

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

Walker HRA

**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:** Walker Housing and Redevelopment Authority

**PHA Number:** MN025

**PHA Fiscal Year Beginning:** (10/2007)

**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: 32  
 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:				

### Public Access to Information

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

- Main administrative office of the PHA
- PHA development management offices
- PHA local offices

### Display Locations For PHA Plans and Supporting Documents

The PHA Plans (including attachments) are available for public inspection at: (select all that apply)

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

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

- Main business office of the PHA
- PHA development management offices
- Other (list below)

**5-YEAR PLAN**  
**PHA FISCAL YEARS 2007 - 2011**  
[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)

**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:
  - 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**

**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**

	<u>Page #</u>
<b>Annual Plan</b>	
i. Executive Summary	
ii. Table of Contents	
1. Housing Needs	5
2. Financial Resources	10
3. Policies on Eligibility, Selection and Admissions	11
4. Rent Determination Policies	20
5. Operations and Management Policies	24
6. Grievance Procedures	26
7. Capital Improvement Needs	26
8. Demolition and Disposition	27
9. Designation of Housing	28
10. Conversions of Public Housing	29
11. Homeownership	31
12. Community Service Programs	32
13. Crime and Safety	35
14. Pets (Inactive for January 1 PHAs)	37
15. Civil Rights Certifications (included with PHA Plan Certifications)	37
16. Audit	37
17. Asset Management	37
18. Other Information	38

**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
- A. FY 2007 Capital Fund Program Annual Statement
- B. Most recent board-approved operating budget (Required Attachment for PHAs that are troubled or at risk of being designated troubled ONLY)
- C. List of Resident Advisory Board Members
- D. List of Resident Board Member
- E. Community Service Description of Implementation
- F. Information on Pet Policy
- Section 8 Homeownership Capacity Statement, if applicable
- Description of Homeownership Programs, if applicable

**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)
- Other (List below, providing each attachment name)

**Supporting Documents Available for Review**

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

<b>List of Supporting Documents Available for Review</b>		
<b>Applicable &amp; On Display</b>	<b>Supporting Document</b>	<b>Applicable Plan Component</b>
X	PHA Plan Certifications of Compliance with the PHA Plans and Related Regulations	5 Year and Annual Plans
X	State/Local Government Certification of Consistency with the Consolidated Plan	5 Year and Annual Plans
X	Fair Housing Documentation: Records reflecting that the PHA has examined its programs or proposed programs, identified any impediments to fair housing choice in those programs, addressed or is addressing those impediments in a reasonable fashion in view of the resources available, and worked or is working with local jurisdictions to implement any of the jurisdictions' initiatives to affirmatively further fair housing that require the PHA's involvement.	5 Year and Annual Plans
	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	
X	Most recent board-approved operating budget for the public housing program	Annual Plan: Financial Resources
X	Public Housing Admissions and (Continued) Occupancy Policy (A&O), which includes the Tenant Selection and Assignment Plan [TSAP]	Annual Plan: Eligibility, Selection, and Admissions Policies
	Section 8 Administrative Plan	Annual Plan: Eligibility, Selection, and Admissions Policies
	Public Housing Deconcentration and Income Mixing Documentation: 1. PHA board certifications of compliance with deconcentration requirements (section 16(a) of the US Housing Act of 1937, as implemented in the 2/18/99 <i>Quality Housing and Work Responsibility Act Initial Guidance; Notice</i> and any further HUD guidance) and 2. Documentation of the required deconcentration and income mixing analysis	Annual Plan: Eligibility, Selection, and Admissions Policies
X	Public housing rent determination policies, including the methodology for setting public housing flat rents <input checked="" type="checkbox"/> check here if included in the public housing A & O Policy	Annual Plan: Rent Determination
X	Schedule of flat rents offered at each public housing development <input checked="" type="checkbox"/> check here if included in the public housing A & O Policy	Annual Plan: Rent Determination
	Section 8 rent determination (payment standard) policies <input type="checkbox"/> check here if included in Section 8 Administrative Plan	Annual Plan: Rent Determination
X	Public housing management and maintenance policy documents, including policies for the prevention or eradication of pest infestation (including cockroach infestation)	Annual Plan: Operations and Maintenance
X	Public housing grievance procedures <input checked="" type="checkbox"/> check here if included in the public housing A & O Policy	Annual Plan: Grievance Procedures
	Section 8 informal review and hearing procedures <input type="checkbox"/> check here if included in Section 8 Administrative Plan	Annual Plan: Grievance Procedures
X	The HUD-approved Capital Fund/Comprehensive Grant Program Annual Statement (HUD 52837) for the active grant year	Annual Plan: Capital Needs
	Most recent CIAP Budget/Progress Report (HUD 52825) for any active CIAP grant	Annual Plan: Capital Needs
X	Most recent, approved 5 Year Action Plan for the Capital Fund/Comprehensive Grant Program, if not included as an attachment (provided at PHA option)	Annual Plan: Capital Needs

**List of Supporting Documents Available for Review**

<b>Applicable &amp; On Display</b>	<b>Supporting Document</b>	<b>Applicable Plan Component</b>
	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
	Approved or submitted applications for demolition and/or disposition of public housing	Annual Plan: Demolition and Disposition
	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	Annual Plan: Conversion of Public Housing
	Approved or submitted public housing homeownership programs/plans	Annual Plan: Homeownership
	Policies governing any Section 8 Homeownership program <input type="checkbox"/> check here if included in the Section 8 Administrative Plan	Annual Plan: Homeownership
	Any cooperative agreement between the PHA and the TANF agency	Annual Plan: Community Service & Self-Sufficiency
	FSS Action Plan/s for public housing and/or Section 8	Annual Plan: Community Service & Self-Sufficiency
	Most recent self-sufficiency (ED/SS, TOP or ROSS or other resident services grant) grant program reports	Annual Plan: Community Service & Self-Sufficiency
	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
X	The most recent fiscal year audit of the PHA conducted under section 5(h)(2) of the U.S. Housing Act of 1937 (42 U.S.C. 1437c(h)), the results of that audit and the PHA's response to any findings	Annual Plan: Annual Audit
X	Troubled PHAs: MOA/Recovery Plan	Troubled PHAs
	Other supporting documents (optional) (list individually; use as many lines as necessary)	(specify as needed)

# 1. Statement of Housing Needs

[24 CFR Part 903.7 9 (a)]

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

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

Housing Needs of Families in the Jurisdiction by Family Type							
Family Type	Overall	Afford-ability	Supply	Quality	Access-ibility	Size	Loca-tion
Income <= 30% of AMI	20	5	1	3	5	3	5
Income >30% but <=50% of AMI	60	3	1	4	3	4	3
Income >50% but <80% of AMI	5	1	1	5	2	5	5
Elderly	25	5	2	4	4	3	5
Families with Disabilities	15	5	3	3	4	3	5
Race/Ethnicity/ W	89	3	1	4	4	3	4
Race/Ethnicity /B	1	3	1	4	4	3	4
Race/EthnicityNA	8	3	1	4	4	3	4
Race/Ethnicity/ A	2	3	1	4	4	3	4

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)  
Wikipedia website- 2000 census

## 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 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	0	N.A.	N.A.
Extremely low income <=30% AMI	n.n.	n.a.	n.a.
Very low income (>30% but <=50% AMI)	n.a.	n.a.	n.a.
Low income (>50% but <80% AMI)	n.a.	n.a.	n.a.
Families with children	n.a.	n.a.	n.a.
Elderly families	n.a.	n.a.	n.a.
Families with Disabilities	n.a.	n.a.	n.a.
Race/ethnicity	n.a.	n.a.	n.a.
Race/ethnicity	n.a.	n.a.	n.a.
Race/ethnicity	n.a.	n.a.	n.a.
Race/ethnicity	n.a.	n.a.	n.a.

