

PHA Plans

Streamlined Annual Version

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

OMB No. 2577-0226
(exp. 06/30/2006)

This information collection is authorized by Section 511 of the Quality Housing and Work Responsibility Act, which added a new section 5A to the U.S. Housing Act of 1937 that introduced 5-year and annual PHA Plans. The full PHA plan provides a ready source for interested parties to locate basic PHA policies, rules, and requirements concerning the PHA's operations, programs, and services, and informs HUD, families served by the PHA, and members of the public of the PHA's mission and strategies for serving the needs of low-income and very low-income families. This form allows eligible PHAs to make a streamlined annual Plan submission to HUD consistent with HUD's efforts to provide regulatory relief for certain types of PHAs. Public reporting burden for this information collection is estimated to average 11.7 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. HUD may not collect this information and respondents are not required to complete this form, unless it displays a currently valid OMB Control Number.

Privacy Act Notice. The United States Department of Housing and Urban Development, Federal Housing Administration, is authorized to solicit the information requested in this form by virtue of Title 12, U.S. Code, Section 1701 et seq., and regulations promulgated thereunder at Title 12, Code of Federal Regulations. Information in PHA plans is publicly available.

Streamlined Annual PHA Plan for Fiscal Year: 2007

PHA Name: Barnstable Housing Authority

NOTE: This PHA Plan template (HUD-50075-SA) is to be completed in accordance with instructions contained in previous Notices PIH 99-33 (HA), 99-51 (HA), 2000-22 (HA), 2000-36 (HA), 2000-43 (HA), 2001-4 (HA), 2001-26 (HA), 2003-7 (HA), and any related notices HUD may subsequently issue.

Streamlined Annual PHA Plan Agency Identification

PHA Name: Barnstable Housing Authority

PHA Number: MA046

PHA Fiscal Year Beginning: 01/2007

PHA Programs Administered:

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

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:				

PHA Plan Contact Information:

Name: Thomas K. Lynch, Executive Director Phone: 508.771.7222
TDD: 508.778.5333 Email: tom_lynch@bha.barnstable.ma.us

Public Access to Information

Information regarding any activities outlined in this plan can be obtained by contacting:
(select all that apply)

PHA's main administrative office PHA's development management offices

Display Locations For PHA Plans and Supporting Documents

The PHA Plan revised policies or program changes (including attachments) are available for public review and inspection. Yes No.

If yes, select all that apply:

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

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

Main business office of the PHA PHA development management offices

Other (list below)

Streamlined Annual PHA Plan

Fiscal Year 2007

[24 CFR Part 903.12(c)]

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[24 CFR 903.7(r)]

Provide a table of contents for the Plan, including applicable additional requirements, and a list of supporting documents available for public inspection.

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	903.7(b)(2) Policies on Eligibility, Selection, and Admissions
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	903.7(k)(1)(i) Statement of Homeownership Programs
7	4. Project-Based Voucher Programs
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Attachments:

- a BHA Organization Chart
- b RAB Minutes
- c 2003 CFP Perform/Eva. Period Ending 6/30/06
- d 2004 CFP Perform/Eva. Period Ending 6/30/06
- e 2005 CFP Perform/Eva. Period Ending 6/30/06
- f 2006 CFP Perform/Eva. Period Ending 6/30/06
- g Site-based Waiting Lists

B. SEPARATE HARD COPY SUBMISSIONS TO LOCAL HUD FIELD OFFICE

Form HUD-50076, PHA Certifications of Compliance with the PHA Plans and Related Regulations: Board Resolution to Accompany the Streamlined Annual Plan identifying policies or programs the PHA has revised since submission of its last Annual Plan, and including Civil Rights certifications and assurances the changed policies were presented to the Resident Advisory Board for review and comment, approved by the PHA governing board, and made available for review and inspection at the PHA's principal office;

For PHAs Applying for Formula Capital Fund Program (CFP) Grants:

Form HUD-50070, Certification for a Drug-Free Workplace;

Form HUD-50071, Certification of Payments to Influence Federal Transactions; and

Form SF-LLL &SF-LLL a, Disclosure of Lobbying Activities.

1. Site-Based Waiting Lists (Eligibility, Selection, Admissions Policies)

[24 CFR Part 903.12(c), 903.7(b)(2)]

Exemptions: Section 8 only PHAs are not required to complete this component.

A. Site-Based Waiting Lists-Previous Year

1. Has the PHA operated one or more site-based waiting lists in the previous year? If yes, complete the following table; if not skip to B.

