yes	Fair Housing Documentation: Records reflecting that the PHA has examined its programs or proposed programs, identified any impediments to fair housing choice in those programs, addressed or is addressing those impediments in a reasonable fashion in view of the resources available, and worked or is working with local jurisdictions to implement any of the jurisdictions' initiatives to affirmatively further fair housing that require the PHA's involvement.	5 Year and Annual Plans
Yes	Consolidated Plan for the jurisdiction/s in which the PHA is located (which includes the Analysis of Impediments to Fair	Annual Plan: Housing Needs

<b>List of Supporting Documents Available for Review</b>		
<b>Applicable &amp; On Display</b>	<b>Supporting Document</b>	<b>Applicable Plan Component</b>
	Housing Choice (AI)) and any additional backup data to support statement of housing needs in the jurisdiction	
Yes	Most recent board-approved operating budget for the public housing program	Annual Plan: Financial Resources;
Yes	Public Housing Admissions and (Continued) Occupancy Policy (A&O), which includes the Tenant Selection and Assignment Plan [TSAP]	Annual Plan: Eligibility, Selection, and Admissions Policies
Yes	Section 8 Administrative Plan	Annual Plan: Eligibility, Selection, and Admissions Policies
Yes	Public Housing Deconcentration and Income Mixing Documentation: 1. PHA board certifications of compliance with deconcentration requirements (section 16(a) of the US Housing Act of 1937, as implemented in the 2/18/99 <i>Quality Housing and Work Responsibility Act Initial Guidance; Notice</i> and any further HUD guidance) and 2. Documentation of the required deconcentration and income mixing analysis	Annual Plan: Eligibility, Selection, and Admissions Policies
Yes	Public housing rent determination policies, including the methodology for setting public housing flat rents <input checked="" type="checkbox"/> check here if included in the public housing A & O Policy	Annual Plan: Rent Determination
Yes	Schedule of flat rents offered at each public housing development <input checked="" type="checkbox"/> check here if included in the public housing A & O Policy	Annual Plan: Rent Determination
Yes	Section 8 rent determination (payment standard) policies <input checked="" type="checkbox"/> check here if included in Section 8 Administrative Plan	Annual Plan: Rent Determination
Yes	Public housing management and maintenance policy documents, including policies for the prevention or eradication of pest infestation (including cockroach infestation)	Annual Plan: Operations and Maintenance
Yes	Public housing grievance procedures <input checked="" type="checkbox"/> check here if included in the public housing A & O Policy	Annual Plan: Grievance Procedures
Yes	Section 8 informal review and hearing procedures <input checked="" type="checkbox"/> check here if included in Section 8 Administrative Plan	Annual Plan: Grievance Procedures
Yes	The HUD-approved Capital Fund/Comprehensive Grant Program Annual Statement (HUD 52837) for the active grant year	Annual Plan: Capital Needs
N/A	Most recent CIAP Budget/Progress Report (HUD 52825) for any active CIAP grant	Annual Plan: Capital Needs
Yes	Most recent, approved 5 Year Action Plan for the Capital	Annual Plan: Capital Needs

<b>List of Supporting Documents Available for Review</b>		
<b>Applicable &amp; On Display</b>	<b>Supporting Document</b>	<b>Applicable Plan Component</b>
	Fund/Comprehensive Grant Program, if not included as an attachment (provided at PHA option)	
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
Yes	Approved or submitted applications for designation of public housing (Designated Housing Plans)	Annual Plan: Designation of Public Housing
Yes	Approved or submitted assessments of reasonable revitalization of public housing and approved or submitted conversion plans prepared pursuant to section 202 of the 1996 HUD Appropriations Act	Annual Plan: Conversion of Public Housing
N/A	Approved or submitted public housing homeownership programs/plans	Annual Plan: Homeownership
Yes	Policies governing any Section 8 Homeownership program <input checked="" type="checkbox"/> check here if included in the Section 8 Administrative Plan	Annual Plan: Homeownership
N/A	Any cooperative agreement between the PHA and the TANF agency	Annual Plan: Community Service & Self-Sufficiency
N/A	FSS Action Plan/s for public housing and/or Section 8	Annual Plan: Community Service & Self-Sufficiency
N/A	Most recent self-sufficiency (ED/SS, TOP or ROSS or other resident services grant) grant program reports	Annual Plan: Community Service & Self-Sufficiency
N/A	The most recent Public Housing Drug Elimination Program (PHDEP) semi-annual performance report for any open grant and most recently submitted PHDEP application (PHDEP Plan)	Annual Plan: Safety and Crime Prevention
Yes	The most recent fiscal year audit of the PHA conducted under section 5(h)(2) of the U.S. Housing Act of 1937 (42 U.S.C. 1437c(h)), the results of that audit and the PHA's response to any findings	Annual Plan: Annual Audit
N/A	Troubled PHAs: MOA/Recovery Plan	Troubled PHAs
	Other supporting documents (optional) (list individually; use as many lines as necessary)	(specify as needed)

**The Fall River Housing Authority has adopted and is implementing the provisions of the Violence Against Women Act of 2005. The policies and procedures adopted by the Authority are contained in our Violence Against Women Policies and Procedures and attached by reference to this Plan.**

## **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>							
Family Type	Overall	Afford-ability	Supply	Quality	Access-ibility	Size	Loca-tion
Income <= 30% of AMI	4	5	2	3	3	2	2
Income >30% but <=50% of AMI	3	3	2	3	3	2	2
Income >50% but <80% of AMI	2	2	2	2	3	2	2
Elderly	3	5	2	2	2	2	2
Families with Disabilities	2	3	2	2	2	2	2
Black	3	2	2	3	2	2	2
Hispanic	3	3	2	3	2	2	2
Asian	3	3	2	3	2	2	2
Race/Ethnicity							

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

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

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

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

Housing Needs of Families on the Waiting List			
Waiting list type: (select one)			
<input type="checkbox"/> Section 8 tenant-based assistance			
<input checked="" type="checkbox"/> Public Housing			
<input type="checkbox"/> Combined Section 8 and Public Housing			
<input type="checkbox"/> Public Housing Site-Based or sub-jurisdictional waiting list (optional)			
If used, identify which development/subjurisdiction:			
	# of families	% of total families	Annual Turnover
Waiting list total	3,013		310
Extremely low income <=30% AMI	2,862	95	
Very low income (>30% but <=50% AMI)	121	4	
Low income (>50% but <80% AMI)	30	01	
Families with children	2,083	69	
Elderly families	122	04	
Families with Disabilities	419	14	
Race/ethnicity White	2,199	73	
Race/ethnicity Black	699	23	
Race/ethnicity Asian	98	03	
Race/ethnicity NA	17	01	
Race/ethnicity Hispanic	809	27	
Characteristics by Bedroom Size (Public Housing Only)			
0 BR	9	03	
1BR	616	20	
2 BR	1,341	45	

Housing Needs of Families on the Waiting List			
3 BR	796	26	
4 BR	157	05	
5 BR	4	00	
5+ BR			
Is the waiting list closed (select one)? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
If yes:			
How long has it been closed (# of months)? N/A			
Does the PHA expect to reopen the list in the PHA Plan year? <input type="checkbox"/> No <input type="checkbox"/> Yes			
Does the PHA permit specific categories of families onto the waiting list, even if generally closed? <input type="checkbox"/> No <input type="checkbox"/> Yes			

The Section 8 waiting list is the MassNAHRO Centralized Waiting List and includes applicants from throughout the state – accounting for the large number of applicants.

Housing Needs of Families on the Waiting List			
Waiting list type: (select one)			
<input checked="" type="checkbox"/> Section 8 tenant-based assistance			
<input type="checkbox"/> Public Housing			
<input type="checkbox"/> Combined Section 8 and Public Housing			
<input type="checkbox"/> Public Housing Site-Based or sub-jurisdictional waiting list (optional)			
If used, identify which development/subjurisdiction:			
	# of families	% of total families	Annual Turnover
Waiting list total	40,421		310
Extremely low income <=30% AMI	40,253	91	
Very low income (>30% but <=50% AMI)	5,317	12	
Low income (>50% but <80% AMI)	558	01	
Families with children	28,013	63	
Elderly families	2,538	6	
Families with Disabilities	14,670	33	
Race/ethnicity White	21,029	47	
Race/ethnicity Black	8,810	19	
Race/ethnicity Asian	1,438	3	

<b>Housing Needs of Families on the Waiting List</b>			
Race/ethnicity Pac Isl	104	0	
Race/ethnicity NA	805	2	
Race/ethnicity Hispanic	13469	30	
Is the waiting list closed (select one)? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
If yes:			
How long has it been closed (# of months)? N/A			
Does the PHA expect to reopen the list in the PHA Plan year? <input type="checkbox"/> No <input type="checkbox"/> Yes			
Does the PHA permit specific categories of families onto the waiting list, even if generally closed? <input type="checkbox"/> No <input type="checkbox"/> Yes			

### **C. Strategy for Addressing Needs**

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

The Fall River Housing Authority has a significant vacancy rate in both our family and Elderly developments. Our effort during our FYE 03/31/07 will be to analyze the factors leading to the vacancy rate and develop procedures to increase occupancy and reduce unit turnaround time. We will create a vacancy reduction team and fund operation of it through operations HUD CFP.

The City as a whole also suffers from a significant vacancy rate, sometimes quoted as being between 10% and 12%.

The consulting firm RKG performed an analysis of the City's housing and concluded that the City has an excess of affordable housing.

As such we will concentrate our efforts on improving our existing housing through Modernization. We will also analyze the livability of our Family sites to determine if selective demolition should be considered to create more open space and increase the livability of the sites. We are no longer actively considering the conversion of Elderly Units to an Assisted Living Model. We however; reserve the right to reconsider if the market for housing and funding ability changes and makes the conversion possible and practical.

This strategy will enable the FRHA to use existing resources to meet the need and allow for future planning.

To assure the availability of units, we will use the project-basing of Section 8 (HCVP) units.

**(1) Strategies**

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

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

Select all that apply

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

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

Select all that apply

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

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

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

Select all that apply

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

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

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

Select all that apply

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

**Need: Specific Family Types: The Elderly**

**Strategy 1: Target available assistance to the elderly:**

Select all that apply

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

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

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

Select all that apply

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

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

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

Select if applicable

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

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

Select all that apply

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

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

**(2) Reasons for Selecting Strategies**

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

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

**2. Statement of Financial Resources**

[24 CFR Part 903.7 9 (b)]

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

<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	6,389,721	Operations
b) Public Housing Capital Fund	2,553,706	Capital Improvements
c) HOPE VI Revitalization	N/A	
d) HOPE VI Demolition	N/A	
e) Annual Contributions for Section 8 Tenant-Based Assistance	15,838,641	Operations
f) Public Housing Drug Elimination Program (including any Technical Assistance funds)	N/A	
g) Resident Opportunity and Self-Sufficiency Grants	N/A	
h) Community Development Block Grant	N/A	
i) HOME	N/A	
Other Federal Grants (list below)		
<b>2. Prior Year Federal Grants (unobligated funds only) (list below)</b>		
Capital Grant 50105	1,446,104	Capital Improvements
Capital Grant 50106	1,764,586	Capital Improvements
<b>3. Public Housing Dwelling Rental Income</b>	4,697,495	Operations
<b>4. Other income (list below)</b>		
Excess Utilities	90,600	Operations
<b>Non-Dwelling</b>	102,000	Operations
<b>4. Non-federal sources (list below)</b>	10,200	Operations
<b>Investment Income</b>	215,268	Operations
<b>Total resources</b>	33,108,321	
1) other income from PHA Units	10,200	Operations

### **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) 3 months.
- 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)

We will begin the practice of obtaining criminal and credit data from private bureaus where we have reason to believe that the prospective applicant has lived in a state outside of Massachusetts. We will also investigate and use Criminal Records maintained by the FBI and in accordance with published regulations.

##### **(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)

*A separate list is maintained for CMT MA006008 per our Designated Housing Plan. This will continue after conversion to Assisted Living.*

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

- PHA main administrative office
- PHA development site management office – will be forwarded to TS Dept
- Other (list below)

Or via Mail. The Authority also has a WEB page where any person may request that an application be mailed to them or downloaded.

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?

None

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:

Elderly applicants are allowed 2 refusals before they fall to the bottom of or are removed from the waiting list. They are dropped after their third refusal since our waiting list for elderly is relatively short.

**(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? Currently 83% of our occupants are extremely low income i.e. lower than 30% of median 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 or demolition of housing units)  
 Resident choice: (state circumstances below)  
 Other: (list below)

c. Preferences

1.  Yes  No: Has the PHA established preferences for admission to public housing (other than date and time of application)? (If “no” is selected, skip to subsection **(5) Occupancy**)
2. Which of the following admission preferences does the PHA plan to employ in the coming year? (select all that apply from either former Federal preferences or other preferences)

Former Federal preferences:

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

Other preferences: (select below)

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

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

Date and Time

Former Federal preferences:

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

Other preferences (select all that apply)

- 3  Working families and those unable to work because of age or disability
- Veterans and veterans' families
- 2  Residents who live and/or work in the jurisdiction
- 3  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)
- 1  Emergency applicants displaced by Fire, Natural Disaster, or Government action, including applicants in units determined to be uninhabitable by competent local authority shall be housed as an emergency case. Applicants granted emergency status will be housed in the next available unit appropriate for the family size. This will include families being displaced to the presence of Lead Paint that has been determined to be hazardous to a young child. Fall

River Residents will be chosen before non-Fall River Residents within this category.

- 4 A family who is suffering from Domestic Violence (including sexual abuse) by a spouse or other family member.

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?

Most recent analysis shows no need to deconcentrate any sites.

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)

**(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)      The FRHA participates in Centralized Waiting List sponsored and administered by MassNAHRO. Applicants may download the

application and submit it to any of the 50 PHA's participating in the Centralized List. Applications are also available by mail or in person at any of the 50 participating PHA's.

**(3) Search Time**

- a.  Yes  No: Does the PHA give extensions on standard 60-day period to search for a unit? OUR STANDARD VOUCHER HAS A 60 DAY TIME PERIOD.

If yes, state circumstances below:

Where an applicant can demonstrate that they were actively seeking an apartment but due to circumstances beyond their control they were not able to find an appropriate unit we will extend to 180 days.

**(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? Currently 83% of our Residents are at or below the 30% limit and we assure that at least 75% of our admissions are extremely low income applicants.

- b. Preferences

1.  Yes  No: Has the PHA established preferences for admission to section 8 tenant-based assistance? (other than date and time of application) (if no, skip to subcomponent **(5) Special purpose section 8 assistance programs**)
2. Which of the following admission preferences does the PHA plan to employ in the coming year? (select all that apply from either former Federal preferences or other preferences)

Former Federal preferences

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

Other preferences (select all that apply)

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

At least 15% of vouchers will be issued to handicapped/disabled applicants.

Special Admissions contained in Chapter 4 Section D of the Section 8 administrative Plan

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)

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

- 4 Victims of Domestic Violence
- 5 Disabled

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

- Date and time of application for applications received after 1/24/03
- Drawing (lottery) or other random choice technique for reopening 1/6/03 to 1/24/03

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.  
Our Policy does give preference to Extremely Low income residents if less than 75% of those being selected are not Extremely Low income residents

**(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  
Local Radio and Cable, including Portuguese Radio, Khmer Radio, local and state wide special interest groups representing Handicapped/Disabled Individuals
- Other (list below)

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

[24 CFR Part 903.7 9 (d)]

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

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

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

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

a. Use of discretionary policies: (select one)

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

---or---

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

b. Minimum Rent

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

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

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

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

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

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

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

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

For the earned income of a previously unemployed household member

For increases in earned income

Fixed amount (other than general rent-setting policy)

If yes, state amount/s and circumstances below:

Fixed percentage (other than general rent-setting policy)

If yes, state percentage/s and circumstances below:

For household heads

For other family members

For transportation expenses

For the non-reimbursed medical expenses of non-disabled or non-elderly families

Other (describe below)

e. Ceiling rents

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

Yes for all developments

Yes but only for some developments

No

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

For all developments

For all general occupancy developments (not elderly or disabled or elderly only)

For specified general occupancy developments

For certain parts of developments; e.g., the high-rise portion

For certain size units; e.g., larger bedroom sizes

Other (list below)

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

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

f. Rent re-determinations:

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

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

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

**(2) Flat Rents**

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

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

Analysis of rents that appear to be fair and appropriate for each individual site. Our analysis considered the uniqueness of our sites and the amenities available at each site and considers the fair rental value of each site as compared to private rents and Sec 8 FMR's

## B. Section 8 Tenant-Based Assistance

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

### (1) Payment Standards

Describe the voucher payment standards and policies.

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

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

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

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

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

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

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

- Annually
- Other (list below)

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

- Success rates of assisted families
- Rent burdens of assisted families

Other (list below)

## **(2) Minimum Rent**

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

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

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

## **5. Operations and Management**

[24 CFR Part 903.7 9 (e)]

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

### **A. PHA Management Structure**

Describe the PHA's management structure and organization.

(select one)

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

### **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	1,508	310
Section 8 Vouchers	2,114	220
Section 8 Certificates		
Section 8 Mod Rehab		
Special Purpose Section 8 Certificates/Vouchers (list individually)		
Public Housing Drug Elimination Program		

(PHDEP)		
Other Federal Programs(list individually)		

### C. Management and Maintenance Policies

L

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)

#### Maintenance Policies:

Preventative Maintenance Program, Maintenance Training Program, Custodial Activities, After-Hours Maintenance (Emergency) Services, Master Key Policy, Maintenance Procedures During Emergencies, Procedures for Stripping And Waxing Floors, Turning On of Gas Meters, Uniform Policy, Resident Maintenance Requests Policy, Maintenance Personnel Requirements, Advance Notice for Vacation Requests Policy and Pest Control Policy.

#### Management Policies:

ACOP (Admissions and Continued Occupancy Policy, Rent Collection Policy, Eviction Policy, Pet Policy and Grievance Procedure Policy, Personnel Policy, Procurement Policy, Capitalization Policy, and Disposition 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)  
The Sec 8 Rental Assistance Department at  
180 Morgan Street  
Fall River, Ma 02721

**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) MA006b01

-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 MA006c01

-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:

The Fall River Housing Authority is in the process of converting our Cardinal Medeiros Towers Development MA06P006008 to an Assisted Living Facility. A Mixed Finance Application has been submitted to HUD, resulting in the transfer of this site to a Non-Profit Corporation (an identity of interest non-profit subject to all HUD and Local regulatory and legislative requirements) if approved. One half of the units or about 102 will be Assisted Living with the remaining 102 as Elderly/Disabled Public Housing. About 4 units will be eliminated in the conversion

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.)

We are no longer actively considering the conversion of Elderly Units to an Assisted Living Model. We however; reserve the right to reconsider if the market for housing and funding ability changes and makes the conversion possible and practical.