Characteristics by Bedroom Size (Public Housing Only)	n.a.	n.a.	n.a.
1BR	n.a.	n.a.	n.a.
2 BR	n.a.	n.a.	n.a.
3 BR	n.a.	n.a.	n.a.
4 BR	n.a.	n.a.	n.a.
5 BR			
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)? 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.

#### (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) No shortage of affordable units, strategies do not apply

**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 2007 grants)</b>		
a) Public Housing Operating Fund	\$50,000.00	
b) Public Housing Capital Fund	\$32,000.00	
c) HOPE VI Revitalization		
d) HOPE VI Demolition		
e) Annual Contributions for Section 8 Tenant-Based Assistance		
f) Public Housing Drug Elimination Program (including any Technical Assistance funds)		
g) Resident Opportunity and Self-Sufficiency Grants		
h) Community Development Block Grant		
i) HOME		
Other Federal Grants (list below)		
<b>2. Prior Year Federal Grants (unobligated funds only) (list below)</b>	0	

<b>Financial Resources: Planned Sources and Uses</b>		
<b>Sources</b>	<b>Planned \$</b>	<b>Planned Uses</b>
<b>3. Public Housing Dwelling Rental Income</b>	\$81,596.00	
<b>4. Other income</b> (list below)		
Money market fund	\$1283.72	
<b>4. Non-federal sources</b> (list below)	0	
<b>Total resources</b>	\$164,879.72	

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

[24 CFR Part 903.7 9 (c)]

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

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

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

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

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

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) credit history

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

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

**(2)Waiting List Organization**

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

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

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

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

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

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

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

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

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

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

**(3) Assignment**

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

- One
- Two
- Three or More

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

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

**(4) Admissions Preferences**

a. Income targeting:

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

b. Transfer policies:

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

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

c. Preferences

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

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

Former Federal preferences:

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

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

Other preferences: (select below)

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

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

Date and Time

Former Federal preferences:

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

Other preferences (select all that apply)

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

4. Relationship of preferences to income targeting requirements:

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

**(5) Occupancy**

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

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

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

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

**(6) Deconcentration and Income Mixing**

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

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

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

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

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

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

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

f. Based on the results of the required analysis, in which developments will the PHA make special efforts to attract or retain higher-income families? (select all that apply)

- Not applicable: results of analysis did not indicate a need for such efforts
- List (any applicable) developments below:

g. Based on the results of the required analysis, in which developments will the PHA make special efforts to assure access for lower-income families? (select all that apply)

- Not applicable: results of analysis did not indicate a need for such efforts
- List (any applicable) developments below:

## B. Section 8

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

### (1) Eligibility

a. What is the extent of screening conducted by the PHA? (select all that apply)

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

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

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

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

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

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

**(2) Waiting List Organization**

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

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

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

- PHA main administrative office
- Other (list below)

**(3) Search Time**

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

If yes, state circumstances below:

**(4) Admissions Preferences**

a. Income targeting

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

b. Preferences

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

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

Former Federal preferences

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

Other preferences (select all that apply)

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

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

Date and Time

Former Federal preferences

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

Other preferences (select all that apply)

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

Other preference(s) (list below)

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

Date and time of application

Drawing (lottery) or other random choice technique

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

This preference has previously been reviewed and approved by HUD

The PHA requests approval for this preference through this PHA Plan

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

The PHA applies preferences within income tiers

Not applicable: the pool of applicant families ensures that the PHA will meet income targeting requirements

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

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

The Section 8 Administrative Plan

Briefing sessions and written materials

Other (list below)

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

Through published notices

Other (list below)

#### **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)  
when there is a reduction in income

- 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)  
- Comparison with other PHAs in the area

## **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		
Section 8 Vouchers		
Section 8 Certificates		
Section 8 Mod Rehab		
Special Purpose Section 8 Certificates/Vouchers (list individually)		
Public Housing Drug Elimination Program (PHDEP)		
Other Federal Programs(list individually)		

**C. Management and Maintenance Policies**

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

- (1) Public Housing Maintenance and Management: (list below)
- (2) Section 8 Management: (list below)

**6. PHA Grievance Procedures**

[24 CFR Part 903.7 9 (f)]

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

**A. Public Housing**

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

If yes, list additions to federal requirements below:

2. Which PHA office should residents or applicants to public housing contact to initiate the PHA grievance process? (select all that apply)

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

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

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

If yes, list additions to federal requirements below:

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

- PHA main administrative office  
 Other (list below)

**7. Capital Improvement Needs**

[24 CFR Part 903.7 9 (g)]

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

**A. Capital Fund Activities**

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

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

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

Select one:

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

-or-

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

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

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

- a.  Yes  No: Is the PHA providing an optional 5-Year Action Plan for the Capital Fund? (if no, skip to sub-component 7B)
- b. If yes to question a, select one:
- The Capital Fund Program 5-Year Action Plan is provided as an attachment to the PHA Plan at Attachment (state name)
- or-
- The Capital Fund Program 5-Year Action Plan is provided below: (if selected, copy the CFP optional 5 Year Action Plan from the Table Library and insert here)

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

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

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

1. Development name:
2. Development (project) number:
3. Status of grant: (select the statement that best describes the current status)
  - Revitalization Plan under development
  - Revitalization Plan submitted, pending approval
  - Revitalization Plan approved
  - Activities pursuant to an approved Revitalization Plan underway

- Yes  No: c) Does the PHA plan to apply for a HOPE VI Revitalization grant in the Plan year?  
If yes, list development name/s below:

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

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

## **8. Demolition and Disposition**

[24 CFR Part 903.7 9 (h)]

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

1.  Yes  No: Does the PHA plan to conduct any demolition or disposition activities (pursuant to section 18 of the U.S. Housing Act of 1937 (42 U.S.C. 1437p)) in the plan Fiscal Year? (If "No", skip to

component 9; if “yes”, complete one activity description for each development.)

