

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

---

# PHA Plans

5 Year Plan for Fiscal Years 2005 - 2009

Annual Plan for Fiscal Year 2008

**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:** Dover Housing Authority

**PHA Number:** DE002

**PHA Fiscal Year Beginning: (mm/yyyy)** 01/08

**PHA Programs Administered:**

**Public Housing and Section 8**   
  **Section 8 Only**   
  **Public Housing Only**  
 Number of public housing units: 295   
 Number of S8 units:   
 Number of public housing units:  
 Number of S8 units: 220

**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 2005 - 2009**  
[24 CFR Part 903.5]

**A. Mission**

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

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

**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) 76
  - Improve voucher management: (SEMAP score) 86
  - Increase customer satisfaction:
  - Concentrate on efforts to improve specific management functions:  
(list; e.g., public housing finance; voucher unit inspections) Work Orders;  
Preventive Maintenance; Unit/Site Inspections; Unit Turnover
  - 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 2008**  
[24 CFR Part 903.7]

**i. Annual Plan Type:**

Select which type of Annual Plan the PHA will submit.

X      **Standard**

**Troubled Agency Plan**

**ii. Executive Summary of the Annual PHA Plan**

[24 CFR Part 903.7 9 (r)]

Provide a brief overview of the information in the Annual Plan, including highlights of major initiatives and discretionary policies the PHA has included in the Annual Plan.

**The Dover Housing Authority will continue its efforts to expand the supply of assisted housing available to the residents of Dover, Delaware. DHA will concentrate its efforts in improving the quality of life of its residents through improved management policies and procedures resulting in increased PHAS and SEMAP scores. DHA will continue its efforts to provide homeownership opportunities to low to moderate-income families through its three homeownership programs. DHA's secondary mission is to empower residents to achieve economic self-sufficiency by providing services and programs that assist tenants overcome obstacles that prevent them from becoming self-sufficient. To that end, DHA will continue its partnerships with agencies and organizations that provide programming at several DHA developments.**

### **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	1
ii. Table of Contents	
1. Housing Needs	6
2. Financial Resources	12
3. Policies on Eligibility, Selection and Admissions	13
4. Rent Determination Policies	22
5. Operations and Management Policies	27
6. Grievance Procedures	28
7. Capital Improvement Needs	29
8. Demolition and Disposition	31
9. Designation of Housing	32
10. Conversions of Public Housing	33
11. Homeownership	34
12. Community Service Programs	36
13. Crime and Safety	39
14. Pets (Inactive for January 1 PHAs)	
15. Civil Rights Certifications (included with PHA Plan Certifications)	41
16. Audit	41
17. Asset Management	41
18. Other Information	42

#### **Attachments**

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

#### Required Attachments:

- Admissions Policy for Deconcentration
- FY 2005 Capital Fund Program Annual Statement
- Most recent board-approved operating budget (Required Attachment for PHAs that are troubled or at risk of being designated troubled ONLY)
- List of Resident Advisory Board Members
- List of Resident Board Member
- Community Service Description of Implementation
- Information on Pet Policy

- Section 8 Homeownership Capacity Statement, if applicable
- Description of Homeownership Programs, if applicable

Optional Attachments:

- PHA Management Organizational Chart
- FY 2005 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)

de002a08  
 de002b08  
 de002c08  
 de002d08  
 de002e08  
 de002f08  
 de002g08  
 de002h08  
 de002i08

**Supporting Documents Available for Review**

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

<b>List of Supporting Documents Available for Review</b>		
<b>Applicable &amp; On Display</b>	<b>Supporting Document</b>	<b>Applicable Plan Component</b>
X	PHA Plan Certifications of Compliance with the PHA Plans and Related Regulations	5 Year and Annual Plans
X	State/Local Government Certification of Consistency with the Consolidated Plan	5 Year and Annual Plans
X	Fair Housing Documentation: Records reflecting that the PHA has examined its programs or proposed programs, identified any impediments to fair housing choice in those programs, addressed or is addressing those impediments in a reasonable fashion in view of the resources available, and worked or is working with local jurisdictions to implement any of the jurisdictions’ initiatives to affirmatively further fair housing that require the PHA’s involvement.	5 Year and Annual Plans
X	Consolidated Plan for the jurisdiction/s in which the PHA is located (which includes the Analysis of Impediments to Fair Housing Choice (AI)) and any additional backup data to support statement of housing needs in the jurisdiction	Annual Plan: Housing Needs
X	Most recent board-approved operating budget for the public	Annual Plan:

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

<b>List of Supporting Documents Available for Review</b>		
<b>Applicable &amp; On Display</b>	<b>Supporting Document</b>	<b>Applicable Plan Component</b>
	approved or submitted HOPE VI Revitalization Plans or any other approved proposal for development of public housing	
	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
X	Approved or submitted public housing homeownership programs/plans	Annual Plan: Homeownership
X	Policies governing any Section 8 Homeownership program <input checked="" type="checkbox"/> check here if included in the Section 8 Administrative Plan	Annual Plan: Homeownership
X	Any cooperative agreement between the PHA and the TANF agency	Annual Plan: Community Service & Self-Sufficiency
X	FSS Action Plan/s for public housing and/or Section 8	Annual Plan: Community Service & Self-Sufficiency
X	Most recent self-sufficiency (ED/SS, TOP or ROSS or other resident services grant) grant program reports	Annual Plan: Community Service & Self-Sufficiency
	The most recent Public Housing Drug Elimination Program (PHEDEP) semi-annual performance report for any open grant and most recently submitted PHDEP application (PHDEP Plan)	Annual Plan: Safety and Crime Prevention
X	The most recent fiscal year audit of the PHA conducted under section 5(h)(2) of the U.S. Housing Act of 1937 (42 U.S.C. 1437c(h)), the results of that audit and the PHA's response to any findings	Annual Plan: Annual Audit
	Troubled PHAs: MOA/Recovery Plan	Troubled PHAs
	Other supporting documents (optional) (list individually; use as many lines as necessary)	(specify as needed)

# 1. Statement of Housing Needs

[24 CFR Part 903.7 9 (a)]

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

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

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	715	NA	NA	NA	NA	5	NA
Income >30% but <=50% of AMI	512	5	NA	NA	NA	5	NA
Income >50% but <80% of AMI	119	5	NA	NA	NA	5	NA
Elderly	358	NA	NA	NA	NA	5	NA
Families with Disabilities	NA	NA	NA	NA	NA	NA	NA
Race/Ethnicity	1064	NA	NA	NA	NA	NA	NA
Race/Ethnicity	202	NA	NA	NA	NA	NA	NA
Race/Ethnicity	67	NA	NA	NA	NA	NA	NA
Race/Ethnicity	13	NA	NA	NA	NA	NA	NA

