

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

FL015v04

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# 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:** Northwest Florida Regional Housing Authority

**PHA Number:** FL015

**PHA Fiscal Year Beginning:** 01/2008

**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 2008 - 2012**  
[24 CFR Part 903.5]

**A. Mission**

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

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

**B. Goals**

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

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

- PHA Goal: Expand the supply of assisted housing  
Objectives:
- Apply for additional rental vouchers:
  - Reduce public housing vacancies:
  - Leverage private or other public funds to create additional housing opportunities:
  - Acquire or build units or developments
  - Other (list below)
- PHA Goal: Improve the quality of assisted housing  
Objectives:
- Improve public housing management: (PHAS score)
  - Improve voucher management: (SEMAP score)
  - Increase customer satisfaction:
  - Concentrate on efforts to improve specific management functions: (list; e.g., public housing finance; voucher unit inspections)
  - Renovate or modernize public housing units:
  - Demolish or dispose of obsolete public housing:

- Provide replacement public housing:
- Provide replacement vouchers:
- Other: (list below)

PHA Goal: Increase assisted housing choices

Objectives:

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

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

PHA Goal: Provide an improved living environment

Objectives:

- Implement measures to de-concentrate 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.

**Standard Plan**

**Streamlined Plan:**

- High Performing PHA**
- Small Agency (<250 Public Housing Units)**
- Administering Section 8 Only**

**Troubled Agency Plan**

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

[24 CFR Part 903.7 9 (r)]

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

**The Authority will use this Agency Plan as a tool for accomplishing its mission of becoming a leader in the industry. The following is a summary of its contents:**

- ◆ **The Plan provides a comprehensive assessment of the Housing Needs within Northwest Florida's communities. At this time, it appears that the Authority is meeting the low-income housing needs, however, we will monitor the need through annual updates of this Plan.**
- ◆ **The Plan includes a summary of the Authority's planned financial resources and planned uses of those funds. This is presented in table form for electronic submission to HUD.**
- ◆ **All admissions and continued occupancy policies as well as rent determination policies and procedures have been reviewed and updated in accordance with the QHWRA of 1998 and subsequent rules. Additional, the Authority's Section 8 Administrative Plan has been updated to include new provisions of the QHWRA of 1998**
- ◆ **The Operations and Management section of the Plan provides a brief description of the Authority's organizational structure, programs under management and includes all administrative and maintenance policies.**
- ◆ **The Authority's Capital Fund Annual Statement and Five-Year Action Plan is provided. The Authority has no plans to apply for HOPE VI revitalization grant in the near future.**
- ◆ **The Authority has no current plans to designate any of their current public housing stock as elderly or disabled.**

- ◆ **The Authority does not have any developments which meet the requirements for a mandatory conversion assessment.**
- ◆ **The Authority is not currently participating in a homeownership program, nor do we intend to implement one in the next fiscal year. NWRHA will monitor interest in such a program and follow up as appropriate.**
- ◆ **The Authority does not have a formal cooperation agreement with their local welfare office however there is daily communication between agencies. All policies and procedures relative to Welfare Benefit Reductions are included in the ACOP.**
- ◆ **The Authority does not currently have any asset management plans that have not already been identified in previous sections of this Plan.**

**All other documentation and certifications are included as required by the QHWRA.**

### **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.

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## Attachments

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

### Required Attachments:

- Admissions Policy for De-concentration
- FY 2008 Capital Fund Program Annual Statement
- Most recent board-approved operating budget (Required Attachment for PHAs that are troubled or at risk of being designated troubled ONLY)

### Optional Attachments:

- PHA Management Organizational Chart
- FY 2008 Capital Fund Program 5 Year Action Plan
- Public Housing Drug Elimination Program (PHDEP) Plan
- Comments of Resident Advisory Board or Boards (must be attached if not included in PHA Plan text)
- Other (List below, providing each attachment name)

### Supporting Documents Available for Review

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

<b>List of Supporting Documents Available for Review</b>		
<b>Applicable &amp; On Display</b>	<b>Supporting Document</b>	<b>Applicable Plan Component</b>
X	PHA Plan Certifications of Compliance with the PHA Plans and Related Regulations	5 Year and Annual Plans
X	State/Local Government Certification of Consistency with the Consolidated Plan	5 Year and Annual Plans
X	Fair Housing Documentation: Records reflecting that the PHA has examined its programs or proposed programs, identified any impediments to fair housing choice in those programs, addressed or is addressing those impediments in a reasonable fashion in view of the resources available, and worked or is working with local jurisdictions to implement any of the jurisdictions’ initiatives to affirmatively further fair housing that require the PHA’s involvement.	5 Year and Annual Plans
X	Consolidated Plan for the jurisdiction/s in which the PHA is located (which includes the Analysis of Impediments to Fair Housing Choice (AI)) and any additional backup data to support statement of housing needs in the jurisdiction	Annual Plan: Housing Needs
X	Most recent board-approved operating budget for the public housing program	Annual Plan: Financial Resources;
X	Public Housing Admissions and (Continued) Occupancy Policy (A&O), which includes the Tenant Selection and Assignment Plan [TSAP]	Annual Plan: Eligibility, Selection, and Admissions Policies
X	Section 8 Administrative Plan	Annual Plan: Eligibility, Selection, and Admissions Policies
X	Public Housing Deconcentration and Income Mixing Documentation: 1. PHA board certifications of compliance with deconcentration requirements (section 16(a) of the US Housing Act of 1937, as implemented in the 2/18/99 <i>Quality Housing and Work Responsibility Act Initial Guidance; Notice</i> and any further HUD guidance) and 2. Documentation of the required deconcentration and income mixing analysis	Annual Plan: Eligibility, Selection, and Admissions Policies

<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	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, approved or submitted HOPE VI Revitalization Plans or any other approved proposal for development of public housing	Annual Plan: Capital Needs
	Approved or submitted applications for demolition and/or disposition of public housing	Annual Plan: Demolition and Disposition
	Approved or submitted applications for designation of public housing (Designated Housing Plans)	Annual Plan: Designation of Public Housing
	Approved or submitted assessments of reasonable revitalization of public housing and approved or submitted conversion plans prepared pursuant to section 202 of the 1996 HUD Appropriations Act	Annual Plan: Conversion of Public Housing
	Approved or submitted public housing homeownership programs/plans	Annual Plan: Homeownership
	Policies governing any Section 8 Homeownership program <input type="checkbox"/> check here if included in the Section 8 Administrative Plan	Annual Plan: Homeownership
	Any cooperative agreement between the PHA and the TANF agency	Annual Plan: Community Service & Self-Sufficiency

<b>List of Supporting Documents Available for Review</b>		
<b>Applicable &amp; On Display</b>	<b>Supporting Document</b>	<b>Applicable Plan Component</b>
	FSS Action Plan/s for public housing and/or Section 8	Annual Plan: Community Service & Self-Sufficiency
	Most recent self-sufficiency (ED/SS, TOP or ROSS or other resident services grant) grant program reports	Annual Plan: Community Service & Self-Sufficiency
	The most recent Public Housing Drug Elimination Program (PHEDEP) semi-annual performance report for any open grant and most recently submitted PHDEP application (PHDEP Plan)	Annual Plan: Safety and Crime Prevention
X	The most recent fiscal year audit of the PHA conducted under section 5(h)(2) of the U.S. Housing Act of 1937 (42 U.S.C. 1437c(h)), the results of that audit and the PHA's response to any findings	Annual Plan: Annual Audit
	Troubled PHAs: MOA/Recovery Plan	Troubled PHAs
	Other supporting documents (optional) (list individually; use as many lines as necessary)	(specify as needed)

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

[24 CFR Part 903.7 9 (a)]

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

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

<b>Housing Needs of Families in the Jurisdiction by Family Type</b>							
<b>Family Type</b>	<b>Overall</b>	<b>Afford-ability</b>	<b>Supply</b>	<b>Quality</b>	<b>Access-ibility</b>	<b>Size</b>	<b>Loca-tion</b>
Income <= 30% of AMI	1200	5	3	2	3	3	4
Income >30% but <=50% of AMI	250	3	3	3	3	3	3
Income >50% but <80% of AMI	50	2	4	4	3	3	3
Elderly	250	4	3	3	4	3	3
Families with Disabilities	200	5	3	2	3	3	4
Black	780	4	3	3	3	3	3

<b>Housing Needs of Families in the Jurisdiction by Family Type</b>							
Family Type	Overall	Afford- ability	Supply	Quality	Access- ibility	Size	Loca- tion
White	720	4	3	3	3	3	3
Hispanic	10	2	2	2	2	2	2

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: 2007
- 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)