2. Activity Description

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

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

**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: 1b. Development (project) number:
2. Designation type: Occupancy by only the elderly <input type="checkbox"/> Occupancy by families with disabilities <input type="checkbox"/> Occupancy by only elderly families and families with disabilities <input type="checkbox"/>
3. Application status (select one) Approved; included in the PHA’s Designation Plan <input type="checkbox"/> Submitted, pending approval <input type="checkbox"/> Planned application <input type="checkbox"/>
4. Date this designation approved, submitted, or planned for submission: <u>(DD/MM/YY)</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: 7. Coverage of action (select one) <input type="checkbox"/> Part of the development <input type="checkbox"/> Total development

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

[24 CFR Part 903.7 9 (j)]

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

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

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

2. Activity Description

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

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

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

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

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

[24 CFR Part 903.7 9 (k)]

### **A. Public Housing**

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

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

#### 2. Activity Description

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

<b>Public Housing Homeownership Activity Description (Complete one for each development affected)</b>
1a. Development name: 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:

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

[24 CFR Part 903.7 9 (l)]

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

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

1. Cooperative agreements:

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

If yes, what was the date that agreement was signed? 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) No applicant or tenant on NFIP

**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. )



- 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) Currently no NIFP, BI-Cap only

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

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

[24 CFR Part 903.7 9 (m)]

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

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

1. Describe the need for measures to ensure the safety of public housing residents (select all that apply)

- High incidence of violent and/or drug-related crime in some or all of the PHA's developments
- High incidence of violent and/or drug-related crime in the areas surrounding or adjacent to the PHA's developments
- Residents fearful for their safety and/or the safety of their children
- Observed lower-level crime, vandalism and/or graffiti
- People on waiting list unwilling to move into one or more developments due to perceived and/or actual levels of violent and/or drug-related crime
- Other (describe below) apartments are rekeyed if keys are lost, stolen or not returned upon termination of lease

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) Rekeying of apartments

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

Quam Court

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

1. List the crime prevention activities the PHA has undertaken or plans to undertake: (select all that apply)

- Contracting with outside and/or resident organizations for the provision of crime- and/or drug-prevention activities
- Crime Prevention Through Environmental Design
- Activities targeted to at-risk youth, adults, or seniors
- Volunteer Resident Patrol/Block Watchers Program
- Other (describe below)

**We have a Memorandum of Agreement with the Walker Police Department**

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

**Quam Court**

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

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

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

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

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

PHAs eligible for FY 2005 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 2005 in this PHA Plan?
- Yes  No: This PHDEP Plan is an Attachment. (Attachment Filename: \_\_\_\_)

**14. RESERVED FOR PET POLICY**

[24 CFR Part 903.7 9 (n)]

**15. Civil Rights Certifications**

[24 CFR Part 903.7 9 (o)]

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

**16. Fiscal Audit**

[24 CFR Part 903.7 9 (p)]

- 1.  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)

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

### **18. Other Information**

[24 CFR Part 903.7 9 (r)]

#### **A. Resident Advisory Board Recommendations**

1.  Yes  No: Did the PHA receive any comments on the PHA Plan from the Resident Advisory Board/s?

2. If yes, the comments are: (if comments were received, the PHA **MUST** select one)

- Attached at Attachment (File name)
- Provided below:

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

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

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

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

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

### 3. Description of Resident Election Process

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

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

#### b. Eligible candidates: (select one)

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

#### c. Eligible voters: (select all that apply)

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

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

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

#### 1. Consolidated Plan jurisdiction: (provide name here)

**State of Minnesota**

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

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

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

The State of Minnesota Consolidated Plan endorses the continuing objectives of national housing policy in the National Affordable Housing Act of 1990, including: ensure that all residents have access to decent shelter; increase the supply of affordable housing; make neighborhoods safe and livable; and reduce generational poverty in assisted housing.

The priorities listed below support and are consistent with the Walker HRA's PHA plan:

- Serving extremely low and low income renters. Conservation of existing affordable units in critical. A combination of rehabilitation and new construction is a must.
- Serving homeless persons.
- Serving those with special needs.
- Strengthening a community's housing stock.

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

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

## Attachments

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

- A. **FY 2007 Capital Fund Program Annual Statement**
- B. **Board Approved Operating Budget**
- C. **Resident Advisory board Members are; Autumn Gould and Jerry Basore**
- D. **Resident Board Members are; Autumn Gould and Jerry Basore**
- E. **Chapter 15. Community Service and Economic Self-Sufficiency**

### **15.0 Overview**

Community Service is defined as "the performance of voluntary work or duties that are a public benefit, and that serve to improve the quality of life, enhance resident self-sufficiency, or increase resident self-responsibility in the community." Community Service is not employment and may not include political activities (24 CFR § 960.601).

The Community Service and Economic Self-Sufficiency requirements mandate that each non-exempt adult household member<sup>46</sup> shall either contribute eight hours per month of community service within their community, or participate in an Economic Self-Sufficiency program for eight hours per month.<sup>cxvix</sup> The requirements can also be met by a combination of eight hours of Community Service and participation in an Economic Self-Sufficiency Program. This chapter provides guidance on administration of this requirement.

### **15.1 How PHAs Can Administer Community Service/Self-sufficiency Programs**

PHAs must develop a local policy for administration of the community service/self-sufficiency program for public housing residents.<sup>cx</sup> The policy should contain a number of elements, including for example: PHA responsibilities in administering the requirement; eligible activities; exemptions from the requirement; and review of compliance. These elements are described further below. See Appendix VI for a Sample Community Service Policy.

PHAs may administer qualifying community service and self-sufficiency activities directly or make the activities available to residents through a contractor or partnership with qualifying organizations (including resident organizations), community agencies, or institutions.

In administering the community service/self-sufficiency program, a PHA should, to the extent possible, provide names and contacts of agencies that can provide opportunities for residents, including persons with disabilities, to fulfill their community service obligations. Persons with disabilities are exempt from the requirement only if they certify that because of their disabilities, they cannot comply with the requirement. The PHA should also provide referrals for volunteer work or self-sufficiency programs.

<sup>46</sup> 18 years or older

Part 4 – Chapter 15 Community Service and Economic Self-Sufficiency: Page 174  
Public Housing Occupancy Guidebook

### **15.2 Eligible Community Service Activities**

Eligible community service activities that can be performed include, but are not limited to:

- Work at a local public or non-profit institution, including but not limited to: school, Head start, other before or after school program, child care center, hospital, clinic, hospice, nursing home, recreation center, senior center, adult day care program, homeless shelter, feeding program, food bank (distributing either donated or commodity foods), or clothes closet (distributing donated clothing), etc.;
- Work with a non-profit organization that serves PHA residents or their children, including but not limited to: Boy Scouts, Girl Scouts, Boys or Girls Club, 4-H Club, PAL, other children's recreation, mentoring, or education programs, Big Brothers or Big Sisters, Garden Center, Community clean-up programs, Beautification programs, etc.;
- Work with any program funded under the Older Americans Act, including but not limited to: Green Thumb, Service Corps of Retired Executives, Senior meals programs, Senior Center, Meals on Wheels, etc.;
- Work with any other public or non-profit youth or senior organizations;
- Work as an officer of a development or citywide resident organization;
- Work as a member of the Resident Advisory Committee;

- Work at the Authority to help improve physical conditions (for example as a floor, grounds or building captain);
  - Work at the Authority to help with children's programs;
  - Work at the Authority to help with senior programs;
  - Helping neighborhood groups with special projects;
  - Working through a resident organization to help other residents with problems, serving as an officer in a Resident Organization, serving on the Resident Advisory Board; and
  - Caring for the children of other residents so they may volunteer.
- PHAs should notify their insurance companies if residents will be serving at the PHA.