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: 2004
- U.S. Census data: the Comprehensive Housing Affordability Strategy ("CHAS") dataset
- American Housing Survey data  
Indicate year:
- Other housing market study  
Indicate year:
- Other sources: (list and indicate year of information)

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

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

Housing Needs of Families on the Waiting List			
Waiting list type: (select one)			
<input type="checkbox"/> Section 8 tenant-based assistance			
<input checked="" type="checkbox"/> Public Housing			
<input type="checkbox"/> Combined Section 8 and Public Housing			
<input type="checkbox"/> Public Housing Site-Based or sub-jurisdictional waiting list (optional)			
If used, identify which development/subjurisdiction:			
	# of families	% of total families	Annual Turnover
Waiting list total	424		40
Extremely low income <=30% AMI	319	75.24%	
Very low income (>30% but <=50% AMI)	89	20.99%	
Low income (>50% but <80% AMI)	16	3.77%	
Families with children	252	59.43%	
Elderly families	34	8.02%	
Families with Disabilities	20	4.72%	
Race/ethnicity (Caucasian)	81	19.10%	
Race/ethnicity (African American)	333	78.54%	
Race/ethnicity (Amer Ind/Alaska Native)	2	.47%	
Race/ethnicity (Asian/Pac Isl)	8	1.88%	

### Housing Needs of Families on the Waiting List

Characteristics by Bedroom Size (Public Housing Only)			
1BR	159	38%	
2 BR	148	35%	
3 BR	101	24%	
4 BR	14	2%	
5 BR	2	1%	
5+ BR	0	0	
Is the waiting list closed (select one)? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes If yes: How long has it been closed (# of months)? Does the PHA expect to reopen the list in the PHA Plan year? <input type="checkbox"/> No <input type="checkbox"/> Yes Does the PHA permit specific categories of families onto the waiting list, even if generally closed? <input type="checkbox"/> No <input type="checkbox"/> Yes			

### Housing Needs of Families on the Waiting List

Waiting list type: (select one)

- Section 8 tenant-based assistance
- Public Housing
- Combined Section 8 and Public Housing
- 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	655		20
Extremely low income <=30% AMI	476	72.67%	
Very low income (>30% but <=50% AMI)	149	22.75%	
Low income (>50% but <80% AMI)	29	4.43%	
Families with children	468	71.45%	
Elderly families	31	4.73%	
Families with Disabilities	19	2.90%	
Race/ethnicity (Caucasian)	102	15.57%	
Race/ethnicity (African Amer)	532	81.22%	
Race/ethnicity (Amer Ind/Alaska Native)	8	1.22%	
Race/ethnicity (Asian/Pac Isl)	13	1.98%	

Characteristics by Bedroom Size (Public Housing Only)			
1BR			
2 BR			
3 BR			
4 BR			
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)

**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 2005 grants)</b>		
a) Public Housing Operating Fund	1,008,000	
b) Public Housing Capital Fund	471,179	
c) HOPE VI Revitalization		
d) HOPE VI Demolition		
e) Annual Contributions for Section 8 Tenant-Based Assistance	1,190,604	
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>		
DE26P002501-05	41,568	Capital Improvements
DE26P002501-06/502-06	300,905	Capital Improvements
DE26P002501-07	471,179	Capital Improvements
<b>3. Public Housing Dwelling Rental Income</b>	756,000	Operations
<b>4. Other income (list below)</b>		
<b>4. Non-federal sources (list below)</b>		

<b>Financial Resources: Planned Sources and Uses</b>		
<b>Sources</b>	<b>Planned \$</b>	<b>Planned Uses</b>
Management Fees	32,005	Operations
<b>Total resources</b>	4,271,440	

### **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) top 10
- When families are within a certain time of being offered a unit: (state time)
- Other: (describe)

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

- Criminal or Drug-related activity
- Rental history
- Housekeeping
- Other (describe)

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

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

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

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

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

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

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

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

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

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

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

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

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

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

### **(3) Assignment**

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

- One
- Two
- Three or More

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

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

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

a. Income targeting:

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

b. Transfer policies:

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

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

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:

- 1 Involuntary Displacement (Disaster, Government Action, Action of Housing Owner, Inaccessibility, Property Disposition)
- 1 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:

Extenuating Circumstances  
Family made consistent effort  
Unit did not pass HQS inspections

**(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

- 1 Involuntary Displacement (Disaster, Government Action, Action of Housing Owner, Inaccessibility, Property Disposition)
- 1 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) Dissemination of information to partner agencies

## **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)\_\$50/week
- Other (list below)

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

**(2) Flat Rents**

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

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

## B. Section 8 Tenant-Based Assistance

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

### (1) Payment Standards

Describe the voucher payment standards and policies.

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

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

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

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

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

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

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

- Annually
- Other (list below)

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

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

**(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	297	40
Section 8 Vouchers	190	15
Section 8 Certificates		
Section 8 Mod Rehab		
Special Purpose Section 8 Certificates/Vouchers (list individually)	30	5
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)  
Administration Plan, Public Housing and Maintenance Plan

(2) Section 8 Management: (list below)  
Section 8 Administrative Plan

## **6. PHA Grievance Procedures**

[24 CFR Part 903.7 9 (f)]

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

### **A. Public Housing**

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

If yes, list additions to federal requirements below:

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

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

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

If yes, list additions to federal requirements below:

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

## **7. Capital Improvement Needs**

[24 CFR Part 903.7 9 (g)]

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

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

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

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

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

Select one:

The Capital Fund Program Annual Statement is provided as an attachment to the PHA Plan at Attachment (state name) de002i07

-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  
03/08/1991

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

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

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

**(1) General**

a. Self-Sufficiency Policies

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

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

b. Economic and Social self-sufficiency programs

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

<b>Services and Programs</b>				
Program Name & Description (including location, if appropriate)	Estimated Size	Allocation Method (waiting list/random selection/specific criteria/other)	Access (development office / PHA main office / other provider name)	Eligibility (public housing or section 8 participants or both)
Family Self Sufficiency Program	55	Open Enrollment	PHA Main Office	Both
Affordable Homeownership	10	Income	PHA Main Office	Both
Employment Connection (TANF)	40	TANF Recipient	Del Tech CC	Both
High School/GED	27	Open Enrollment	Groves High School	Both
Family Life Development	33	Open Enrollment	Del Tech CC	Both
Financial Literacy	12	Open Enrollment	DCRAC	Both
Employment Education Program	4	Open Enrollment	PHA	Both