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:	Cardinal Medeiros Towers
1b. Development (project) number:	MA06P006008
2. Activity type:	Demolition <input type="checkbox"/> Disposition <input checked="" type="checkbox"/>
3. Application status (select one)	Approved <input type="checkbox"/> Submitted, pending approval <input type="checkbox"/> Planned application <input checked="" type="checkbox"/>
4. Date application approved, submitted, or planned for submission:	<u>(2/28/2005)</u>
5. Number of units affected:	208
6. Coverage of action (select one)	<input type="checkbox"/> Part of the development <input checked="" type="checkbox"/> Total development
7. Timeline for activity:	a. Actual or projected start date of activity: 4/1/2005 b. Projected end date of activity: 9/30/2006

**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: Cardinal Medeiros Towers 1b. Development (project) number: MA06P006008
2. Designation type: Occupancy by only the elderly <input type="checkbox"/> Occupancy by families with disabilities <input type="checkbox"/> Occupancy by only elderly families and families with disabilities <input checked="" 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: <u>(02/16/2001)</u>
5. If approved, will this designation constitute a (select one) <input type="checkbox"/> New Designation Plan <input type="checkbox"/> Revision of a previously-approved Designation Plan?
6. Number of units affected: 208 7. Coverage of action (select one) <input type="checkbox"/> Part of the development <input checked="" type="checkbox"/> Total development This building is being considered for partial conversion to an Assisted Living Facility(ALF). One half of the building will become an ALF. The entire building will continue be available to house elderly families and families with disabilities.

<b>Designation of Public Housing Activity Description</b>
1a. Development name: O'Brien Apartments 1b. Development (project) number: MA06P006005
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: <u>(02/16/2001)</u>

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

<b>Designation of Public Housing Activity Description</b>
1a. Development name: Holmes Apartments
1b. Development (project) number: MA06P006006
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: <u>(02/16/2001)</u>
5. If approved, will this designation constitute a (select one)
<input type="checkbox"/> New Designation Plan
<input type="checkbox"/> Revision of a previously-approved Designation Plan?
6 Number of units affected: 100
7. Coverage of action (select one)
<input type="checkbox"/> Part of the development
<input checked="" type="checkbox"/> Total development

<b>Designation of Public Housing Activity Description</b>
1a. Development name: Oliveira Apartments
1b. Development (project) number: MA06P006007
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: <u>(02/16/2001)</u>
5. If approved, will this designation constitute a (select one)
<input type="checkbox"/> New Designation Plan
<input type="checkbox"/> Revision of a previously-approved Designation Plan?
6 Number of units affected: 84

7. Coverage of action (select one)

Part of the development

Total development

<b>Designation of Public Housing Activity Description</b>	
1a. Development name:	Cottell Heights
1b. Development (project) number:	MA06P006010
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:	<u>(02/16/2001)</u>
5. If approved, will this designation constitute a (select one)	<input type="checkbox"/> New Designation Plan <input type="checkbox"/> Revision of a previously-approved Designation Plan?
6. Number of units affected:	71
7. Coverage of action (select one)	<input type="checkbox"/> Part of the development <input checked="" type="checkbox"/> Total development

<b>Designation of Public Housing Activity Description</b>	
1a. Development name:	Mitchell Heights
1b. Development (project) number:	MA06P006011
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:	<u>(02/16/2001)</u>
5. If approved, will this designation constitute a (select one)	<input type="checkbox"/> New Designation Plan <input type="checkbox"/> Revision of a previously-approved Designation Plan?
6. Number of units affected:	104
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:	Sunset Hill
1b. Development (project) number:	MA06P006001
2. What is the status of the required assessment?	<input type="checkbox"/> Assessment underway <input checked="" 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 checked="" 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)

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

5. Description of how requirements of Section 202 are being satisfied by means other than conversion (select one)

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

Fall River Housing Authority submission and subsequent review by ABT associates resulted in conclusion that site is both viable and cheaper to maintain than vouchers.

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

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

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

[24 CFR Part 903.7 9 (k)]

**A. Public Housing**

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

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

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

2. Activity Description

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

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

**B. Section 8 Tenant Based Assistance**

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

2. Program Description:

a. Size of Program

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

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

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

b. PHA-established eligibility criteria

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

If yes, list criteria below: See Section 8 Administrative Plan

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

[24 CFR Part 903.7 9 (l)]

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

### **A. PHA Coordination with the Welfare (TANF) Agency**

1. Cooperative agreements:

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

The FRHA meets with Senior TANF Agency staff on a monthly basis to coordinate activities between the agencies. This process while not formal provides all of the benefits of a written agreement. The FRHA's Deputy Executive Director, Director of Management and Coordinator of Tenant Selection meet with the Director of the Local TANF Office.

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) The FRHA has a very strong working relationship with the local office of the state TANF agency. Our Social Service staff is in routine contact with this department and ideas and approaches to problems resolution and FRHA activities are discussed and resolved.

**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)

Watuppa Heights Center social activities., informational meetings	15	Interested tenants	Development office, main office	PH Tenants
Community Service Program	7	TANF Recipients	Various Sites	Both
Project Alert (SSTAR) at Bennie Costa Plaza Sunset Hill	20	Ages 8-14	Stanley Street Treatment & Resource	PH Tenants
Boy Scout Troop at Sunset Hill	8	Ages 7-up	Narragansett Council	PH Tenants
Mayor's Youth Council	5	Referrals & Outreach	Community Dev. Rec	PH Tenants
Sunset Hill After School Tutoring	25	Referrals & Outreach	Schools	PH Tenants
Old Colony Youth Build of Fall River	5	Referrals & Outreach	Bank Street Armory	PH Tenants
Sport-A-Rama	62	Ages 8-16	PH	PH Tenants
Boy's & Girl's Club	42	Interested Youngsters	Sunset Hill and Maple Gardens	PH Tenants

**(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: DD/MM/YY)
Public Housing	0	0
Section 8	25	0 (as of 11/1/2001) Completed

- 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: The FRHA met it goal and no longer has an active program

**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**

**The Fall River Housing Authority has adopted the requirement and is contained in our ACOP Section 14.0 Continued Occupancy and Community Service.**

**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)

**Sunset Hill, Heritage Heights, Diafario Village, No. Rocliffe, Fordney, Bennie Costa Plaza and Riley Plaza**

**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)

**Sunset Hill, Heritage Heights, Diafario Village, No. Rocliffe, Fordney, Bennie Costa Plaza and Riley Plaza**

**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)

**Sunset Hill, Heritage Heights, Diafario Village, No. Rocliffe, Fordney,  
Bennie Costa Plaza and Riley Plaza**

**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)] Our Pet Policy is attached as MA006m01

**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)

Housing Authority is developing procedures for and is converting its mangement at all sites to an Asset Based Management Model.

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 MA006e01
- Provided below:

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

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

The Agency Plan was developed with the Participation of the RAB and the Plan as drafted and submitted encompasses an agreed upon Plan

**B. Description of Election process for Residents on the PHA Board – Please note that a Resident has been appointed to the Board of the FRHA by the Mayor of the City of Fall River.**

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: (provide name here)
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)

Our Agency Plan and the City's Consolidated Plan are consistent in their goals and in addressing the Housing Needs of Fall River.

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

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

Substantial deviation is a material change to a FRHA [written] policy that requires approval by Fall River Housing Authority's (FRHA's) Board of Commissioners. It does not include a change in strategy, policy or procedure when the change is reasonably necessary to effectuate the intent, purpose or interpretation of FRHA's Agency Plan or other policy. A significant amendment or modification to an FRHA policy is one that will most likely result in a major effect upon the intent, purpose or interpretation of FRHA's Agency Plan or other policy. Discretionary or administrative amendments consonant with the Authority's stated overall mission and basic objectives will not be considered substantial deviations or significant modifications.

## Attachments

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

### Subject to final submission changes

Deconcentration Plan	MA006a01
Capital Plan Year 1	MA006b01
Capital Plan 5 Years	MA006b01
Violence Against Women Act Policy	MA006c01
Community Service Monitoring Procedure	MA006d01
Resident Advisory Board Summary	MA006e01
Admissions and Continued Occupancy Policies	MA006f01
Section 8 Administrative Plan	MA006g01
Rent Policies	MA006h01
Grievance Procedures	MA006i01
Maintenance Policy	MA006j01
Pest Control Policy	MA006k01
Section 8 Payment Standard	MA006l01
Pet Policy	MA006m01
Community Service Policy	MA006n01
New Federal Lease	MA006o01
Ann Statement/Perf and Eval Rpt MA06-P006-50203	MA006p01
Ann Statement/Perf and Eval Rpt MA06-P006-50104	MA006q01
Ann Statement/Perf and Eval Rpt MA06-P006-50105	MA006r01
Ann Statement/Perf and Eval Rpt MA06-P006-50106	MA006s01
RAB Agreement with PHA Plan	MA006x01

# PHA Plan Table Library

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

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

Capital Fund Grant Number      FFY of Grant Approval: (MM/YYYY)

Original Annual Statement

Line No.	Summary by Development Account	Total Estimated Cost
1	Total Non-CGP Funds	
2	1406 Operations	
3	1408 Management Improvements	
4	1410 Administration	
5	1411 Audit	
6	1415 Liquidated Damages	
7	1430 Fees and Costs	
8	1440 Site Acquisition	
9	1450 Site Improvement	
10	1460 Dwelling Structures	
11	1465.1 Dwelling Equipment-Nonexpendable	
12	1470 Nondwelling Structures	
13	1475 Nondwelling Equipment	
14	1485 Demolition	
15	1490 Replacement Reserve	
16	1492 Moving to Work Demonstration	
17	1495.1 Relocation Costs	
18	1498 Mod Used for Development	
19	1502 Contingency	
20	<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

**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>				



**APPENDIX 1**  
**AS of 09/01/2006**  
**Fall River Housing Authority**  
**Deconcentration Policy for Federal Family Developments**

Pursuant to the requirements of the Quality Housing and Work Responsibility Act of 1998 (QHWRA) the FRHA is hereby implementing a Deconcentration Plan to assure that families with children are not concentrated in our various federally aided family developments.

We have analyzed the income levels in the affected family developments and the following information summarizes the results.

Summary of Average Family Income Levels

Location	Average Family Income	Acceptable Range (85 to 115%)
All Federal Family Sites	13,068	11,108 to 15,028
Sunset Hill	13,823	Within
Heritage Heights	11,145	Within
Diafario Village	12,120	Within
No. Rocliffe Apts	12,553	Within
Fordney Apartments	13,962	Within
Bennie Costa Plaza	14,715	Within
Riley Apartments	15,340	Above See Note Below (1)

In order to comply with the requirements of QHWRA we will adjust our Admissions and Continued Occupancy Plan to provide for the following actions:

1) All sites are within the limits as calculated pursuant to HUD regulations and therefore we not require any selection of residents based on income until the Income Levels are recomputed one year from now.

HUD has issued regulations eliminating the need for deconcentration at sites that have an average income at or below the extremely low income level.

(1) Riley Plaza is a site that potentially would be subject to the Deconcentration process since it is not within the 85 to 115% range. Riley Plaza has an average income of \$15,340 per year as adjusted for Bedroom distribution. It has an average family size of 4. The Extremely Low Income Limits for a 4 person family \$21,950. The average income is well below the threshold set in 24CFR903.2. i.e. the site is below the Extremely Low Income Threshold and therefore the upper limit shall never be less than the limit at which a family would be defined as an extremely low income family under 24CFR5.603(b).

## CAPITAL FUND PROGRAM TABLES START HERE

Annual Statement/Performance and Evaluation Report					
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary					
PHA Name: Fall River Housing Authority		Grant Type and Number Capital Fund Program Grant No: MA06-P006-50107 Replacement Housing Factor Grant No:		Federal FY of Grant: 2007	
<input checked="" type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input type="checkbox"/> Revised Annual Statement (revision no: ) <input type="checkbox"/> Performance and Evaluation Report for Period Ending: <input type="checkbox"/> Final Performance and Evaluation Report					
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations	65,000			
3	1408 Management Improvements Soft Costs	510,000			
	Management Improvements Hard Costs				
4	1410 Administration	250,000			
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	100,000			
8	1440 Site Acquisition				
9	1450 Site Improvement	50,000			
10	1460 Dwelling Structures	1,278,706			
11	1465.1 Dwelling Equipment—Nonexpendable	50,000			
12	1470 Nondwelling Structures	200,000			
13	1475 Nondwelling Equipment	50,000			
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1499 Development Activities				
19	1502 Contingency				
	Amount of Annual Grant: (sum of lines.....)	2,553,706			
	Amount of line XX Related to LBP Activities				
	Amount of line XX Related to Section 504 compliance				
	Amount of line XX Related to Security –Soft Costs				
	Amount of Line XX related to Security-- Hard Costs				
	Amount of line XX Related to Energy Conservation Measures				
	Collateralization Expenses or Debt Service				

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

PHA Name: Fall River Housing Authority		Grant Type and Number Capital Fund Program Grant No: MA06-P006-50107 Replacement Housing Factor Grant No:				Federal FY of Grant: 2007		
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				
PHA Wide	Operations	1406		65,000				
PHA Wide	Elder Services Contract	1408		15,000				
PHA Wide	Police/Security Guard Contracts	1408		460,000				
PHA Wide	Tenant Coordinator(s)	1408		10,000				
PHA Wide	Computer Software	1408		25,000				
PHA Wide	CFP Administrative Cost	1410		250,000				
PHA Wide	Fees & Costs – A/E Services	1430		100,000				
PHA Wide	Site Improvement – Curb Appeal	1450		50,000				
PHA Wide	Vacancy Day Reduction Program	1460		25,000				
PHA Wide	Apartment Upgrades	1460		100,000				
6-1	Tub-Reglazing	1460		20,000				
6-1	One-bedroom Conversions	1460		118,706				
6-1	Replace Door Hardware	1460		10,000				
6-1	Window Glazing	1460		10,000				
6-1	Baseboard Upgrade	1460		20,000				
6-1	Screen Door Replacement	1460		10,000				
6-2	Building Entrance Doors/Intercoms	1460		10,000				
6-2	Apartment Painting	1460		10,000				
6-2	Replace Zone Valves/Heating Upgrade	1460		25,000				
6-2	Sump Pump Replacement	1460		10,000				
6-2	Replace Door Hardware	1460		10,000				
6-3	Baseboard Upgrade	1460		25,000				
6-3	Replace mixing valves	1460		25,000				
6-3	Window Glazing	1460		10,000				
6-4	Replace Mixing Valves	1460		25,000				
6-4	Replace Hot Water Storage Tanks	1460		25,000				
6-5	Building Exterior Repairs	1460		10,000				
6-5	Handicap Access Upgrades	1460		30,000				
6-6	Building Entry Lighting	1460		10,000				
6-6	Building Exterior Repairs	1460		20,000				
6-6	Replace Mixing Valves	1460		25,000				

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

PHA Name: Fall River Housing Authority		Grant Type and Number Capital Fund Program Grant No: MA06-P006-50107 Replacement Housing Factor Grant No:				Federal FY of Grant: 2007			
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				
6-6	Replace Lavatories		1460		20,000				
6-6	Handicap Access Upgrades		1460		20,000				
6-6	Apartment Lighting Upgrades		1460		10,000				
6-7	Replace Mixing Valves		1460		25,000				
6-7	Replace Lavatories and Toilets		1460		25,000				
6-8	Heating System Upgrades		1460		25,000				
6-8	Replace Lavatories and Toilets		1460		25,000				
6-8	Handicap Access Upgrades		1460		20,000				
6-10	Window Replacement		1460		50,000				
6-10	Water Riser Replacement		1460		25,000				
6-10	Replace Tub Overflows		1460		10,000				
6-10	Replace Lavatories and Toilets		1460		25,000				
6-10	Handicap Access Upgrades		1460		20,000				
6-11	Water Riser Replacements		1460		25,000				
6-11	Handicap Access Upgrades		1460		20,000				
6-13	Replace Bathroom Exhaust Fans		1460		20,000				
6-13	Kitchen Floor Replacements		1460		10,000				
6-13	Apartment Door Replacements (interior)		1460		10,000				
6-13	Kitchen & Bath Upgrade		1460		30,000				
6-13	Building Exterior Repairs		1460		25,000				
6-15	Replace Bathroom Exhaust Fans		1460		10,000				
6-15	Kitchen Floor Replacements		1460		10,000				
6-15	Apartment Door Replacements (interior)		1460		10,000				
6-15	Kitchen & Bath Upgrade		1460		30,000				
6-15	Building Exterior Repairs		1460		25,000				
6-16	Replace Bathroom Exhaust Fans		1460		10,000				
6-16	Kitchen Floor Replacements		1460		10,000				
6-16	Apartment Door Replacements (interior)		1460		10,000				
6-16	Kitchen & Bath Upgrade		1460		30,000				
6-16	Building Exterior Repairs		1460		25,000				
6-17	Replace Bathroom Exhaust Fans		1460		10,000				

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

PHA Name: Fall River Housing Authority		Grant Type and Number Capital Fund Program Grant No: MA06-P006-50107 Replacement Housing Factor Grant No:				Federal FY of Grant: 2007			
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				
6-17	Kitchen Floor Replacements		1460		10,000				
6-17	Apartment Door Replacements (interior)		1460		10,000				
6-17	Kitchen & Bath Upgrade		1460		30,000				
6-17	Building Exterior Repairs		1460		25,000				
PHA Wide	Apartment Appliances		1465		50,000				
PHA Wide	Office Upgrades		1470		25,000				
PHA Wide	Security Upgrades/Cameras/Lighting		1470		150,000				
PHA Wide	Common Area Upgrades		1470		25,000				
PHA Wide	Snow Removal Equipment/Vehicle		1475		50,000				

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

PHA Name: Fall River Housing Authority		<b>Grant Type and Number</b> Capital Fund Program No: MA06-P006-50107 Replacement Housing Factor No:					<b>Federal FY of Grant: 2007</b>	
Development Number Name/HA-Wide Activities	All Fund Obligated (Quarter Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates	
	Original	Revised	Actual	Original	Revised	Actual		
MA6-01 SUNSET HILL	08/09			08/11				
MA6-02 HERITAGE	08/09			08/11				
MA6-03 DIAFERIO	08/09			08/11				
MA6-04 OAK VILLAGE	08/09			08/11				
MA6-05 O'BRIEN	08/09			08/11				
MA6-06 HOLMES	08/09			08/11				
MA6-07 OLIVEIRA	08/09			08/11				
MA6-08 MEDEIROS	08/09			08/11				
MA6-10 COTTELL	08/09			08/11				
MA6-11 MITCHELL	08/09			08/11				
MA6-13 N. ROCLIFFE	08/09			08/11				
MA6-15 FORDNEY ST	08/09			08/11				
MA6-16 BENNIE COSTA	08/09			08/11				
MA6-17 RILEY PLAZA	08/09			08/11				