### **15.3 Eligible Self-sufficiency Activities**

Eligible self-sufficiency activities in which residents may engage include, but are not limited to:

- Job readiness programs;
  - Job training programs;
  - Skills training programs;
  - Higher education (Junior college or college);
- Part 4 – Chapter 15 Community Service and Economic Self-Sufficiency: Page 175  
Public Housing Occupancy Guidebook
- GED classes;
  - Apprenticeships (formal or informal);
  - Substance abuse or mental health counseling;
  - English proficiency or literacy (reading) classes;
  - English as a second language classes;
  - Budgeting and credit counseling; and
  - Carrying out any activity required by the Department of Public Assistance as part of welfare reform.

### **15.4 Exempt Residents**

A PHA must identify in the community service/self-sufficiency policy the residents that are exempt from the program work/self-sufficiency requirement, including persons who are:<sup>cxli</sup>

- 62 years or older;
- Person with disabilities and certifies that, based on the disability, he or she cannot comply with the requirement;
- Caretakers of a person with disability who has certified that based on the disability, he or she cannot comply the requirement;
- Currently working at least 30 hours per week;
- Certified as exempt from work activities under a State Programs as stated by the Social Security Act or any other welfare state program; and
- Members of a family receiving benefits from a State Welfare Program in compliance with the program's requirements.

The PHA should describe in the Community Service Policy the process it will follow to determine which family members are exempt from the requirement as well as the process for determining any changes to the exempt status of the family member. The PHA's must provide the family with exemption verification forms, Recording/Certification documentation forms, and a copy of the Policy at initial application and at lease execution.<sup>cxliii</sup> The PHA makes the final determination whether or not grant the exemption from the community service requirement. If a Resident does not agree with the PHA's determination, he/she can dispute the decision through the PHA's Grievance Procedures.

Part 4 – Chapter 15 Community Service and Economic Self-Sufficiency: Page 176  
Public Housing Occupancy Guidebook

### **15.5 Noncompliant Residents**

An exemption to the requirement must be verified annually by the PHA.<sup>cxliiii</sup> At least thirty days before the annual reexamination and/or lease expiration, the PHA must begin reviewing the exempt or non-exempt status and compliance of family members.<sup>cxliiv</sup> If the PHA finds a family member to be noncompliant, the PHA must enter into an agreement with the noncompliant member and the Head of Household to make up the deficient hours over the next twelve (12) month period.<sup>cxliv</sup> If, at the next annual re-examination, the family member still is not compliant, the PHA is not permitted to renew the lease and the entire family will have to vacate, unless the noncompliant member agrees to move out of the

unit. The family may use the Authority's Grievance Procedure to protest the lease termination.

### **15.6 Other HUD Requirements**

A PHA policy must also state the following requirements:

- The eight (8) hours per month may be either volunteer work or self-sufficiency program activity or a combination of the two.
- At least eight (8) hours of activity must be performed each month. An individual may not skip a month and then double up the following month, unless special circumstances warrant it. The Authority will make the determination of whether to permit a deviation from the schedule.
- Activities must be performed within the community and not outside the jurisdictional area of the PHA.

### **15.7 Resident Responsibilities**

At lease execution or re-examination after the effective date of the adopted policy, all adult members (18 or older) of a public housing resident family must:

- Provide documentation that they qualify for an exemption, if they claim to be exempt from Community Service requirement; and
- Sign a certification that they have received and read the policy and understand that if they are not exempt, failure to comply with the Community Service requirement will result in non-renewal of their lease.

At each annual re-examination, non-exempt family members must present a completed documentation form (PHA Form) of activities performed over the previous twelve (12) months. This form will include places for signatures of supervisors, instructors, or counselors certifying to the number of hours contributed. See Appendix VI for a sample form.

Part 4 – Chapter 15 Community Service and Economic Self-Sufficiency: Page 177  
Public Housing Occupancy Guidebook

If a family member is found to be noncompliant at re-examination, the member and the Head of Household will sign an agreement with the Authority to make up the deficient hours over the next twelve-month period.

### **15.8 Change in Exempt Status**

When an adult resident's exempt status changes during the year:

- If, during the twelve-month period, a non-exempt person becomes exempt, it is his/her responsibility to report this to the Authority and provide documentation.
- If, during the twelve-month period, an exempt person becomes non-exempt, it is his/her responsibility to report this to the Authority. The Authority will provide the person with the Recording/Certification documentation form and a list of agencies in the community that provide volunteer and/or training opportunities.

### **15.9 No Substitution of Community Service Workers for PHA Employees**

No PHA may substitute any community service activity performed by a resident for work ordinarily performed by a PHA employee.

FPart 4 – Chapter 14 Utilities: Page 172  
Public Housing Occupancy Guidebook

involves considerably less bookkeeping for the PHA. Typically, the PHA sends a check to the utility company each month with a list of the residents by address and utility account number on whose behalf reimbursements are being paid. The PHA pays early enough in the month that the resident's utility bill would reflect the PHA's payment.

Residents paying an income-based rent are eligible for a utility reimbursement, while residents who choose a flat rent are not eligible for a utility reimbursement.

### **14.5 Reasonable Accommodation of Residents With Disabilities (24 CFR § 965.508)**

On request from a family that includes a disabled or elderly person, the PHA must approve a utility allowance that is higher than the applicable amount on the utility allowance schedule if a higher utility allowance is needed as a reasonable accommodation in accordance with 24 CFR Part 8 to make the program accessible to and usable by the family with a disability (24 CFR § 965.508).

Residents with disabilities may not be charged for the use of certain resident-supplied appliances if there

**F. SECTION XXV. PET RULE SECTION XXV. PET RULE**

1. This HA chooses not to publish rules except those attached to this policy governing the keeping of common household pets (Refer to Section 5.315(b) Content of pet rules: general requirements - public housing programs). Tenants will comply with Section IV (P) of their dwelling lease which states, "Not to keep or allow dogs, cats, or any other animals or pets on the premises without prior written consent of Landlord."
2. Exclusion from this policy for animals that assist persons with disabilities. This policy does not apply to animals that are used to assist persons with disabilities. The exclusion applies to animals that reside in **projects for the elderly or persons with disabilities**. The Housing Authority must grant this exclusion if the following is provided:
  - ☞ The tenant or prospective tenant certifies in writing that the tenant or a member of his or her family is a person with a disability;
  - ☞ The animal has been trained to assist persons with that specific disability (example, seeing eye dog); and
  - ☞ The animal actually assists the person with a disability.

**Note:**

**Nothing in this policy limits or impairs the rights of persons with disabilities.**

Operating Budget

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

CVL Approval No. 2077-0392, exp. 3/31/03

Please specify the number of copies of this budget to be prepared to average 170 hours per response, including the time for reviewing and preparing the budget, identifying data to be prepared, and reviewing the data needed and to be prepared. Please also provide a detailed list of all special comments regarding the budget, including any information that is necessary for the preparation of the budget. The budget should be prepared by the Office of Management and Budget, Paperwork Reduction Project (2007-0392), Washington, DC 20530. Do not send the completed form to the Office of Management and Budget.