Site-Based Waiting Lists				
Development Information: (Name, number, location)	Date Initiated	Initial mix of Racial, Ethnic or Disability Demographics	Current mix of Racial, Ethnic or Disability Demographics since Initiation of SBWL	Percent change between initial and current mix of Racial, Ethnic, or Disability demographics
Colony House MA046-003	Jan. 1981 68 Units	Unknown	8 Black 4 American Indian 7 Other 153 Young Disabled	-
Aunt Sarah's Harbor View House	April 2002 12 Units	11 White 1 American Indian	11 White 1 Vacancy	25%

2. What is the number of site based waiting list developments to which families may apply at one time? 2
3. How many unit offers may an applicant turn down before being removed from the site-based waiting list? 1
4. Yes No: Is the PHA the subject of any pending fair housing complaint by HUD or any court order or settlement agreement? If yes, describe the order, agreement or complaint and describe how use of a site-based waiting list will not violate or be inconsistent with the order, agreement or complaint below:

B. Site-Based Waiting Lists – Coming Year

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 next component.

1. How many site-based waiting lists will the PHA operate in the coming year? 2

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? All BHA Programs for which Families qualify
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)
U.S. Postal Service
BHA Web Site – www.barnstablehousing.org

2. Capital Improvement Needs

[24 CFR Part 903.12 (c), 903.7 (g)]

Exemptions: Section 8 only PHAs are not required to complete this component.

A. Capital Fund Program

1. Yes No Does the PHA plan to participate in the Capital Fund Program in the upcoming year? If yes, complete items 7 and 8 of this template (Capital Fund Program tables). If no, skip to B.
2. Yes No: Does the PHA propose to use any portion of its CFP funds to repay debt incurred to finance capital improvements? If so, the PHA must identify in its annual and 5-year capital plans the development(s) where such improvements will be made and show both how the proceeds of the financing will be used and the amount of the annual payments required to service the debt. (Note that separate HUD approval is required for such financing activities.).

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

Applicability: 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.

1. Yes No: Has the PHA received a HOPE VI revitalization grant? (if no, skip to #3; if yes, provide responses to the items on the chart located on the next page, copying and completing as many times as necessary).

2. Status of HOPE VI revitalization grant(s):

HOPE VI Revitalization Grant Status	
a. Development Name:	
b. Development Number:	
c. Status of Grant:	
	<input type="checkbox"/> Revitalization Plan under development
	<input type="checkbox"/> Revitalization Plan submitted, pending approval
	<input type="checkbox"/> Revitalization Plan approved
	<input type="checkbox"/> Activities pursuant to an approved Revitalization Plan underway

3. Yes No: Does the PHA expect to apply for a HOPE VI Revitalization grant in the Plan year?

If yes, list development name(s) below:

4. Yes No: 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:

5. Yes No: 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:

3. Section 8 Tenant Based Assistance--Section 8(y) Homeownership Program

(if applicable) [24 CFR Part 903.12(c), 903.7(k)(1)(i)]

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 the next component; if "yes", complete each program description below (copy and complete questions for each program identified.)

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, what is the maximum number of participants this fiscal year?

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:

c. What actions will the PHA undertake to implement the program this year (list)?

3. Capacity of the PHA to Administer a Section 8 Homeownership Program:

The PHA has demonstrated its capacity to administer the program by (select all that apply):

- Establishing a minimum homeowner downpayment requirement of at least 3 percent of purchase price and requiring that at least 1 percent of the purchase price comes from the family's resources.
- Requiring that financing for purchase of a home under its Section 8 homeownership will be provided, insured or guaranteed by the state or Federal government; comply with secondary mortgage market underwriting requirements; or comply with generally accepted private sector underwriting standards.
- Partnering with a qualified agency or agencies to administer the program (list name(s) and years of experience below):
- Demonstrating that it has other relevant experience (list experience below):

4. Use of the Project-Based Voucher Program

Intent to Use Project-Based Assistance

Yes No: Does the PHA plan to "project-base" any tenant-based Section 8 vouchers in the coming year? If the answer is "no," go to the next component. If yes, answer the following questions.

1. Yes No: Are there circumstances indicating that the project basing of the units, rather than tenant-basing of the same amount of assistance is an appropriate option? If yes, check which circumstances apply:

- low utilization rate for vouchers due to lack of suitable rental units
- access to neighborhoods outside of high poverty areas
- other (describe below):

The BHA is looking to develop additional housing opportunities for low income families and underserved populations. Project basing of some of these units will assist with the financing of the project.