1. Information taken from the Authority’s rent roll and demographic information for each tenant.

## 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.

<b>Housing Needs of Families on the Waiting List</b>			
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:			
<b>Graceville 15-1A&amp;B, 15-11</b>	# of families	% of total families	Annual Turnover
Waiting list total	21		8
Extremely low income <=30% AMI	19	90%	
Very low income (>30% but <=50% AMI)	2	10%	
Low income (>50% but <80% AMI)	0	0	
Families with children	11	52%	
Elderly families	0	0	
Families with Disabilities	4	19%	
White	15	71%	
Black	6	29%	
Hispanic	0	0	
Characteristics by Bedroom Size (Public Housing Only)			
1BR	10	47%	5
2 BR	5	23%	5
3 BR	6	30%	2
4 BR	0	0	1

Housing Needs of Families on the Waiting List			
5 BR	0	0	0
5+ BR	0	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			

### 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:			
<b>Cottondale 15-02</b>	# of families	% of total families	Annual Turnover
Waiting list total	7		3
Extremely low income <=30% AMI	7	100	
Very low income (>30% but <=50% AMI)	0	0	
Low income (>50% but <80% AMI)	0	0	
Families with children	5	71%	
Elderly families	0	0	

Housing Needs of Families on the Waiting List			
Families with Disabilities	1	14%	
White	3	43%	
Black	4	57%	
Hispanic	0	0	
Characteristics by Bedroom Size (Public Housing Only)			
1BR	2	28%	1
2 BR	2	28%	0
3 BR	3	44%	1
4 BR	0	0	0
5 BR	0	0	0
5+ BR	0	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			

## 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.

<b>Housing Needs of Families on the Waiting List</b>			
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:			
<b>Malone 15-03</b>	# of families	% of total families	Annual Turnover
Waiting list total	5		2
Extremely low income <=30% AMI	3	60%	
Very low income (>30% but <=50% AMI)	2	40%	
Low income (>50% but <80% AMI)	0	0	
Families with children	2	40%	
Elderly families	2	40%	
Families with Disabilities	0	0	
White	4	80%	
Black	1	20%	
Hispanic	0		

### Housing Needs of Families on the Waiting List

Characteristics by Bedroom Size (Public Housing Only)			
1BR	3	60%	0
2 BR	2	40%	1
3 BR	0	0	0
4 BR	0	0	0
5 BR	0	0	0
5+ BR	0	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			

## 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.

<b>Housing Needs of Families on the Waiting List</b>			
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:			
Sneads 15-04 A&B	# of families	% of total families	Annual Turnover
Waiting list total	2		2
Extremely low income <=30% AMI	2	100%	
Very low income (>30% but <=50% AMI)	0	0	
Low income (>50% but <80% AMI)	0	0	
Families with children	1	50%	
Elderly families	0	0	
Families with Disabilities	0	0	
White	1	50%	
Black	1	50%	
Hispanic	0	0	
Characteristics by Bedroom Size (Public Housing Only)			

### Housing Needs of Families on the Waiting List

1BR	1	50%	0
2 BR	0	0	5
3 BR	1	50%	1
4 BR	0	0	0
5 BR	0	0	0
5+ BR	0	0	0

Is the waiting list closed (select one)?  No  Yes

If yes:

How long has it been closed (# of months)?

Does the PHA expect to reopen the list in the PHA Plan year?  No  Yes

Does the PHA permit specific categories of families onto the waiting list, even if generally closed?  No  Yes

## 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.

<b>Housing Needs of Families on the Waiting List</b>			
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:			
Bonifay 15-05 A&B and 15-16 A&B	# of families	% of total families	Annual Turnover
Waiting list total	19		8
Extremely low income <=30% AMI	16	84%	
Very low income (>30% but <=50% AMI)	3	16%	
Low income (>50% but <80% AMI)	0	0	
Families with children	10	52%	
Elderly families	2	10%	
Families with Disabilities	3	15%	
White	13	68%	
Black	6	32%	
Hispanic	0	0	

### Housing Needs of Families on the Waiting List

Characteristics by Bedroom Size (Public Housing Only)			
1BR	9	47%	2
2 BR	4	21%	8
3 BR	6	32%	2
4 BR	0	0	2
5 BR	0	0	0
5+ BR	0	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			

## 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.

<b>Housing Needs of Families on the Waiting List</b>			
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:			
Cross City 15-06 A&B	# of families	% of total families	Annual Turnover
Waiting list total	7		3
Extremely low income <=30% AMI	6	85%	
Very low income (>30% but <=50% AMI)	1	15%	
Low income (>50% but <80% AMI)	0	0	
Families with children	3	42%	
Elderly families	0	0	
Families with Disabilities	3	42%	
White	2	28%	
Black	4	57%	
Hispanic	1	15%	

### Housing Needs of Families on the Waiting List

Characteristics by Bedroom Size (Public Housing Only)			
1BR	4	57%	0
2 BR	3	43%	1
3 BR	0	0	1
4 BR	0	0	0
5 BR	0	0	0
5+ BR	0	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			

## 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:			
Jasper 15-07 A&B, 15-18	# of families	% of total families	Annual Turnover
Waiting list total	19		8
Extremely low income <=30% AMI	15	78%	
Very low income (>30% but <=50% AMI)	4	22%	
Low income (>50% but <80% AMI)	0	0	
Families with children	11	57%	
Elderly families	1	5%	
Families with Disabilities	3	15%	
White	5	26%	
Black	13	68%	
Hispanic	1	6%	

### Housing Needs of Families on the Waiting List

Characteristics by Bedroom Size (Public Housing Only)			
1BR	8	42%	2
2 BR	7	36%	2
3 BR	2	10%	6
4 BR	1	6%	1
5 BR	1	6%	2
5+ BR	0	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			

## 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:			
<b>Blountstown 15-09A&amp;B</b>	# of families	% of total families	Annual Turnover
Waiting list total	6		3
Extremely low income <=30% AMI	5	83%	
Very low income (>30% but <=50% AMI)	1	17%	
Low income (>50% but <80% AMI)	0	0	
Families with children	3	50%	
Elderly families	1	17%	
Families with Disabilities	0	0	
White	4	66%	
Black	2	34%	
Hispanic	0	0	

### Housing Needs of Families on the Waiting List

Characteristics by Bedroom Size (Public Housing Only)			
1BR	3	50%	2
2 BR	1	17%	0
3 BR	1	17%	2
4 BR	1	16%	1
5 BR	0	0	0
5+ BR	0	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			

## 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.

<b>Housing Needs of Families on the Waiting List</b>			
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:			
<b>Havana 15-10</b>	# of families	% of total families	Annual Turnover
Waiting list total	9		3
Extremely low income <=30% AMI	9	100%	
Very low income (>30% but <=50% AMI)	0	0	
Low income (>50% but <80% AMI)	0	0	
Families with children	8	88%	
Elderly families	0	0	
Families with Disabilities	1	12%	
White	0	0	
Black	9	100%	
Hispanic	0	0	

### Housing Needs of Families on the Waiting List

Characteristics by Bedroom Size (Public Housing Only)			
1BR	1	12%	0
2 BR	4	44%	1
3 BR	4	44%	1
4 BR	0	0	0
5 BR	0	0	0
5+ BR	0	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			

## 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.

<b>Housing Needs of Families on the Waiting List</b>			
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:			
Carrabelle 15-12A&B	# of families	% of total families	Annual Turnover
Waiting list total	2		1
Extremely low income <=30% AMI	1	50%	
Very low income (>30% but <=50% AMI)	1	50%	
Low income (>50% but <80% AMI)	0	0	
Families with children	2	100%	
Elderly families	0	0	
Families with Disabilities	0	0	
White	2	100%	
Black	0	0	
Hispanic	0	0	

### Housing Needs of Families on the Waiting List

Characteristics by Bedroom Size (Public Housing Only)			
1BR	0	0	0
2 BR	1	50%	1
3 BR	1	50%	0
4 BR	0	0	1
5 BR	0	0	0
5+ BR	0	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			

## 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:			
<b>Wewahitchka 15-13A,B&amp;E</b>	# of families	% of total families	Annual Turnover
Waiting list total	12		5
Extremely low income <=30% AMI	10	83%	
Very low income (>30% but <=50% AMI)	2	17%	
Low income (>50% but <80% AMI)	0	0	
Families with children	5	41%	
Elderly families	3	25%	
Families with Disabilities	2	16%	
White	8	66%	
Black	4	34%	
Hispanic	0	0	

### Housing Needs of Families on the Waiting List

Characteristics by Bedroom Size (Public Housing Only)			
1BR	7	58%	2
2 BR	4	33%	2
3 BR	1	9%	4
4 BR	0	0	1
5 BR	0	0	0
5+ BR	0	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			