1. Type of Budget:  Income  Available  Other: \_\_\_\_\_

2. Budget Period: **September 30, 2007**

3. Agency Name: **Housing and Redevelopment Authority of Walker**

4. Address (no. and street): **Walker, MN 56484**

5. POC Name: \_\_\_\_\_

6. POC Title: \_\_\_\_\_

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780. POC Address: \_\_\_\_\_

781. POC City: \_\_\_\_\_

782. POC State: \_\_\_\_\_

783. POC Zip: \_\_\_\_\_

784. POC Title: \_\_\_\_\_

785. POC Address: \_\_\_\_\_

786. POC City: \_\_\_\_\_

787. POC State: \_\_\_\_\_

788. POC Zip: \_\_\_\_\_

789. POC Title: \_\_\_\_\_

790. POC Address: \_\_\_\_\_

791. POC City: \_\_\_\_\_

792. POC State: \_\_\_\_\_

793. POC Zip: \_\_\_\_\_

794. POC Title: \_\_\_\_\_

795. POC Address: \_\_\_\_\_

796. POC City: \_\_\_\_\_

797. POC State: \_\_\_\_\_

798. POC Zip: \_\_\_\_\_

799. POC Title: \_\_\_\_\_

800. POC Address: \_\_\_\_\_

801. POC City: \_\_\_\_\_

802. POC State: \_\_\_\_\_

803. POC Zip: \_\_\_\_\_

804. POC Title: \_\_\_\_\_

8

Name of the HOA  
**Housing and Redevelopment Authority of Walker**

Fiscal Year ending  
**September 30, 2007**

Line No	Acct No	Description	Actuals Last Fiscal Year PLM (2)	Original Current Budget Yr 2006 PLM (3)	Requested Budget Estimate			
					HOA/HRA Estimate		HUD Modification	
					PLM (4)	Amount for request \$100 (5)	PLM (6)	Amount for request \$100 (7)
<b>Ordinary Maintenance and Operation</b>								
237	4410	Auto	33.18	34.14	34.50	15,320		
240	4420	Miscellaneous	22.65	19.12	27.86	8,700		
241	4430	Journal Costs	57.36	27.41	31.95	12,040		
280		<b>Total Ordinary Maintenance &amp; Operation (Excludes 238 to 240)</b>	<b>113.19</b>	<b>80.67</b>	<b>94.31</b>	<b>36,060</b>		
<b>Protective Services</b>								
237	4410	Auto	-	-	-	-		
241	4430	Miscellaneous	-	-	-	-		
242	4430	Contract Labor	-	-	-	-		
480		<b>Total Protective Services Expense (sum of lines 237 to 242)</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>		
<b>General Expense</b>								
410	4310	Insurance	31.46	30.53	31.25	12,000		
420	4310	Replacement of Landscaping	1.07	3.56	6.98	2,680		
430	4320	Training Logos Printing	0.77	(2.28)	-	-		
440	4340	Employee Benefit Contributions	31.22	62.52	38.53	14,720		
450	4350	Other Services	1.79	1.79	-	-		
460	4360	Other General Expense	0.97	0.97	-	-		
470		<b>Total General Expense (sum of lines 410 to 460)</b>	<b>68.28</b>	<b>37.05</b>	<b>76.95</b>	<b>29,400</b>		
480		<b>Total Routine Expense (sum of lines 210, 230, 238, 240, 400 and 470)</b>	<b>307.73</b>	<b>\$34.88</b>	<b>153.62</b>	<b>180,032</b>		
<b>Capital Expenditures</b>								
490	4370	Construction of Landscaping	-	-	-	-		
500		<b>Total Opening Expense (sum of lines 480 and 490)</b>	<b>307.73</b>	<b>\$34.88</b>	<b>153.62</b>	<b>180,032</b>		
<b>Maintenance Expenditures</b>								
510	4370	Commuter Maintenance	-	-	-	-		
520	4370	Replacement of Major Capital Equipment	4.79	0.97	17.93	6,750		
530	4380	Major Repairs and Additions	34.85	3.30	8.57	3,100		
540		<b>Total Maintenance Expenditures (sum of lines 510, 520, and 530)</b>	<b>39.64</b>	<b>4.27</b>	<b>26.50</b>	<b>9,850</b>		
550		<b>Total Opening Expenditures (sum of lines 500 and 540)</b>	<b>347.37</b>	<b>\$39.15</b>	<b>180.12</b>	<b>189,882</b>		
<b>Prior Year Adjustments</b>								
560	4370	Prior Year Adjustment on Preceding Fiscal Year Receipts	2.51	-	-	-		
<b>Other Expenditures</b>								
570		Deficiency in Receipts Receipts or Fund Balancing Receipts	-	-	-	-		
580		<b>Total Operating Expenditures including prior year adjustments and other expenditures (line 530 plus or minus line 550 plus or minus line 570)</b>	<b>351.12</b>	<b>335.93</b>	<b>364.22</b>	<b>139,882</b>		
590		Revised Receipts for Deficit, Deficit HUD Contribution and other due for funding needs (line 517 minus line 580)	(162.20)	(115.20)	(80.74)	(37,150)		
<b>HUD Contributions</b>								
600	6010	Each Annual Contribution (Form HUD 50075) (Form HUD 50075)	-	-	-	-		
610	6010	Prior Year Adjustments (Table C, Line 4)	-	-	-	-		
620		<b>Total Basic Annual Contributions (line 600 plus or minus line 610)</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>		
630	6020	Contributions toward HUD Section 202, 208, 210, 214, 216, 217, 218, 219, 220, 221, 222, 223, 224, 225, 226, 227, 228, 229, 230, 231, 232, 233, 234, 235, 236, 237, 238, 239, 240, 241, 242, 243, 244, 245, 246, 247, 248, 249, 250, 251, 252, 253, 254, 255, 256, 257, 258, 259, 260, 261, 262, 263, 264, 265, 266, 267, 268, 269, 270, 271, 272, 273, 274, 275, 276, 277, 278, 279, 280, 281, 282, 283, 284, 285, 286, 287, 288, 289, 290, 291, 292, 293, 294, 295, 296, 297, 298, 299, 300, 301, 302, 303, 304, 305, 306, 307, 308, 309, 310, 311, 312, 313, 314, 315, 316, 317, 318, 319, 320, 321, 322, 323, 324, 325, 326, 327, 328, 329, 330, 331, 332, 333, 334, 335, 336, 337, 338, 339, 340, 341, 342, 343, 344, 345, 346, 347, 348, 349, 350, 351, 352, 353, 354, 355, 356, 357, 358, 359, 360, 361, 362, 363, 364, 365, 366, 367, 368, 369, 370, 371, 372, 373, 374, 375, 376, 377, 378, 379, 380, 381, 382, 383, 384, 385, 386, 387, 388, 389, 390, 391, 392, 393, 394, 395, 396, 397, 398, 399, 400, 401, 402, 403, 404, 405, 406, 407, 408, 409, 410, 411, 412, 413, 414, 415, 416, 417, 418, 419, 420, 421, 422, 423, 424, 425, 426, 427, 428, 429, 430, 431, 432, 433, 434, 435, 436, 437, 438, 439, 440, 441, 442, 443, 444, 445, 446, 447, 448, 449, 450, 451, 452, 453, 454, 455, 456, 457, 458, 459, 460, 461, 462, 463, 464, 465, 466, 467, 468, 469, 470, 471, 472, 473, 474, 475, 476, 477, 478, 479, 480, 481, 482, 483, 484, 485, 486, 487, 488, 489, 490, 491, 492, 493, 494, 495, 496, 497, 498, 499, 500, 501, 502, 503, 504, 505, 506, 507, 508, 509, 510, 511, 512, 513, 514, 515, 516, 517, 518, 519, 520, 521, 522, 523, 524, 525, 526, 527, 528, 529, 530, 531, 532, 533, 534, 535, 536, 537, 538, 539, 540, 541, 542, 543, 544, 545, 546, 547, 548, 549, 550, 551, 552, 553, 554, 555, 556, 557, 558, 559, 560, 561, 562, 563, 564, 565, 566, 567, 568, 569, 570, 571, 572, 573, 574, 575, 576, 577, 578, 579, 580, 581, 582, 583, 584, 585, 586, 587, 588, 589, 590, 591, 592, 593, 594, 595, 596, 597, 598, 599, 600, 601, 602, 603, 604, 605, 606, 607, 608, 609, 610, 611, 612, 613, 614, 615, 616, 617, 618, 619, 620, 621, 622, 623, 624, 625, 626, 627, 628, 629, 630, 631, 632, 633, 634, 635, 636, 637, 638, 639, 640, 641, 642, 643, 644, 645, 646, 647, 648, 649, 650, 651, 652, 653, 654, 655, 656, 657, 658, 659, 660, 661, 662, 663, 664, 665, 666, 667, 668, 669, 670, 671, 672, 673, 674, 675, 676, 677, 678, 679, 680, 681, 682, 683, 684, 685, 686, 687, 688, 689, 690, 691, 692, 693, 694, 695, 696, 697, 698, 699, 700, 701, 702, 703, 704, 705, 706, 707, 708, 709, 710, 711, 712, 713, 714, 715, 716, 717, 718, 719, 720, 721, 722, 723, 724, 725, 726, 727, 728, 729, 730, 731, 732, 733, 734, 735, 736, 737, 738, 739, 740, 741, 742, 743, 744, 745, 746, 747, 748, 749, 750, 751, 752, 753, 754, 755, 756, 757, 758, 759, 760, 761, 762, 763, 764, 765, 766, 767, 768, 769, 770, 771, 772, 773, 774, 775, 776, 777, 778, 779, 780, 781, 782, 783, 784, 785, 786, 787, 788, 789, 790, 791, 792, 793, 794, 795, 796, 797, 798, 799, 800, 801, 802, 803, 804, 805, 806, 807, 808, 809, 810, 811, 812, 813, 814, 815, 816, 817, 818, 819, 820, 821, 822, 823, 824, 825, 826, 827, 828, 829, 830, 831, 832, 833, 834, 835, 836, 837, 838, 839, 840, 841, 842, 843, 844, 845, 846, 847, 848, 849, 850, 851, 852, 853, 854, 855, 856, 857, 858, 859, 860, 861, 862, 863, 864, 865, 866, 867, 868, 869, 870, 871, 872, 873, 874, 875, 876, 877, 878, 879, 880, 881, 882, 883, 884, 885, 886, 887, 888, 889, 890, 891, 892, 893, 894, 895, 896, 897, 898, 899, 900, 901, 902, 903, 904, 905, 906, 907, 908, 909, 910, 911, 912, 913, 914, 915, 916, 917, 918, 919, 920, 921, 922, 923, 924, 925, 926, 927, 928, 929, 930, 931, 932, 933, 934, 935, 936, 937, 938, 939, 940, 941, 942, 943, 944, 945, 946, 947, 948, 949, 950, 951, 952, 953, 954, 955, 956, 957, 958, 959, 960, 961, 962, 963, 964, 965, 966, 967, 968, 969, 970, 971, 972, 973, 974, 975, 976, 977, 978, 979, 980, 981, 982, 983, 984, 985, 986, 987, 988, 989, 990, 991, 992, 993, 994, 995, 996, 997, 998, 999, 1000						
640		Mandatory PPS Contributions (20%)	-	-	-	-		
650		Other Specials	-	-	-	-		
660		Other Specials	-	-	-	-		
670		<b>Total Yearly Adjustments (Other (sum of lines 640 thru 670))</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>		
680		<b>Total HUD Contributions (sum of lines 620 and 670)</b>	<b>107.39</b>	<b>145.48</b>	<b>103.22</b>	<b>38,638</b>		
690		<b>Total HUD Contributions (sum of lines 620 and 680)</b>	<b>107.39</b>	<b>145.48</b>	<b>103.22</b>	<b>38,638</b>		
700		Receipts from HUD (Deficiency of line 517 plus line 590 minus line 510)	(78.81)	27.26	6.47	2,450		