2. Indicate the number of units and general location of units (e.g. eligible census tracts or smaller areas within eligible census tracts): Approximately 5 in the Town of Barnstable

5. PHA Statement of Consistency with the Consolidated Plan

[24 CFR Part 903.15]

For each applicable Consolidated Plan, make the following statement (copy questions as many times as necessary) only if the PHA has provided a certification listing program or policy changes from its last Annual Plan submission.

1. Consolidated Plan jurisdiction: Barnstable County

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

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

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

- a. Holding a regional housing forum;**
- b. Applying for and receiving grant funds to increase the supply of low/mod housing on a regional basis;**
- c. Working with local banks and other financial establishments to create a soft second loan program, HOME program, and first time home buyers assistance program;**
- d. Appointing a designee to negotiate proposals for low and moderate-income housing;**
- e. Creating a regional housing partnership;**
- f. Having established a regional affordable housing trust;**
- g. Encouraging the use of alternative Title V technology;**
- h. Use newly adopted Community Preservation Act (CPA) funding for the production and preservation of affordable housing in Barnstable;**
- i. Adopting an affordable housing overlay district (AHOD); and**
- j. Having regulations for development of reasonable impact that requires 10% affordable housing units or a payment in lieu thereof.**
- k. Participation with local businesses on a workforce housing strategy.**

6. Supporting Documents Available for Review for Streamlined Annual PHA Plans

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

List of Supporting Documents Available for Review		
Applicable & On Display	Supporting Document	Related Plan Component
X	<i>PHA Certifications of Compliance with the PHA Plans and Related Regulations and Board Resolution to Accompany the Standard Annual, Standard Five-Year, and Streamlined Five-Year/Annual Plans;</i>	5 Year and Annual Plans
X	<i>PHA Certifications of Compliance with the PHA Plans and Related Regulations and Board Resolution to Accompany the Streamlined Annual Plan</i>	Streamlined Annual Plans
X	<i>Certification by State or Local Official of PHA Plan Consistency with Consolidated Plan.</i>	5 Year and standard Annual Plans
X	Fair Housing Documentation Supporting Fair Housing Certifications: Records reflecting that the PHA has examined its programs or proposed programs, identified any impediments to fair housing choice in those programs, addressed or is addressing those impediments in a reasonable fashion in view of the resources available, and worked or is working with local jurisdictions to implement any of the jurisdictions’ initiatives to affirmatively further fair housing that require the PHA’s involvement.	5 Year and Annual Plans
X	Housing Needs Statement of the Consolidated Plan for the jurisdiction(s) in which the PHA is located and any additional backup data to support statement of housing needs for families on the PHA’s public housing and Section 8 tenant-based waiting lists.	Annual Plan: Housing Needs
X	Most recent board-approved operating budget for the public housing program	Annual Plan: Financial Resources
X	Public Housing Admissions and (Continued) Occupancy Policy (A&O/ACOP), which includes the Tenant Selection and Assignment Plan [TSAP] and the Site-Based Waiting List Procedure.	Annual Plan: Eligibility, Selection, and Admissions Policies
	Deconcentration Income Analysis	Annual Plan: Eligibility, Selection, and Admissions Policies
X	Any policy governing occupancy of Police Officers and Over-Income Tenants in Public Housing. <input checked="" type="checkbox"/> Check here if included in the public housing A&O Policy.	Annual Plan: Eligibility, Selection, and Admissions Policies
X	Section 8 Administrative Plan	Annual Plan: Eligibility, Selection, and Admissions Policies
X	Public housing rent determination policies, including the method 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
	Schedule of flat rents offered at each public housing development. <input type="checkbox"/> Check here if included in the public housing A & O Policy.	Annual Plan: Rent Determination
X	Section 8 rent determination (payment standard) policies (if included in plan, not necessary as a supporting document) and written analysis of Section 8 payment standard policies. <input checked="" type="checkbox"/> Check here if included in Section 8 Administrative Plan.	Annual Plan: Rent Determination
X	Public housing management and maintenance policy documents, including policies for the prevention or eradication of pest infestation (including cockroach infestation).	Annual Plan: Operations and Maintenance
X	Results of latest Public Housing Assessment System (PHAS) Assessment (or other applicable assessment).	Annual Plan: Management and Operations
	Follow-up Plan to Results of the PHAS Resident Satisfaction Survey (if necessary)	Annual Plan: Operations and Maintenance and Community Service & Self-