## 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:			
<b>Bristol 15-14</b>	# of families	% of total families	Annual Turnover
Waiting list total	3		1
Extremely low income <=30% AMI	3	100%	
Very low income (>30% but <=50% AMI)	0	0	
Low income (>50% but <80% AMI)	0	0	
Families with children	3	100%	
Elderly families	0	0	
Families with Disabilities	0	0	
White	2	66%	
Black	1	34%	
Hispanic	0	0	

### Housing Needs of Families on the Waiting List

Characteristics by Bedroom Size (Public Housing Only)			
1BR	0	0	2
2 BR	1	34%	1
3 BR	1	33%	1
4 BR	1	33%	0
5 BR	0	0	0
5+ BR	0	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			

## 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.

<b>Housing Needs of Families on the Waiting List</b>			
Waiting list type: (select one)			
<input checked="" type="checkbox"/> Section 8 tenant-based assistance			
<input type="checkbox"/> Public Housing			
<input type="checkbox"/> Combined Section 8 and Public Housing			
<input type="checkbox"/> Public Housing Site-Based or sub-jurisdictional waiting list (optional)			
If used, identify which development/subjurisdiction:			
<b>Bradford Co.</b>	# of families	% of total families	Annual Turnover
Waiting list total	89		10
Extremely low income <=30% AMI	89	100%	
Very low income (>30% but <=50% AMI)	0	0	
Low income (>50% but <80% AMI)	0	0	
Families with children	61	68%	
Elderly families	3	3%	
Families with Disabilities	13	16%	
White	32	35%	
Black	49	55%	
Hispanic	8	10%	

### Housing Needs of Families on the Waiting List

<b>Characteristics by Bedroom Size (Public Housing Only)</b>			
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			

## 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.

<b>Housing Needs of Families on the Waiting List</b>			
Waiting list type: (select one)			
<input checked="" type="checkbox"/> Section 8 tenant-based assistance			
<input type="checkbox"/> Public Housing			
<input type="checkbox"/> Combined Section 8 and Public Housing			
<input type="checkbox"/> Public Housing Site-Based or sub-jurisdictional waiting list (optional)			
If used, identify which development/subjurisdiction:			
<b>Calhoun Co.</b>	# of families	% of total families	Annual Turnover
Waiting list total	20		5
Extremely low income <=30% AMI	20	100%	
Very low income (>30% but <=50% AMI)	0	0	
Low income (>50% but <80% AMI)	0	0	
Families with children	14	70%	
Elderly families	0	0	
Families with Disabilities	2	10%	
White	7	35%	
Black	11	55%	
Hispanic	2	10%	

### Housing Needs of Families on the Waiting List

<b>Characteristics by Bedroom Size (Public Housing Only)</b>			
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			

## 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.

<b>Housing Needs of Families on the Waiting List</b>			
Waiting list type: (select one)			
<input checked="" type="checkbox"/> Section 8 tenant-based assistance			
<input type="checkbox"/> Public Housing			
<input type="checkbox"/> Combined Section 8 and Public Housing			
<input type="checkbox"/> Public Housing Site-Based or sub-jurisdictional waiting list (optional)			
If used, identify which development/subjurisdiction:			
<b>Columbia Co.</b>	# of families	% of total families	Annual Turnover
Waiting list total	420		15
Extremely low income <=30% AMI	420	100%	
Very low income (>30% but <=50% AMI)	0	0	
Low income (>50% but <80% AMI)	0	0	
Families with children	285	67%	
Elderly families	19	4%	
Families with Disabilities	74	17%	
White	145	34%	
Black	242	57%	
Hispanic	33	9%	

**Housing Needs of Families on the Waiting List**

Characteristics by Bedroom Size <b>(Public Housing Only)</b>			
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			

## 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.

<b>Housing Needs of Families on the Waiting List</b>			
Waiting list type: (select one)			
<input checked="" type="checkbox"/> Section 8 tenant-based assistance			
<input type="checkbox"/> Public Housing			
<input type="checkbox"/> Combined Section 8 and Public Housing			
<input type="checkbox"/> Public Housing Site-Based or sub-jurisdictional waiting list (optional)			
If used, identify which development/subjurisdiction:			
<b>Dixie Co.</b>	# of families	% of total families	Annual Turnover
Waiting list total	22		4
Extremely low income <=30% AMI	22	100%	
Very low income (>30% but <=50% AMI)	0	0	
Low income (>50% but <80% AMI)	0	0	
Families with children	16	72%	
Elderly families	1	4%	
Families with Disabilities	3	13%	
White	12	54%	
Black	7	31%	
Hispanic	3	15%	

### Housing Needs of Families on the Waiting List

<b>Characteristics by Bedroom Size (Public Housing Only)</b>			
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			

## 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.

<b>Housing Needs of Families on the Waiting List</b>			
Waiting list type: (select one)			
<input checked="" type="checkbox"/> Section 8 tenant-based assistance			
<input type="checkbox"/> Public Housing			
<input type="checkbox"/> Combined Section 8 and Public Housing			
<input type="checkbox"/> Public Housing Site-Based or sub-jurisdictional waiting list (optional)			
If used, identify which development/subjurisdiction:			
<b>Franklin Co.</b>	# of families	% of total families	Annual Turnover
Waiting list total	28		8
Extremely low income <=30% AMI	28	100%	
Very low income (>30% but <=50% AMI)	0	0	
Low income (>50% but <80% AMI)	0	0	
Families with children	23	82%	
Elderly families	0	0	
Families with Disabilities	0	0	
White	16	58%	
Black	6	21%	
Hispanic	6	21%	

### Housing Needs of Families on the Waiting List

<b>Characteristics by Bedroom Size (Public Housing Only)</b>			
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			

## 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.

<b>Housing Needs of Families on the Waiting List</b>			
Waiting list type: (select one)			
<input checked="" type="checkbox"/> Section 8 tenant-based assistance			
<input type="checkbox"/> Public Housing			
<input type="checkbox"/> Combined Section 8 and Public Housing			
<input type="checkbox"/> Public Housing Site-Based or sub-jurisdictional waiting list (optional)			
If used, identify which development/subjurisdiction:			
<b>Gadsden Co.</b>	# of families	% of total families	Annual Turnover
Waiting list total	620		25
Extremely low income <=30% AMI	620	100%	
Very low income (>30% but <=50% AMI)	0	0	
Low income (>50% but <80% AMI)	0	0	
Families with children	526	84%	
Elderly families	9	1%	
Families with Disabilities	78	12%	
White	16	3%	
Black	597	96%	
Hispanic	7	1%	
Characteristics by Bedroom Size (Public Housing Only)			
1BR			
2 BR			
3 BR			

**Housing Needs of Families on the Waiting List**

4 BR			
5 BR			
5+ BR			

Is the waiting list closed (select one)?  No  Yes

If yes:

    How long has it been closed (# of months)?

    Does the PHA expect to reopen the list in the PHA Plan year?  No  Yes

    Does the PHA permit specific categories of families onto the waiting list, even if generally closed?  No  Yes

## 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.

<b>Housing Needs of Families on the Waiting List</b>			
Waiting list type: (select one)			
<input checked="" type="checkbox"/> Section 8 tenant-based assistance			
<input type="checkbox"/> Public Housing			
<input type="checkbox"/> Combined Section 8 and Public Housing			
<input type="checkbox"/> Public Housing Site-Based or sub-jurisdictional waiting list (optional)			
If used, identify which development/subjurisdiction:			
<b>Gulf Co.</b>	# of families	% of total families	Annual Turnover
Waiting list total	27		4
Extremely low income <=30% AMI	27	100%	
Very low income (>30% but <=50% AMI)	0	0	
Low income (>50% but <80% AMI)	0	0	
Families with children	21	77%	
Elderly families	0	0	
Families with Disabilities	1	3%	
White	10	37%	
Black	15	55%	
Hispanic	2	8%	

### Housing Needs of Families on the Waiting List

<b>Characteristics by Bedroom Size (Public Housing Only)</b>			
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			

## 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.

<b>Housing Needs of Families on the Waiting List</b>			
Waiting list type: (select one)			
<input checked="" type="checkbox"/> Section 8 tenant-based assistance			
<input type="checkbox"/> Public Housing			
<input type="checkbox"/> Combined Section 8 and Public Housing			
<input type="checkbox"/> Public Housing Site-Based or sub-jurisdictional waiting list (optional)			
If used, identify which development/subjurisdiction:			
<b>Hamilton Co.</b>	<b># of families</b>	<b>% of total families</b>	<b>Annual Turnover</b>
Waiting list total	95		8
Extremely low income <=30% AMI	95	100%	
Very low income (>30% but <=50% AMI)	0	0	
Low income (>50% but <80% AMI)	0	0	
Families with children	72	75%	
Elderly families	4	4%	
Families with Disabilities	9	9%	
White	20	21%	
Black	72	75%	
Hispanic	3	4%	