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

a. Participation Description

<b>Family Self Sufficiency (FSS) Participation</b>		
Program	Required Number of Participants (start of FY 2005 Estimate)	Actual Number of Participants (As of: DD/MM/YY)
Public Housing	0	26, as of 9/30/07
Section 8	25	29, as of 9/30/07

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

### C. Welfare Benefit Reductions

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

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

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

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

[24 CFR Part 903.7 9 (m)]

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

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

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

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

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

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

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

Colonial Gardens/Hayes Circle; Senate View; Queen Manor; Manchester Square/Manchester Court; Derby Estates I & II

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

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

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

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

Colonial Gardens/Hayes Circle; Senate View; Queen Manor; Manchester Square/Manchester Court; Derby Estates I & II

### 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)

Colonial Gardens/Hayes Circle; Senate View; Queen Manor; Manchester Square/Manchester Court; Derby Estates I & II

### 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)

**Resident Board Member Currently searching for a Resident Board member**

**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) City of Dover
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)

Infrastructure improvements when necessary; zoning and permit accommodations

**D. Other Information Required by HUD**

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

## **Attachments**

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

# PHA Plan Table Library

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

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

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

Original Annual Statement

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



**Public Housing Homeownership Activity Description**  
**Complete one for each development affected**

1a. Development name: Scattered Sites  
1b. Development (project) number: DE26-P002-009

2. Federal Program authority:  
 HOPE I  
 5(h)  
 Turnkey III  
 Section 32 of the USHA of 1937 (effective 10/1/99)

3. Application status: (select one)  
 Approved; included in the PHA's Homeownership Plan/Program  
 Submitted, pending approval  
 Planned application

4. Date Homeownership Plan/Program approved, submitted, or planned for submission:  
(DD/MM/YYYY) 05-16-1994

5. Number of units affected: 3

Coverage of action: (select one)  
 Part of the development  
 Total Development

**Public Housing Homeownership Activity Description**  
**Complete one for each development affected**

1a. Development name: Scattered Sites  
1b. Development (project) number: DE26-P002-010

2. Federal Program authority:  
 HOPE I  
 5(h)  
 Turnkey III  
 Section 32 of the USHA of 1937 (effective 10/1/99)

3. Application status: (select one)  
 Approved; included in the PHA's Homeownership Plan/Program  
 Submitted, pending approval  
 Planned application

4. Date Homeownership Plan/Program approved, submitted, or planned for submission:  
(DD/MM/YYYY) 05-16-1994

5. Number of units affected: 6

Coverage of action: (select one)  
 Part of the development  
 Total Development

**Public Housing Homeownership Activity Description**  
**Complete one for each development affected**

1a. Development name: Scattered Sites  
1b. Development (project) number: DE26-P002-011

2. Federal Program authority:  
 HOPE I  
 5(h)  
 Turnkey III  
 Section 32 of the USHA of 1937 (effective 10/1/99)

3. Application status: (select one)  
 Approved; included in the PHA's Homeownership Plan/Program  
 Submitted, pending approval  
 Planned application

4. Date Homeownership Plan/Program approved, submitted, or planned for submission:  
(DD/MM/YYYY) 05-16-1994

5. Number of units affected: 1

Coverage of action: (select one)  
 Part of the development  
 Total Development

**Public Housing Homeownership Activity Description**  
**Complete one for each development affected**

1a. Development name: Scattered Sites  
1b. Development (project) number: DE26-P002-012

2. Federal Program authority:  
 HOPE I  
 5(h)  
 Turnkey III  
 Section 32 of the USHA of 1937 (effective 10/1/99)

3. Application status: (select one)  
 Approved; included in the PHA's Homeownership Plan/Program  
 Submitted, pending approval  
 Planned application

4. Date Homeownership Plan/Program approved, submitted, or planned for submission:  
(DD/MM/YYYY) 05-16-1994

5. Number of units affected: 3

Coverage of action: (select one)  
 Part of the development  
 Total Development

**Public Housing Homeownership Activity Description**  
**Complete one for each development affected**

1a. Development name: Scattered Sites  
1b. Development (project) number: DE26-P002-014

2. Federal Program authority:  
 HOPE I  
 5(h)  
 Turnkey III  
 Section 32 of the USHA of 1937 (effective 10/1/99)

3. Application status: (select one)  
 Approved; included in the PHA's Homeownership Plan/Program  
 Submitted, pending approval  
 Planned application

4. Date Homeownership Plan/Program approved, submitted, or planned for submission:  
(DD/MM/YYYY) 05-16-1994

5. Number of units affected : 4

Coverage of action: (select one)  
 Part of the development  
 Total Development

Resident Advisory Board 2007

Joetta Armstrong  
Takesha Henry  
Doris Berry  
Carlisa Chandler  
Jamie Wilson  
Nakia Mosley  
Anna Cooper  
Shani Brown  
Juanita Suhami  
Diamond Madison  
Taka Stevenson  
Kathy Brown  
Shinell Kelly  
Kimberly Alford  
April Myer  
Arleta Johnson  
Dorothy Purnell  
Carolyn Rhodes  
Catherine Kiser  
Sherine Black  
Darlene Johnson  
Martha Wright  
Cynthia Morris  
Elisha Caldwell  
Jada Brown  
Jerry Singletary  
Nancy Daniels  
Rhonda Reid  
Elaine Ewing  
Inez Gibbs  
Doris Guzman  
Gail Tolbert

Henrietta Nichols  
Betty Schoolfield  
Brenda Taylor  
Tameica Whittingham  
Nikita Barnaby  
Lois Davis  
Melinda Carpenter  
Ruby Riley  
Karen Masten  
Crystal Moore  
Nancy Daniels  
Carmetta Holden  
Matilde Rodriquez  
Jessica Singletary  
Charlotte Waters  
Daisy West  
Rhonda Reid

Dover Housing Authority's  
Capacity to Operate the Section 8  
Homeownership Program

A minimum down payment of at least 3% of purchase price will be required. In addition, the family must pay at least 1% of the purchase price from the family's personal resources.

Dover Housing Authority will require that financing be provided, insured or guaranteed by state or federal government and will comply with acceptable underwriting standards.