		Operating Revenue	PHAFHA Estimate	HJO Modification
		Part I - Maximum Operating Revenue - End of Current Budget Year		
740	2251	PHAFHA - Leased Housing - Budget 2006/07 100% of New APD, 200% of Existing APD (2006)		

		Part II - Provision for and Utilization of Actual Operating Revenue of Fiscal Year - Total	
750		Operating Revenue utilized in Previous Fiscal Year - Actual for 10 months 9/30/2005	20,011
760		Provision for Operating Revenue - Current Budget Year (2006/07) <input type="checkbox"/> Retained for FY <input checked="" type="checkbox"/> Actual for FY 9/30/2005	10,466
770		Operating Revenue utilized Current Budget Year (2006/07) <input type="checkbox"/> Retained for FY <input checked="" type="checkbox"/> Actual for FY 9/30/2005	10,477
780		Provision for Operating Revenue - Recast Budget Year Estimate for FY 2007 (Actual Year 2006)	2,456
790		Operating Revenue utilized Recast Budget Year Estimate for FY - Same as line 780 and 810	2,456
800		Open Reserve Provision - Total for FY	

Continued

PHAFHA Approval: Name: \_\_\_\_\_ Title: Executive Director Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Field Office Approval: Name: \_\_\_\_\_ Title: \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Operating Budget  
Schedule of Administration  
Expense Other Than Salary**

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

DWQ Approval No. 2577-007 (Rev. 1/30/06)

This Reporting Duties for the collection of information is estimated to average 10 hours per reporting instance. The time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing the burden, to the Bureau Management Officer, Office of Information Policies and Systems, U.S. Department of Housing and Urban Development, Washington, D.C. 20410-3009 and to the Office of Management and Budget, Paperwork Reduction Project (2577-007) Washington, D.C. 20503. Do not send this completed form to either of the above addresses.

Name of the Authority		Location			Fiscal Year end	
Housing and Redevelopment Authority of Walker		P.O. Box 217 Walker, MN 55464			September 30, 2007	
Description		(7)	(8)	(9)	(10)	(11)
		Total	Management	Development	Section 8	Other
1	Legal Expense (See Special Note in instructions)					
2	Training (list and provide justification)					
3	Travel					
	Taxes To: (City and State) and Meetings (list and provide justification)	300	300			
4	Other LHA Travel					
	Outside Area of LHA Jurisdiction					
5	Within Area of LHA Jurisdiction					
6	Total Travel	300	300			
7	Accounting	1,630	1,630			
8	Auditing	1,050	1,050			
	<b>Sundry</b>					
9	Rent of Office Space					
10	Publications	1,420	1,420			
11	Membership Dues and Fees (list organization and amount)					
12	Telephones, Fax, Electronic Communications	2,310	2,310			
13	Collection Agent Fees and Court Costs					
14	Administrative Services Contract	2,220	2,220			
15	Forms, Stationery and Office Supplies	830	830			
16	Other Sundry Expense (provide breakdown)	1,430	1,430			
17	Total Sundry	8,010	8,010			
18	Total Administration Expense Other Than Salary	\$ 10,890	\$ 10,890			

Line 16 - Postage \$120 and Other Sundry \$1,310.