List of Supporting Documents Available for Review		
Applicable & On Display	Supporting Document	Related Plan Component
		Sufficiency
X	Results of latest Section 8 Management Assessment System (SEMAP)	Annual Plan: Management and Operations
X	Any policies governing any Section 8 special housing types <input checked="" type="checkbox"/> Check here if included in Section 8 Administrative Plan	Annual Plan: Operations and Maintenance
X	Public housing grievance procedures <input checked="" type="checkbox"/> Check here if included in the public housing A & O Policy	Annual Plan: Grievance Procedures
X	Section 8 informal review and hearing procedures. <input checked="" type="checkbox"/> Check here if included in Section 8 Administrative Plan.	Annual Plan: Grievance Procedures
X	The Capital Fund/Comprehensive Grant Program Annual Statement /Performance and Evaluation Report for any active grant year.	Annual Plan: Capital Needs
	Most recent CIAP Budget/Progress Report (HUD 52825) for any active CIAP grants.	Annual Plan: Capital Needs
	Approved HOPE VI applications or, if more recent, approved or submitted HOPE VI Revitalization Plans, or any other approved proposal for development of public housing.	Annual Plan: Capital Needs
X	Self-evaluation, Needs Assessment and Transition Plan required by regulations implementing Section 504 of the Rehabilitation Act and the Americans with Disabilities Act. See PIH Notice 99-52 (HA).	Annual Plan: Capital Needs
	Approved or submitted applications for demolition and/or disposition of public housing.	Annual Plan: Demolition and Disposition
X	Approved or submitted applications for designation of public housing (Designated Housing Plans).	Annual Plan: Designation of Public Housing
	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, Section 22 of the US Housing Act of 1937, or Section 33 of the US Housing Act of 1937.	Annual Plan: Conversion of Public Housing
	Documentation for required Initial Assessment and any additional information required by HUD for Voluntary Conversion.	Annual Plan: Voluntary Conversion of Public Housing
	Approved or submitted public housing homeownership programs/plans.	Annual Plan: Homeownership
	Policies governing any Section 8 Homeownership program (Section _____ of the Section 8 Administrative Plan)	Annual Plan: Homeownership
	Public Housing Community Service Policy/Programs <input type="checkbox"/> Check here if included in Public Housing A & O Policy	Annual Plan: Community Service & Self-Sufficiency
	Cooperative agreement between the PHA and the TANF agency and between the PHA and local employment and training service agencies.	Annual Plan: Community Service & Self-Sufficiency
X	FSS Action Plan(s) for public housing and/or Section 8.	Annual Plan: Community Service & Self-Sufficiency
	Section 3 documentation required by 24 CFR Part 135, Subpart E for public housing.	Annual Plan: Community Service & Self-Sufficiency
	Most recent self-sufficiency (ED/SS, TOP or ROSS or other resident services grant) grant program reports for public housing.	Annual Plan: Community Service & Self-Sufficiency
X	Policy on Ownership of Pets in Public Housing Family Developments (as required by regulation at 24 CFR Part 960, Subpart G). <input checked="" type="checkbox"/> Check here if included in the public housing A & O Policy.	Annual Plan: Pet Policy
X	The results of the most recent fiscal year audit of the PHA conducted under the Single Audit Act as implemented by OMB Circular A-133, the results of that audit and the PHA's response to any findings.	Annual Plan: Annual Audit
	Other supporting documents (optional) (list individually; use as many lines as necessary)	(specify as needed)
	Consortium agreement(s) and for Consortium Joint PHA Plans <u>Only</u> : Certification that consortium agreement is in compliance with 24 CFR Part 943 pursuant to an opinion of counsel on file and available for inspection.	Joint Annual PHA Plan for Consortia: Agency Identification and Annual Management and Operations

7. Capital Fund Program Annual Statement/Performance and Evaluation Report and Replacement Housing Factor

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I: Summary					
PHA Name: Barnstable Housing Authority			Grant Type and Number Capital Fund Program Grant No: MA06P04650107 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				
3	1408 Management Improvements				
4	1410 Administration	8,500			
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	5,000			
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	79,213			
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Nondwelling Structures				
13	1475 Nondwelling Equipment				
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1499 Development Activities				
19	1501 Collateralization or Debt Service				
20	1502 Contingency	1,533			
21	Amount of Annual Grant: (sum of lines 2 – 20)	94,246			
22	Amount of line 21 Related to LBP Activities				
23	Amount of line 21 Related to Section 504 compliance				
24	Amount of line 21 Related to Security – Soft Costs				
25	Amount of Line 21 Related to Security – Hard Costs				
26	Amount of line 21 Related to Energy Conservation				

7. Capital Fund Program Annual Statement/Performance and Evaluation Report and Replacement Housing Factor

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I: Summary					
PHA Name: Barnstable Housing Authority			Grant Type and Number Capital Fund Program Grant No: MA06P04650107 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
	Measures				