# Voluntary Conversion of Developments From Public Housing

## Initial Assessment- Dover Housing Authority

### **Colonial Gardens & Hayes Circle**

Conversion of Colonial Gardens is not feasible; additional Housing Choice Vouchers are not included in the City of Dover's Consolidated Plan. The City does not want additional Section 8 vouchers due to the fact that DHA shares jurisdiction within the City with Delaware State Housing Authority. City Council feels that the City currently supports an adequate number of Section 8 tenant vouchers.

### **Senate View**

Conversion of Senate View is not feasible; additional Housing Choice Vouchers are not included in the City of Dover's Consolidated Plan. The City does not want additional Section 8 vouchers due to the fact that DHA shares jurisdiction within the City with Delaware State Housing Authority. City Council feels that the City currently supports an adequate number of Section 8 tenant vouchers.

### **Queen Manor**

This development is not a general occupancy development; therefore, it is exempt from conversion.

### **Manchester Square & Manchester Circle**

Conversion of Manchester is not feasible; additional Housing Choice Vouchers are not included in the City of Dover's Consolidation Plan. The City does not want additional Section 8 vouchers due to the fact that DHA shares jurisdiction within the City with Delaware State Housing Authority. City Council feels that the City currently supports an adequate number of Section 8 tenant vouchers.

### **Derby Estates I & II**

Conversion of Derby Estates is not feasible; additional Housing Choice Vouchers are not included in the City of Dover's Consolidation Plan. The City does not want additional Section 8 vouchers due to the fact that DHA shares jurisdiction within the City with Delaware State Housing Authority. City Council feels that the City currently supports an adequate number of Section 8 tenant vouchers.



# Pet Policy

It is the policy of Dover Housing Authority to allow pets in all family units, under the following conditions:

1. Only one dog, cat or pet is allowed per bedroom per apartment.
2. No pets are to be left unattended on patios, balconies or tied up outdoors.
3. The following charges or deposits will be required if a pet is maintained:
  - **A non-refundable pet fee of \$20.00.** This fee will cover reasonable costs relating to the presence of pets. This fee will be added to the first month's rent and the first month of each annual renewal. The pet security deposit is considered an additional security deposit under the lease.
  - **A refundable pet deposit of \$100.00.** This amount is refundable only if the apartment is vacated without damage caused by a pet. Otherwise, the cost to correct any damage caused by a pet will be deducted from the deposit and the balance, if any, will be returned.
4. The following rules and regulations apply to all pet owners:
  - **Licenses:** all pets are required to be licensed according to Delaware State Law. A copy of the license must be provided to management.
  - **Vaccinations:** All pets are required to receive appropriate vaccinations according to Delaware State Law. A copy of the vaccination record must be provided to management.
  - **Leashes:** All pets outside of the apartment must be kept on a lease. This applies to cats as well as dogs. The pet is not permitted to roam the property unattended.
  - **Restricted Areas:** All pets are excluded from laundry rooms, playgrounds and recreational areas.
  - **Cleanup: Animal wastes are a danger to health and sanitation.** All pet owners are required to cleanup after their animals whether they are inside the apartment or outside on the grounds. Cat litter may not be disposed of in toilets. Cat litter may not be dropped down trash chutes unless securely bagged.
  - **Noise:** All pets are subject to local noise ordinances and may not disturb other residents.
  - **Temporary Pets:** No pets are allowed on a temporary basis. Residents are responsible for their pets.
  - **Dangerous Breeds:** Management in its sole discretion, may deny occupancy to animal breeds it deems unacceptable to apartment living. Any breed that is considered a dangerous breed by the American Kennel Association is prohibited in DHA units.
  - **Exotic Pets:** Exotic pets are to be registered with the Department of Agriculture, as required by law. A copy of the USDA registration must be on file with Dover Housing Authority.

- **Termination:** Management can cancel the Pet Agreement at will if management, in its sole discretion, deems the agreement to have been violated.
- **Breeding:** Pets shall not be kept, bred or used for any commercial purpose.
- **Lease Addendum:** All residents who have pets are required to register the pet with the Dover Housing Authority and sign the Lease Addendum Pet Disclosure Agreement. A violation of this agreement is considered a lease violation.

Notwithstanding any provision herein, people with visual, hearing and physical disabilities may keep certified guide dogs or service dogs in their apartments. Further, nothing herein shall hinder full access to the apartments and the common areas by persons with disabilities assisted by service animals.

## Community Service Requirement for Public Housing Residents

Adult residents of public housing will be required to perform eight hours of community service each month, or participate in a self-sufficiency program for at least eight hours every month. The following residents will be exempt from this requirement:

1. Elderly persons
2. Disabled persons
3. Employed persons
4. Persons exempted from work requirements under State of Delaware welfare to work programs.
5. Persons receiving assistance under a State program that have not been found to be in noncompliance with such a program.

DHA will determine compliance annually, 30 days prior to the expiration of the lease. If DHA determines that the resident is not in compliance, the resident will be notified of noncompliance and that the determination is subject to administrative grievance procedures. The resident's lease will not be renewed unless the resident enters into an agreement with DHA to make up the missed hours by participating in a self-sufficiency program or contributing to community service.

Residents who are required to perform eight hours of Community Service will satisfy this requirement by working directly for the Dover Housing Authority in the following capacities:

- Performing routine clerical duties
- Manning the information desk at Queen Manor
- Housekeeping chores
- Maintenance chores, yard cleanup etc.

Tracking and monitoring the Community Service volunteers will be the responsibility of the DHA Secretary/Office Manager. Residents will be informed of the policy in the DHA December 2000 issue of the Newsletter.

All residents who are exempted from the Community Service policy will be notified in December 2000. Residents will be given a choice of either performing Community Service or enrolling in the Family Self-Sufficiency Program. Tracking of compliance will begin in January 2001.

# Deconcentration Plan

For  
Dover Housing Authority

## **Purpose:**

This plan was developed to specify the steps Dover Housing Authority will take in order to reduce the concentration of lower income and higher income public housing tenants in particular developments, should they exist and to affirmatively further fair housing.

## **Steps necessary to deconcentrate poverty in DHA developments:**

Step 1: DHA will annually determine the average income of all families residing in all of its developments.

Step 2: Since all of DHA developments contain less than 100 units and all buildings house no more than 7 families, it is not necessary to determine the average income of residents by building.

Step 3: Determine which developments have an average income higher than the average for general occupancy developments. The developments will be designated “higher income developments”. Determine which developments have an average income lower than the average for general developments. These developments will be designated lower income developments”.

Step 4: Determine which families on the waiting list have incomes higher than the DHA-wide average income for general occupancy developments and which families have incomes lower than the DHA-wide average income for general occupancy developments.