# Capital Fund Program Five-Year Action Plan

## Part I: Summary

PHA Name Fall River Housing Authority		X - Original 5-Year Plan <input type="checkbox"/> Revision No:			
Development Number/Name/HA-Wide	Year 1 FFY 2007	Work Statement for Year 2 FFY Grant: 2008 PHA FY: 2009	Work Statement for Year 3 FFY Grant: 2009 PHA FY: 2010	Work Statement for Year 4 FFY Grant: 2010 PHA FY: 2011	Work Statement for Year 5 FFY Grant: 2011 PHA FY: 2012
MA 06-01	Annual Statement	437,036	241,586	241,586	351,586
MA 06-02		4,550	180,000	300,000	150,000
MA 06-03		40,000	270,000	160,000	160,000
MA 06-04		70,000	20,000	250,000	110,000
MA 06-05		100,000	110,000	110,000	160,000
MA 06-06		110,000	150,000	150,000	150,000
MA 06-07		200,000	30,000	80,000	100,000
MA 06-08		280,000	30,000	30,000	100,000
MA 06-10		240,000	340,000	130,000	100,000
MA 06-11		160,000	30,000	90,000	50,000
MA 06-13		10,000	10,000	50,000	50,000
MA 06-15		10,000	10,000	50,000	50,000
MA 06-16		60,000	50,000	50,000	50,000
MA 06-17		10,000	180,000	30,000	50,000
PHA WIDE		822,120	972,120	832,120	922,120
Total CFP Funds (Est.)		2,553,706	2,553,706	2,553,706	2,553,706
Total Replacement Housing Factor Funds					

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

Activities for Year 1	Activities for Year : 2 FFY Grant: 2008 PHA FY: 2009			Activities for Year: 3 FFY Grant: 2009 PHA FY: 2010		
	Development Number	Major Work Catagories	Estimated Cost	Development Number	Major Work Catagories	Estimated Cost
See Annual Statement FFY 2007	PHA Wide	Operations	\$10,000	PHA Wide	Operations	\$10,000
	PHA Wide	Elder services Coord.	\$50,000	PHA Wide	Elder services Coord.	\$50,000
	PHA Wide	Police/Security	\$460,000	PHA Wide	Police/Security	\$460,000
	PHA Wide	Project Manager	\$70,000	PHA Wide	Project Manager	\$70,000
	PHA Wide	Mod. & Dev. Coord.	\$55,000	PHA Wide	Mod. & Dev. Coord.	\$55,000
	PHA Wide	Fringe benefits	\$72,120	PHA Wide	Fringe benefits	\$72,120
	PHA Wide	Tenant Coord.	\$5,000	PHA Wide	Tenant Coord.	\$5,000
	PHA Wide	Fees & Costs - AE	\$100,000	PHA Wide	Fees & Costs - AE	\$100,000
	MA 6-01	Replace Bathroom Floor	\$237,036	PHA Wide	Site Improvements	\$100,000
	MA 6-01	Foundation Repairs	\$200,000	PHA Wide	Vacancy Reduction	\$50,000
	MA 6-02	Window Glazing	\$4,550	MA 6-01	Replace Sump Pumps	\$10,000
	MA 6-03/28/31	Window Glazing	\$10,000	MA 6-01	Parking Upgrades	\$50,000
	MA 6-03/28/31	Install Sewer Line Pits	\$10,000	MA 6-01	Playground Upgrades	\$50,000
	MA 6-03/28/31	Repair Retaining Walls	\$10,000	MA 6-01	Unit Kitch. Upgrades	\$101,586
	MA 6-03/28/31	Heat in C.R. Baths	\$10,000	MA 6-01	Admin Bldg. AC Impr.	\$30,000
	MA 6-04	Parking Area Upgrade	\$50,000	MA 6-02	New Circ. Pumps	\$10,000
	MA 6-04	Comm. Bldg. Floors	\$10,000	MA 6-02	Parking Upgrades	\$50,000
	MA 6-04	Comm. Rm. A/C	\$10,000	MA 6-02	Playground Upgrades	\$10,000
	MA 6-05	Parking Area Upgrade	\$50,000	MA 6-02	Replace Boilers (ESCo)	\$10,000
	MA 6-05	Fire Alarm Upgrade	\$40,000	MA 6-02	Unit Kitch. Upgrades	\$100,000
	MA 6-05	Sprinkler Sys. Upgrades	\$10,000	MA 6-03/28/31	Fire Alarm Upgrades	\$40,000
	MA 6-06	CR Bath Upgrade	\$10,000	MA 6-03/28/31	Playground upgrades	\$10,000
	MA 6-06	Security Camera Sys.	\$40,000	MA 6-03/28/31	Siding Repairs	\$10,000
	MA 6-06	Window Glazing	\$10,000	MA 6-03/28/31	Screen Door Replace.	\$100,000
	MA 6-06	Fire Alarm Upgrade	\$40,000	MA 6-03/28/31	Bulkhead Upgrades	\$10,000
	MA 6-06	Sprinkler Sys. Upgrades	\$10,000	MA 6-03/28/31	Replace Mixing Valves	\$50,000
	MA 6-07	Kitchen Lighting Upgr.	\$10,000	MA 6-03/28/31	Security System/Lights	\$40,000
	MA 6-07	Security Camera Sys.	\$40,000	MA 6-03/28/31	Speed Bumps	\$10,000
	MA 6-07	Exterior Repairs	\$50,000	MA 6-04	Replace Attic Piping	\$10,000
	MA 6-07	Fire Alarm Upgrade	\$40,000	MA 6-04	Heating Upgrades	\$10,000
	MA 6-07	Sprinkler Sys. Upgrades	\$10,000	MA-6-05	Security System/Lights	\$40,000
	MA 6-07	Parking Lot Impr.	\$50,000	MA 6-05	Replace Water Risers	\$60,000
	MA 6-08	Mezz. Bath Upgrade	\$10,000	MA 6-05	New Trash Containers	\$10,000
	MA 6-08	Parking Lot Improv.	\$50,000	MA 6-06	Parking Upgrades	\$50,000

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

Activities for Year 1	Activities for Year : 2 FFY Grant: 2008 PHA FY: 2009			Activities for Year: 3 FFY Grant: 2009 PHA FY: 2010		
	Development Number	Major Work Catagories	Estimated Cost	Development Number	Major Work Catagories	Estimated Cost
See Annual Statement FFY 2007	MA 6-08	Comm. Rm. Upgrades	\$10,000	MA 6-06	Common Area Improve.	\$10,000
	MA 6-08	New Tr. Comp. Rm. Drs	\$20,000	MA 6-06	New Trash Containers	\$10,000
	MA 6-08	Common Area Upgrades	\$30,000	MA 6-06	Replace Water Shut-offs	\$10,000
	MA 6-08	Exterior Lighting Upgr.	\$10,000	MA 6-07	Common Area Improve.	\$10,000
	MA 6-08	Replace Baseboard Cvr	\$10,000	MA 6-07	C.R. Window Treat.	\$10,000
	MA 6-08	Repl. Bath Faucets	\$10,000	MA 6-07	New Trash Containers	\$10,000
	MA 6-08	Riser Replacement	\$30,000	MA 6-08	Replace Circ. Pumps	\$10,000
	MA 6-08	Bldg. Ext. Repairs	\$50,000	MA 6-08	Common Area Improve.	\$10,000
	MA 6-08	Sprinkler Sys. Upgrades	\$10,000	MA 6-08	New Trash Containers	\$10,000
	MA 6-08	Security Camera Sys.	\$40,000	MA 6-10	Replace Circ. Pumps	\$10,000
	MA 6-10	Repair Concr. Canopy	\$20,000	MA 6-10	Replace Roof	\$110,000
	MA 6-10	Fire Alarm Upgrade	\$40,000	MA 6-10	Replace Water Shut-offs	\$10,000
	MA 6-10	Comm. Rm. Upgrades	\$10,000	MA 6-10	Parking Upgrades	\$50,000
	MA 6-10	Common Area Upgrades	\$20,000	MA 6-10	Apt. Floor Replacement	\$150,000
	MA 6-10	DHW Tank Replace	\$50,000	MA 6-10	New Trash Containers	\$10,000
	MA 6-10	Bldg. Ext. Repairs	\$50,000	MA 6-11	Replace Circ. Pumps	\$10,000
	MA 6-10	Sprinkler Sys. Upgrades	\$10,000	MA 6-11	Heating Sys. Upgrade	\$10,000
	MA 6-10	Security Camera Sys.	\$40,000	MA 6-11	New Trash Containers	\$10,000
	MA 6-11	Sprinkler Sys. Upgrades	\$10,000	MA 6-13	New Bath Exhaust Fans	\$10,000
	MA 6-11	Security Camera Sys.	\$40,000	MA 6-15	Roof Replacements	\$10,000
	MA 6-11	Fire Alarm Upgrade	\$40,000	MA 6-16	Bldg. Exterior Upgrade	\$50,000
	MA 6-11	Common Area Upgrades	\$10,000	MA 6-17	Parking Upgrades	\$50,000
	MA 6-11	New Roof	\$50,000	MA 6-17	Playground Equipment	\$10,000
	MA 6-11	Replace Air Handlers	\$10,000	MA 6-17	Replace Water Shut-offs	\$10,000
	MA 6-13	Range Outlet Upgrade	\$10,000	MA 6-17	Apt. Floor Replacement	\$10,000
	MA 6-15	Range Outlet Upgrade	\$10,000	MA 6-17	Bldg. Exterior Upgrade	\$100,000
	MA 6-16	Range Outlet Upgrade	\$10,000			
	MA 6-16	Roof Replacements	\$50,000			
	MA 6-17	Range Outlet Upgrade	\$10,000			

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

Activities for Year 1	Activities for Year : 4 FFY Grant: 2010 PHA FY: 2011			Activities for Year: 5 FFY Grant: 2011 PHA FY: 2012		
	Development Number	Major Work Catagories	Estimated Cost	Development Number	Major Work Catagories	Estimated Cost
See Annual Statement FFY 2007	PHA Wide	Operations	\$10,000	PHA Wide	Operations	\$10,000
	PHA Wide	Elder services Coord.	\$50,000	PHA Wide	Elder services Coord.	\$50,000
	PHA Wide	Police/Security	\$460,000	PHA Wide	Police/Security	\$460,000
	PHA Wide	Project Manager	\$70,000	PHA Wide	Project Manager	\$70,000
	PHA Wide	Mod. & Dev. Coord.	\$55,000	PHA Wide	Mod. & Dev. Coord.	\$55,000
	PHA Wide	Fringe benefits	\$72,120	PHA Wide	Fringe benefits	\$72,120
	PHA Wide	Tenant Coord.	\$5,000	PHA Wide	Tenant Coord.	\$5,000
	PHA Wide	Fees & Costs - AE	\$100,000	PHA Wide	Fees & Costs - AE	\$100,000
	PHA Wide	Relocation for Mod.	\$10,000	PHA Wide	New Apt. Appliances	\$100,000
	MA 6-01	Replace Windows/Scr.	\$101,586	MA 6-01	Roof Replacements	\$101,586
	MA 6-01	Fire Alarm Upgrade	\$40,000	MA 6-01	Chimney Waterproof	\$100,000
	MA 6-01	Apt. Bath Upgrade	\$100,000	MA 6-01	Apartment Upgrades	\$100,000
	MA 6-02	Fire Alarm Upgrades	\$40,000	MA 6-01	Mech. Upgrades	\$50,000
	MA 6-02	Replace Wind./Screens	\$100,000	MA 6-02	Roof Replacements	\$50,000
	MA 6-02	Apt. Bath Upgrades	\$100,000	MA 6-02	Bldg. Envelope Repair	\$50,000
	MA 6-02	HC Access Upgrades	\$10,000	MA 6-02	Mechanical Upgrades	\$50,000
	MA 6-02	Common Area Upgrades	\$10,000	MA 6-03/28/31	Roof Replacements	\$50,000
	MA 6-02	Security System/Lights	\$40,000	MA 6-03/28/31	Apartment Upgrades	\$50,000
	MA 6-03/28/31	Replace Bath Exhausts	\$10,000	MA 6-03/28/31	Mechanical Upgrades	\$50,000
	MA 6-03/28/31	Repl. Windows/Screens	\$100,000	MA 6-03/28/31	Common Area/Offices	\$10,000
	MA 6-03/28/31	Parking Upgrades	\$50,000	MA 6-04	Bldg. Exterior Repairs	\$50,000
	MA 6-04	Sewer Line Replace	\$10,000	MA 6-04	Mechanical Upgrades	\$50,000
	MA 6-04	Security System/Lights	\$40,000	MA 6-04	Repl. Windows/Screens	\$10,000
	MA 6-04	Apartment Upgrades	\$100,000	MA 6-05	Roof Replacement	\$50,000
	MA 6-04	Roof Replacement	\$100,000	MA 6-05	Window Replacement	\$100,000
	MA 6-05	Bldg. Entrance Impr.	\$10,000	MA 6-05	Mechanical Upgrades	\$10,000
	MA 6-05	Trash Compactor Upgr.	\$30,000	MA 6-06	Roof Replacement	\$50,000
	MA 6-05	Bldg. Exterior Repair	\$50,000	MA 6-06	Apartment Upgrades	\$50,000
	MA 6-05	Common Area Upgrade	\$10,000	MA 6-06	Mechanical Upgrades	\$50,000
	MA 6-05	Apt. Flooring Replace	\$10,000	MA 6-07	Roof Replacement	\$50,000
	MA 6-06	Water Riser Replace	\$30,000	MA 6-07	Mechanical Upgrades	\$50,000
	MA 6-06	Mixing Valve Replace	\$10,000	MA 6-08	Roof Replacements	\$50,000
	MA 6-06	Bldg. Entry Improve.	\$10,000	MA 6-08	Window Replacement	\$50,000
	MA 6-06	Trash Compactor Upgr.	\$30,000	MA 6-10	Window Replacement	\$50,000

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

Activities for Year 1	Activities for Year : 4 FFY Grant: 2010 PHA FY: 2011			Activities for Year: 5 FFY Grant: 2011 PHA FY: 2012		
	Development Number	Major Work Catagories	Estimated Cost	Development Number	Major Work Catagories	Estimated Cost
See Annual Statement FFY 2007	MA 6-06	Apt. Floor Replacement	\$10,000	MA 6-10	Mechanical Upgrades	\$50,000
	MA 6-06	Bldg. Exterior Repairs	\$50,000	MA 6-11	Window Replacement	\$50,000
	MA 6-06	HC Access Upgrade	\$10,000	MA 6-13	Roof Replacements	\$50,000
	MA 6-07	Bldg. Entry Upgrade	\$10,000	MA 6-15	Bldg Exterior Repairs	\$50,000
	MA 6-07	Apt. Floor Replacement	\$10,000	MA 6-16	Window Replacement	\$50,000
	MA 6-07	Water Riser Replace	\$20,000	MA 6-17	Roof Replacements	\$50,000
	MA 6-07	Trash Compactor Repla.	\$30,000			
	MA 6-07	HC Access Upgrade	\$10,000			
	MA 6-08	Trash Compactor Repl.	\$30,000			
	MA 6-10	Bldg. Entry Upgrade	\$10,000			
	MA 6-10	Trash Compactor Repl.	\$30,000			
	MA 6-10	Bldg. Exterior Repairs	\$10,000			
	MA 6-10	Emergency Generator	\$70,000			
	MA 6-10	Replace Mixing Valves	\$10,000			
	MA 6-11	Bldg. Entry Upgrade	\$10,000			
	MA 6-11	Trash Compactor Repl.	\$30,000			
	MA 6-11	Common Area Upgrades	\$10,000			
	MA 6-11	Bldg. Exterior Repairs	\$10,000			
	MA 6-11	Apt. Floor Replacement	\$10,000			
	MA 6-11	Apt. Lighting Upgrade	\$10,000			
	MA 6-11	Mechanical Upgrades	\$10,000			
	MA 6-13	Apt. Floor Replacement	\$10,000			
	MA 6-13	Apt. Electric Upgrades	\$20,000			
	MA 6-13	Bldg. Exterior Lighting	\$10,000			
	MA 6-13	Replace Gate Valves	\$10,000			
	MA 6-15	Apt. Floor Replacement	\$10,000			
	MA 6-15	Apt. Electric Upgrades	\$20,000			
	MA 6-15	Bldg. Exterior Lighting	\$10,000			
	MA 6-15	Replace Gate Valves	\$10,000			
	MA 6-16	Apt. Floor Replacement	\$10,000			
	MA 6-16	Apt. Electric Upgrades	\$20,000			
	MA 6-16	Bldg. Exterior Lighting	\$10,000			
	MA 6-16	Replace Gate Valves	\$10,000			
	MA 6-17	Apt. Floor Replacement	\$10,000			
	MA 6-17	Apt. Electric Upgrades	\$20,000			

## **Summary of RAB MEETINGS and PUBLIC HEARING**

The Fall River Housing Authority (FRHA), pursuant to Federal Guidelines, appointed the Citywide legal representation of the developments--the Fall River Joint Tenants Council, Inc. (JTC)--as the Resident Advisory Board (RAB).

The members of the RAB are as follows:

William H. King, Public Housing  
Bette Ann Lavoie, Public Housing  
Muriel Berryman, Public Housing  
Donald Keyser, Public Housing  
Mary Pacheco, Public Housing  
John English, Public Housing  
Rosemary Cutler, Public Housing  
Joseph Souza, Public Housing  
Pearl LePage, Public Housing  
Jack Cooper, Mass. Union of Public Housing Tenants  
Margarita Morales, Mass. Union of Public Housing Tenants  
Susan Hayes, Section 8, Tenant Based  
Le'Shawn Long, Section 8, Tenant Based  
Lisa Copeland, Section 8, Tenant Based

The RAB also had the following unofficial member/observer that represented our state aided developments insofar as issues such as lease and grievance procedures also will affect them.

Adeline Adams, State Aided Public Housing, Unofficial Member/Observer  
Connie Proto, State Aided Public Housing, Unofficial Member/Observer

Seven meetings were held and the Five Year and Annual Plans were presented to the RAB and discussed at length.

### **RAB Meeting #1 September 26 , 2006**

Please be advised that the first meeting of the RAB was held on Tuesday, September 26, 2006 regarding the Authority's upcoming submission of the Agency Plan for 2007.

Thirteen (13) participants were in attendance at this meeting, and items discussed were as follows:

Mr. McDonald introduced himself and requested each participant to do the same. Two new participants from the Housing Choice Voucher Program (Section 8) have joined the Resident Advisory Board, and we look forward to having them in attendance at our RAB meetings.

Mr. McDonald distributed a copy of the Public Housing Agency Plan Desk Guide, prepared by the Department of Housing & Urban Development (HUD) (the funding source of our federal programs) to anyone who requested same, and gave a general description of the Guide.