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part II: Supporting Pages								
PHA Name: Barnstable Housing Authority			Grant Type and Number Capital Fund Program Grant No: MA06P04650107 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	Revised	Funds Obligated	Funds Expended	
MA046003 Colony House	Kitchen Renovation Work	1460	10	79,213				
	Administration Assist. Exec. Direct. \$4250 Fiscal Officer \$2125 Maint. Supervisor \$2125	1410		8,500				
	Fees & Costs A/E	1430		5,000				
	Contingency	1502		1,533				

7. Capital Fund Program Annual Statement/Performance and Evaluation Report and Replacement Housing Factor

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part III: Implementation Schedule							
PHA Name: Barnstable Housing Authority			Grant Type and Number Capital Fund Program No: MA06P04650107 Replacement Housing Factor No:				Federal FY of Grant: 2007
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	
Colony House	9/30/09			9/30/11			

8. Capital Fund Program Five-Year Action Plan

Capital Fund Program Five-Year Action Plan					
Part I: Summary					
PHA Name: Barnstable Housing Authority				<input checked="" type="checkbox"/> Original 5-Year Plan <input checked="" type="checkbox"/> Revision No: 2	
Development Number/Name/HA-Wide	Year 1	Work Statement for Year 2 FFY Grant: 2008 PHA FY: 2008	Work Statement for Year 3 FFY Grant: 2009 PHA FY: 2009	Work Statement for Year 4 FFY Grant: 2010 PHA FY: 2010	Work Statement for Year 5 FFY Grant: 2011 PHA FY: 2011
MA046-003	Annual Statement				
Colony House		\$94,246	\$94,246	\$94,246	\$94,246
CFP Funds Listed for 5-year planning	\$94,246	\$94,246	\$94,246	\$94,246	\$94,246
Replacement Housing Factor Funds					

**ORGANIZATIONAL CHART
BARNSTABLE HOUSING AUTHORITY**

8/06

BOARD OF COMMISSIONERS

Paula Schnepf, Chairwoman
Deborah Converse, Vice Chairwoman
Richard A. Cross, Jr., Treasurer
Arthur Kimber, Assistant Treasurer
Joe Chilli (State Appointee)

EXECUTIVE DIRECTOR

Thomas K. Lynch

ASSISTANT EXECUTIVE DIRECTOR

Sandra J. Perry

**SPECIAL
SVCS.**

**FISCAL
OFFICER**
Terri Gillis

**MAINTENANCE
SUPERVISOR**
David Hart

**LEASED
HOUSING
COORDINATOR**

**CONGREGATE
SVCS. COORD.**

FT ASSISTANT
Peggy Roberts

Kim Gomez

Dianna Fisher

ARCHITECTS

ADMIN. ASSIST.
Donna Muncherian

LABOR/MECH.

PROGRAM REPRESENTATIVE

ENGINEERS

Larry Franklin
Roland Brierly

Jenifer Callahan

**CONSULTANTS
FEE**

TENANT SELECT. SPEC.

LABORERS

ACCOUNTANT
Howard Gordon

Estelle Stanley

Willie Albury
Edward Chipman

ADMIN. ASSISTANT

PART TIME CLERK

Rebeca Lauzon

SUPPORT SVCS. COORD.

Maria Cheski

LAWYERS

Patricia Grace (DHCD)
Jane Davis (Federal)

PT RECEPTIONIST

Richard Murphy

RAB MEETING MINUTES

Barnstable Housing Authority
2007 Annual Plan

Resident Advisory Board
Comments

Colony House Resident Advisory Board 2006 Meeting Summary:

This year the Resident Advisory Board discussed repairs and/or improvements for 500 Old Colony Road; some of these recommendations were modified and carried forward from the 2005 Board Meetings. Members were informed that some of their suggestions and/or requests were issues which were either already being attended to by the maintenance department, or are issues for which the Housing Authority is aware of and are planning to conduct investigations as to their causes.

The following is the RAB's list of recommendations as presented to the Executive Director and Assistant Director on August 4, 2006.

- Not enough parking spaces. Discussed using the two strips of grass on either side of the garage in the back parking lot for maintenance personnel. Or suggesting using other off-site parking for BHA staff.
- Residents would like to see the laundry room expanded, with at least one more washer & dryer. The RAB suggests we might try reserving a couple of machines for Homemakers' use only.
- The RAB recommends that the BHA invest in a gas powered generator in case of an electrical outage. They suggest a small unit capable of powering at least the community room on the first floor so that residents could better "shelter in place."
- The RAB recommends resurfacing and repainting the front, side and rear parking lots.
- Members are requesting using brighter lighting in the front foyer, and also feel the area could use re-painting
- The RAB would like to see two new benches in the front of the building, as two were damaged during snow plowing in the winter.
- The RAB members would like to see the awning over the front patio either repaired or replaced.