Step 5: When a unit becomes available for occupancy in a higher income development, DHA will skip families on the waiting list if necessary to reach a lower income family to whom DHA will offer the unit. When a unit becomes available for occupancy in a lower income development, DHA will skip families on the waiting list if necessary to reach a higher income family to whom DHA will offer the unit.

## **Fair Housing Requirements:**

All admission and occupancy policies for public housing and Section 8 tenant-based Housing programs will comply with Fair Housing Act requirements and regulations for affirmatively furthering fair housing. DHA will not require any specific income or racial quotas for any development or developments.

DHA will carry out its Deconcentration Plan in conformity with the nondiscrimination requirements in Federal civil rights laws. DHA will not assign a person to a particular section of a development or building based on race, color religion, sex, disability, familial status or national origin for purposes of segregating populations.

DHA policies that govern eligibility, selection and admissions have been designed to Reduce racial and national origin concentrations.

# Dover Housing Authority

## Organizational Chart

Board of Commissioners

Executive Director

Housing Management Specialist

Occupancy Department	Accounting Department	Maintenance Department	Facilities/Construction	Resident Services
Housing Specialist III	Fee Accountant	Maintenance Mechanic	Project Manager	FSS Coord.
Housing Specialist II	Accounting Tech	Maintenance Aide I	Admin Asst	
Housing Specialist I	Admin Asst	Maintenance Aide I		
Housing Specialist I		Maintenance Aide I		
Housing Specialist I		Maintenance Aide		
Clerk Typist I		Maintenance Laborer		
Clerk Typist I		Maintenance Laborer		
Clerk Typist Trainee		Maintenance Trainee		
Clerk Typist Trainee		Maintenance Trainee		
		Clerk Typist Trainee		



**Annual Statement/Performance and Evaluation Report**

**Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I: Summary**

<b>PHA Name: Dover Housing Authority</b>	<b>Grant Type and Number</b> Capital Fund Program Grant No: DE26P00250203 Replacement Housing Factor Grant No:	<b>Federal FY of Grant:</b> <b>2003</b>
--	--	--

Original Annual Statement 
  Reserve for Disasters/ Emergencies 
  Revised Annual Statement (revision no: )  
 Performance and Evaluation Report for Period Ending: 06/30/2007 
  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	9,345	9,345	9,345	9,345.00
3	1408 Management Improvements				
4	1410 Administration	9,345	9,345	9,345	9,345.00
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs				
8	1440 Site Acquisition				
9	1450 Site Improvement		5,750.15	5,750.15	4,839
10	1460 Dwelling Structures	74,767	69,016.85	69,016.85	69,016.85
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)	93,457	93,457	93,457	92,545.91
22	Amount of line 21 Related to LBP Activities				
23	Amount of line 21 Related to Section 504 compliance				
24	Amount of line 21 Related to Security – Soft Costs				
25	Amount of Line 21 Related to Security – Hard Costs				
26	Amount of line 21 Related to Energy Conservation Measures				



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

PHA Name: Dover Housing Authority		Grant Type and Number Capital Fund Program No: DE26P00250203 Replacement Housing Factor No:					Federal FY of Grant: 2003
Development Number Name/HA-Wide Activities	All Fund Obligated (Quarter Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates
	Original	Revised	Actual	Original	Revised	Actual	
DE002-002	12/31/2004	12/2005		06/2006		12/2006	
HAX		06/2005		12/2005		12/2007	
HAX	03/31/2004		03/31/2004	12/2004		12/2004	
HAX	03/31/2004		03/31/2004	3/2005		12/2004	

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

<b>PHA Name: Dover Housing Authority</b>	<b>Grant Type and Number</b> Capital Fund Program Grant No: DE26P002501-04 Replacement Housing Factor Grant No:	<b>Federal FY of Grant: 2004</b>
--	---	--------------------------------------

Original Annual Statement  Reserve for Disasters/ Emergencies  Revised Annual Statement (revision no: )  
 Performance and Evaluation Report for Period Ending: 06/30/2007  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	54,025	54,025	54,025	54,025
3	1408 Management Improvements	100,000	104,046	104,046	98,232
4	1410 Administration	54,025	54,025	54,025	54,025
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	10,000	1,650	1,650	1,650
8	1440 Site Acquisition				
9	1450 Site Improvement	42,000	124,009	124,009	124,009
10	1460 Dwelling Structures	140,000	15,754	15,754	15,754
11	1465.1 Dwelling Equipment—Nonexpendable	30,000	42,768	42,768	42,768
12	1470 Nondwelling Structures	50,000	79,807	79,807	10,896
13	1475 Nondwelling Equipment	56,000	64,175	64,175	64,175
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	4,209			
21	Amount of Annual Grant: (sum of lines 2 – 20)	540,259	540,259	540,259	465,534
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	10,000			
26	Amount of line 21 Related to Energy Conservation Measures	140,000			

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

PHA Name: Dover Housing Authority		Grant Type and Number Capital Fund Program Grant No: DE26P002501-04 Replacement Housing Factor Grant No:				Federal FY of Grant: 2004		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
HA-WIDE	Computer software upgrades	1408	1	15,000	21,495	21,495	21,495	Comp
HA-WIDE	Drug elim activities/BGC	1408	1	20,000	20,000	20,000	16,464	In progress
HA-WIDE	Staff training	1408		15,000	16,631	16,631	16,631	Comp
HA-WIDE	Resident employment training	1408	2	50,000	45,920	45,920	43,642	In progress
HA-WIDE	Utility Locator	1430	7	10,000	1,650	1,650	1,650	Comp
HA-WIDE	Construct trash enclosures	1450	14	32,000	49,659	49,659	49,659	Comp
HA-WIDE	Additional pole lites	1450	50	10,000	2,250	2,250	2,250	Comp
003	Install air conditioners in units—stand-alone units	1465	50	100,000	754	754	754	Moved to 501-08
001, 002, 003, 004	Upgrade electric service	1460	228	40,000	25,605	25,605	25,605	Comp
HA-WIDE	Replace outdated hot water heaters	1460	50	15,000	17,163	17,163	17,163	Comp
HA-WIDE	Replace outdated appliances—r/r refrigerators, stoves (from fy2002)	1465	50	15,000	15,000	15,000	15,000	Comp
004	Addition to Admin bldg for youth programs	1470	1	50,000	79,807	79,807	10,896	In progress
HA-WIDE	Vehicle for CFP Inspector/Coord	1475	1	16,000	17,216	17,216	17,216	Comp
HA-WIDE	Office Equip upgrades—upgrades to computer hardware, copiers, laser printers, as needed by upgrades in technology	1475	3	40,000	46,959	46,959	46,959	Comp
HA-WIDE	Operations	1406		54,025	54,025	54,025	54,025	Comp
HA-WIDE	Salaries and Benefits	1410		54,025	54,025	54,025	54,025	Comp
013	Upgrade of sewer lines—emergency item	1450	1 bldg	0	72,100	72,100	72,100	Comp