To the best of my knowledge, all the information stated herein, as well as any information provided in the accompanying therewith, is true and accurate.

Warning: FUD will prosecute false claims and statements. Conviction may result in criminal and/or civil penalties.

(19 U.S.C. 1091, 1010, 1012; 31 U.S.C. 3729, 3872)

Signature of authorized representative & Date

X

Executive Director

5/4/2007

Form HUD-5257 (3/95)

tel: (800) 675-5647

**Operating Budget**  
Summary of Budget Data and Justifications

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

OMB Approval No. 2577-0025 (Exp. 9/30/2009)

Fiscal reporting burden for the collection of information is estimated to average 45 minutes 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. This information is required to be collected if it has been determined that the collection of information is necessary for the proper performance of the functions of the Department of Housing and Urban Development, and the collection of information does not impose an undue burden on the public.

This information is required by Section 642(d) of the U.S. Housing Act of 1957. The information is being required to determine the operating program and provide a summary of proposed budgeted receipts and expenditures, appropriate budgetary needs, and justification of certain specified amounts. HUD requires the information to determine if the operating plan requested by the PIH and the amounts are reasonable and that the PIH is in compliance with procedures established by HUD. Responses are required to obtain benefits. This information does not affect the individual's privacy.

Name of Local Housing Authority	Locality	Date Worksheet
Housing and Redevelopment Authority of Walker	P.O. Box 217 Walker MN 56484	September 30, 2007

**Operating Receipts**

Dwelling Rental Receipts (see page 1) are for HUD-subsidized housing, other than Section 23 Leased, which is a state amount of total available PIH unit. It is not the number of dwelling units available for occupancy and the number accepted for the same month and HUD policy reflects and economic and other factors which may result in a greater or lesser average monthly rent during the fiscal year. For Section 23 Leased, housing space for units of a fixed amount, the PUM Law provides whether or not the cost of the unit is included, if not included, a certain method for payment of utility, water bills and telephone.

Dwelling Rental of \$ 88,550 is based on projected average monthly dwelling rental charge per unit of \$ 278.27 and projected occupancy percentage of 81%. Average monthly dwelling rental charge based on Rent Rates of 301/07

Excess of Rent (NOT for Section 23 Leased housing) Over appropriate space in item 1, and explain "Other" Under item 2, explain basis for determining excess utility contribution. For example, Due to utility charges under of CH-104-1, limitation of excess cost of services of CH-100-2, etc. Other effective period periods. Utility discounts. Excess utility charges in allowance or other factors which will cause a variation in change in the total amount of excess utility charges during the fiscal year budget year.

1. Utility Service Subsequent: Gas  Electricity  Other  (Specify) \_\_\_\_\_  
2. Comments:

Annualized estimate - \$ 320

Annualizing rental plan for Section 23 Leased Housing (Complete item 1) describing each space period, its name, and the rental terms. For example, Community Building Space - Musky School - \$80 per month. etc. City charges and I will during the proposed Budget Year after any applicable Standardizing Period income.

Space Period	Term(s)	Rental Term
_____	_____	_____
_____	_____	_____
_____	_____	_____

2. Comments:

Provide additional information:

form HUD-50075 (03/2003)  
ref Handbook 7-735.1

**Interest on General Fund Investments:** Show the amount of projected General Fund investment and the percentage of the General Fund's revenues. Explain any circumstances such as increased or decreased operating revenues, available debt interest expense, etc., which will affect estimated average monthly total investments in the Requested Budget Year. Explain basis for distribution of interest income between housing programs.

Checking	\$ 24,851	times	0.50%	\$ 124
Savings	\$ 105	times	0.99%	1
<b>Total Projected Interest</b>				<b>\$ 125</b>

**Other Comments On Estimate of Operating Receipts:** This comment on a ledger and on a source of income which will offset a portion and balancing of the HUD projected Operating Receipts, is due during the Requested Budget Year, for Section 23 Leases including certain basis for estimate of utility charges to tenants.

Other Tenant Revenue	\$ 1,410	(0.1)
Laundry Machines Income	2,940	(0.1)
Cable TV Income	10,000	(1.0)
Capital Fund Operating Advances	8,000	(0.8)
<b>Total</b>	<b>\$ 15,710</b>	

**Operating Expenditures**

**Summary of Staffing and Salary Data**

Complete the summary below on the basis of information from Form HUD-5076, Schedule of All Positions and Salaries, as follows:

- Column (1): Enter the total number of positions assigned with the corresponding account. The number is shown in Column (1) Form HUD-5076.
- Column (2): Enter the number of equivalent full-time positions available at HUD-coded housing in management. For example, a HA has three (3) "1/2" positions at 80% loading at the rate of 85%, 70%, and 55% respectively. Thus, the equivalent full-time positions are: (3) x (.75) = 2.25.
- Column (3): Enter the amount of total salary expense shown in Column (5) or Column (6) Form HUD-5076, applicable to HUD-coded housing in management. Enter from Section 23 Leases housing.
- Column (4): Enter the portion of total salary expense shown in Column (5) or Column (6) Form HUD-5076, applicable to Section 23 Leases - Housing Management.
- Column (5): Enter the portion of total salary expense shown in Column (5) or Column (7) Form HUD-5076, applicable to Modernization Programs (Comprehensive Management Assistance Program or Comprehensive Grant Program).
- Column (6): Enter the portion of total salary expense shown in Column (5) or Column (8) Form HUD-5076, applicable to Section 1 Program.

**Note:** The number of equivalent full-time positions and the amount of salary expense for all positions designated "M" on Form HUD-5076 must be equally distributed to accounts: Civilian Maintenance and Operation - Labor, Expendable Maintenance Non-Projects, and Buildings and Adjuncts Work Projects.

Account Line	Total Number of Positions (1)	Equivalent Full-Time Positions (2)	HUD-Related Management Program*			
			Management (3)	Section 23 Leases Housing (4)	Modernization Programs (5)	Section 1 Program (6)
6270003100 - 60100 - 0000 - 0000 - 1	1	-	20,250.00	-	-	-
6270003100 - 60100 - 0000 - 0000 - 2	-	-	-	-	-	-
001 - 001 - Maintenance & Operation - Labor 1	1	-	15,320.00	-	-	-
001 - 001 - Labor 1:						
Other (Specify): Tenant Services - Legal etc 1:	-	-	-	-	-	-
1 - Modernization/Leasehold Work Projects 2:						
Buildings and Adjuncts Work Projects 2:						

\* Entry forward in the appropriate line on HUD-5076, the amount of salary expense shown in Column (3) on the corresponding line above. Entry forward to the appropriate line on HUD-5076 (Section 23 Leases Housing Budget), the amount of salary expense shown in Column (4) on the corresponding line above.

† The amount of salary expense applicable to Expendable Maintenance Work Projects and to Buildings and Adjuncts Work Projects is to be included in the cost of each individual project to be funded by the HA staff, as shown on Form HUD-5076.