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 I: Summary					
PHA Name: Barnstable Housing Authority		Grant Type and Number Capital Fund Program Grant No: MA06P04650103 Replacement Housing Factor Grant No:			Federal FY of Grant: 2003
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input type="checkbox"/> Revised Annual Statement (revision no: 4) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 6/30/06 <input type="checkbox"/> Final Performance and Evaluation Report					
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations				
3	1408 Management Improvements				
4	1410 Administration	5400	4400	4400	4400
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	3500	6928	6928	6928
8	1440 Site Acquisition				
9	1450 Site Improvement	40,000	10,000	10,000	0
10	1460 Dwelling Structures	16,000	0	0	CFP2003-bonus
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Nondwelling Structures	38,500	54,000	54,000	11,740
13	1475 Nondwelling Equipment	5,000	0	0	2001 CFP Job Complete
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1499 Development Activities				
19	1501 Collaterization or Debt Service				

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

PHA Name: Barnstable Housing Authority	Grant Type and Number Capital Fund Program Grant No: MA06P04650103 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: 4)
 Performance and Evaluation Report for Period Ending: 6/30/06
 Final Performance and Evaluation Report

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
20	1502 Contingency	3428	0	0	0
21	Amount of Annual Grant: (sum of lines 2 – 20)	90,340	75,328	75,328	19,640
22	Amount of line 21 Related to LBP Activities				
23	Amount of line 21 Related to Section 504 compliance				
24	Amount of line 21 Related to Security – Soft Costs				
25	Amount of Line 21 Related to Security – Hard Costs				
26	Amount of line 21 Related to Energy Conservation Measures				

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

PHA Name: Barnstable Housing Authority		Grant Type and Number Capital Fund Program Grant No: MA06P04650103 Replacement Housing Factor Grant No:				Federal FY of Grant: 2003		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
MA046-003 Colony House	Parking Lot sealing, striping and repair as well as replacement of fencing & dividers outside the units with vinyl	1450	3 lots-46 spaces	5,000	10,000	10,000	0	Quotes
				10,000	16,000	CFP 2002		Complete
	Front patio slate is crumbling and presents a safety hazard. Replacement is necessary	1460	18 units exterior	20,000	0	CFP 2003-bonus		Complete
	Kitchen Renovation work to begin phase 1 of modernization to cabinets, counters and floors of Colony House Apartments		7 units	32,000	0	0	0	Delayed 1 yr.
	Metal Door Replacement-3 emergency exit doors and one outside office door in E.D.'s office	1470	4 doors	3,500	3,000	3,000	0	Quotes
	Office Expansion-small kitchen area no longer needed to be converted into office space			35,000	54,000	54,000	11,740	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: Barnstable Housing Authority		Grant Type and Number Capital Fund Program Grant No: MA06P04650103 Replacement Housing Factor Grant No:				Federal FY of Grant: 2003		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
	Office Security System to replace old system which had been installed prior to renovation work done in 2001	1470	1 system	5,000	0		Completed CFP2001	Completed CFP2001
	Fees & Costs Architect Fee Cape Cod Times Ad-bid	1430		3500	6928	6928	6928	
	Administration Assist. Exec. Director - \$2200 Fiscal Officer - \$1100 Maintenance Supervisor - \$1100	1410		5400	4400	4,400	4,400	
	Contingency	1502		3428	0	0		

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

PHA Name: Barnstable Housing Authority		Grant Type and Number Capital Fund Program Grant No: MA06P04650103 Replacement Housing Factor Grant No:				Federal FY of Grant: 2003		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	

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

PHA Name: Barnstable Housing Authority		Grant Type and Number Capital Fund Program No: MA06P04650103 Replacement Housing Factor No:					Federal Grant Year: 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		
	09/16/05		09/16/05					

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

PHA Name: Barnstable Housing Authority		Grant Type and Number Capital Fund Program No: MA06P04650103 Replacement Housing Factor No:					Federal Grant Year: 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	