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

PHA Name: Dover Housing Authority		<b>Grant Type and Number</b> Capital Fund Program No: De26P002501-04 Replacement Housing Factor No:				Federal FY of Grant: 2004	
Development Number Name/HA-Wide Activities	All Fund Obligated (Quarter Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates
	Original	Revised	Actual	Original	Revised	Actual	
HA-WIDE	06/05		06/05	06/05		06/05	
HA-WIDE	09/05		09/2005	06/06	12/2007		
HA-WIDE	12/05		12/2005	12/05		12/2005	
HA-WIDE	03/05	12/05	12/2005	06/06		09/2007	
HA-WIDE	12/04	03/06	03/2007	06/06		03/2007	
HA-WIDE	06/05		09/2006	12/05		03/2006	
HA-WIDE	06/05	06/06	06/2006	09/06		06/2006	
003	06/05	09/05		03/06			Moved to 501-08
001, 002, 003, 004	06/05	09/05	12/2006	03/06		03/2007	
HA-WIDE	09/05	12/05	12/2005	12/05		12/2005	
HA-WIDE	09/05	12/05	12/2005	12/05		03/2007	
004	12/04	12/05	06/2007	12/05	12/2007		
HA-WIDE	12/04		12/2007	12/04		12/2004	
HA-WIDE	12/04	12/05	12/2005	12/05		12/2005	
HA-WIDE	12/04		12/2004	06/05		06/05	
HA-WIDE	12/04		12/2004	09/05		06/2005	
013		09/2006	09/2006			03/2007	

<b>Annual Statement/Performance and Evaluation Report</b>					
<b>Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I: Summary</b>					
<b>PHA Name: Dover Housing Authority</b>		<b>Grant Type and Number</b> Capital Fund Program Grant No: DE26P002501-05 Replacement Housing Factor Grant No:			<b>Federal FY of Grant:</b> <b>2005</b>
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:      ) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 06/30/2007 <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	49,421	49,421	49,421	49,421
3	1408 Management Improvements	97,500	98,462	98,462	98,462
4	1410 Administration	49,421	49,421	49,421	49,421
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	50,000	1,585	1,585	1,585
8	1440 Site Acquisition				
9	1450 Site Improvement	145,000	22,315	20,160	20,160
10	1460 Dwelling Structures	99,000	209,704	87,768	18,269
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Nondwelling Structures		39,619	0	0
13	1475 Nondwelling Equipment		2,000	2,000	2,000
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs		21,685	21,685	21,685
18	1499 Development Activities				
19	1501 Collateralization or Debt Service				
20	1502 Contingency	3,870	0		
21	Amount of Annual Grant: (sum of lines 2 – 20)	494,212	494,212	330,502	261,003
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	120,000			

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

PHA Name: Dover Housing Authority		Grant Type and Number Capital Fund Program Grant No: DE26P002501-05 Replacement Housing Factor Grant No:				Federal FY of Grant: 2005		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
HAX-WIDE	Operations	1406		49,421	49,421	49,421	49,421	In progress
HA-WIDE	Computer software upgrades	1408	1	15,000	22,280	22,280	22,280	Comp
HA-WIDE	Drug elim activities/BGC, NIKE WOW	1408	1	25,000	15,556	15,556	15,556	In progress
HA-WIDE	Staff training	1408		12,500	14,744	14,744	14,744	In progress
HA-WIDE	Resident employment training	1408	2	45,000	30,700	30,700	30,700	In progress
HA-WIDE	Financial recording training	1408	1	0	15,182	15,182	15,182	Comp
HAX-WIDE	Admin Salaries/Benefits	1410		49,421	49,421	49,421	49,421	In progress
HA-WIDE	Property Appraiser	1430	7	30,000	0	0	0	Not started
HA-WIDE	Engineer to develop site plans	1430	7	20,000	1,585	1,585	1,585	In progress
001, 002, 004, 008	Improve curb appeal through replacement/planting of add'l trees, shubs, mulching, etc.	1450	4 dev	20,000	22,315	20,160	20,160	Comp
004	Cementing of islands to improve control of trash and debris	1450	4	5,000	0	0	0	Not started
004	Convert gas service from master meters to individual meters	1460	75	120,000	76,318	76,318	6,819	Prelim work being compl
008	Replace Drive-it exterior with vinyl siding (for insurance purposes)	1460	14 units	28,000	11,587	2,601	2,601	Not required any more by ins co
002	Replace vct in kitchen	1460	57 units	57,000	3,349	3,349	3,349	Not started
004	Upgrade bathrooms	1460	14 units	14,000	0			Moved to 701-06
004	Repairs to fire unit	1460	1	0	5,500	5,500	5,500	Fire damage, comp
004	Upgrade detectors in units	1460	75 units	0	49,797	0	0	UPCS item
011	Install windows in windowless units	1460	4 units	0	30,000	0	0	UPCS item
003	Flooring upgrade in QM	1460	50 units	0	33,153	0	0	Moved from 701-06
004	Flooring upgrade in Admin	1470	1 bldg	0	39,619	0	0	Moved from 701-06

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part II: Supporting Pages								
PHA Name: Dover Housing Authority		<b>Grant Type and Number</b> Capital Fund Program Grant No: DE26P002501-05 Replacement Housing Factor Grant No:				Federal FY of Grant: 2005		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
004	Equipment upgrade	1475		0	2,000	2,000	2,000	
013	Relocation Activities	1495	10 families	0	21,685	21,685	21,685	Not started
HAX-WIDE	Coningency	1502		3,870	0			