### Housing Needs of Families on the Waiting List

<b>Characteristics by Bedroom Size (Public Housing Only)</b>			
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			

## 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.

<b>Housing Needs of Families on the Waiting List</b>			
Waiting list type: (select one)			
<input checked="" type="checkbox"/> Section 8 tenant-based assistance			
<input type="checkbox"/> Public Housing			
<input type="checkbox"/> Combined Section 8 and Public Housing			
<input type="checkbox"/> Public Housing Site-Based or sub-jurisdictional waiting list (optional)			
If used, identify which development/subjurisdiction:			
<b>Jackson Co</b>	# of families	% of total families	Annual Turnover
Waiting list total	55		5
Extremely low income <=30% AMI	55	100%	
Very low income (>30% but <=50% AMI)	0	0	
Low income (>50% but <80% AMI)	0	0	
Families with children	41	74%	
Elderly families	1	1%	
Families with Disabilities	4	7%	
White	19	34%	
Black	32	58%	
Hispanic	4	8%	

### Housing Needs of Families on the Waiting List

<b>Characteristics by Bedroom Size (Public Housing Only)</b>			
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			

## 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.

<b>Housing Needs of Families on the Waiting List</b>			
Waiting list type: (select one)			
<input checked="" type="checkbox"/> Section 8 tenant-based assistance			
<input type="checkbox"/> Public Housing			
<input type="checkbox"/> Combined Section 8 and Public Housing			
<input type="checkbox"/> Public Housing Site-Based or sub-jurisdictional waiting list (optional)			
If used, identify which development/subjurisdiction:			
<b>Lafayette Co.</b>	# of families	% of total families	Annual Turnover
Waiting list total	3		1
Extremely low income <=30% AMI	3	100%	
Very low income (>30% but <=50% AMI)	0	0	
Low income (>50% but <80% AMI)	0	0	
Families with children	3	100%	
Elderly families	0	0	
Families with Disabilities	0	0	
White	1	34%	
Black	1	33%	
Hispanic	1	33%	

### Housing Needs of Families on the Waiting List

<b>Characteristics by Bedroom Size (Public Housing Only)</b>			
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			

## 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.

<b>Housing Needs of Families on the Waiting List</b>			
Waiting list type: (select one)			
<input checked="" type="checkbox"/> Section 8 tenant-based assistance			
<input type="checkbox"/> Public Housing			
<input type="checkbox"/> Combined Section 8 and Public Housing			
<input type="checkbox"/> Public Housing Site-Based or sub-jurisdictional waiting list (optional)			
If used, identify which development/subjurisdiction:			
<b>Liberty Co.</b>	# of families	% of total families	Annual Turnover
Waiting list total	10		2
Extremely low income <=30% AMI	10	100%	
Very low income (>30% but <=50% AMI)	0	0	
Low income (>50% but <80% AMI)	0	0	
Families with children	8	80%	
Elderly families	0	0	
Families with Disabilities	1	10%	
White	5	50%	
Black	4	40%	
Hispanic	1	10%	

### Housing Needs of Families on the Waiting List

<b>Characteristics by Bedroom Size (Public Housing Only)</b>			
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			

## 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.

<b>Housing Needs of Families on the Waiting List</b>			
Waiting list type: (select one)			
<input checked="" type="checkbox"/> Section 8 tenant-based assistance			
<input type="checkbox"/> Public Housing			
<input type="checkbox"/> Combined Section 8 and Public Housing			
<input type="checkbox"/> Public Housing Site-Based or sub-jurisdictional waiting list (optional)			
If used, identify which development/subjurisdiction:			
<b>Madison Co.</b>	# of families	% of total families	Annual Turnover
Waiting list total	238		15
Extremely low income <=30% AMI	238	100%	
Very low income (>30% but <=50% AMI)	0	0	
Low income (>50% but <80% AMI)	0	0	
Families with children	168	70%	
Elderly families	2	2%	
Families with Disabilities	43	18%	
White	17	17%	
Black	218	91%	
Hispanic	3	2%	

### Housing Needs of Families on the Waiting List

<b>Characteristics by Bedroom Size (Public Housing Only)</b>			
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			

## 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 checked="" type="checkbox"/> Section 8 tenant-based assistance			
<input type="checkbox"/> Public Housing			
<input type="checkbox"/> Combined Section 8 and Public Housing			
<input type="checkbox"/> Public Housing Site-Based or sub-jurisdictional waiting list (optional)			
If used, identify which development/subjurisdiction:			
<b>Suwannee Co.</b>	# of families	% of total families	Annual Turnover
Waiting list total	91		10
Extremely low income <=30% AMI	91	100%	
Very low income (>30% but <=50% AMI)	0	0	
Low income (>50% but <80% AMI)	0	0	
Families with children	71	78%	
Elderly families	3	3%	
Families with Disabilities	3	3%	
White	23	25%	
Black	53	58%	
Hispanic	15	17%	

**Housing Needs of Families on the Waiting List**

Characteristics by Bedroom Size <b>(Public Housing Only)</b>			
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)? 24 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			

## 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.

<b>Housing Needs of Families on the Waiting List</b>			
Waiting list type: (select one)			
<input checked="" type="checkbox"/> Section 8 tenant-based assistance			
<input type="checkbox"/> Public Housing			
<input type="checkbox"/> Combined Section 8 and Public Housing			
<input type="checkbox"/> Public Housing Site-Based or sub-jurisdictional waiting list (optional)			
If used, identify which development/subjurisdiction:			
<b>Taylor Co.</b>	# of families	% of total families	Annual Turnover
Waiting list total	160		15
Extremely low income <=30% AMI	160	100%	
Very low income (>30% but <=50% AMI)	0	0	
Low income (>50% but <80% AMI)	0	0	
Families with children	120	75%	
Elderly families	4	2%	
Families with Disabilities	27	16%	
White	42	26%	
Black	110	68%	
Hispanic	8	6%	

### Housing Needs of Families on the Waiting List

<b>Characteristics by Bedroom Size (Public Housing Only)</b>			
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			

## 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.

<b>Housing Needs of Families on the Waiting List</b>			
Waiting list type: (select one)			
<input checked="" type="checkbox"/> Section 8 tenant-based assistance			
<input type="checkbox"/> Public Housing			
<input type="checkbox"/> Combined Section 8 and Public Housing			
<input type="checkbox"/> Public Housing Site-Based or sub-jurisdictional waiting list (optional)			
If used, identify which development/subjurisdiction:			
Union Co.	# of families	% of total families	Annual Turnover
Waiting list total	12		3
Extremely low income <=30% AMI	12	100%	
Very low income (>30% but <=50% AMI)	0	0	
Low income (>50% but <80% AMI)	0	0	
Families with children	9	75%	
Elderly families	0	0	
Families with Disabilities	1	8%	
White	5	41%	
Black	4	33%	
Hispanic	3	26%	

### Housing Needs of Families on the Waiting List

<b>Characteristics by Bedroom Size (Public Housing Only)</b>			
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 2008 grants)</b>		
a) Public Housing Operating Fund	884,190.00	
b) Public Housing Capital Fund	611,711.00	
c) HOPE VI Revitalization	N/A	
d) HOPE VI Demolition	N/A	
e) Annual Contributions for Section 8 Tenant-Based Assistance	3,885,721.00	
f) Public Housing Drug Elimination Program (including any Technical Assistance funds)	N/A	
g) Resident Opportunity and Self-Sufficiency Grants	N/A	
h) Community Development Block Grant	N/A	
i) HOME	N/A	
Other Federal Grants (list below)		
<b>2. Prior Year Federal Grants (unobligated funds only) (list below)</b>		
FL29P015501-06	614,465.00	
FL29P015501-07	611,711.00	
<b>3. Public Housing Dwelling Rental Income</b>	328,549.00	
<b>4. Other income (list below)</b>		
Interest on General Fund Inv.	12,000.00	
Other Receipts	11,300.00	
<b>4. Non-federal sources (list below)</b>		

Financial Resources: Planned Sources and Uses		
Sources	Planned \$	Planned Uses
<b>Total resources</b>	6,959,647.00	

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

[24 CFR Part 903.7 9 (c)]

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

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

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

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

- When families are within a certain number of being offered a unit: (state number)
- When families are within a certain time of being offered a unit: (state time)
- Other: (describe)  
NWRHA verifies eligibility upon the offer of a unit for housing.