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 I: Summary						
PHA Name: Barnstable Housing Authority		Grant Type and Number Capital Fund Program Grant No: MA06P04650104 Replacement Housing Factor Grant No:			Federal FY of Grant: 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: 6/30/06 <input type="checkbox"/> Final Performance and Evaluation Report						
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost		
		Original	Revised	Obligated	Expended	
1	Total non-CFP Funds					
2	1406 Operations					
3	1408 Management Improvements					
4	1410 Administration	7,500	8,500	8,500	8,500	
5	1411 Audit					
6	1415 Liquidated Damages					
7	1430 Fees and Costs	5,000	7,297	7,297	5,982	
8	1440 Site Acquisition					
9	1450 Site Improvement					
10	1460 Dwelling Structures	72,440	72,440	72,440	65,735	
11	1465.1 Dwelling Equipment—Nonexpendable					
12	1470 Nondwelling Structures					
13	1475 Nondwelling Equipment					
14	1485 Demolition					
15	1490 Replacement Reserve					
16	1492 Moving to Work Demonstration					
17	1495.1 Relocation Costs					
18	1499 Development Activities					
19	1501 Collateralization or Debt Service					

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

PHA Name: Barnstable Housing Authority	Grant Type and Number Capital Fund Program Grant No: MA06P04650104 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: 6/30/06 Final Performance and Evaluation Report

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
20	1502 Contingency	2,297	0	0	0
21	Amount of Annual Grant: (sum of lines 2 – 20)	87,237	87,237	87,237	79,217
22	Amount of line 21 Related to LBP Activities				
23	Amount of line 21 Related to Section 504 compliance				
24	Amount of line 21 Related to Security – Soft Costs				
25	Amount of Line 21 Related to Security – Hard Costs				
26	Amount of line 21 Related to Energy Conservation Measures				

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

PHA Name: Barnstable Housing Authority		Grant Type and Number Capital Fund Program Grant No: MA06P04650104 Replacement Housing Factor Grant No:				Federal FY of Grant: 2004		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	

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

PHA Name: Barnstable Housing Authority		Grant Type and Number Capital Fund Program No: MA06P04650104 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		
	9/13/06			9/13/08				

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 I: Summary					
PHA Name: Barnstable Housing Authority		Grant Type and Number Capital Fund Program Grant No: MA06P04650105 Replacement Housing Factor Grant No:			Federal FY of Grant: 2005
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input checked="" type="checkbox"/> Revised Annual Statement (revision no: 1) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 06/30/06 <input type="checkbox"/> Final Performance and Evaluation Report					
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations				
3	1408 Management Improvements				
4	1410 Administration	8,500	8,500	8,500	1,900
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	4,000	5,533	4,000	4,000
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	72,440	72,440	0	0
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Nondwelling Structures				
13	1475 Nondwelling Equipment				
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1499 Development Activities				
19	1501 Collateralization or Debt Service				

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

PHA Name: Barnstable Housing Authority	Grant Type and Number Capital Fund Program Grant No: MA06P04650105 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: 1)
 Performance and Evaluation Report for Period Ending: 06/30/06
 Final Performance and Evaluation Report

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
20	1502 Contingency	1,533	0	0	0
21	Amount of Annual Grant: (sum of lines 2 – 20)	86,473	86,473	12,500	5,900
22	Amount of line 21 Related to LBP Activities				
23	Amount of line 21 Related to Section 504 compliance				
24	Amount of line 21 Related to Security – Soft Costs				
25	Amount of Line 21 Related to Security – Hard Costs				
26	Amount of line 21 Related to Energy Conservation Measures	3,500	5,533	4,000	5,900

Annual Statement/Performance and Evaluation Report								
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)								
Part II: Supporting Pages								
PHA Name: Barnstable Housing Authority			Grant Type and Number Capital Fund Program Grant No: MA06P04650105 Replacement Housing Factor Grant No:			Federal FY of Grant: 2005		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	

Annual Statement/Performance and Evaluation Report								
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)								
Part III: Implementation Schedule								
PHA Name: Barnstable Housing Authority			Grant Type and Number Capital Fund Program No: MA06P04650105 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		
MA046003	8/17/2007			8/17/2009				

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 I: Summary						
PHA Name: Barnstable Housing Authority		Grant Type and Number Capital Fund Program Grant No: MA06P04650106 Replacement Housing Factor Grant No:			Federal FY of Grant: 2006	
<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: 06/30/06 <input type="checkbox"/> Final Performance and Evaluation Report						
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost		
		Original	Revised	Obligated	Expended	
1	Total non-CFP Funds					
2	1406 Operations					
3	1408 Management Improvements					
4	1410 Administration	8,500				
5	1411 Audit					
6	1415 Liquidated Damages					
7	1430 Fees and Costs	5,000				
8	1440 Site Acquisition					
9	1450 Site Improvement					
10	1460 Dwelling Structures	79,213				
11	1465.1 Dwelling Equipment—Nonexpendable					
12	1470 Nondwelling Structures					
13	1475 Nondwelling Equipment					
14	1485 Demolition					
15	1490 Replacement Reserve					
16	1492 Moving to Work Demonstration					
17	1495.1 Relocation Costs					
18	1499 Development Activities					
19	1501 Collaterization or Debt Service					