The Desk Guide is a helpful tool and participants were urged to read it in order to gain a better understanding of the Agency Plan submission process.

The Quality Housing and Work Responsibility Act (QHWRA) of 1999 requires public housing authorities to do an annual plan of its operational policies and the spending of its modernization funds.

Over the course of these meetings, we will have a number of discussions regarding the policies and how the modernization funds will be allocated.

During the meeting Mr. McDonald distributed a draft of the Capital Fund Program items for the 2007 Agency Plan submission, as well as a copy of last year's submission. A discussion was held regarding the upcoming modernization items, and Mr. McDonald explained that the residents and Resident Advisory Board members will have a great deal of input in these modernization work items before the final submission.

There was a brief question and answer period following the meeting.

Some of the topics that will be discussed at the 2<sup>nd</sup> RAB meeting (on Tuesday, October 3, 2006) are as follows:

**DECONCENTRATION POLICY** --The Fall River Housing Authority is required to analyze the federal family developments every year to make sure that we are not clustering residents by income--i.e. having all very low income residents at one site.

After analyzing the income levels in the affected family developments, it was determined that all sites are within the limits pursuant to HUD regulations; and, therefore, we are not required to make any selection of residents by income until the income levels are recomputed one year from now. (Copy enclosed.)

**RENT POLICIES**--FRHA residents in our federal developments have the option of paying their rent on a percentage or flat rent basis. The Flat Rent system was introduced to enable higher-income residents to remain in public housing, without having to pay exorbitant rents. Our rents continue to be significantly lower than rents in private housing, and the FRHA only raises the flat rents a minimal amount each year to satisfy HUD requirements. (Copy of revised Flat Rents, effective April 1, 2007 is enclosed.)

**SECTION 8 PAYMENT STANDARDS** –The revised Section 8 Payment Standards, effective January 1, 2007, are enclosed for your review.

## **RAB Meeting #2 October 3, 2006**

Please be advised that the 2nd meeting of the RAB was held on Tuesday, October 3, 2006 regarding the Authority's upcoming submission of the Agency Plan for 2007.

Thirteen (13) participants were in attendance at this meeting, and items discussed were as follows:

Mr. King and Ms. Berryman requested clarification regarding the current excess utility charge associated with stand-alone food freezers. Mr. King stated that he didn't recall the RAB agreeing to the charge of \$10 per month. Mr. McDonald stated that he would research the date(s) that the RAB discussed and agreed to this charge and share the results at the next RAB meeting on October 17<sup>th</sup>.

Mr. McDonald advised that the main agenda item at the next RAB meeting will be the Section 8 Administrative Plan. Deborah Saba, Coordinator of Housing Assistance, is suggesting some changes to the current Plan, and a copy of the draft will be forwarded to RAB members for review prior to the next meeting.

Ms. Berryman requested clarification regarding the new recertification procedure that the FRHA is currently in the process of implementing, in which a resident's recertification date will coincide with his/her anniversary (move-in) date. This new procedure should prove to be beneficial to both residents and FRHA staff. There was some confusion as to what date a rent increase or decrease would take effect under the new system, and James Comer, Director of Field Operations, stated that he would get a definitive answer for the RAB by October 17<sup>th</sup>.

**FLAT RENTS** –Mr. McDonald discussed the formula that the FRHA utilizes in raising the Flat Rents, and advised that some residents benefit by choosing the Flat Rent option, especially for those residents who are in the higher income bracket, as opposed to paying the typical 30% of income for rent. The new Flat Rents were distributed and discussed with the RAB, and will become effective on April 1, 2007.

**SECTION 8 PAYMENT STANDARDS** –Mr. McDonald advised that the Department of Housing & Urban Development (HUD) published the revised Fair Market Rents/Section 8 Payment Standards, and a copy was distributed and discussed. The new Payment Standards will become effective on January 1, 2007.

**DECONCENTRATION POLICY** –Mr. McDonald distributed a copy of the Annual Deconcentration Analysis as of September 1, 2006 and discussed at length how he determined the average adjusted income for all family developments (\$13,068.00), and advised

that once again the FRHA is within the 85% and 115% range and, as such, the FRHA does not have a concentration of either high income or very low income families at any of these sites. The Deconcentration Policy does not affect the developments for elderly/disabled.

**PET POLICY** –A copy of the Pet Policy was distributed and discussed with the RAB. The only change is #3 on Page 1, which will now read: **“From the date of adoption of this pet policy by the FRHA, said policy will remain as is until March 31, 2008, for state family developments, at which time FRHA will reconvene with the representatives of the RAB to further discuss and deliberate the no pet policy in state family developments. At that time, if a no pet policy is implemented, the grandfather clause will be initiated. Residents would then have to complete a grandfather clause form to keep his/her pet (Form B).”** This verbiage will be incorporated into the pet policy prior to submission to HUD.

A brief question and answer period followed the meeting.

As stated on page 1 of this memo, the main agenda item for the next RAB meeting on Tuesday, October 17, 2006 will be the proposed changes to the Section 8 Administrative Plan. A copy of the Plan, as well as a list of the proposed changes is enclosed for your advance review.

### **RAB Meeting #3 October 17, 2006**

Twelve (12) participants were in attendance at this meeting, and items discussed were as follows:

**VIOLENCE AGAINST WOMEN ACT (VAWA)** –Mr. McDonald distributed a copy of an overview of the Violence Against Women Act (VAWA) which was signed into law by President Bush on January 5, 2006. The Act was originally enacted in 1994. The overview was prepared by NAHRO (National Association of Housing & Redevelopment Officials) and Mr. McDonald discussed its contents, and how the Fall River Housing Authority will be affected by it. He requested RAB members to review the handout, which will be discussed at future meetings.

**EXCESS UTILITY ALLOWANCES** –Mr. King requested clarification regarding excess utility allowances, specifically with regard to stand-alone food freezers. Mr. McDonald distributed a copy of the minutes of RAB meetings from November 3, 2003, November 13, 2003 and November 26, 2003, outlining the agreed upon amounts for excess utility charges. The final amount for the freezer charge agreed on was \$10 per month. Mr. King requested that the RAB and the FRHA reopen discussions regarding this charge.

**SECTION 8 ADMINISTRATIVE PLAN** –Mr. McDonald distributed a copy of the Section 8 Administrative Plan, including the proposed changes made by Deborah Saba, Coordinator of Housing Assistance. A list of the page numbers was also distributed for easy

reference. Each change was discussed in detail. Because Ms. Saba was not available to attend this meeting, any questions regarding the proposed changes will be discussed at a later date.

The agenda items for the next RAB meeting scheduled for **TUESDAY, NOVEMBER 7, 2006** are as follows:

**ADMISSIONS & CONTINUED OCCUPANCY PLAN** --Marie Souza, Coordinator of Tenant Selection prepared a list of proposed changes to the ACOP, copy of which will be distributed and discussed. A copy of the revised ACOP, with changes in bold, will be provided at the meeting and discussed in detail.

**LEASE FOR FEDERAL AND STATE AIDED PUBLIC HOUSING** --A copy of any changes to the lease will be distributed, discussed and agreed upon before being incorporated into the Lease.

**AGENCY PLAN PUBLIC HEARING** --The Fall River Housing Authority is required to conduct a Public Hearing each year prior to its submission of the Agency Plan. As in the past, the Public Hearing is scheduled during the first week of January. The date for this year's Public Hearing is Wednesday, January 3, 2007, 4:00 p.m. in the James A. O'Brien, Sr. Apartments Community Hall.

### **RAB Meeting #4 November 7, 2006**

Fifteen (15) participants were in attendance at this meeting, and items discussed were as follows:

**FALL RIVER HOUSING AUTHORITY LEASE** --A copy of the revised FRHA Lease was distributed to all in attendance and discussed. There were a number of lease addendums which have been incorporated into the Lease. Each addendum that was incorporated into the Lease was discussed. The only actual changes to the lease are with regard to extermination requirements for transferring residents and requesting residents to keep their windows closed during the period of December 1st through March 31st, unless medical documentation is provided to management to allow otherwise. There was a great deal of discussion regarding the proposed fee of \$65 for extermination services and who would be responsible for these charges. More discussion will take place prior making a final determination regarding this fee.

Mr. McDonald advised that the Authority is in the process of rewriting the specifications for extermination services, which will address a number of issues that were discussed. When the new specifications are available, they will be made available for review by the RAB.

The excess utility costs, specifically regarding stand-alone food freezers, were discussed at length, and it was agreed by the RAB and the FRHA to leave the current excess utility charges the way they are.

A few of the RAB members suggested that the FRHA supply a bucket of ice melt/rock salt for residents to use when they are clearing the areas in front of their homes that they are responsible for. (Section IX, I).

Mr. McDonald and Mr. Picard emphasized the need for residents to keep their common areas clear of debris, hazardous substances, etc. Mr. Picard was requested to make sure that the managers do regular inspections of the common areas and enforce this requirement for the safety of our residents.

Under Section IX, L, "Windows are to remain closed during the period of December 1st through March 31st, unless medical documentation is provided to allow otherwise", was added. Mr. Picard advised that managers regularly see residents' windows wide open during the winter months, and with the exorbitant cost of electricity, the FRHA's utility costs have skyrocketed. Mr. McDonald stated that although residents are not currently required to pay for their heating costs, they may have to in the future, and it's a good idea to start getting in the habit of conserving now.

Mr. McDonald advised that some residents have not been complying with the Community Service requirements, and, as such, under Section X, B, (Termination or Voiding of Lease (by LHA), #19 will have the following statement added, "Failure to comply with Community Service requirements will be subject to non-renewal of lease."

A list of exemptions from performing community service are to be made available to all residents of federal developments, as well as a list of ways residents can fulfill their obligation.

**ADMISSIONS AND CONTINUED OCCUPANCY PLAN (ACOP)** --A copy of the ACOP, with proposed changes, was distributed and discussed. Marie Souza, Coordinator of Tenant Selection went over each proposed change. Some of the changes that required discussion were:

Page 8, Eligibility Criteria (8.2) #1--The sentence "Anyone designated as heads-of-household have to be 18 years of age or older" was proposed by Ms. Souza, and a lengthy discussion followed regarding whether to use the term "heads of household" or "co-heads". Mr. McDonald stated that this will be revisited at another RAB meeting.

Page 20 and 21, Assignment of Bedroom Sizes (10.2)--The sentence "The FRHA will assign the required bedroom size to the parent who has custody of the minor children 183 days per year" was proposed in order to make sure the custodial parent gets the appropriate number of bedrooms.

Mr. McDonald suggested that in addition to A-E, (considerations taken in determining bedroom size) we add "F"--in circumstances where the Tenant Selection Department feels that another bedroom may be assigned to both parents--in situations where minor children spend a great deal of time with both parents.

Page 32, Acceptable Methods of Verification--Under "Violence Against Women Act", the FRHA is still waiting for HUD's Final Rule, but Ms. Souza stated that the we've been following the regulations all along. Mr. King asked if this pertains to violence against men as well, and Mr. McDonald assured him that although the title of the Act is "Violence Against Women", the FRHA will make sure that men are given the same consideration.

Pages 51-55, Unit Transfers--There was a great deal of discussion regarding types of transfers, transfer requests, processing of transfers etc. Ms. Souza advised that because there are so many types of transfers, the Tenant Selection Department is required to keep many different waiting lists and it is becoming very tedious. Mr. McDonald stated that he would try to combine all of the transfer information into one section that would make it easier for the Tenant Selection Department to keep track of and still accommodate each type of transfer request (either by the FRHA or a resident).

### **RAB Meeting #5 November 28, 2006**

Mr. McDonald advised that the **next** RAB meeting will be held on **TUESDAY, DECEMBER 12, 2006** and the final RAB meeting (before the Public Hearing) will be held on **TUESDAY, DECEMBER 19, 2006.**

The agenda for the **December 12th** meeting will include the **Capital Fund Program** items, which will be discussed in detail. In addition, we will have the final versions of the Fall River Housing Authority Lease, the Admissions & Continued Occupancy Policy (ACOP) and the Section 8 Administrative Plan available for review.

A **light buffet luncheon** will be served at the **DECEMBER 19TH** meeting, and at this point, we should have a complete Agency Plan book available for review.

The Public Hearing (a copy of ad enclosed) will be held on **WEDNESDAY, JANUARY 3, 2007 AT 4:00 P.M. IN THE O'BRIEN APARTMENTS COMMUNITY HALL.** (coffee and donuts will be served following the Public Hearing) Please note that the Public Hearing is at **4:00 p.m.**

Fifteen (15) participants were in attendance at this meeting, and items discussed were as follows:

**MAINTENANCE POLICY** --A copy of the revised Maintenance Policy was distributed to all in attendance and discussed. The only change to the Policy is the addition of two sentences in the first paragraph as follows: "**During the year starting on April 1, 2007, we**

**will be adapting these policies to our Asset Based Management system of operation. We don't expect any major changes to our maintenance policies except that the managers at our sites will supervise the delivery of day-to-day maintenance services."**

**PHA PLANS (TEMPLATE)** --A copy of the updated PHA Plans (Template) was distributed to all in attendance and discussed at length. Mr. McDonald reviewed each change. James Comer, Director of Field Operations, is in the process of creating an updated Organizational Chart, which will be included as one of the attachments of the Agency Plan. The other changes are on pages 7, 16, 30, 44, 46 and 47. A final copy will be available for review prior to the Public Hearing.

### **RAB Meeting #6 December 12, 2006**

Twelve (12) participants were in attendance at this meeting, and items discussed were as follows:

**EXTERMINATION FEES** --The RAB members voiced their objection to having any fees associated with extermination services for residents of public housing. They feel that the initial extermination fee that is required of residents when they move into their public housing units is enough, and any additional fees associated with extermination during their tenancies should be borne by the Authority. Mr. Comer explained that the proposed \$65 fee that has been discussed over the course of the RAB meetings, and in regard to extermination services when residents REQUEST transfers, is most likely not the amount that will be charged to those residents requesting transfers. Mr. Comer explained that until the Authority receives and reviews the proposals for extermination, which are due on December 27, 2006, a final amount cannot be determined. Prior to the Public Hearing, this subject will be resolved, hopefully to everyone's satisfaction.

Mr. Comer further explained that the new extermination procedures will include more "preventative" measures in addition to the regular extermination process. In order for the extermination procedures to work, residents will not be allowed to refuse extermination of their units when required. The Authority will make sure that notices to residents clearly state what type of extermination will take place, what preparation will be required, whether or not residents will be required to vacate their units during the extermination process, etc. The Authority will make sure that common areas--including trash chutes, community halls, laundry rooms, stairwells, etc. are exterminated on a regular basis.

The members also requested that a Fall River Housing Authority employee always accompany the exterminator when he/she is entering residents' apartments.

**SNOW/ICE** --Muriel Berryman stated that there should be language in the Lease that says that elderly/disabled residents are not required to shovel. This language is already in the

Lease. In addition, RAB members reminded Mr. Comer that the Authority agreed to supply buckets of ice melt/sand to residents to utilize during the winter months.

**OPEN WINDOWS** --The language that is currently in the lease regarding open windows during the winter months will remain as is.

**CAPITAL FUND PROGRAM ITEMS** --A draft of the Capital Fund Program items was distributed to all in attendance and discussed in detail. A final copy will be available at the last regular RAB meeting on Tuesday, December 19, 2006, should any changes be made to the list.

**COMMUNITY SERVICE POLICY & PROCEDURES** --The Authority's Community Service Policy & Procedures were discussed, copy enclosed. The Authority follows the requirements set forth by the Department of Housing & Urban Development (HUD), and this document outlines the requirements, exclusions, etc. in more detail.

**VIOLENCE AGAINST WOMEN ACT: POLICY**--The Authority's Violence Against Women Act: Policy was discussed, copy enclosed. The Authority will enforce the passage of the Violence Against Women Act and the Department of Justice Reauthorization Act of 2005 (which was originally enacted in 1994).

As with any of the Authority's policies, there will be situations that arise that will need to be looked at on an individual basis, but in general, the Authority will follow these Policies as written.

The meeting on December 19, 2006 will be the last one before the Public Hearing; and any questions or concerns that you may have will be addressed at that time.

**THE LUNCHEON WILL BE SET UP IN THE KITCHEN AND SERVED AT 12:00 NOON. The meeting will take place following the luncheon.**

**DON'T FORGET--THE PUBLIC HEARING WILL BE HELD ON WEDNESDAY, JANUARY 3, 2007 AT 4:00 P.M. COFFEE AND DONUTS WILL BE SERVED FOLLOWING THE HEARING.**

### **RAB Meeting #7 December 19, 2006**

Twelve (12) participants were in attendance at this meeting, and items discussed were as follows:

**EXTERMINATION FEES** --Mr. McDonald advised the RAB members that there will be no extermination fees for residents and that language will be taken out of the lease for the time being, and discussion regarding this matter will resume at the RAB meetings that will take place for the 2008 Agency Plan submission.

**TRANSFER POLICY** --The revised Transfer Policy was distributed to all in attendance and discussed. Mr. McDonald explained that the Policy is basically the same, but the wording was changed a little bit to make it easier to understand and follow.

16.9 PROCEDURE FOR OVER-HOUSED FEDERAL FAMILY TRANSFERS

Managers assigned to Federal Family developments must maintain a ledger containing a list of over-housed tenants within their developments. The list must be maintained according to the date the tenant became over-housed. The tenant who has been over-housed the longest should be first on the list. When the FRHA determines that a transfer will be made the offer will first be made to residents within the site if there are any active transfer requests for that unit size at the site. These transfers will be coordinated with the Tenant Selection Department.

An over-housed tenant that refuses a reasonable request to transfer to a unit of the appropriate size will be subject to eviction for said refusal, subject to review before the Grievance Panel if the tenant requests a hearing.

Mr. McDonald gave a copy of the Agency Plan book to Mr. King for the Fall River Joint Tenants Council office. Any additional documents will be forwarded to Mr. King after the Public Hearing.

**THE PUBLIC HEARING WILL BE HELD ON WEDNESDAY, JANUARY 3, 2007 AT 4:00 P.M. COFFEE AND DONUTS WILL BE SERVED FOLLOWING THE HEARING.**

**PUBLIC HEARING HELD 1/3/2007**

Thomas J. Collins, Jr., Executive Director of the Fall River Housing Authority presided and the hearing was conducted in an informal manner. There were 36 people in attendance at the Public Hearing, and the issues discussed are summarized below with any comments notated. Copies of relevant portions of documents were provided to the attendees. The following subjects were discussed and were also reviewed in detail at the RAB meetings. All areas discussed below were also discussed in detail at the RAB meetings.

Daniel McDonald, Deputy Executive Director distributed a copy of the Resident Advisory Board meetings summary, which briefly outlined the subjects discussed at each meeting, as follows:

**Capital Fund** – Both the One and Five Year Plans were distributed and reviewed by the attendees. Everett McGarty, Director of Modernization, explained the Plans and a brief question and answer period followed Mr. McGarty's presentation. The Annual Performance and Evaluation reports for 2003, 2004, 2005 and 2006 were made available to all in attendance.