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

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

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

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

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

**(2)Waiting List Organization**

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

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

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

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

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

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

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

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

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

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

**(3) Assignment**

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

- One
- Two
- Three or More

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

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

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

a. Income targeting:

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

b. Transfer policies:

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

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

c. Preferences

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

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

Former Federal preferences:

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

Other preferences: (select below)

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

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

Date and Time

Former Federal preferences:

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

Other preferences (select all that apply)

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

4. Relationship of preferences to income targeting requirements:

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

**(5) Occupancy**

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

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

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

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

**(6) De-concentration 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 de-concentration 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 de-concentration 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 de-concentration 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 de-concentration 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 de-concentration 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)  
**Require criminal history disclosure from each adult applicant.**
- 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?
- \*At time of final eligibility determination (before issuance of voucher)**
- 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)  
**Previous landlord if known and if requested by prospective landlord.**

### (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:

**Extension maybe granted due to verified medical issues.**

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

- a. Income targeting

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

- b. Preferences

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

Former Federal preferences

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

Other preferences (select all that apply)

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

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

Date and Time

Former Federal preferences

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

Other preferences (select all that apply)

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

4. Among applicants on the waiting list with equal preference status, how are applicants selected? (select one)
- Date and time of application
- Drawing (lottery) or other random choice technique
5. If the PHA plans to employ preferences for “residents who live and/or work in the jurisdiction” (select one)
- This preference has previously been reviewed and approved by HUD
- The PHA requests approval for this preference through this PHA Plan
6. Relationship of preferences to income targeting requirements: (select one)
- The PHA applies preferences within income tiers
- Not applicable: the pool of applicant families ensures that the PHA will meet income targeting requirements

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

- a. In which documents or other reference materials are the policies governing eligibility, selection, and admissions to any special-purpose section 8 program administered by the PHA contained? (select all that apply)
- The Section 8 Administrative Plan
- Briefing sessions and written materials
- Other (list below)
- b. How does the PHA announce the availability of any special-purpose section 8 programs to the public?
- Through published notices
- Other (list below)

**4. PHA Rent Determination Policies**

[24 CFR Part 903.7 9 (d)]

**A. Public Housing**

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

**(1) Income Based Rent Policies**

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

- a. Use of discretionary policies: (select one)
- The PHA will not employ any discretionary rent-setting policies for income based rent in public housing. Income-based rents are set at the higher of 30%

of adjusted monthly income, 10% of unadjusted monthly income, the welfare rent, or minimum rent (less HUD mandatory deductions and exclusions). (If selected, skip to sub-component (2))

---or---

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

b. Minimum Rent

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

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

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

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

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

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

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

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

- For the earned income of a previously unemployed household member  
 For increases in earned income  
 Fixed amount (other than general rent-setting policy)

If yes, state amount/s and circumstances below:

- Fixed percentage (other than general rent-setting policy)  
If yes, state percentage/s and circumstances below:

- For household heads  
 For other family members

- For transportation expenses
- For the non-reimbursed medical expenses of non-disabled or non-elderly families
- Other (describe below)

e. Ceiling rents

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

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

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

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

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

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

f. Rent re-determinations:

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

- Never
- At family option
- Any time the family experiences an income increase

- Any time a family experiences an income increase above a threshold amount or percentage: (if selected, specify threshold)\_\_\_\_\_
- Other (list below)

**Families must report all changes in family income and/or composition.**

- 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:

**Northwest Florida Regional Housing Authority currently has twenty (20) positions. The job titles include: Executive Director, Program Coordinator, Fiscal Manager, Public Housing Counselors, Section 8 Housing Counselors, Bookkeeper, Director of Facilities, Maintenance Mechanics, and Laborers. A brief summary of job responsibilities is included here also for reference:**

### **Executive Director**

**The chief administrative officer of the Housing Authority serving at the pleasure of the Board of Commissioners and is responsible for achieving all Housing Program goals and objective established by the Housing Authority Board in accordance with Federal, State and Local policies and procedures.**

### **Program Coordinator**

**Assists the Executive Director with administrative and supervisory work in executing the functions and activities necessary for the effective and efficient operation of the Authority. Functional responsibilities include all aspects of the Authority's work. Exercises considerable independent judgment in determining courses of actions within established policy.**

### **Fiscal Manager**

**Work involves the application of accounting principles and practices to the maintenance of accounting and fiscal records, performance of confidential duties assisting the Executive Director in the areas of budget, procurement, management information systems, and other administrative duties that require working with clearly established accounting systems and procedures. Performance of the duties requires thorough knowledge of accounting methods and independent judgment.**

### **Bookkeeper**

**Under the direct supervision of the Fiscal Manager, this position is responsible for all functions related to the financial activities of the Authority. Assists in the preparation and maintenance of manual and automated reports and financial statements/records covering income, expenditures, and property management. Assists in the preparation of financial and operating activity reports for each Housing Program to ensure proper account balances and operating procedures. Assists in the preparation of payroll and the proper maintenance of payroll, personnel, insurance and workman compensation claims. Assists in the proper maintenance of the purchase order system. Assists with the preparation of timely submission of required financial reports to the HUD Office and appropriate State offices.**

### **Public Housing Counselor**

**Provides information to potential applicants of the “Application Process” for securing housing assistance for the Public Housing Program. Responsible for receiving and processing applications, maintaining the waiting list, monitoring vacancies, assisting the Program Coordinator with monthly status reports, orientation of tenants in Public Housing of program rules, regulations and terminology. Responsible for tenant files, re-certifications, unit inspections, lease violations, case management and other duties as required.**

### **Section 8 Housing Counselor**

**Provides information to potential applicants of the “application process” for securing housing assistance for the Section 8 Program. Duties include receiving and processing application for the Section 8 Rental Assistance Program, maintaining the waiting list, monitoring vacancies, assisting the Program Coordinator with monthly status reports, orientation of tenants and landlords participating in the Section 8 Housing Assistance Program of the program rules, regulations and terminology. Responsible for tenant files, HQS, monitoring of vacancies, HAP payment tracking and other duties as required.**

### **Director of Facilities**

**Reporting to the Executive Director and has direct responsibility for the overall maintenance operation of the Public Housing Program. Functional responsibilities include all aspects of the Authority's work with specific emphasis on that related to the Public Housing Program. Exercises considerable independent judgment in determining courses of action within established policy. Duties include, but are not limited to: Responsibility for the timely and efficient execution of all aspects of facility management. Supervision of all Public Housing Maintenance personnel in the execution of their assigned duties, conducting quality control audits, performing employee evaluations. Assisting the Executive Director with planning, developing and oversight responsibilities for the Capital Fund Program work. Responsible for the oversight of use and maintenance of all Authority automotive & maintenance equipment assigned to the Public Housing Program. Coordinating & scheduling maintenance & repairs for automobiles assigned to the Section 8 Program.**

### **Maintenance Mechanics**

**Under the supervision of the Maintenance Supervisor, incumbent is responsible for performing a wide variety of maintenance and repair functions in the Public Housing Program which conforms to codes, specifications and Program regulations.**

### **Maintenance Laborers**

**Under general supervision of the Maintenance Supervisor, this is general manual and limited semi-skilled and/or unskilled work in the maintenance and upkeep of the Authority and Public Housing buildings and/or grounds. The incumbent is responsible for performing a variety of custodial, maintenance, and grounds-keeping tasks at Authority properties. Individual will operate simple hand tools and small-motorized equipment such as machines and power mowers. Instructions are specific in nature on all but previously learned tasks, and work is subject to review for quality upon completion.**

**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	370	85
Section 8 Vouchers	826	75
Section 8 Certificates	NA	NA
Section 8 Mod Rehab	NA	NA
Special Purpose Section 8 Certificates/Vouchers (list individually)	NA	NA
Public Housing Drug Elimination Program (PHDEP)	NA	NA
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)  
**Personnel Policy, Safety Policy and Maintenance Manual**
  
- (2) Section 8 Management: (list below)  
**Section 8 Administrative Plan**

## **6. PHA Grievance Procedures**

[24 CFR Part 903.7 9 (f)]

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

### **A. Public Housing**

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

If yes, list additions to federal requirements below:

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

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

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

If yes, list additions to federal requirements below:

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

## **7. Capital Improvement Needs**

[24 CFR Part 903.7 9 (g)]

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

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

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

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

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

Select one:

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

-or-

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

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

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

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

b. If yes to question a, select one:

The Capital Fund Program 5-Year Action Plan is provided as an attachment to the PHA Plan at Attachment (state name FL015/5YRv03)

-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: (DD/MM/YY)	
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**

**Voluntary Conversion Initial Assessments**

1. **How many of the PHA's developments are subject to the Required Initial Assessment? ALL**
2. **How many of the PHA's developments are not subject to the Required Initial Assessments based on exemptions (e.g., elderly and/or disabled developments not general occupancy developments)? NONE**
3. **How many Assessments were conducted for the PHA's covered developments? One for each HUD development number**
4. **Identify PHA developments that may be appropriate for conversion based on the Required Initial Assessments: None at this time, however, we do understand that this is a non-binding assessment.**

**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 entered into a cooperative agreement with the TANF Agency, to share information and/or target supportive services (as contemplated by section 12(d)(7) of the Housing Act of 1937)?