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

PHA Name: Barnstable Housing Authority	Grant Type and Number Capital Fund Program Grant No: MA06P04650106 Replacement Housing Factor Grant No:	Federal FY of Grant: 2006
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Original Annual Statement **Reserve for Disasters/ Emergencies** **Revised Annual Statement (revision no:)**
 Performance and Evaluation Report for Period Ending: 06/30/06 **Final Performance and Evaluation Report**

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
20	1502 Contingency	1,533			
21	Amount of Annual Grant: (sum of lines 2 – 20)	94,246			
22	Amount of line 21 Related to LBP Activities				
23	Amount of line 21 Related to Section 504 compliance				
24	Amount of line 21 Related to Security – Soft Costs				
25	Amount of Line 21 Related to Security – Hard Costs				
26	Amount of line 21 Related to Energy Conservation Measures	2,500			

Annual Statement/Performance and Evaluation Report								
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)								
Part II: Supporting Pages								
PHA Name: Barnstable Housing Authority			Grant Type and Number Capital Fund Program Grant No: MA06P04650106 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	Revised	Funds Obligated	Funds Expended	

Annual Statement/Performance and Evaluation Report								
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)								
Part III: Implementation Schedule								
PHA Name: Barnstable Housing Authority			Grant Type and Number Capital Fund Program No: MA06P04650106 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		
Colony House	8/17/2008			8/17/2010				

Site Based Waiting Lists 2007 Annual Plan

Deficiency 1:

The Barnstable Housing Authority (BHA) maintains two federal site based waiting lists. They are:

1. **Colony House** is a 68 unit elderly/disabled public housing development for low income and very low income individuals who are 62 years and over or disabled. The building was tenanted in 1981.
2. **Aunt Sarah's Harbor View House** is a 12 unit building with Section 8 project based vouchers attached. The building was tenanted in April 2002. The Equal Opportunity Housing Plan adopted under BHA's Section 8 Voucher Program also applies to Aunt Sarah's Harbor View House. The waiting list is open to individuals with income at or below 60% of median income for Barnstable-Yarmouth, MA.

All required data for Colony House public housing units (MA046003) and Aunt Sarah's Harbor View House Project Based Vouchers (V00035) is reported to HUD's Multifamily Tenant Characteristics Systems (MTCS) in an accurate, complete and timely manner through the 50058 process.

Applicants for public housing are advised of all programs and options available to them through the waiting list process along with the estimated waiting time for these programs. The BHA has requested that another public housing authority, familiar with HUD regulations function as independent tester. A similar testing/review program is in place for the Section 8 Program.

The BHA publishes a brochure which is available at the front desk of the agency's administrative office and describes all housing programs the agency administers. Also, the BHA maintains a web site (barnstablehousing.org) which describes all programs and provides downloadable applications for easy accessibility by interested parties.

Preferences

Colony House - Preference is given to those applicants who qualify as: Involuntarily Displaced, Living in Substandard Housing, Paying 50% or more of income for rent & utilities. When all else is equal residents of the Town of Barnstable receive preference.

Aunt Sarah's Harbor View House – Only preference given is local preference to those living or working in the Town of Barnstable.

Deficiency 2:

The HOME Consortium has identified certain barriers to affordable housing in the Consolidated Plan. The Barnstable Housing Authority has a staff member who is on the HOME Consortium and works to address the impediments through housing preservation and production projects.

The Executive Director and one BHA Commissioner serve on the Town of Barnstable's Housing Committee. The Housing Committee advises the Town Council on Housing Issues. The Town's State approved Affordable Housing Plan and the County approved Local Comprehensive Plan, identify barriers to housing. The BHA is positioned to assist the local committees dealing with impediments affecting housing opportunities.

The Housing Committee serves as the referral agent for the Town of Barnstable to the County Human Rights Commission when fair housing issues arise.

Tenant Selection Specialists at the BHA have provided workshops and educational forums for area agencies/advocates such as Cape Organization for the Disabled (CORD), Salvation Army, Community Action Committee (CAC), NOAH Shelter and Housing Assistance Corporation (HAC), to assist them in advocating for low income minorities, elderly, disabled and homeless individuals/families. These forums have provided an excellent resource for marketing the various subsidized programs offered by the BHA through advocacy agencies to low income minorities. The BHA has also marketed our public housing program to such agencies as: Cape Cod Hospital, Social Security Office, Town of Barnstable Senior Center, and Town Hall.