**Rent Policies** – Mr. McDonald explained the current rent policy that was agreed to in 2005, and discussed the revised Flat Rents.

**Section 8 Administrative Plan** The changes as shown in the summary above were presented and discussed. A meeting with the Section 8 RAB participants and representatives of the Authority's Section 8 Department will be scheduled in the near future to discuss the Plan.

**Admissions & Continued Occupancy (ACOP) Plan** changes, including the revised Transfer Policy, were also discussed.

**Deconcentration Policy**--We explained our Deconcentration Policy and explained the current status whereby we are no longer required to perform actions to achieve deconcentration. We will continue monitor the situation and make changes as necessary.

**Lease**-- The changes to the Lease were reviewed and discussed.

**VIOLENCE AGAINST WOMEN ACT**-- The Authority's Violence Against Women Act Policy was discussed. The Authority will enforce the passage of the Violence Against Women Act and the Department of Justice Reauthorization Act of 2005 (which was originally enacted in 1994).

The content of the minutes from the seven meetings between the RAB and the FRHA was explained in detail.

Mr. McDonald explained some of the changes that will occur as the Authority moves toward implementing the Department of Housing & Urban Development (HUD) Asset Management model.

In summary the FRHA developed the Agency Plan in conjunction with the RAB and provided the public with an opportunity to discuss and comment at the Public Hearing. The Template itself was discussed at length with no criticisms or suggested changes.

**The result is an Agency Plan that is agreed to by all parties and with no unresolved issues. The Plan reflects a workable document and is the Sum of the FRHA, RAB and public desires.**

The Public Hearing adjourned at 5:00 p.m.

# PET POLICY

The following rules are established to govern the keeping of pets in and on properties owned and operated by the Housing Authority in the City of Fall River, Massachusetts. The Fall River Police Department and Fall River Dog Officer shall have responsibility for enforcement of applicable city ordinances. The manager of each of the Authority's public housing developments shall have primary responsibility for enforcing the guidelines in this Pet Policy. Rules and regulations of pet ownership and maintenance and enforcement, including any changes thereto, will be posted in the management office of each housing development which it owns and shall inform all registered pet owners of any changes in such rules and regulations.

This policy does not apply to animals that are used to assist persons with disabilities. Assistive animals approved by ADA (seeing eye dogs, etc.) are allowed in all public housing facilities with no restrictions other than those imposed on all tenants to maintain their units and associated facilities in a decent, safe, and sanitary manner and to refrain from disturbing their neighbors.

Permission to own and keep a specific pet will not be unreasonably withheld. Approval for pet ownership will be based on, among other things, the resident's demonstration that he/she has the physical and financial capability to care for the pet and certification that he/she will abide by the following guidelines concerning pet ownership and pet maintenance:

1. All pets must be registered with the Housing Authority. Tenants must request in writing permission to have a pet, residents will then receive a written permit *prior* to any animal being kept on or about the premises. Management reserves the right to check references for previous pet guardianship to confirm that the resident has demonstrated that she/he has been a responsible pet guardian. Residents will receive a certificate and ID TAG from FRHA management for the animal after completing and submitting the required documentation (see #5). Animal must wear tag at all times. The privilege of having an animal may be revoked at any time subject to the Housing Authority grievance procedure if the animal becomes destructive, is a nuisance, or infringes the safety of others. (Form A)
2. **No pet sitting is allowed for any animals.** No visitor is allowed to bring his or her pet to FRHA property. Any animal on FRHA property at anytime must be pre-registered to management. No exceptions.
3. From the date of adoption of this pet policy by the FRHA, said policy will remain as is until March 31, 2008, for state family developments, at which time FRHA will reconvene with the representatives of the RAB to further discuss and deliberated the no pet policy in state family developments. At the time, if a no pet policy is implemented, the grandfather clause will be initiated. Residents would then have to complete a grandfather clause form to keep his/her pet. (Form B)
4. A maximum number of one pet per household is permitted. Two (2) aquariums – one not to exceed twenty (20) gallons in capacity and the other not to exceed ten (10) gallons – may be permitted. Many fish is acceptable, but no more then (2) two birds (no birds of prey e.g. eagles, hawks, falcons), may be kept if they do not create a nuisance as determined by Housing Management. Birds must be confined to a cage at all times, unless exercised during controlled conditions in resident pet owner's apartment.
5. The tenant is responsible to give management the following documentation within 30 days of the issuance of the written approval: (Form C & D)
  - A. A color photo and identifying description and name of the pet to be housed.
  - B. The attending veterinarian's name, address, and telephone number.
  - C. Veterinary certificate of spaying or neutering, no later then six (6) months of age. Rabies, distemper, parvovirus, feline leukemia, and other inoculations when applicable.
  - D. Licensing certificates in accord with state and local laws.
  - E. Name, addresses and phone numbers of two (2) a primary and alternate caretaker who will assume immediate responsibility for the pet should the owner is unable to care for pet. This caretaker must provide a written verification acknowledging their willingness to assume responsibility for the pet in compliance with the guidelines established in this Pet Policy.
  - F. A Pet Rider or Addendum to the resident's current lease executed by the resident.

6. Only common household pets (dogs, cats, birds, guinea pigs, gerbils, hamsters, and other common small domesticated animals, ferrets are not considered a common household pet) will be approved by the FRHA for ownership and maintenance. No vicious or intimidating dogs (Shar-pie, Chow Chow, Terriers, (Boston, Wheaten, Con Terriers are allowed) Pit Bull, Doberman, German Shepard, Rottweiler, any mixture of said mentioned, or any animal over 40 lbs. The forty (40) pound weight limit shall apply to the size for an animal in normally good condition. Animals over this weight limit due to weight gain will not be eliminated solely due to its weight. Any animal deemed to be potentially harmful to the health or safety of others, including attack or fights trained dogs, will not be allowed. No snakes, iguanas, or any type of reptile are allowed. The FRHA shall be the final arbiter on this matter.
7. If pets are left unattended for a period of twenty-four (24) hours or more, the Authority may enter the dwelling unit, remove the pet and transfer it to the proper authorities at the residents expense, that is subject to the provision of state law and pertinent local ordinances. The Housing Authority accepts no responsibility for the animal under such circumstances. If the primary caretakers designated by the pet owner is unable or unwilling to assume responsibility for the pet upon the incapacitation of the owner and the owner is unable to locate an alternate caretaker within twenty-four (24) hours, the Authority may enter the owner's unit, remove the pet, and arrange for the pet's care for no less than ten (10) days to protect the pet. Funds for such care will be billed to the resident (see #8). The Authority may contact the Massachusetts Society for the Prevention of Cruelty to Animals or other suitable humane society for assistance in providing alternate arrangements for the care of the pet if a caretaker cannot be located.
8. If animal control officer removes any pet, resident will be fully responsible for fees associated with removal and care of said animal. FRHA or Animal Control Officer reserves the right to remove said animal if safety of residents, concern of property and care of animal is in question.
9. No pet may be kept in violation of humane or health laws.
10. Management reserves the right to require animal guardians to relocate to a comparable unit on the ground floor or other suitable unit of their building base upon written complaints concerning; 1) the behavior of the dog/cat (etc.) in the elevator or hallways; or 2) the documented medical conditions of resident(s) affected by the presence of the animal. Designated elevator use will be the ONLY elevators used by pet guardians when they are with their pets.
11. Dogs and cats shall remain inside a tenant's unit. When taken outside the unit, dogs and cats must be kept on a leash, controlled by a responsible household member. No animal shall be permitted to be loose in hallways, lobby areas, cellar, basement, laundry areas, community rooms, yards or other common areas of the facility. Pets are not to be tied outside or on the patio.
12. Residents must provide litter boxes for cat waste, which must be kept in the dwelling unit. Residents shall not permit refuse from litter boxes to accumulate nor become unsightly or unsanitary. Residents are solely responsible for cleaning up pet (dog, cat, etc.) droppings, outside the unit and on facility grounds. Droppings of pets must be disposed of by being placed in a sack and then placed in a refuse container outside the building. In a high-rise facility residents are responsible to dispose pet waste properly in a sealed sack and placed in the refuse drop in hallway. Under no circumstances should any pet debris be deposited in a toilet, as blockages will occur. Residents will be responsible for the cost of repairs or replacements of any damaged toilets or pipes. Tenant must take all necessary precautions to eliminate any pet odors and insect infestation within or around unit and maintain unit in a sanitary condition at all times (see # 17).
13. Residents shall not permit their pet to disturb, interfere, or diminish the peaceful enjoyment of other residents. The terms, "disturb, interfere or diminish" shall include but not be limited to barking, howling, chirping, biting, scratching and other like activities.
14. Tenants shall not alter their unit, patio or unit area to create an enclosure for an animal.
15. Tenants are prohibited from feeding stray animals. The feeding of stray animals shall constitute having a pet without permission of the Housing Authority.

16. Management has the right to make a home visit to observe the pet, the quarters in which it is kept, and the condition of the unit when proper notice is given or under unique circumstances.
17. Pet guardians are encouraged to secure personal liability insurance or other insurance to indemnify the property management against pet-related litigation and attorney fees. Tenant is responsible for all damages and actions done by their pet and will pay for all repairs and misgivings. Any sums necessary to repair (cleaning of carpets and /or fumigation of units etc.) such damage will be billed to the pet guardian. Tenants are responsible for materials/labor on all damages caused by their pets. Damage payment plans may be negotiated between the Authority and the pet owner at the FRHA's discretion. Disputes concerning the amount of such damages are subject to the standard grievance procedures described in the owner's lease.
18. Tenants who violate these rules are subject to: (a) being required to get rid of the pet within 30 days of notice by the Housing Authority; and/or, (b) eviction.

Management will establish a pet committee for resolving complaints consisting of three (3) members: one (1) resident who is a pet guardian, one (1) resident who is not a pet guardian and one (1) local interested humane group member or veterinarian. Complaints must be in writing, all written complaints shall be referred to the pet committee for resolution. The pet committee to verbal or unsigned complaints shall give no credence. Management will also inform the pet guardian of any other rule infractions and will duly notify the pet committee for attempted resolution.

- Upon second notice of a written legitimate complaint from the pet committee to the pet guardian, the resident shall be advised that a further notice shall be cause for termination of the pet rider provisions; except that in the case of a serious problem, e.g. a vicious dog, this procedure may be shortened in the interest of public safety.

Resident has received a copy of the FRHA pet policy. The pet policy rules and regulations have been explained to the tenant by the FRHA management. The tenant understands the above regulations regarding pets and agrees to conform to the FRHA pet policy.

The resident at the time of signing this agreement has a pet \_\_\_\_\_.  
Signature of resident

The resident at the time of signing this agreement does not have a pet \_\_\_\_\_.  
Signature of resident

\_\_\_\_\_  
Tenant Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Witness Signature

\_\_\_\_\_  
Date

**FALL RIVER HOUSING AUTHORITY**  
**APPLICATION FOR PET PERMIT**

I am officially requesting permission of the Fall River Housing Authority to house a pet in accord with the Family Housing Pet Policy promulgated by the Fall River Housing Authority. I have received a copy of this pet policy, understand all of my right and obligations under this pet policy, and agree to abide by all of the rules listed in the pet policy.

I understand and agree that I will not house a pet until such time as my application for pet permit has been reviewed and formally approved in writing by the Fall River Housing Authority.

I am requesting permission to house the following pet:

(Identify breed and describe pet fully, including current size/weight of pet, and projected size/weight of pet at maturity)

**THIS SECTION MUST BE COMPLETED/SIGNED BY**  
**VETERNARIAN/ANIMAL SHELTER**

Breed: \_\_\_\_\_  
(please make reference to reverse side)

Current size/wgt: \_\_\_\_\_ Projected size/wgt: \_\_\_\_\_

Description: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Tenant Information

\_\_\_\_\_  
Signature

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Apartment No: \_\_\_\_\_

Telephone No: \_\_\_\_\_

Date: \_\_\_\_\_

“GRANDFATHER” CLAUSE (dated 11/10/2001)

This grandfather clause is added as an addendum to the attached pet policy for ...

\_\_\_\_\_ and  
(resident)

\_\_\_\_\_ on  
(management)

Pets of residents that do not conform to the attached pet policy (for example, multiple animals in excess of the policy or types of animals not allowed by policy), that reside with the resident prior to the adoption of the attached pet policy, are allowed, provided that the resident conforms with all other aspects of the pet policy for each pet listed (without exception) and the resident agrees to all terms.

If the resident gives away or otherwise relinquishes any pet listed herein, or if/when the pet (s) dies, any future pets of the resident must conform to the attached pet policy, the resident will not be permitted to replace a relinquished of deceased pet in excess of the limit stated in the pet policy. Future pet (s) must be approved by management prior to taking up residence and must be maintained in accordance with the pet policy.

\_\_\_\_\_  
(name/description of “non-conforming pet)

\_\_\_\_\_  
(resident signature)

\_\_\_\_\_  
(management signature)

\_\_\_\_\_  
(date)

FALL RIVER HOUSING AUTHORITY  
DISPOSITION OF PET PERMIT APPLICATION

\_\_\_\_\_  
Date

\_\_\_\_\_  
Name

\_\_\_\_\_  
Address

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

Your application for Pet Ownership received on \_\_\_\_\_ has been:

Tentatively Approved                       Approved

Rejected for the following reasons:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

If the above indicates tentative approval, approval is conditional on the receipt of the following within thirty (30) days from this notice.

- \_\_\_\_\_ A color photo and identifying description and name of pet.
- \_\_\_\_\_ Attending veterinarian's name, address and telephone number.
- \_\_\_\_\_ Veterinary certificate of spaying or neutering; Rabies, Distemper, Parvovirus, Feline Leukemia and other inoculations, when applicable.
- \_\_\_\_\_ Dog license certificates in accord with local and state laws.
- \_\_\_\_\_ Names, addresses and telephone numbers of two (2) alternate caretakers who will assume responsibility of the pet should the owner become incapacitated. These caretakers must provide written verification acknowledging willingness to assume these responsibilities.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Fall River Housing Authority

Rev: 11/20/01  
(over)

DISPOSITION OF PET PERMIT APPLICATION

MANAGERS CHECK OFF LIST

Color Pet Photo

\_\_\_\_\_  
Veterinarian Name

\_\_\_\_\_  
Address

\_\_\_\_\_  
Telephone No.

VETERINARY CERTIFICATES

Spaying or Neutering

Rabies

Distemper

Others

Dog license with Local & State Laws

FALL RIVER HOUSING AUTHORITY

APPLICATION FOR PET

PRIMARY CARE TAKER

\_\_\_\_\_ (date)

I, \_\_\_\_\_ of \_\_\_\_\_ telephone no.

\_\_\_\_\_ agree that I will assume responsibility for the pet owned by

\_\_\_\_\_ of \_\_\_\_\_ telephone no. \_\_\_\_\_ in the event that owner becomes incapacitated or not immediately available to care for pet.

I further agree that while pet is in my care and custody, I will follow all guidelines established in the Fall River Housing Authority Pet Policy.

Witness:

\_\_\_\_\_ (signature) \_\_\_\_\_ (date)

***ALTERNATE CARETAKER***

**I, \_\_\_\_\_ of \_\_\_\_\_ telephone no. \_\_\_\_\_**

**Agree that I will assume responsibility for the pet owned by**

**Of \_\_\_\_\_ telephone no. \_\_\_\_\_ in the event that owner becomes incapacitated or not immediately available to care for pet. I further agree that while pet is in my care and custody, I will follow all guidelines established in the Fall River Housing Authority Pet Policy.**

Witness:

---

---

(signature) (date)

# **COMMUNITY SERVICE AND CONTINUED OCCUPANCY**

## **14.0 CONTINUED OCCURNCY AND COMMUNITY S ERVICE**

### **14.1 GENERAL**

In order to be eligible for continued occupancy, each adult family member must either (1) contribute eight hours per month of community service (not including political activities) within the community in which the public housing development is located, or (2) participate in an economic self-sufficiency program unless they are exempt from this requirement

### **14.2 EXEMPTIONS**

The following adult family members of tenant families are exempt from this requirement.

- A. Family members who are 62 or older
- B. Family members who are blind or disabled
- C. Family members who are the primary care giver for someone who is blind or disabled
- D. Family members engaged in work activity
- E. Family members who are exempt from work activity under part A title IV of the Social Security Act or under any other State welfare program, including the welfare-to-work program
- F. Family members receiving assistance under a State program funded under part A title IV of the Social Security Act or under any other State welfare program, including welfare-to-work and who are in compliance with that program

### **14.3 NOTIFICATION OF THE REQUIREMENT**

The Fall River Housing Authority shall identify all adult family members who are apparently not exempt from the community service requirement.

The Fall River Housing Authority shall notify all such family members of the community service requirement and of the categories of individuals who are exempt from the requirement. The notification will provide the opportunity for family members to claim

and explain an exempt status. The Fall River Housing Authority shall verify such claims.

The notification will advise families that their community service obligation will begin upon the effective date of their first annual reexamination on or after 4/1/2002. For family's paying a flat rent, the obligation begins on the date their annual reexamination would have been effective had an annual reexamination taken place. It will also advise them that failure to comply with the community service requirement will result in ineligibility for continued occupancy at the time of any subsequent annual reexamination.

#### **14.4 VOLUNTEER OPPORTUNITIES AND ECONOMIC SELF SUFFICIENCY**

Community service includes performing work or duties in the public benefit that serve to improve the quality of life and/or enhance resident self-sufficiency, and/or increase the self-responsibility of the resident within the community.

An economic self sufficiency program is one that is designed to encourage, assist, train or facilitate the economic independence of participants and their families or to provide work for participants. These programs may include programs for job training, work placement, basic skills training, education, English proficiency, work fare, financial or household management, apprenticeship, and any program necessary to ready a participant to work (such as substance abuse or mental health treatment).

The Fall River Housing Authority will coordinate with social service agencies, local schools, and the Human Resources Office in identifying a list of volunteer community service positions.

Together with the resident advisory councils, the Fall River Housing Authority may create volunteer positions such as hall monitoring, litter patrols, and supervising and record keeping for volunteers.

#### **14.5 THE PROCESS**

At the first annual reexamination on or after April 1, 2002 and each annual reexamination thereafter, the Fall River Housing Authority will do the following:

- A. Provide a list of volunteer opportunities to the family members.
- B. Provide information about obtaining suitable volunteer positions.
- C. Provide a volunteer time sheet to the family member. Instructions for the time sheet require the individual to complete the form and have a supervisor date and sign for each period of work.

- D. Assign family members to a volunteer coordinator who will assist the family members in identifying appropriate volunteer positions and in meeting their responsibilities. The volunteer coordinator will track the family member's progress monthly and will meet with the family member as needed to best encourage compliance.
- E. Thirty (30) days before the family's next lease anniversary date, the volunteer coordinator will advise the Fall River Housing Authority whether each applicable adult family member is in compliance with the community service requirement.