If yes, what was the date that agreement was signed? DD/MM/YY

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

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

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

**(1) General**

a. Self-Sufficiency Policies

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

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

b. Economic and Social self-sufficiency programs

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

<b>Services and Programs</b>				
Program Name & Description (including location, if appropriate)	Estimated Size	Allocation Method (waiting list/random selection/specific criteria/other)	Access (development office / PHA main office / other provider name)	Eligibility (public housing or section 8 participants or both)

**(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	N/A	
Section 8	N/A	

- 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:

\*HA is not required to administer the FSS Program

**C. Welfare Benefit Reductions**

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

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

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

**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)

**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)

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

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

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

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

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

PHAs eligible for FY 2005 PHDEP funds must provide a PHDEP Plan meeting specified requirements prior to receipt of PHDEP funds.

- Yes  No: Is the PHA eligible to participate in the PHDEP in the fiscal year covered by this PHA Plan?
- Yes  No: Has the PHA included the PHDEP Plan for FY 2005 in this PHA Plan?
- Yes  No: This PHDEP Plan is an Attachment. (Attachment Filename: \_\_\_\_)

## **14. RESERVED FOR PET POLICY**

[24 CFR Part 903.7 9 (n)]

**All pets must be approved in advance by the HA management. The pet owner must submit and enter into a Pet Agreement with the HA. Pets must be registered with the HA before they are brought onto the premises. Registration includes certificate signed by a licensed veterinarian or State/local authority that the pet has received all inoculations required by State or local law, and that the pet has no communicable disease(s) and is pest-free. Dogs & cats must be spayed or neutered. Registration must be renewed and will be coordinated with the annual recertification date.**

## **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)?

FY 2006 Audit has just recently been completed and will be forwarded to the Jacksonville HUD Field Office.

## **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) NWFRHA considers all PH adult residents as members of the Resident Advisory Board.

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) **Adult family members of Public Housing**

### 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: **State of Florida Consolidated Plan**
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)

Goal: The public and private sectors shall increase the affordability and availability of housing for low-income and moderate-income persons, including citizens in rural areas, while at the same time encouraging self-sufficiency of the individual and assuring environmental and structural quality and cost effective operations.

Policies:

- ◆ Eliminate public policies that result in housing discrimination, and development policies that encourage housing opportunities for all Florida citizens.
- ◆ Diminish the use of institutions to house persons by promoting deinstitutionalization to the maximum extent possible.
- ◆ Increase the supply of safe, affordable, and sanitary housing for low-income and moderate-income persons and elderly persons by alleviating housing shortages, recycling older houses and redeveloping residential neighborhoods, identifying housing needs, providing incentives to the private sector to build affordable housing, encouraging public-private partnerships to maximize the creation of affordable housing, and encouraging research into low-cost housing construction techniques, considering life-cycle operating costs.
- ◆ Reduce the cost of housing construction by eliminating unnecessary regulatory practices that add to the cost of housing.

- Other: (list below)

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

The State Comprehensive Plan is intended to be a direction-setting document. Its policies may be implemented only to the extent that financial resources are provided pursuant to legislative appropriation of grants or appropriations of any other public or private entities. The Plan does not create regulatory authority or authorize the adoption of agency rules, criteria, or standards not otherwise authorized by law.

The goals and policies contained in the State Comprehensive Plan shall be reasonably applied where they are economically and environmentally feasible, not contrary to the public interest, and consistent with the protection of private property rights. The plan shall be construed and applied as a whole, and no specific goal or policy in the plan shall be construed or applied in isolation from the other goals and policies in the plan.

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

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

##### **A. De-concentration Analysis**

NWFRHA has assessed its properties and found that it does not have properties above/below range that would require de-concentration efforts. In addition, NWFRHA developments are dispersed throughout its jurisdiction (22 counties) and any attempt to offer incentives to residents and/or offer units to applicants in other sub jurisdictions would create a hardship for the family (transportation to work, etc.) and would not accomplish the desired result.

##### **Implementation of the Community Service Requirements**

##### **COMMUNITY SERVICE REQUIREMENT GUIDELINES**

Under section 12c, each adult resident of public housing must participate in eight hours of community service and/or economic self-sufficiency activities per month, unless they meet criteria for exemption.

The following description governs how the Northwest Florida Regional Housing Authority will comply with the community service requirements in their next PHA Plan. Addressed below are:

- The administrative steps taken to implement the requirement (scheduled changes in leases, development of a written description of the requirement, written notification to residents of the requirement, entering into Memorandum of Understanding with TANF (welfare) agencies, who will administer the program, etc.).
- Programmatic aspects (types of activities included in order for residents to fulfill their obligation, partner agencies who may offer residents opportunities to fulfill the obligation, etc.).
- The full policy on the community service requirement is also a supporting document to the PHA Plan.

### **Administrative Steps**

Lease has already been revised to reflect changes in requirements for residents.

- Written description of the requirement is listed in the Community Service portion of the Agency Plan.
- Plan will include a notification page to residents informing them of the obligation to comply under the terms of the lease. Verification will take place on re-examination.
- At this time we intend for our housing management staff to administer the program. However, this will be determined once a review of the number of participants has been established.

### **Programmatic Steps**

- The types of activities that residents could participate in include resident training (energy efficiency, housekeeping issues, etc once a month on a Saturday, meals on wheels, youth programs, any volunteer work, etc.).

- Partner agencies might include county recreation services, crisis centers, homeless shelters, missions, any non-profit or civic organizations, etc.

## **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 FL29P01550108 FFY of Grant Approval: 01/2008

Original Annual Statement

Line No.	Summary by Development Account	Total Estimated Cost
1	Total Non-CGP Funds	
2	1406 Operations	74,425.00
3	1408 Management Improvements	
4	1410 Administration	56,000.00
5	1411 Audit	
6	1415 Liquidated Damages	
7	1430 Fees and Costs	60,000.00
8	1440 Site Acquisition	
9	1450 Site Improvement	
10	1460 Dwelling Structures	328,025.00
11	1465.1 Dwelling Equipment-Nonexpendable	48,261.00
12	1470 Nondwelling Structures	
13	1475 Nondwelling Equipment	45,000.00
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>	<b>611,711.00</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	

**\*Based on 2007 Actual CFP**

**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
PHA WIDE	Operations	1406	74,425.00
	Administration (Salaries, etc.)	1410	56,000.00
	A&E Fees	1430	60,000.00
15-7 A&B JASPER	Bathroom Upgrade	1460	145,000.00
	Replace Refrigerators	1465.1	23,711.00
15-12 A&B Carrbelle	Replace Windows	1460	45,000.00
	Replace Roofs	1460	30,525.00
	Replace Waterheaters	1465.1	3,050.00
	Replace Stoves/Vents	1465.1	5,500.00
	Foundation Repair	1460	107,500.00
15-13 Wewahitchka	Refrigerators	1465.1	16,000.00
PHA Wide	Maintenance Truck & Sewer Machines	1475	45,000.00

**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)
PHA WIDE		



## CAPITAL FUND PROGRAM TABLES START HERE

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<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: NORTHWEST FLORIDA REGIONAL HOUSING AUTHORITY</b>		<b>Grant Type and Number</b> Capital Fund Program Grant No: FL29P015501-07 Replacement Housing Factor Grant No:		<b>Federal FY of Grant:</b> 2007	
<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: 06/30/07 <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	86,700.00		0.00	
3	1408 Management Improvements				
4	1410 Administration	60,000.00		0.00	
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	60,000.00		0.00	
8	1440 Site Acquisition				
9	1450 Site Improvement	210,000.00		0.00	
10	1460 Dwelling Structures	195,011.00		0.00	
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Nondwelling Structures				
13	1475 Nondwelling Equipment				
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1499 Development Activities				
19	1501 Collaterization or Debt Service				

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

PHA Name: NORTHWEST FLORIDA REGIONAL HOUSING AUTHORITY	Grant Type and Number Capital Fund Program Grant No: FL29P015501-07 Replacement Housing Factor Grant No:	Federal FY of Grant: 2007
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Original Annual Statement  Reserve for Disasters/ Emergencies  Revised Annual Statement (revision no: )  
 Performance and Evaluation Report for Period Ending: 06/30/07  Final Performance and Evaluation Report

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
20	1502 Contingency				
21	Amount of Annual Grant: (sum of lines 2 – 20)	611,711.00		0.00	
22	Amount of line 21 Related to LBP Activities				
23	Amount of line 21 Related to Section 504 compliance				
24	Amount of line 21 Related to Security – Soft Costs				
25	Amount of Line 21 Related to Security – Hard Costs				
26	Amount of line 21 Related to Energy Conservation Measures				