Annual Statement/Performance and Evaluation Report							
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)							
Part III: Implementation Schedule							
PHA Name: Dover Housing Authority		Grant Type and Number Capital Fund Program No: DE26P002501-05 Replacement Housing Factor No:				Federal FY of Grant: 2005	
Development Number Name/HA-Wide Activities	All Fund Obligated (Quarter Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates
	Original	Revised	Actual	Original	Revised	Actual	
HAX-WIDE	03/06	12/05	12/05			03/2006	
HA-WIDE	06/06	06/06	06/06	09/06		12/2006	
HA-WIDE	03/06	03/06	03/06	12/06	12/2007		
HA-WIDE	03/06	09/06	09/06	12/06		12/2006	
HA-WIDE	12/05	12/05	12/05	12/06		12/2006	
HA-WIDE		03/06	03/06	12/06		12/2006	
HAX-WIDE	03/06	12/05	12/05	12/06		12/2006	
HA-WIDE	06/06	12/06	12/06	12/06			Eliminated
HA-WIDE	12/06	12/06	12/06	12/06		12/2006	
001, 002, 004, 008	06/06	09/2007	09/2007	12/06	09/2007		
004	06/06	09/06	09/06	12/06			Eliminated
004	06/06	06/2007	06/2007	12/06	12/2007		
008	03/06	03/2008	03/2008		06/2008		
002	06/06	06/2007	06/2007			06/2007	
004	06/06	09/06	09/06				Moved
004		06/06	03/2006			03/2006	
004		09/2007			12/2007		
011		12/2007			03/2008		
003		09/2007			03/2008		
004		09/2007			12/2007		
004		06/2006	06/2006			06/2006	
013		09/06	09/2006			12/2006	

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

<b>PHA Name: Dover Housing Authority</b>	<b>Grant Type and Number</b> Capital Fund Program Grant No: DE26P002501-06 Replacement Housing Factor Grant No:	<b>Federal FY of Grant:</b> <b>2006</b>
--	---	--

Original Annual Statement  Reserve for Disasters/ Emergencies  Revised Annual Statement (revision no: )  
 Performance and Evaluation Report for Period Ending: 06/30/2007  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	49,421	46,942	46,942	46,942
3	1408 Management Improvements	95,000	93,885	76,297	41,656
4	1410 Administration	49,421	46,942	46,942	46,942
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs				
8	1440 Site Acquisition				
9	1450 Site Improvement	75,000	5,000	0	0
10	1460 Dwelling Structures	185,000	124,179	0	0
11	1465.1 Dwelling Equipment—Nonexpendable	0	0		
12	1470 Nondwelling Structures	20,000	0		
13	1475 Nondwelling Equipment	10,000	140,000	5,925	5,925
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	10,370	2,479		
21	Amount of Annual Grant: (sum of lines 2 – 20)	494,212	469,427	176,106	141,465
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	125,000	38,179		

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

PHA Name: Dover Housing Authority		Grant Type and Number Capital Fund Program Grant No: DE26P002501-06 Replacement Housing Factor Grant No:				Federal FY of Grant: 2006		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
HAX-WIDE	Operations	1406		49,421	46,942	46,942	46,942	Comp
HA-WIDE	Computer software upgrades	1408	1	15,000	20,000	2,412	2,412	In progress
HA-WIDE	Drug elim activities/BGC, NIKE WOW	1408	1	25,000	33,885	33,885	27,299	In Progress
HA-WIDE	Staff training	1408	5	15,000	15,000	15,000	2,030	In progress
HA-WIDE	Resident employment training	1408	2	40,000	25,000	25,000	9,915	In progress
HAX-WIDE	Admin Salaries/Benefits	1410		49,421	46,942	46,942	46,942	Comp
001, 002, 003, 004, 008, 011	Improve curb appeal through replacement/planting of add'l trees, shubs, mulching, etc.	1450	6 dev	5,000	5,000	0	0	Planning
002	Replace sidewalks/tripping hazards	1450	1 dev	40,000	0	0	0	City of Dover to do
001, 002, 004	Construct bus shelters	1450	6	30,000	0	0	0	Eliminated, attractive nuisance
003	Replace carpet	1460	1 bldg/50 units	50,000	0	0	0	Moved to 701-04
001, 003, 004	Sect 504 improvements	1460	5 units	10,000	10,000	0	0	Started, on as needed basis
004	Install central air conditioning systems	1460	25 units	125,000	0	0	0	Moved to 501-08
002	Roof upgrade	1460	60 units	0	38,179	0	0	UPCS item
004	Upgrade bathrooms	1460	76 baths	0	76,000	0	0	Fungibility
004	Replace carpet in Admin bldg	1470	1	20,000	0	0	0	Moved to 701-04
004	Equipment Upgrades	1475	10	10,000	10,000	4,440	4,440	Started
001, 002, 003, 011	Install security cameras	1475	4 dev	0	140,000	0	0	Security Issue
	Contingency	1502		10,370	2,479			

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

PHA Name: Dover Housing Authority		<b>Grant Type and Number</b> Capital Fund Program No: DE26P002501-06 Replacement Housing Factor No:				<b>Federal FY of Grant: 2006</b>	
Development Number Name/HA-Wide Activities	All Fund Obligated (Quarter Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates
	Original	Revised	Actual	Original	Revised	Actual	
HAX-WIDE	03/2007	09/2006	06/2006	12/2006		12/2006	
HA-WIDE	06/2007		06/2007	09/2007		09/2007	
HA-WIDE	06/2007	09/2006	09/2006	06/2007		06/2007	
HA-WIDE	09/2007	03/2008		06/2008			
HA-WIDE	03/2007	12/2006		09/2007		09/2007	
HAX-WIDE	03/2007	12/2006		12/2006		12/2006	
001, 002, 003, 004, 008, 011	09/2007	03/2008					
002	06/2007						
001, 002, 004	06/2007						
HAX-WIDE	09/2007						
003	09/2007						
001, 003, 004	06/2007	03/2008		06/2008			
004	12/2007						
002	09/2007	12/2007		03/2008			
004		06/2008		09/2008			
004		09/2007		12/2007			
004		12/2007		12/2007			
001, 002, 003, 011		12/2007		03/2008			

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

<b>PHA Name: Dover Housing Authority</b>	<b>Grant Type and Number</b> Capital Fund Program Grant No: DE26P002501-07 Replacement Housing Factor Grant No:	<b>Federal FY of Grant:</b> 2007
--	---	-------------------------------------

Original Annual Statement  Reserve for Disasters/ Emergencies  Revised Annual Statement (revision no: )  
 Performance and Evaluation Report for Period Ending: 06/30/2007  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	47,115	47,115		
3	1408 Management Improvements	93,885	93,885		
4	1410 Administration	47,115	47,115		
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs				
8	1440 Site Acquisition				
9	1450 Site Improvement	82,500	195,000		
10	1460 Dwelling Structures	178,788	77,400		
11	1465.1 Dwelling Equipment—Nonexpendable	0	0		
12	1470 Nondwelling Structures	0	0		
13	1475 Nondwelling Equipment	10,000	10,000		
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1499 Development Activities				
19	1501 Collateralization or Debt Service				
20	1502 Contingency	11,776	664		
21	Amount of Annual Grant: (sum of lines 2 – 20)	471,179	471,179		
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		10,000		
25	Amount of Line 21 Related to Security – Hard Costs		15,000		
26	Amount of line 21 Related to Energy Conservation Measures				