#### **14.6 NOTIFICATION OF NON-COMPLIANCE WITH COMMUNITY SERVICE REQUIREMENT**

The Fall River Housing Authority will notify any family found to be in noncompliance of the following:

- A. The family member(s) has been determined to be in noncompliance;
- B. That the determination is subject to the grievance procedure; and
- C. That, unless the family member(s) enter into an agreement to comply, the lease will not be renewed or will be terminated;

#### **14.7 OPPORTUNITY FOR CURE**

The Fall River Housing Authority will offer the family member(s) the opportunity to enter into an agreement prior to the anniversary of the lease. The agreement shall state that the family member(s) agrees to enter into an economic self-sufficiency program or agrees to contribute to community service for as many hours as needed to comply with the requirement over the past 12-month period. The cure shall occur over the 12-month period beginning with the date of the agreement and the resident shall at the same time stay current with that year's community service requirement. The first hours a resident earns goes toward the current commitment until the current year's commitment is made.

The volunteer coordinator will assist the family member in identifying volunteer opportunities and will track compliance on a monthly basis.

If any applicable family member does not accept the terms of the agreement, does not fulfill their obligation to participate in an economic self-sufficiency program, or falls behind in their obligation under the agreement to perform community service by more than three (3) hours after three (3) months, the Fall River Housing Authority shall take action to terminate the lease.

## 14.8 OPPORTUNITIES TO PERFORM THE SERVICE REQUIREMENTS

The Fall River Housing Authority in conjunction with the Resident Advisory Board has determined that the FRHA and our residents will best be served if we liberally define what constitutes Community Service and Economic Self Sufficiency activities. The following partial list of activities, are suggestions only and are not meant to be all inclusive. Any activity which benefits the residents' economic self sufficiency will be accepted and any activity that reasonable provides the FRHA developments or the general public with a needed service will also be accepted. All opportunities to perform community service will be provided and performed with pride and dignity.

- GED Program
- High School completion
- ESL English as a Second Language Program
- Vocational School
- College Courses
- Participation in Foster Grandparent program
- Provide arts and crafts for elderly residents
- Provide arts and crafts for children
- Gardening around FRHA sites
- Volunteering with Food Kitchens or programs to help low income residents of Fall River
- Visit Nursing homes or Hospitals
- Run Errands for Elderly or Handicapped City residents
- Peer Leadership
- Red Cross
- Tutoring
- Volunteer participation in after school childcare program
- Working with FR Joint Tenants to educate residents on their rights and organization, as well as passing out flyers and otherwise assisting the FRJTC in its mission
- Other activities as may from time to time be added by the FRHA or agreed to with the Resident Advisory Board
- Volunteer work in the public sector
- Volunteer work in the FRHA and the FRHAJTC
- Attendance at monthly resident meetings

## CAPITAL FUND PROGRAM TABLES START HERE

<b>Annual Statement/Performance and Evaluation Report</b>					
<b>Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary</b>					
PHA Name: Fall River Housing Authority 85 Morgan Street P. O. Box 989\ Fall River, MA 02722		Grant Type and Number Capital Fund Program Grant No: MA06-P006-50203 Replacement Housing Factor Grant No:			Federal FY of Grant:  2003
Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 09/30/2006 <input type="checkbox"/> Final Performance and Evaluation Report					
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised #1	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations				
3	1408 Management Improvements Soft Costs				
	Management Improvements Hard Costs				
4	1410 Administration				
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs				
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	547,567	486,135.70	486,135.70	194,135.70
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Nondwelling Structures	0	61,431.30	61,431.30	0
13	1475 Nondwelling Equipment				
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1499 Development Activities				
19	1502 Contingency				
	Amount of Annual Grant: (sum of lines.....)	547,567	547,567	547,567	194,135.70

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

<b>PHA Name:</b> Fall River Housing Authority 85 Morgan Street P. O. Box 989\ Fall River, MA 02722	<b>Grant Type and Number</b> Capital Fund Program Grant No: MA06-P006-50203 Replacement Housing Factor Grant No:	<b>Federal FY of Grant:</b>  2003
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Original Annual Statement  Reserve for Disasters/ Emergencies  Revised Annual Statement (revision no:)  
 Performance and Evaluation Report for Period Ending: 09/30/2006  Final Performance and Evaluation Report

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
	Amount of line XX Related to LBP Activities				
	Amount of line XX Related to Section 504 compliance				
	Amount of line XX Related to Security –Soft Costs				
	Amount of Line XX related to Security-- Hard Costs				
	Amount of line XX Related to Energy Conservation Measures				
	Collateralization Expenses or Debt Service				

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

PHA Name: Fall River Housing Authority 85 Morgan Street P.O. Box 989 Fall River, MA 02722		Grant Type and Number Capital Fund Program Grant No: MA06-P006-50203 Replacement Housing Factor Grant No:				Federal FY of Grant: 2003			
Development Number Name/HA-Wide Activities	General Description of Major Work Categories		Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
					Original	Revision #1	Obligated	Expended	
MA 06-1 Sunset Hill	None				0				
MA 06-2 Heritage Heights	None				0				
MA 06-3 Diaferio Village	Construct Modular Building Window Glazing Painting Apts, Hallways, Basements		1460 1460 1460		205,567 0 0	31,595.70 41,040 121,500	31,595.70 41,040 121,500	31,595.70 41,040 121,500	Completed Completed Completed
MA 06-4 Oak Village	None				0				
MA 06-5 O'Brien Apts	None				0				
MA 06-6 Holmes Apts.	None				0				
MA 06-7 Oliveira Apts.	None				0				
MA 06-8 Medeiros Towers	Replace Roof Building Exterior Repairs		1460 1460		150,000 0	0 292,000	0 292,000	0	Omitted In Progress

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

PHA Name: Fall River Housing Authority 85 Morgan Street P.O. Box 989 Fall River, MA 02722		Grant Type and Number Capital Fund Program Grant No: MA06-P006-50203 Replacement Housing Factor Grant No:				Federal FY of Grant: 2003			
Development Number Name/HA-Wide Activities	General Description of Major Work Categories		Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
					Original	Revision #1	Obligated	Expended	
MA 06-10 Cottell Apts.	None				0				
MA 06-11	None				0				
MA 6-13 N. Rocliffe Apts	Maintenance/Community Building Upgrades		1470		0	25,533.79	25,533.79		In Progress
MA 6-15 Fordney Apts	Maintenance/Community Building Upgrades		1470		0	35,897.51	35,897.51		In Progress
MA 6-16 Bennie Costa Plaze	Replace Roof		1460		192,000	0	0	0	Omitted

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

PHA Name:		Grant Type and Number Capital Fund Program No: MA06-P006-50203 Replacement Housing Factor No:					Federal FY of Grant: 2003	
Development Number Name/HA-Wide Activities	All Fund Obligated (Quarter Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates	
	Original	Revised	Actual	Original	Revised	Actual		
MA6-01 SUNSET HILL	02/06			02/08				
MA6-02 HERITAGE	02/06			02/08				
MA6-03 DIAFERIO	02/06			02/08				
MA6-04 OAK VILLAGE	02/06			02/08				
MA6-05 O'BRIEN Apts	02/06			02/08				
MA6-06 HOLMES Apts	02/06			02/08				
MA6-07 OIVEIRA Apts	02/06			02/08				
MA6-08 CARDINAL MEDEIROS TOWERS	02/06			02/08				
MA6-10 COTTELL	02/06			02/08				
MA6-11 MITCHELL	02/06			02/08				
MA6-13 N. ROCLIFFE	02/06			02/08				
MA6-15 FORDNEY	02/06			02/08				
MA6-16 BENNIE COSTA	02/06			02/08				
MA6-17 RILEY PLAZA	02/06			02/08				





**CAPITAL FUND PROGRAM TABLES START HERE**

<b>Annual Statement/Performance and Evaluation Report</b>					
<b>Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary</b>					
<b>PHA Name:</b> Fall River Housing Authority 85 Morgan Street P. O. Box 989 Fall River, MA 02722		<b>Grant Type and Number</b> Capital Fund Program Grant No: MA06-P006-50104 Replacement Housing Factor Grant No:		<b>Federal FY of Grant:</b>  2004	
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 9/30/2006 <input type="checkbox"/> Final Performance and Evaluation Report					
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised #1	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations	53,775	24,542.18	24,542.18	24,542.18
3	1408 Management Improvements Soft Costs	433,000	540,092.85	540,092.85	540,092.85
	Management Improvements Hard Costs				
4	1410 Administration	125,345	117,766.47	117,766.47	102,089.80
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	100,000	234,517.46	234,517.46	73,568.44
8	1440 Site Acquisition				
9	1450 Site Improvement	17,400	354,355	354,355.00	354,355
10	1460 Dwelling Structures	1,677,589	934,499.91	926,299.91	488,540.70
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Nondwelling Structures	444,654	638,503.71	646,703.71	376,115.23
13	1475 Nondwelling Equipment	7,500	14,985.42	14,985.42	14,985.42
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1499 Development Activities				
19	1502 Contingency				

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

PHA Name: Fall River Housing Authority 85 Morgan Street P. O. Box 989 Fall River, MA 02722	Grant Type and Number Capital Fund Program Grant No: MA06-P006-50104 Replacement Housing Factor Grant No:	Federal FY of Grant:  2004
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Original Annual Statement  Reserve for Disasters/ Emergencies  Revised Annual Statement (revision no:)  
 Performance and Evaluation Report for Period Ending: 9/30/2006  Final Performance and Evaluation Report

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
	Amount of Annual Grant: (sum of lines.....)	2,859,263	2,859,263	2,859,263	1,974,289.62
	Amount of line XX Related to LBP Activities				
	Amount of line XX Related to Section 504 compliance				
	Amount of line XX Related to Security –Soft Costs				
	Amount of Line XX related to Security-- Hard Costs				
	Amount of line XX Related to Energy Conservation Measures				
	Collateralization Expenses or Debt Service				

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

PHA Name: Fall River Housing Authority 85 Morgan Street P.O. Box 989 Fall River, MA 02722		Grant Type and Number Capital Fund Program Grant No: MA06-P006-50104 Replacement Housing Factor Grant No:				Federal FY of Grant: 2004			
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work	
				Original	Revision #1	Obligated	Expended		
MA 06-1 Sunset Hill	Replace roofs	1460		50,000	84,750	84,750	0	Planning	
	Window glazing	1460		60,000	24,490	24,490	0	In Progress	
	Painting apts & adm building	1460		400,000	0	0	0	Omitted	
	Replace auto vents heating lines	1460		0	0	0	0	Omitted	
	New heavy duty base covers	1460		0	0	0	0	Omitted	
	Install new apt metal doors/frame	1460		0	24,938.55	24,938.55	24,938.55	Completed	
	Expand Maint. Area	1470		0	0	0	0	Omitted	
	Site improvement	1470		335,904	348,703	348,703	348,703	Completed	
MA 06-2 Heritage Heights	Painting apts & adm building	1460		100,000	18,450	18,450	18,450	Completed	
	Refrig., Ranges, Hoods	1460		220,500	164,250	164,250	164,250	Completed	
	New bathroom faucets	1460		40,878	0	0	0	Omitted	
	Parking Area Improvements	1470		0	20,550	20,550	20,550	Completed	
MA 06-3 Diaferio Village	Replace down spouts	1460		51,000	0	0	0	Omitted	
	Install non elec. Zone valves hallways	1460		20,400	0	0	0	Omitted	
	Install tub wall liners	1460		0	0	0	0	Omitted	
	Upgrade telecommunications	1460		0	90,889.86	90,889.86	90,889.86	Completed	
	Install new apt metal door/frame	1460		0	19,312.45	19,312.45	19,312.45	Completed	
	Upgrade air handling units comm.. bldg	1470		17,500	26,700	26,700	10,843	In Progress	
	Sep heatg zones mgmt/maint area	1470		0	27,900	0	0	Omitted	
Replace Hot Water Mixing Valves	1470		0	35,750	35,750	35,750	Completed		
MA 06-4 Oak Village	New apt isolation valves	1460		0	8,000	0	0	Omitted	
	New bathroom sinks & faucets	1460		0	19,725	0	0	Omitted	
	New shut-offs under toilets	1460		0	4,000	0	0	Omitted	
	Upgrade heatg controls in bldg	1460		0	4,500	0	0	Omitted	
	Upgrade community building kitchen	1470		5,000	73,779.63	73,779.63	33,377	In Progress	
MA 06-5	Install keyed access system	1460		24,800	0	0	0	Omitted	

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

PHA Name: Fall River Housing Authority 85 Morgan Street P.O. Box 989 Fall River, MA 02722		Grant Type and Number Capital Fund Program Grant No: MA06-P006-50104 Replacement Housing Factor Grant No:				Federal FY of Grant: 2004			
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work	
				Original	Revision #1	Obligated	Expended		
O'Brien Apts.	Relocate corridor fire hydrants Air Condition Community Room	1460 1470		36,750 0	0 3,599.85	0 3,599.85	0 3,599.85	Omitted Completed	
MA 06-6 Holmes Apts.	New access at dumpster area Install keyed access system New thermostats in apts. Install supervised fire alarm panel New bathroom faucets New toilet shut-offs Upgrade laundry room Install clean-out 1st fl office Security Camera Upgrade Air Condition Community Room	1450 1460 1460 1460 1460 1460 1470 1470 1470 1470		14,400 65,000 4,675 15,000 0 0 8,250 0 0 0	0 0 5,383.34 0 0 0 0 0 1,510 3,599.85	0 0 5,383.34 0 0 0 0 0 1,510 3,599.85	0 0 5,383.34 0 0 0 0 0 1,510 3,599.85	Omitted Omitted Completed Omitted Omitted Omitted Omitted Omitted Completed Completed	
MA 06-7 Oliveira Apts	Install keyed access system New thermostats in apts Install by-pass at water meter Upgrade laundry room Upgrade comm. Room kitchen Install new shower/maint area Air Condition Community Room	1460 1460 1460 1470 1470 1470 1470		14,400 4,675 1,000 0 ,5000 2,500 0	0 5,383.34 0 0 5,000 2,500 3,599.85	0 5,383.34 0 0 0 0 3,599.85	0 5,383.34 0 0 0 0 3,599.85	Omitted Completed Omitted Omitted Omitted Omitted Completed	
MA 06-8 Cardinal Medeiros Towers	Upgrade stairwells & corridor lighting Upgrade emerg pull cord system Repair 6" ck valve sprinkler system New shut-offs for toilets Install security camera Domestic Water Booster Pumps Building Entrance Doors Painting Adult Day Care Center	1460 1460 1460 1460 1475 1460 1460 1470		0 0 0 0 7,500 0 0 0	41,092 27,520 3,500 7,813 14,985.42 41,745 67,601.21 8,200	0 0 0 0 14,985.42 41,745 67,601.21 8,200	0 0 0 0 14,985.42 41,745 1,805 8,200	Planning Planning Planning Planning Completed Completed In Progress Completed	

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

PHA Name: Fall River Housing Authority 85 Morgan Street P.O. Box 989 Fall River, MA 02722		Grant Type and Number Capital Fund Program Grant No: MA06-P006-50104 Replacement Housing Factor Grant No:				Federal FY of Grant: 2004			
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work	
				Original	Revision #1	Obligated	Expended		
	Replace Water Risers/Baseboard Covers Replace Boiler Rm Door/Janitor Door Hardware	1460 1470		0 0	270,923 7,700	270,923 7,700		In Progress Contract Awarded	
MA 06-10 Cottell Apts.	Install keyed access system Install new trash chute doors Repair/Replace hot water storage tank Install new hot water mixing valves Upgrade laundry room Upgrade comm.. room kitchen Install add. Elec. Outlet comm.. room	1460 1460 1460 1460 1470 1470 1470		14,400 18,450 0 0 7,500 5,000 10,500	0 0 0 0 0 0 0	0 0 0 0 0 0 0	0 0 0 0 0 0 0	Omitted Omitted Omitted Omitted Omitted Omitted Omitted	
MA 06-11 Mitchell Apts.	Install keyed access system Install new unit heater front vestibule Upgrade laundry room Upgrade community room kitchen Roof Repairs Install Community Rm Air Conditioner	1460 1460 1470 1470 1460 1470		1,500 14,400 7,500 5,000 0 0	0 0 0 0 1,275 3,199.90	0 0 0 0 1,275 3,199.90	0 0 0 0 1,275 3,199.90	Omitted Omitted Omitted Omitted Completed Completed	
MA 6-13 N. Roccliffe Apts	Repair retaining wall-playground Eliminate mildew boiler rooms Install heavy duty screen doors Upgrade access panels living rooms Install exhaust fans/bathrooms Upgrade laundry room Maintenance/Comm. Rm. Upgrades	1450 1460 1460 1460 1460 1470 1470		3,000 3,500 15,000 36,750 75,000 8,000 0	0 0 19,391 0 0 0 125,195.50	0 0 19,391 0 0 0 125,195.50	0 0 19,391 0 0 0 87,978.62	Omitted Omitted Completed Omitted Omitted Omitted In Progress	
MA 6-15 Fordeny Apts	Eliminate mildew boiler rooms Install heavy duty screen doors Upgrade access panels living rooms Install exhaust fans/bathrooms Upgrade laundry room	1460 1460 1460 1460 1470		3,600 15,000 37,800 72,000 8,000	0 19,847 0 2,447.50 0	0 19,847 0 2,447.50 0	0 19,847 0 2,447.50 0	Omitted Completed Omitted Completed Omitted	

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

PHA Name: Fall River Housing Authority 85 Morgan Street P.O. Box 989 Fall River, MA 02722		Grant Type and Number Capital Fund Program Grant No: MA06-P006-50104 Replacement Housing Factor Grant No:				Federal FY of Grant: 2004			
Development Number Name/HA-Wide Activities	General Description of Major Work Categories		Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
					Original	Revision #1	Obligated	Expended	
	Replace gutters/downspouts Maintenance/Comm. Rm. Upgrades		1470 1470		3,000 0	0 122,380.13	0 122,380.13	0 92,402.84	Omitted In Progress
MA 6-16 Bennie Costa Plaze	Eliminate mildew boiler rooms		1460		6,000	0	0	0	Omitted
	Install heavy duty screen doors		1460		15,000	38,186	38,186	38,186	Completed
	Upgrade access panels living rooms		1460		63,000	0	0	0	Omitted
	Install exhaust fans/bathrooms		1460		120,000	2,447.50	2,447.50	2,447.50	Completed
	Upgrade laundry room		1470		8,000	0	0	0	Omitted
	Landscaping & Site Improvements Maintenance/Comm. Rm. Upgrades		1450 1470		0 0	5,652 53,650	5,652 53,650	5,652 21,320	Completed In Progress
MA 6-17 Riley Plaza	Eliminate mildew boiler rooms		1460		2,500	0	0	0	Omitted
	Install heavy duty screen doors		1460		15,111	25,025	25,025	25,025	Completed
	Upgrade access panels living rooms		1460		26,250	0	0	0	Omitted
	Install exhaust fans/bathrooms		1460		50,000	0	0	0	Omitted
	Upgrade laundry room		1470		8,000	0	0	0	Omitted
	Maintenance/Comm. Rm. Upgrades		1470		0	157,289	157,289	58,384.32	In Progress