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

PHA Name: NORTHWEST FLORIDA REGIONAL HOUSING AUTHORITY		Grant Type and Number Capital Fund Program Grant No: FL29P015501-07 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	
PHA WIDE	OPERATIONS	1406		86,700.00		0.00		
	ADMINISTRATION (Salaries, etc.)	1410		60,000.00		0.00		
	A&E FEES	1430		60,000.00		0.00		
FL15-1/11 G'ville	Resurface Streets	1450		150,000.00		0.00		
FL15-2 C'dale	Resurface Parking Area	1450		25,000.00		0.00		
FL15-10 Havana	Parking Pads/Sidewalks	1450		25,000.00		0.00		
FL15-13 Wewa	Parking Pads	1450		10,000.00		0.00		
FL15-4 Sneads	Foundation Repair	1460	2 Units	48,411.00		0.00		
FL15-18 Jasper	Replace Windows	1460	28 Units	98,600.00		0.00		
FL15-16 Bonifay	Replace Windows	1460	16 Units	48,000.00		0.00		
	<b>TOTAL</b>			<b>611,711.00</b>		<b>0.00</b>		





## CAPITAL FUND PROGRAM TABLES START HERE

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<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:</b> Northwest Florida Regional Housing Authority		<b>Grant Type and Number</b> Capital Fund Program Grant No: FL29P015501-06 Replacement Housing Factor Grant No:			<b>Federal FY of Grant:</b> 2006	
<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: 06/30/07 <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	57,405.00		0.00		
3	1408 Management Improvements					
4	1410 Administration	45,000.00		0.00		
5	1411 Audit					
6	1415 Liquidated Damages					
7	1430 Fees and Costs	39,000.00		0.00		
8	1440 Site Acquisition					
9	1450 Site Improvement					
10	1460 Dwelling Structures	457,060.00		0.00		
11	1465.1 Dwelling Equipment—Nonexpendable	16,000.00		0.00		
12	1470 Nondwelling Structures					
13	1475 Nondwelling Equipment					
14	1485 Demolition					
15	1490 Replacement Reserve					
16	1492 Moving to Work Demonstration					
17	1495.1 Relocation Costs					
18	1499 Development Activities					
19	1501 Collaterization or Debt Service					

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

<b>PHA Name:</b> Northwest Florida Regional Housing Authority	<b>Grant Type and Number</b> Capital Fund Program Grant No: FL29P015501-06 Replacement Housing Factor Grant No:	<b>Federal FY of Grant:</b> 2006
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Original Annual Statement  
 Reserve for Disasters/ Emergencies  
 Revised Annual Statement (revision no: )  
 Performance and Evaluation Report for Period Ending: 06/30/07  
 Final Performance and Evaluation Report

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
20	1502 Contingency				
21	Amount of Annual Grant: (sum of lines 2 – 20)	614,465.00		0.00	
22	Amount of line 21 Related to LBP Activities				
23	Amount of line 21 Related to Section 504 compliance				
24	Amount of line 21 Related to Security – Soft Costs				
25	Amount of Line 21 Related to Security – Hard Costs				
26	Amount of line 21 Related to Energy Conservation Measures				

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

PHA Name: Northwest Florida Regional Housing Authority		Grant Type and Number Capital Fund Program Grant No: FL29P015501-06 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	
PHA WIDE	Operations	1406		57,405.00		0.00		
	Administration (Salaries, EBC, etc.)	1410		45,000.00		0.00		
	A&E Fees	1430		39,000.00		0.00		
FL 15-7 A&B	Replace Kitchen Cabinets	1460	58 Units	272,060.00		0.00		
	Replace Stoves	1465.1	58 Units	16,000.00		0.00		
FL15-9 A&B	Replace Roofs	1460	34 Units	115,000.00		0.00		
FL15-16 A&B	Replace Roofs	1460	16 Units	70,000.00		0.00		
	TOTAL			614,465.00		0.00		





## CAPITAL FUND PROGRAM TABLES START HERE

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<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:</b> Northwest Florida Regional Housing Authority		<b>Grant Type and Number</b> Capital Fund Program Grant No: FL29P01550105 Replacement Housing Factor Grant No:			<b>Federal FY of Grant:</b> 2005	
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input checked="" type="checkbox"/> Revised Annual Statement (revision no: 1) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 06/30/07 <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	4,115.00	60,000.00	60,000.00		
3	1408 Management Improvements					
4	1410 Administration	62,607.00	51,440.00	51,440.00		
5	1411 Audit					
6	1415 Liquidated Damages					
7	1430 Fees and Costs	0.00	30,000.00	30,000.00		
8	1440 Site Acquisition					
9	1450 Site Improvement					
10	1460 Dwelling Structures	559,350.00	466,632.00	466,632.00	204,632.00	
11	1465.1 Dwelling Equipment—Nonexpendable					
12	1470 Nondwelling Structures					
13	1475 Nondwelling Equipment	0.00	18,000.00	18,000.00		
14	1485 Demolition					
15	1490 Replacement Reserve					
16	1492 Moving to Work Demonstration					
17	1495.1 Relocation Costs					
18	1499 Development Activities					
19	1501 Collateralization or Debt Service					

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

<b>PHA Name:</b> Northwest Florida Regional Housing Authority	<b>Grant Type and Number</b> Capital Fund Program Grant No: FL29P01550105 Replacement Housing Factor Grant No:	<b>Federal FY of Grant:</b> 2005
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Original Annual Statement  Reserve for Disasters/ Emergencies  Revised Annual Statement (revision no: 1)  
 Performance and Evaluation Report for Period Ending: 06/30/07  Final Performance and Evaluation Report

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
20	1502 Contingency				
21	Amount of Annual Grant: (sum of lines 2 – 20)	626,072.00	626,072.00	626,072.00	204,632.00
22	Amount of line 21 Related to LBP Activities				
23	Amount of line 21 Related to Section 504 compliance				
24	Amount of line 21 Related to Security – Soft Costs				
25	Amount of Line 21 Related to Security – Hard Costs				
26	Amount of line 21 Related to Energy Conservation Measures				

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

PHA Name: Northwest Florida Regional Housing Authority		Grant Type and Number Capital Fund Program Grant No: FL29P01550105 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	
PHA WIDE	OPERATIONS	1406		4,115.00	60,000.00	60,000.00	0.00	
	ADMINISTRATION (Salaries, etc.)	1410		62,607.00	51,440.00	51,440.00	0.00	
	A&E FEES	1430		-0-	30,000.00	30,000.00	0.00	
FL15-05 A&B	REPLACE ROOFS	1460	40 UNITS	116,850.00	88,964.00	88,964.00	88,964.00	
	REPLACE WINDOWS	1460	40 UNITS	106,600.00	172,000.00	172,000.00	0.00	
FL15-09 A&B	REPLACE WINDOWS	1460	34 UNITS	91,000.00	90,000.00	90,000.00	0.00	
FL15-10	REPLACE ROOFS	1460	14 UNITS	40,900.00	32,444.00	32,444.00	32,444.00	
FL15-11	REPLACE WINDOWS	1460	20 UNITS	52,000.00	0.00			
FL15-13A,B&E	REPLACE ROOFS	1460	40 UNITS	126,000.00	83,224.00	83,224.00	83,224.00	
FL15-14	REPLACE WINDOWS	1460	10 UNITS	26,000.00	0.00			
PHA WIDE	MAINTENANCE TRUCK	1475	1	-0-	18,000.00	18,000.00	0.00	
	<b>TOTAL</b>			<b>626,072.00</b>	<b>626,072.00</b>	<b>626,072.00</b>	<b>204,632.00</b>	





## CAPITAL FUND PROGRAM TABLES START HERE

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<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:</b> Northwest Florida Regional Housing Authority		<b>Grant Type and Number</b> Capital Fund Program Grant No: FL29P01550104 Replacement Housing Factor Grant No:			<b>Federal FY of Grant:</b> 2004	
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input checked="" type="checkbox"/> Revised Annual Statement (revision no: 2) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 06/30/07 <input type="checkbox"/> Final Performance and Evaluation Report						
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost		
		Original	Revised	Obligated	Expended	
1	Total non-CFP Funds					
2	1406 Operations	0	84,574.00	84,574.00	84,574.00	
3	1408 Management Improvements	118,000.00	0.00	0.00		
4	1410 Administration	0	26,500.00	26,500.00	0.00	
5	1411 Audit					
6	1415 Liquidated Damages					
7	1430 Fees and Costs	109,600.00	31,000.00	31,000.00	0.00	
8	1440 Site Acquisition					
9	1450 Site Improvement	30,000.00	30,000.00	30,000.00	0.00	
10	1460 Dwelling Structures	322,150.00	415,800.00	415,800.00	411,356.80	
11	1465.1 Dwelling Equipment—Nonexpendable	8,450.00	8,450.00	8,450.00	0.00	
12	1470 Nondwelling Structures					
13	1475 Nondwelling Equipment	8,124.00	0.00	0.00		
14	1485 Demolition					
15	1490 Replacement Reserve					
16	1492 Moving to Work Demonstration					
17	1495.1 Relocation Costs					
18	1499 Development Activities					
19	1501 Collateralization or Debt Service					