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

PHA Name: Dover Housing Authority		Grant Type and Number Capital Fund Program Grant No: DE26P002501-07 Replacement Housing Factor Grant No:				Federal FY of Grant: 2007		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
HA-WIDE	Operations	1406		47,115	47,115			
HA-WIDE	Additional Police Patrols	1408	4 dev	0	15,000			Need contract
HA-WIDE	Drug Prev After school Program	1408	2 dev	23,885	26,000			Proposal approved
HA-WIDE	Staff training	1408	5	15,000	12,885			
HA-WIDE	Resident employment training	1408	2	40,000	40,000			
HAX-WIDE	Admin Salaries/Benefits	1410		47,115	47,115			
001, 002, 003, 004, 008, 011	Improve curb appeal through replacement/planting of add'l trees, shubs, mulching, etc.	1450	6 dev	5,000	5,000			
002	Construct retaining walls	1450	1 dev	0	150,000			UPCS deficiency
HAX-WIDE	Additional Pole Lights	1450	4 dev	10,000	10,000			
002	Playground upgrade	1450	1 dev	0	30,000			Site improvement/Safety issue
009	Upgrade exterior to vinyl	1460	5 units	5,000	5,000			
001, 002	Upgrade Smoke Detectors to code	1460	73 units	0	47,400			Upgrade to code
008	Install deadbolts	1460	22 units	0	5,000			Security issue
002	Repairs to unit w/ vehicle damage	1460	1 unit	0	20,000			Vehicle damage
004	Equipment Upgrades	1475	1 dev	10,000	10,000			
	Contingency	1502		11,776	664			
HAX-WIDE	Computer software upgrades	1408	5	15,000	0			Absorb by operations
004	Construct bus shelter	1450	1	10,000	0			Eliminated— attractive nuisance
001	Repair parking lot	1450	1 dev	20,000	0			Moved to 5-yr plan
002	Repair sidewalks	1450	1 dev	37,500	0			City of Dover to do
004	Install a/c units	1460	75 units	173,788	0			Moved to 501-08

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

PHA Name: Dover Housing Authority		<b>Grant Type and Number</b> Capital Fund Program No: DE26P002501-07 Replacement Housing Factor No:				<b>Federal FY of Grant: 2007</b>	
Development Number Name/HA-Wide Activities	All Fund Obligated (Quarter Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates
	Original	Revised	Actual	Original	Revised	Actual	
HA-WIDE	12/2007			12/2007			
HA-WIDE	12/2007			03/2008			
HA-WIDE	12/2007			06/2008			
HA-WIDE	03/2008			09/2008			
HA-WIDE	12/2007			12/2008			
HAX-WIDE	12/2007			12/2008			
001, 002, 003, 004, 008, 011	03/2008			06/2008			
002	03/2008			09/2008			
HAX-WIDE	03/2008			09/2008			
002	06/2008			09/2008			
009	12/2007			03/2008			
001, 002	12/2007			03/2008			
008	12/2007			03/2008			
002	12/2007			03/2008			
004	03/2008			06/2008			

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

<b>PHA Name: Dover Housing Authority</b>	<b>Grant Type and Number</b> Capital Fund Program Grant No: DE26P002501-08 Replacement Housing Factor Grant No:	<b>Federal FY of Grant:</b> <b>2008</b>
--	---	--

**Original Annual Statement**  **Reserve for Disasters/ Emergencies**  **Revised Annual Statement (revision no: )**  
 **Performance and Evaluation Report for Period Ending:**  **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	47,115			
3	1408 Management Improvements	94,149			
4	1410 Administration	47,115			
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs				
8	1440 Site Acquisition				
9	1450 Site Improvement	5,000			
10	1460 Dwelling Structures	267,800			
11	1465.1 Dwelling Equipment—Nonexpendable	0			
12	1470 Nondwelling Structures	0			
13	1475 Nondwelling Equipment	10,000			
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1499 Development Activities				
19	1501 Collateralization or Debt Service				
20	1502 Contingency				
21	Amount of Annual Grant: (sum of lines 2 – 20)	471,179			
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	179,000			



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

PHA Name: Dover Housing Authority		<b>Grant Type and Number</b> Capital Fund Program No: DE26P002501-08 Replacement Housing Factor No:				<b>Federal FY of Grant: 2008</b>	
Development Number Name/HA-Wide Activities	All Fund Obligated (Quarter Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates
	Original	Revised	Actual	Original	Revised	Actual	
HA-WIDE	09/2008			12/2008			
HA-WIDE	09/2008			03/2009			
HA-WIDE	09/2008			06/2009			
HA-WIDE	09/2008			06/2009			
HA-WIDE	12/2008			12/2009			
HAX-WIDE	12/2008			12/2009			
001, 002, 003, 004, 008, 011	03/2009			06/2009			
003, 004	06/2009			09/2009			
001, 002, 003, 008, 009, 010, 012, 014	09/2008			12/2008			
004	12/2008			06/2009			

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

<b>PHA Name: Dover Housing Authority</b>	<b>Grant Type and Number</b> Capital Fund Program Grant No: DE26P002502-06 Replacement Housing Factor Grant No:	<b>Federal FY of Grant:</b> <b>2007</b>
--	---	--

Original Annual Statement  Reserve for Disasters/ Emergencies  Revised Annual Statement (revision no: )  
 Performance and Evaluation Report for Period Ending: 06/30/2007  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	1,385		1,385	1,385
3	1408 Management Improvements				
4	1410 Administration	1,385		1,385	1,385
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs				
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	11,099			
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)	13,869		2,770	2,770
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	11,099			



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

PHA Name: Dover Housing Authority		<b>Grant Type and Number</b> Capital Fund Program No: DE26P002502-06 Replacement Housing Factor No:				<b>Federal FY of Grant: 2007</b>	
Development Number Name/HA-Wide Activities	All Fund Obligated (Quarter Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates
	Original	Revised	Actual	Original	Revised	Actual	
HA-WIDE	06/2007		06/2007	06/2007		06/2007	
HA-WIDE	06/2007		06/2007	06/2007		06/2007	
001	09/2007	12/2007		06/2008			