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

PHA Name: Fall River Housing Authority 85 Morgan Street P.O. Box 989 Fall River, MA 02722		Grant Type and Number Capital Fund Program Grant No: MA06-P006-50104 Replacement Housing Factor Grant No:				Federal FY of Grant: 2004			
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work	
				Original	Revision #1	Obligated	Expended		
PHA WIDE	Inventory Work Order Clerk I Inventory Work Order Clerk II	1406 1406		24,000 29,775	24,542.18 0	24,542.18 0	24,542.18 0	Completed Omitted	
MANAGEMENT									
	Elder service contract	1408		13,000	18,095.14	18,095.14	18,095.14	Completed	
	Hire City police/security	1408		410,000	479,043.98	479,043.98	479,043.98	Completed	
	Tenant Coordinator	1408		10,000	42,953.73	42,953.73	42,953.73	Completed	
PHA-WIDE									
ADMIN									
	Project Manager	1410		46,758	46,758	46,758	31,081.33	In Progress	
	Modernization/devel Coord	1410		42,476	45,258	45,258	45,258	Completed	
	Fringe Benefits	1410		0	25,750.47	25,750.47	25,750.47	Completed	
FEES & COSTS	Fees & Costs for Engineering Services	1430		100,000	234,517.46	234,517.46	73,568.44	In Progress	
Total									

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

PHA Name:		Grant Type and Number Capital Fund Program No: MA06-P006-50104 Replacement Housing Factor No:				Federal FY of Grant: 2004	
Development Number Name/HA-Wide Activities	All Fund Obligated (Quarter Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates
	Original	Revised	Actual	Original	Revised	Actual	
MA6-01 SUNSET HILL	09/06			09/08			
MA6-02 HERITAGE	09/06			09/08			
MA6-03 DIAFERIO	09/06			09/08			
MA6-04 OAK VILLAGE	09/06			09/08			
MA6-05 O'BRIEN Apts	09/06			09/08			
MA6-06 HOLMES Apts	09/06			09/08			
MA6-07 OIVEIRA Apts	09/06			09/08			
MA6-08 CARDINAL MEDEIROS TOWERS	09/06			09/08			
MA6-10 COTTELL	09/06			09/08			
MA6-11 MITCHELL	09/06			09/08			
MA6-13 N. ROCLIFFE	09/06			09/08			
MA6-15 FORDNEY	09/06			09/08			
MA6-16 BENNIE COSTA	09/06			09/08			
MA6-17 RILEY PLAZA	09/06			09/08			



## CAPITAL FUND PROGRAM TABLES START HERE

<b>Annual Statement/Performance and Evaluation Report</b>						
<b>Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary</b>						
<b>PHA Name:</b> Fall River Housing Authority 85 Morgan Street P. O. Box 989\ Fall River, MA 02722		<b>Grant Type and Number</b> Capital Fund Program Grant No: MA06-P006-50105 Replacement Housing Factor Grant No:			<b>Federal FY of Grant:</b>  2005	
Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 9/30/2006 <input type="checkbox"/> Final Performance and Evaluation Report						
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost		
		Original	Revised #1	Obligated	Expended	
1	Total non-CFP Funds					
2	1406 Operations	53,775	53,775	53,775	18,105.84	
3	1408 Management Improvements Soft Costs	583,000	599,836.07	599,836.07	599,836.07	
	Management Improvements Hard Costs					
4	1410 Administration	125,345	125,345	110,452.90	65,307.16	
5	1411 Audit					
6	1415 Liquidated Damages					
7	1430 Fees and Costs	100,000	107,864.03	98,056.03	0	
8	1440 Site Acquisition					
9	1450 Site Improvement	178,820	50,000	0	0	
10	1460 Dwelling Structures	1,671,058	1,022,177.90	0	0	
11	1465.1 Dwelling Equipment—Nonexpendable					
12	1470 Nondwelling Structures	15,000	768,000	0	0	
13	1475 Nondwelling Equipment					
14	1485 Demolition					
15	1490 Replacement Reserve					
16	1492 Moving to Work Demonstration					
17	1495.1 Relocation Costs					
18	1499 Development Activities					
19	1502 Contingency					
	Amount of Annual Grant: (sum of lines.....)	2,726,998	2,726,998	862,120	683,249.07	

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

PHA Name: Fall River Housing Authority 85 Morgan Street P. O. Box 989\ Fall River, MA 02722	Grant Type and Number Capital Fund Program Grant No: MA06-P006-50105 Replacement Housing Factor Grant No:	Federal FY of Grant:  2005
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Original Annual Statement  Reserve for Disasters/ Emergencies  Revised Annual Statement (revision no:)  
 Performance and Evaluation Report for Period Ending: 9/30/2006  Final Performance and Evaluation Report

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
	Amount of line XX Related to LBP Activities				
	Amount of line XX Related to Section 504 compliance				
	Amount of line XX Related to Security –Soft Costs				
	Amount of Line XX related to Security-- Hard Costs				
	Amount of line XX Related to Energy Conservation Measures				
	Collateralization Expenses or Debt Service				

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

PHA Name: Fall River Housing Authority 85 Morgan Street P.O. Box 989 Fall River, MA 02722		Grant Type and Number Capital Fund Program Grant No: MA06-P006-50105 Replacement Housing Factor Grant No:				Federal FY of Grant: 2005			
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work	
				Original	Revision #1	Obligated	Expended		
MA 06-1 Sunset Hill	Re-point chimneys	1460		18,500	0	0	0	Omitted	
	Replace bathtub valves	1460		35,500	0	0	0	Omitted	
	Maintenance/Comm Rm Upgrades	1470		0	101,290			Planning	
	Roof Replacement	1460		0	311,229			Pending	
MA 06-2 Heritage Heights	Upgrade bathroom exhaust system	1460		93,566	0	0	0	Omitted	
MA 06-3 Diaferio Village	Upgrade telecommunications	1460		27,000	0	0	0	Omitted	
	Maintenance Comm Rm Upgrades	1470		0	141,710			Planning	
	Additional Office/Comm Rm Space	1470		0	25,000			Pending	
	Building Exterior Repairs	1460		0	213,000			Pending	
MA 06-4 Oak Village	Window treatments in comm. Hall	1460		18,000	0	0	0	Omitted	
	Building exterior repair	1460		1,500	0	0	0	Omitted	
MA 06-5 O'Brien Apts	Upgrade elevator EMS key	1460		5,000	0	0	0	Omitted	
	Remove old hot water lines	1460		6,375	0	0	0	Omitted	
	Common Area Upgrades	1470		0	50,000			Planning	
MA 06-6 Holmes Apts.	Upgrade elevator EMS key	1460		5,000	0	0	0	Omitted	
	Building exterior repairs	1460		341,750	0	0	0	Omitted	
	Common Area Upgrades	1470		0	50,000			Planning	
MA 06-7 Oliveira Apts.	Upgrade elevator EMS key	1460		5,000	0	0	0	Omitted	
	Building exterior repairs	1460		244,000	250,000	0	0	Pending	
	Common Area Upgrades	1470		0	50,000			Planning	
MA 06-8 Medeiros Towers	Site improvements/landscaping	1460		50,500	50,000	0	0	Pending	
	Upgrade elevator EMS key	1460		10,000	0	0	0	Omitted	
	Building exterior repairs/assistd living	1460		587,637	0	0	0	Omitted	
	Upgrade office telecommunications	1460		20,000	0	0	0	Omitted	
	Replace Heating Circulation Pumps	1460		0	111,087			Planning	
	Common Area Upgrades	1470		0	250,000			Planning	
MA 06-10	Upgrade elevator EMS key	1460		5,000	0	0	0	Omitted	

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

PHA Name: Fall River Housing Authority 85 Morgan Street P.O. Box 989 Fall River, MA 02722		Grant Type and Number Capital Fund Program Grant No: MA06-P006-50105 Replacement Housing Factor Grant No:				Federal FY of Grant: 2005			
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work	
				Original	Revision #1	Obligated	Expended		
Cottell Apts.	Replace kitchen faucets	1460		10,650	0	0	0	Omitted	
	Emergency Repairs to Sprinkler Riser	1460		0	3,125			In Progress	
	Replace Heating Circulation Pumps	1460		0	45,928			In Progress	
	Common Area Upgrades	1470		0	50,000			Planning	
MA 6-11 Mitchell Apts.	Upgrade elevator EMS key	1460		5,000	0	0	0	Omitted	
	Replace storeroom hardware	1460		5,400	0	0	0	Omitted	
	Replace hot water control panel	1460		4,850	0	0	0	Omitted	
	Replace Heating Circulation Pumps	1460		0	15,633.90			In Progress	
	Common Area Upgrades	1470		0	50,000			Planning	
MA 6-13 N. Roccliffe Apts	Replace baseboard heat	1460		50,000	0	0	0	Omitted	
MA 6-15 Fordeny Apts	Replace baseboard heat	1460		50,000	0	0	0	Omitted	
	Repave fire lanes	1470		15,000	0	0	0	Omitted	
MA 6-16 Bennie Costa Plaze	Landscaping/site improvements	1450		74,320	0	0	0	Omitted	
	Replace baseboard heat	1460		85,630	0	0	0	Omitted	
MA 6-17 Riley Plaza	Landscaping/site improvements	1450		54,000	0	0	0	Omitted	
	Replace baseboard heat	1460		35,700	0	0	0	Omitted	
OPERATIONS	Inventory work order clerk	1406		53,775	53,775	53,775	18,105.84	In Progress	

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

PHA Name: Fall River Housing Authority 85 Morgan Street P.O. Box 989 Fall River, MA 02722		Grant Type and Number Capital Fund Program Grant No: MA06-P006-50105 Replacement Housing Factor Grant No:				Federal FY of Grant: 2005			
Development Number Name/HA-Wide Activities	General Description of Major Work Categories		Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
					Original	Revision #1	Obligated	Expended	
MANAGEMENT	Elder Services		1408		13,000	6,367.44	6,367.44	6,367.44	Completed
	Hire City Police/Security		1408		410,000	390,027.73	390,027.73	390,027.73	Completed
	Tenant Coordinator		1408		10,000	11,931.06	11,931.06	11,931.06	Completed
	Assisted Living		1408		150,000	191,509.84	191,509.84	191,509.84	Completed
ADM	Project Manager		1410		36,111	36,111	21,218.90	21,218.90	In Progress
	Mod Coordinator		1410		46,758	46,758	46,758	22,684.94	In Progress
	Fringe Benefits		1410		42,476	42,476	42,476	21,403.32	In Progress
FEES & COSTS	Engineering services		1430		100,000	107,864.03	98,056.03		In Progress
HA-Wide 6-13, 6-15,6-16, 6-17	Flooring Replacement		1460		0	89,011			In Progress

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

PHA Name:		Grant Type and Number Capital Fund Program No: MA06-P006-50105 Replacement Housing Factor No:					Federal FY of Grant: 2005	
Development Number Name/HA-Wide Activities	All Fund Obligated (Quarter Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates	
	Original	Revised	Actual	Original	Revised	Actual		
MA6-01 SUNSET HILL	08/07			08/09				
MA6-02 HERITAGE	08/07			08/09				
MA6-03 DIAFERIO	08/07			08/09				
MA6-04 OAK VILLAGE	08/07			08/09				
MA6-05 O'BRIEN Apts	08/07			08/09				
MA6-06 HOLMES Apts	08/07			08/09				
MA6-07 OIVEIRA Apts	08/07			08/09				
MA6-08 CARDINAL MEDEIROS TOWERS	08/07			08/09				
MA6-10 COTTELL	08/07			08/09				
MA6-11 MITCHELL	08/07			08/09				
MA6-13 N. ROCLIFFE	08/07			08/09				
MA6-15 FORDNEY	08/07			08/09				
MA6-16 BENNIE COSTA	08/07			08/09				
MA6-17 RILEY PLAZA	08/07			08/09				



## CAPITAL FUND PROGRAM TABLES START HERE

<b>Annual Statement/Performance and Evaluation Report</b> <b>Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary</b>						
<b>PHA Name:</b> Fall River Housing Authority 85 Morgan Street P. O. Box 989\ Fall River, MA 02722		<b>Grant Type and Number</b> Capital Fund Program Grant No: MA06-P006-50106 Replacement Housing Factor Grant No:			<b>Federal FY of Grant:</b> 2006	
Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 9/30/2006 <input type="checkbox"/> Final Performance and Evaluation Report						
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost		
		Original	Revised #1	Obligated	Expended	
1	Total non-CFP Funds					
2	1406 Operations	53,775	53,775	53,775	0	
3	1408 Management Improvements Soft Costs	510,000	510,000	510,000	87,723.13	
	Management Improvements Hard Costs					
4	1410 Administration	125,345	125,345	125,345	0	
5	1411 Audit					
6	1415 Liquidated Damages					
7	1430 Fees and Costs	100,000	200,000	173,000	0	
8	1440 Site Acquisition					
9	1450 Site Improvement	65,500	105,500	0	0	
10	1460 Dwelling Structures	1,488,586	1,505,086	0	0	
11	1465.1 Dwelling Equipment—Nonexpendable					
12	1470 Nondwelling Structures	210,500	54,000	0	0	
13	1475 Nondwelling Equipment					
14	1485 Demolition					
15	1490 Replacement Reserve					
16	1492 Moving to Work Demonstration					
17	1495.1 Relocation Costs					
18	1499 Development Activities					
19	1502 Contingency					
	Amount of Annual Grant: (sum of lines.....)	2,553,706	2,553,706	862,120	87,723.13	

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

<b>PHA Name:</b> Fall River Housing Authority 85 Morgan Street P. O. Box 989\ Fall River, MA 02722	<b>Grant Type and Number</b> Capital Fund Program Grant No: MA06-P006-50106 Replacement Housing Factor Grant No:	<b>Federal FY of Grant:</b> 2006
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Original Annual Statement  Reserve for Disasters/ Emergencies  Revised Annual Statement (revision no:)  
 Performance and Evaluation Report for Period Ending: 9/30/2006  Final Performance and Evaluation Report

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
	Amount of line XX Related to LBP Activities				
	Amount of line XX Related to Section 504 compliance				
	Amount of line XX Related to Security –Soft Costs				
	Amount of Line XX related to Security-- Hard Costs				
	Amount of line XX Related to Energy Conservation Measures				
	Collateralization Expenses or Debt Service				

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

PHA Name: Fall River Housing Authority 85 Morgan Street P.O. Box 989 Fall River, MA 02722		Grant Type and Number Capital Fund Program Grant No: MA06-P006-50106 Replacement Housing Factor Grant No:				Federal FY of Grant: 2006			
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	Revision #1	Obligated	Expended		
MA 06-1 Sunset Hill	Upgrade Comm Room	1460		25,000	0	0	0	Omitted	
	Upgrade Bath Vents	1460		213,000	80,000	0	0	Pending	
	Building Exterior Repairs	1460		366,511	303,723	0	0	Pending	
	Carbon Monoxide Detectors	1460		0	95,964	0	0	Planning	
MA 06-2 Heritage Heights	Carbon Monoxide Detectors	1460		0	27,605	0	0	Planning	
MA 06-3 Diaferio Village	Replace Porch Rails	1460		27,000	0	0	0	Omitted	
	Carbon Monoxide Detectors	1460		0	56,507	0	0	Planning	
MA 06-4 Oak Village	Landscape Improvements	1450		25,500	25,500	0	0	Pending	
	Building Structural Repairs	1460		143,500	143,500	0	0	Pending	
	Carbon Monoxide Detectors	1460		0	9,253	0	0	Planning	
MA 06-5 O'Brien Apts	Handicapped Bath for Common Area	1470		0	54,000	0	0	Pending	
	Carbon Monoxide Detectors	1460		0	9,865	0	0	Planning	
MA 06-6 Holmes Apts.	Common Area Upgrades	1470		40,000	0	0	0	Omitted	
	Carbon Monoxide Detectors	1460		0	19,845	0	0	Planning	
MA 06-7 Oliveira Apts.	Install New Hot Water Heater	1460		50,000	50,000	0	0	Pending	
	New Apt. Door Hardware	1460		35,000	35,000	0	0	Pending	
	Carbon Monoxide Detectors	1460		0	17,973	0	0	Planning	
MA 06-8 Medeiros Towers	New Fire Doors in Boiler Room	1460		2,750	0	0	0	Omitted	
	Upgrade Laundry Room	1470		5,000	0	0	0	Omitted	
	Common Area Upgrade	1470		33,500	0	0	0	Omitted	
	Upgrade A/C Units	1460		15,000	15,000	0	0	Pending	
	Replace Shower Mixing Valves	1460		104,000	104,000	0	0	Pending	
	Elev. Lobby Improvements	1460		7,000	0	0	0	Omitted	
	Install New Roof	1460		175,000	175,000	0	0	Pending	
	Carbon Monoxide Detectors	1460		0	32,321	0	0	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: Fall River Housing Authority 85 Morgan Street P.O. Box 989 Fall River, MA 02722		Grant Type and Number Capital Fund Program Grant No: MA06-P006-50106 Replacement Housing Factor Grant No:				Federal FY of Grant: 2006			
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	Revision #1	Obligated	Expended	
MA 06-10 Cottell Apts.	Install Bathroom Faucets & Valves		1460		35,325	35,325	0	0	Pending
	Replace heat in lobby		1460		10,000	10,000	0	0	Pending
	Remove Carpeting & Re-tile in Apts.		1460		71,000	71,000			Pending
	Paint Stairways / Upgrade Corridors		1460		39,000	39,000			Pending
	Carbon Monoxide Detectors		1460		0	15,977			Planning
MA 6-11 Mitchell Apts.	Upgrade sprinkler riser system		1460		35,000	35,000	0	0	Pending
	Paint Stairways / Upgrade Corridors		1460		40,000	40,000	0	0	Pending
	Carbon Monoxide Detectors		1460		0	20,219	0	0	Planning
MA 6-13 N. Rocliffe Apts	Landscape Improvements		1450		20,000	20,000	0	0	Pending
	Carbon Monoxide Detectors		1460		0	14,345	0	0	Planning
MA 6-15 Fordeny Apts	Landscape Improvements		1450		20,000	20,000	0	0	Pending
	Carbon Monoxide Detectors		1460		0	14,680	0	0	Planning
MA 6-16 Bennie Costa Plaze	Landscape Improvements		1450		0	20,000	0	0	Pending
	Carbon Monoxide Detectors		1460		0	22,970	0	0	Planning
MA 6-17 Riley Plaza	Landscape Improvements		1450		0	20,000	0	0	Pending
	Carbon Monoxide Detectors		1460		0	11,014	0	0	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: Fall River Housing Authority 85 Morgan Street P.O. Box 989 Fall River, MA 02722		Grant Type and Number Capital Fund Program Grant No: MA06-P006-50106 Replacement Housing Factor Grant No:				Federal FY of Grant: 2006			
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	Revision #1	Obligated	Expended	
OPERATIONS	Inventory work order clerk		1406		53,775	53,775	53,775	0	In Progress
MANAGEMENT	Elder Services		1408		13,000	13,000	13,000	2,720.09	In Progress
	Hire City Police/Security		1408		490,000	490,000	490,000	83,354.24	In Progress
	Tenant Coordinator		1408		7,000	7,000	7,000	1,648.80	In Progress
ADM	Project Manager		1410		36,111	36,111	36,111	0	In Progress
	Mod Coordinator		1410		46,758	46,758	46,758	0	In Progress
	Fringe Benefits		1410		42,476	42,476	42,476	0	In Progress
FEES & COSTS	Engineering services		1430		100,000	200,000	173,000		In Progress