†† Figures and percentages obsolete.

Form HUD-5075 (2001)  
06/10/2002 02:04:17

Specify all proposed new positions and all proposed positions to be abolished in the Requested Budget Year. One One HUD conference is proposed during the year in present justification for audit of wages. One prior HUD conference is proposed solely in respect for familiarization of Staff of the justification and pertinent components of the matter. One additional one for current approved wage rates (form HUD-52-58) and justify all decisions from these rates.

See form HUD-52466 for details.

Travel: Publications: Materials: Travel: Telephone and Telegraph: and Sundry: In addition to justification for Travel: Conventions and Meetings: shown on form HUD-52570 give an explanation of substantial Requested Budget Year estimated increases over the PUM rate of expenditures for these accounts in the Current Budget Year. List all dates for abolition of each element of these expenses.

See form HUD-52570 for details.

Utilities: Give an explanation of substantial Requested Budget Year estimated increases over the PUM rate of expenditures for each utility category in the Current Budget Year. Methods and data compiled over a seven year period "Other Utility Expenses".

Utility expenses based on current costs and anticipated increases for Requested Budget Year. Allowable utilities expense per unit/month of: 86.68.

Water based on annualized amount, electric same as prior year budget, fuel based on annualized amount, and other utilities (garbage removal) based on prior year budget amount plus 2.6% inflation factor. When determining the estimated utility costs the HRA has considered prior year budget, prior year actual, current year actual and known increases.

General Maintenance & Operation: Materials: Give an explanation of substantial Requested Budget Year estimated increases over the PUM rate of expenditures for material in the Current Budget Year.

Misc. Materials	\$	4,440
Electrical/Maintenance Supplies		1,650
Cleaning Supplies		520
Painting Supplies		730
Gas		90
Lighting Supplies		1,220
<b>Total Estimated Materials</b>	<b>\$</b>	<b>8,700</b>

General Maintenance & Operation: Contract Costs: List each ordinary maintenance and operation service contracted for and give the estimated cost for each. Do not justify new contract services proposed in the Requested Budget Year explain substantial Requested Budget Year increases over the PUM rate of expenditures for Contract Services in the Current Budget Year. If it has contract for maintenance of elevator cabs, give contract cost per cab.

Misc. Contract Costs	\$	1,510
Exterminating		230
Cable TV		4,670
Lawn Care		1,710
Painting		930
Lock Changes		280
Plumbing/HVAC		2,630
Fire Extinguishers		280
<b>Total Estimated Contract Costs</b>	<b>\$</b>	<b>12,040</b>

Revisions: Additions and Deletions

Form HUD-50075 (03/2003)  
ref - continues 50075

Explain: Detail a justification of estimated Requested Budget Year increased expenses in the PIV is a record item for increase over the Current Budget Year. One change coverage was increase.

Property Insurance		\$	10,000		
Worker's Compensation			1,100		
<b>Total Estimated Insurance</b>			<b>\$</b>	<b>11,100</b>	

Employee Benefit Contributions: List all employee benefit plans performed in above justification for all plans to be reduced in the Requested Budget Year to which prior HUD concurrence has not been given.

FICA Contributions	\$	35,810	times	7.65%	\$	2,724
Health Insurance	\$	900	times	12 months		10,800
Retirement						1,200

**Total Estimated Employee Benefits** **\$ 14,724**

Outstanding Receivables: Give the number of receivables receivable to all utility, P&G, Finance and Other non-Federal accounts receivable for the project and related benefits in the month in which the estimate was computed.

We expect to write-off 50 in uncollectible accounts.

Expenditures: Maintenance, Replacement of Equipment and Repairs and Rentals: Give prior HUD approval project justification for each expenditure not project included in the Requested Budget and for those for future years which makes up the estimate when HUD Subsequent funding approval incorporated or attached to form HUD 50075 and not be repeated here.

See form HUD 50075 for details.

Expenditures: Other: Give prior HUD approval project justification for each expenditure not project included in the Requested Budget and for those for future years which makes up the estimate when HUD Subsequent funding approval incorporated or attached to form HUD 50075 and not be repeated here.







# 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>				



## 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: WALKER			Grant Type and Number Capital Fund Program Grant No: MN46P02550107 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				
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs				
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	33,620			
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Nondwelling Structures				
13	1475 Nondwelling Equipment				
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1499 Development Activities				
19	1501 Collateralization or Debt Service				
20	1502 Contingency				
21	Amount of Annual Grant: (sum of lines 2 – 20)	33,620			
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				





## 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: WALKER			Grant Type and Number Capital Fund Program Grant No: MN46P02550106 Replacement Housing Factor Grant No:		Federal FY of Grant: 2006
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input checked="" type="checkbox"/> Revised Annual Statement (revision no: 2) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 6/30/07 <input type="checkbox"/> Final Performance and Evaluation Report					
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Revision #1	Revision #2	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations	31,902	32,845	31,902	31,902
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	1499 Development Activities				
19	1501 Collateralization or Debt Service				
20	1502 Contingency				
21	Amount of Annual Grant: (sum of lines 2 – 20)	31,902	32,845	31,902	31,902
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				





## 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: WALKER		Grant Type and Number Capital Fund Program Grant No: MN46P02550105 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: 3) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 6/30/07 <input type="checkbox"/> Final Performance and Evaluation Report					
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Revision #2	Revision #3	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations	11,000	28,923.03	28,923.03	28,923.03
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	23,024	5,100.97	5,100.97	5,100.97
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Nondwelling Structures				
13	1475 Nondwelling Equipment				
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1499 Development Activities				
19	1501 Collateralization or Debt Service				
20	1502 Contingency				
21	Amount of Annual Grant: (sum of lines 2 – 20)	34,024	34,024	34,024	34,024
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				





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

<b>Capital Fund Program Five-Year Action Plan</b>					
<b>Part I: Summary</b>					
PHA Name: WALKER					<input checked="" type="checkbox"/> <b>Original 5-Year Plan</b> <input type="checkbox"/> <b>Revision No:</b>
Development Number/Name/HA-Wide	Year 1	Work Statement for Year 2	Work Statement for Year 3	Work Statement for Year 4	Work Statement for Year 5
		FFY Grant: 2008 PHA FY: 2008	FFY Grant: 2009 PHA FY: 2009	FFY Grant: 2010 PHA FY: 2010	FFY Grant: 2011 PHA FY: 2011
	Annual Statement				
MN025001		35,000	35,000	35,000	35,000
CFP Funds Listed for 5-year planning		35,000	35,000	35,000	35,000
Replacement Housing Factor Funds					

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

<b>Capital Fund Program Five-Year Action Plan</b>						
<b>Part II: Supporting Pages—Work Activities</b>						
Activities for Year 1	Activities for Year : 2 FFY Grant: 2008 PHA FY: 2008			Activities for Year: 3 FFY Grant: 2009 PHA FY: 2009		
	Development Name/Number	Major Work Categories	Estimated Cost	Development Name/Number	Major Work Categories	Estimated Cost
<b>See</b>						
<b>Annual</b>	MN025001	<i>Install elevator</i>	35,000	MN025001	<i>Install elevator (continuation of 2008 CFP)</i>	35,000
<b>Statement</b>						
	Total CFP Estimated Cost		\$35,000			\$35,000