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

PHA Name:		Grant Type and Number Capital Fund Program No: MA06-P006-50106 Replacement Housing Factor No:					Federal FY of Grant: 2006	
Development Number Name/HA-Wide Activities	All Fund Obligated (Quarter Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates	
	Original	Revised	Actual	Original	Revised	Actual		
MA6-01 SUNSET HILL	08/08			08/10				
MA6-02 HERITAGE	08/08			08/10				
MA6-03 DIAFERIO	08/08			08/10				
MA6-04 OAK VILLAGE	08/08			08/10				
MA6-05 O'BRIEN Apts	08/08			08/10				
MA6-06 HOLMES Apts	08/08			08/10				
MA6-07 OIVEIRA Apts	08/08			08/10				
MA6-08 CARDINAL MEDEIROS TOWERS	08/08			08/10				
MA6-10 COTTELL	08/08			08/10				
MA6-11 MITCHELL	08/08			08/10				
MA6-13 N. ROCLIFFE	08/08			08/10				
MA6-15 FORDNEY	08/08			08/10				
MA6-16 BENNIE COSTA	08/08			08/10				
MA6-17 RILEY PLAZA	08/08			08/10				



## CAPITAL FUND PROGRAM TABLES START HERE

<b>Annual Statement/Performance and Evaluation Report</b>					
<b>Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary</b>					
PHA Name: Fall River Housing Authority 85 Morgan Street P. O. Box 989\ Fall River, MA 02722		Grant Type and Number Capital Fund Program Grant No: MA06-P006-50103 Replacement Housing Factor Grant No:			Federal FY of Grant:  2003
<input checked="" type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 09/30/2006 <input type="checkbox"/> Final Performance and Evaluation Report					
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised #2	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations	53,775	27,624.33	27,624.33	27,624.33
3	1408 Management Improvements Soft Costs	385,725	456,324.55	456,324.55	456,324.55
	Management Improvements Hard Costs				
4	1410 Administration	152,620	121,625.27	121,625.27	121,625.27
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	150,000	82,605.07	82,605.07	56,141.22
8	1440 Site Acquisition				
9	1450 Site Improvement	30,000	0	0	0
10	1460 Dwelling Structures	1,556,861	1,095,066.20	1,095,066.20	1,095,066.20
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Nondwelling Structures	110,500	658,735.58	658,735.58	658,735.58
13	1475 Nondwelling Equipment	2,500	0	0	0
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1499 Development Activities				

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

PHA Name: Fall River Housing Authority 85 Morgan Street P. O. Box 989\ Fall River, MA 02722	Grant Type and Number Capital Fund Program Grant No: MA06-P006-50103 Replacement Housing Factor Grant No:	Federal FY of Grant:  2003
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Original Annual Statement Reserve for Disasters/ Emergencies Revised Annual Statement (revision no:)  
Performance and Evaluation Report for Period Ending: 09/30/2006 Final Performance and Evaluation Report

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
19	1502 Contingency				
	Amount of Annual Grant: (sum of lines.....)	2,441,981	2,441,981.00	2,441,981.00	2,415,517.15
	Amount of line XX Related to LBP Activities				
	Amount of line XX Related to Section 504 compliance				
	Amount of line XX Related to Security –Soft Costs				
	Amount of Line XX related to Security-- Hard Costs				
	Amount of line XX Related to Energy Conservation Measures				
	Collateralization Expenses or Debt Service				

## Annual Statement/Performance and Evaluation Report

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

#### Part II: Supporting Pages

PHA Name: Fall River Housing Authority 85 Morgan Street P.O. Box 989 Fall River, MA 02722		Grant Type and Number Capital Fund Program Grant No: MA06-P006-50103 Replacement Housing Factor Grant No:				Federal FY of Grant: 2003			
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work	
				Original	Revision #2	Obligated	Expended		
MA 06-1 Sunset Hill	Install expansion joints sewer lines	1450		30,000	0	0	0	Omitted	
	New building apt. door locks	1460		50,000	0	0	0	Omitted	
	New circulators on heating lines	1460		0	0	0	0	Omitted	
	Replace auto vents on heating lines	1460		35,500	0	0	0	Omitted	
	New heavy duty baseboard covers	1460		188,598	0	0	0	Omitted	
	Replace gauges around mixing valves	1460		29,600	0	0	0	Omitted	
	Install new hot water mixing valve	1460		18,500	18,500.00	18,500.00	18,500.00	Completed	
	Replace mixing valves in showers	1460		106,500	0	0	0	Omitted	
	Install new zone valves in showers	1460		71,000	0	0	0	Omitted	
	Replace sump-pumps basements	1460		96,100	0	0	0	Omitted	
	Re-install main heating line basements	1460		0	0	0	0	Omitted	
	Emergency roof repairs	1460		5,000	4,200.00	4,200.00	4,200.00	Completed	
	Refrig. Ranges, Hoods	1460		0	236,747.85	236,747.85	236,747.85	Completed	
	Expand maintenance area	1460		32,000	0	0	0	Omitted	
Site Improvements	1470		0	33,619.00	33,619.00	33,619.00	Completed		
MA 06-2 Heritage Heights	Rebuild hot water mixing valves	1460		9,500	9,100.00	9,100.00	9,100.00	Completed	
	New bathroom faucets	1460		47,600	0	0	0	Omitted	
	Install new apt metal doors/frames	1460		95,250	6,968.00	6,968.00	6,968.00	Completed	
	Circulating Pumps/Mixing Valves	1460		0	24,709.20	24,709.20	24,709.20	Completed	
	Upgrade Refrig and Ranges	1460		0	132,602.15	132,602.15	132,602.15	Completed	
	Upgrade Fire Alarm	1470		0	3,524.06	3,524.06	3,524.06	Completed	

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

PHA Name: Fall River Housing Authority 85 Morgan Street P.O. Box 989 Fall River, MA 02722		Grant Type and Number Capital Fund Program Grant No: MA06-P006-50103 Replacement Housing Factor Grant No:				Federal FY of Grant: 2003			
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work	
				Original	Revision #2	Obligated	Expended		
MA 06-3 Diaferio Village	Install coin vents in apt. baseboards	1460		44,800	0	0	0	Omitted	
	Install tub wall liners	1460		47,585	0	0	0	Omitted	
	Separate heating zones mgmt/maint area	1470		30,000	0	0	0	Omitted	
MA 06-4 Oak Village	Remove incinerators	1450		0	0	0	0	Omitted	
	New apt isolation valves	1460		8,000	0	0	0	Omitted	
	New bathroom sinks & faucets	1460		24,000	0	0	0	Omitted	
	New shut-offs under toilets	1460		4,000	0	0	0	Omitted	
	Upgrade heating controls in buildings	1460		4,500	0	0	0	Omitted	
	Window Sealant replacement	1460		0	17,450.00	17,450.00	17,450.00	Completed	
	Handicapped rails comm. bldg	1460		0	4,275.00	4,275.00	4,275.00	Completed	
Install new heating zones comm. room	1470		10,500	0	0	0	Omitted		
MA 06-5 O'Brien Apts.	Install heat in old boiler room	1460		15,000	0	0	0	Omitted	
	Replace generator, Remove asbestos	1460		0	0	0	0	Omitted	
	Install keyed access system	1460		0	14,127.00	14,127.00	14,127.00	Completed	
	Upgrade office light fixtures	1470		12,500	1,290.10	1,290.10	1,290.10	Completed	
	Common area improvements	1470		15,500	106,632.80	106,632.80	106,632.80	Completed	
	Upgrade Fire Alarm	1470		0	44,904.00	44,904.00	44,904.00	Completed	

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

PHA Name: Fall River Housing Authority 85 Morgan Street P.O. Box 989 Fall River, MA 02722		Grant Type and Number Capital Fund Program Grant No: MA06-P006-50103 Replacement Housing Factor Grant No:				Federal FY of Grant: 2003			
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work	
				Original	Revision #2	Obligated	Expended		
MA 06-6 Holmes Apts.	New bathroom faucets	1460		10,000	0	0	0	Omitted	
	New toilet shut-offs	1460		10,000	0	0	0	Omitted	
	Install keyed access system	1460		0	5,670.00	5,670.00	5,670.00	Completed	
	Install clean-out/1st floor office area	1470		3,500	0	0	0	Omitted	
	Common Area Improvements	1470		0	84,178.20	84,178.20	84,178.20	Completed	
	Upgrade fire alarm	1470		0	44,905.00	44,905.00	44,905.00	Completed	
MA 06-7 Oliveira Apts	Roof Replacement	1460		0	146,000.00	146,000.00	146,000.00	Completed	
	Install keyed access system	1460		0	9,474.00	9,474.00	9,474.00	Completed	
	Common Area Improvements	1470		0	59,090.70	59,090.70	59,090.70	Completed	
	Upgrade fire alarm	1470		0	37,020.88	37,020.88	37,020.88	Completed	
MA 06-8 Cardinal Medeiros Towers	New exterior metal rails	1450		65,000	0	0	0	Omitted	
	Upgrade emergency pull cord system	1460		265,000	0	0	0	Omitted	
	Repair 6" ck valve sprinkler system	1460		3,500	0	0	0	Omitted	
	New shut-offs for toilet	1460		15,600	0	0	0	Omitted	
	Upgrade laundry room	1460		6,500	0	0	0	Omitted	
	New community room curtains	1475		2,500	0	0	0	Omitted	

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

PHA Name: Fall River Housing Authority 85 Morgan Street P.O. Box 989 Fall River, MA 02722		Grant Type and Number Capital Fund Program Grant No: MA06-P006-50103 Replacement Housing Factor Grant No:				Federal FY of Grant: 2003			
Development Number Name/HA-Wide Activities	General Description of Major Work Categories		Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
					Original	Revision #2	Obligated	Expended	
MA 06-10 Cottell	Replace roof exhaust units/louvers		1460		20,150	0		0	Omitted
	Repair/replace hot water storage tanks		1460		55,000	0	0	0	Omitted
	Install new hot water mixing valves		1460		14,200	0	0	0	Omitted
	Install isolation valves on risers		1460		4,200	0	0	0	Omitted
	Install keyed access system		1460		0	9,460.00	9,460.00	9,460.00	Completed
	Common Area Improvements		1470		0	47,828.06	47,828.06	47,828.06	Completed
	Upgrade fire alarm		1470		0	44,905.00	44,905.00	44,905.00	Completed
MA 06-11	Install new domestic water pump		1460		55,000	0	0	0	Omitted
	Upgrade public restrooms		1460		10,000	0	0	0	Omitted
	Install 2 new heating circulators		1460		1,500	0	0	0	Omitted
	Building exterior repairs		1460		355,000	2,945.00	2,945.00	2,945.00	Completed
	Install keyed access system		1460		0	7,263.00	7,263.00	7,263.00	Completed
	Common Area Improvements		1470		0	66,737.78	66,737.78	66,737.78	Completed
	Upgrade fire alarm		1470			84,100.00	84,100.00	84,100.00	Completed
MA 6-13 N. Roccliffe Apts	Install by-pass on water heaters		1460		1,500	0	0	0	Omitted
	Install new apartment shut-off valves		1460		3,500	0	0	0	Omitted
	Install new shut-offs for sinks/toilets		1460		7,000	0	0	0	Omitted
	Re-design front/rear entrances		1460		0	65,400.00	65,400.00	65,400.00	Completed

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

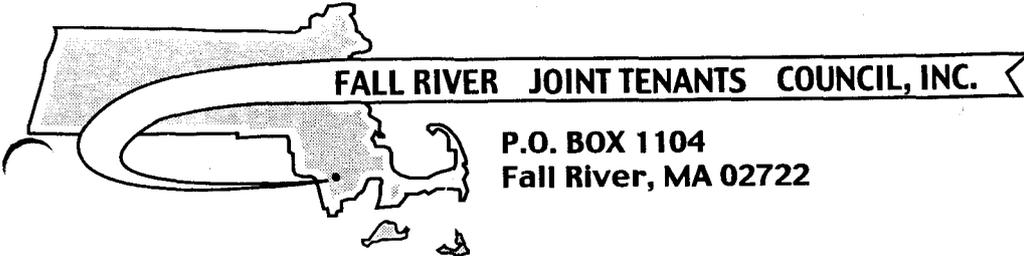
PHA Name: Fall River Housing Authority 85 Morgan Street P.O. Box 989 Fall River, MA 02722		Grant Type and Number Capital Fund Program Grant No: MA06-P006-50103 Replacement Housing Factor Grant No:				Federal FY of Grant: 2003			
Development Number Name/HA-Wide Activities	General Description of Major Work Categories		Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
					Original	Revision #2	Obligated	Expended	
MA 6-15 Fordeny Apts	Install by-pass on water heaters		1460		2,100	0	0	0	Omitted
	Install new apartment shut-off valves		1460		3,600	0	0	0	Omitted
	Install new shut-offs for sinks/toilets		1460		7,200	0	0	0	Omitted
	New hot air furnace Maint. area		1460		9,500	0	0	0	Omitted
	Re-design front/rear entrances		1460		0	163,500.02	163,500.02	163,500.02	Completed
MA 6-16	In-stall by-pass on water heaters		1460		3,000	0	0	0	Omitted
	Install new apt shut-off valves		1460		6,000	0	0	0	Omitted
	Install new shut-offs sinks/toilets		1460		12,000	0	0	0	Omitted
	Re-design front/rear entrances		1460		0	155,349.98	155,349.98	155,349.98	Completed
MA 6-17 Riley Plaza	Install by-pass on water heaters		1460		1,500	0	0	0	Omitted
	Install new apartment shut-off valves		1460		2,500	0	0	0	Omitted
	Install new shut-offs for sinks/toilets		1460		5,000	0	0	0	Omitted
	New hot air furnace Maint. area		1460		9,500	0	0	0	Omitted
	Re-design front/rear entrances		1460		0	61,325.00	61,325.00	61,325.00	Completed

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

PHA Name: Fall River Housing Authority 85 Morgan Street P.O. Box 989 Fall River, MA 02722		Grant Type and Number Capital Fund Program Grant No: MA06-P006-50103 Replacement Housing Factor Grant No:				Federal FY of Grant: 2003			
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work	
				Original	Revision #1	Obligated	Expended		
PHA WIDE	Inventory Work Order Clerk I Inventory Work Order Clerk II	1406 1406		24,000 29,775	27,624.33 0	27,624.33 0	27,624.33 0	Completed Omitted	
MANAGEMENT									
	Elder service contract	1408		15,600	7,750.00	7,750.00	7,750.00	Completed	
	Hire City police/security	1408		360,125	383,565.87	383,566.00	383,565.87	Completed	
	Tenant Coordinator	1408		10,000	7,758.68	7,758.68	7,758.68	Completed	
	Assisted living	1408		0	57,250.00	57,250.00	57,250.00	Completed	
PHA-WIDE									
ADMIN	Clerk of the Works	1410		26,000	5,200.00	5,200.00	5,200.00	Completed	
	Project Manager	1410		36,250	39,441.05	39,441.05	39,441.05	Completed	
	Modernization/Develop. Coord.	1410		42,241	60,846.67	60,846.67	60,846.67	Completed	
	Fringe Benefits	1410		48,129	16,137.55	16,137.55	16,137.55	Completed	
FEES & COSTS	Fees & Costs for Engineering Services	1430		145,000	82,605.07	56,141.22	56,141.22	In Progress	
	CFP Advertising for Contracts	1430		5,000	0	0	0	Omitted	
Total									

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

PHA Name:		Grant Type and Number Capital Fund Program No: MA06-P006-50103 Replacement Housing Factor No:				Federal FY of Grant: 2003	
Development Number Name/HA-Wide Activities	All Fund Obligated (Quarter Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates
	Original	Revised	Actual	Original	Revised	Actual	
MA6-01 SUNSET HILL	09/05			09/07			
MA6-02 HERITAGE	09/05			09/07			
MA6-03 DIAFERIO	09/05			09/07			
MA6-04 OAK VILLAGE	09/05			09/07			
MA6-05 O'BRIEN Apts.	09/05			09/07			
MA6-06 HOLMES Apts.	09/05			09/07			
MA6-07 OIVEIRA Apts.	09/05			09/07			
MA6-08 CARDINAL MEDEIROS TOWERS	09/05			09/07			
MA6-10 COTTELL	09/05			09/07			
MA6-11 MITCHELL	09/05			09/07			
MA6-13 N. ROCLIFFE	09/05			09/07			
MA6-15 FORDNEY	09/05			09/07			
MA6-16 BENNIE COSTA	09/05			09/07			
MA6-17 RILEY PLAZA	09/05			09/07			



FALL RIVER JOINT TENANTS COUNCIL, INC.

P.O. BOX 1104  
Fall River, MA 02722

January 4, 2007

Re: Fall River Housing Authority Agency Plan  
Submission for 2007

Daniel McDonald, Deputy Executive Director  
of Operations & Technology  
Fall River Housing Authority  
85 Morgan Street  
Fall River, Massachusetts 02721

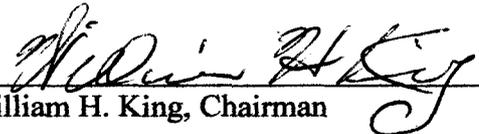
Dear Mr. McDonald:

This will serve to advise that the Fall River Joint Tenants Council Resident Advisory Board attended and participated in seven (7) meetings relative to the submission of the Fall River Housing Authority's Agency Plan for 2007.

The Resident Advisory Board was included in all discussions with regard to any changes to the Plan, and we are in agreement with all aspects of this submission.

Very truly yours,

FALL RIVER JOINT TENANTS COUNCIL, INC.

  
\_\_\_\_\_  
William H. King, Chairman

WHK:mjg