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

<b>PHA Name:</b> Northwest Florida Regional Housing Authority	<b>Grant Type and Number</b> Capital Fund Program Grant No: FL29P01550104 Replacement Housing Factor Grant No:	<b>Federal FY of Grant:</b> 2004
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Original Annual Statement  Reserve for Disasters/ Emergencies  Revised Annual Statement (revision no: 2)  
 Performance and Evaluation Report for Period Ending: 06/30/07  Final Performance and Evaluation Report

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
20	1502 Contingency				
21	Amount of Annual Grant: (sum of lines 2 – 20)	596,324.00	596,324.00	596,324.00	495,930.80
22	Amount of line 21 Related to LBP Activities				
23	Amount of line 21 Related to Section 504 compliance				
24	Amount of line 21 Related to Security – Soft Costs				
25	Amount of Line 21 Related to Security – Hard Costs				
26	Amount of line 21 Related to Energy Conservation Measures				

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

PHA Name: Northwest Florida Regional Housing Authority		Grant Type and Number Capital Fund Program Grant No: FL29P01550104 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	
PHA WIDE	OPERATIONS	1406		0.00	84,574.00	84,574.00	84,574.00	
	MANAGEMENT IMPROVEMENTS (Training & Equip. Inventory System)	1408		118,000.00	0.00	0.00		
	ADMINISTRATION (salaries, etc.)	1410		0.00	26,500.00	26,500.00	0.00	
	A&E FEES	1430		109,600.00	31,000.00	31,000.00	0.00	
FL15-04 A&B	REPLACE SEWER LINES	1450	22 UNITS	31,000.00	0.00	0.00		
FL15-16 B	REPLACE SEWER LINES	1450	10 UNITS	15,000.00	0.00	0.00		
15-06 A&B	INSTALLATION HVAC/DUCTWORK	1460	26 UNITS	143,000.00	373,600.00	373,600.00	373,600.00	
	REPLACE WATERHEATERS	1460	26 UNITS	5,200.00	5,200.00	5,200.00	5,200.00	
	BATHROOM UPGRADE	1460	26 UNITS	65,000.00	0.00	0.00		
	ELECTRICAL UPGRADE	1460	26 UNITS	37,000.00	37,000.00	37,000.00	32,556.80	
	REPLACE STOVES/VENTS	1465. 1	26 UNITS	8,450.00	8,450.00	8,450.00	0.00	
	REMOVAL OF LP GASLINES, TANKS & METERS	1450		30,000.00	30,000.00	30,000.00	0.00	
	TOTAL			596,324.00	596,324.00	596,324.00	495,930.80	

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

PHA Name: Northwest Florida Regional Housing Authority		Grant Type and Number Capital Fund Program Grant No: FL29P01550104 Replacement Housing Factor Grant No:				Federal FY of Grant: 2004		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	

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

PHA Name: Northwest Florida Regional Housing Authority		Grant Type and Number Capital Fund Program No: FL2901550104 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		
PHA WIDE	09/13/06			09/13/08				







## CAPITAL FUND PROGRAM TABLES START HERE

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<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:</b> Northwest Florida Regional Housing Authority		<b>Grant Type and Number</b> Capital Fund Program Grant No: FL29P01550103 Replacement Housing Factor Grant No:			<b>Federal FY of Grant:</b> 2003	
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input type="checkbox"/> Revised Annual Statement (revision no: 3) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 06/30/07 <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	15,000.00	40,000.00	40,000.00	0.00	
3	1408 Management Improvements	99,000.00	35,000.00	35,000.00	0.00	
4	1410 Administration	0.00	49,000.00	49,000.00	0.00	
5	1411 Audit					
6	1415 Liquidated Damages					
7	1430 Fees and Costs	45,600.00	45,600.00	45,600.00	31,826.50	
8	1440 Site Acquisition					
9	1450 Site Improvement					
10	1460 Dwelling Structures	340,000.00	340,000.00	340,000.00	316,204.00	
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	10,000.00	0.00	0.00	0.00	
18	1499 Development Activities					
19	1501 Collateralization or Debt Service					

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

<b>PHA Name:</b> Northwest Florida Regional Housing Authority	<b>Grant Type and Number</b> Capital Fund Program Grant No: FL29P01550103 Replacement Housing Factor Grant No:	<b>Federal FY of Grant:</b> 2003
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Original Annual Statement    Reserve for Disasters/ Emergencies    Revised Annual Statement (revision no: 3)  
 Performance and Evaluation Report for Period Ending: 06/30/07    Final Performance and Evaluation Report

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
20	1502 Contingency				
21	Amount of Annual Grant: (sum of lines 2 – 20)	509,600.00	509,600.00	509,600.00	348,030.50
22	Amount of line 21 Related to LBP Activities				
23	Amount of line 21 Related to Section 504 compliance				
24	Amount of line 21 Related to Security – Soft Costs				
25	Amount of Line 21 Related to Security – Hard Costs				
26	Amount of line 21 Related to Energy Conservation Measures				

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

PHA Name: Northwest Florida Regional Housing Authority		Grant Type and Number Capital Fund Program Grant No: FL29P01550103 Replacement Housing Factor Grant No:				Federal FY of Grant: 2003		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
PHA WIDE	Operations	1406		15,000.00	40,000.00	40,000.00	0.00	
	Management Imp.(Inspection System)	1408		99,000.00	35,000.00	35,000.00	0.00	
	Administration (Salaries, etc.)	1410		0.00	49,000.00	49,000.00	0.00	
	A&E Fees	1430		45,600.00	45,600.00	45,600.00	31,826.50	
	Relocation Costs	1495.1		10,000.00	0.00	0.00	0.00	
FL15-01 A&B	Replace Roofs	1460	36 Units	68,350.00	102,600.00	102,600.00	103,965.00	
	Replace floor tile	1460	36 Units	25,000.00	0.00	0.00		
FL15-02	Replace Roofs	1460	10 Units	0.00	28,500.00	28,500.00	28,000.00	
FL15-03	Remove Pantry Walls	1460	6 Units	6,000.00	0.00	0.00		
	Kitchen Cabinet	1460	6 Units	9,000.00	0.00	0.00		
	Bathroom Upgrade	1460	6 Units	6,000.00	0.00	0.00		
	Install HVAC	1460	6 Units	24,000.00	0.00	0.00		
	Exterior door hardware	1460	6 Units	600.00	0.00	0.00		
	Security screen doors	1460	6 Units	3,000.00	0.00	0.00		
	Replace water heaters	1460	6 Units	1,200.00	0.00	0.00		
	Install gas stoves	1460	6 Units	2,100.00	0.00	0.00		



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

PHA Name: Northwest Florida Regional Housing Authority		Grant Type and Number Capital Fund Program Grant No: FL29P01550103 Replacement Housing Factor Grant No:				Federal FY of Grant: 2003		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	





## CAPITAL FUND PROGRAM TABLES START HERE

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<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:</b> Northwest Florida Regional Housing Authority		<b>Grant Type and Number</b> Capital Fund Program Grant No: FL29P01550203 Replacement Housing Factor Grant No:			<b>Federal FY of Grant:</b> 2003	
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input checked="" type="checkbox"/> Revised Annual Statement (revision no: 2) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 06/30/07 <input type="checkbox"/> Final Performance and Evaluation Report						
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost		
		Original	Revised	Obligated	Expended	
1	Total non-CFP Funds					
2	1406 Operations					
3	1408 Management Improvements	21,526.00	0.00	0.00	0.00	
4	1410 Administration					
5	1411 Audit					
6	1415 Liquidated Damages					
7	1430 Fees and Costs	17,763.00	0.00	0.00	0.00	
8	1440 Site Acquisition					
9	1450 Site Improvement					
10	1460 Dwelling Structures	0.00	107,631.00	107,631.00	82,866.33	
11	1465.1 Dwelling Equipment—Nonexpendable					
12	1470 Nondwelling Structures					
13	1475 Nondwelling Equipment	68,342.00	0.00	0.00	0.00	
14	1485 Demolition					
15	1490 Replacement Reserve					
16	1492 Moving to Work Demonstration					
17	1495.1 Relocation Costs					
18	1499 Development Activities					
19	1501 Collaterization or Debt Service					

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

<b>PHA Name:</b> Northwest Florida Regional Housing Authority	<b>Grant Type and Number</b> Capital Fund Program Grant No: FL29P01550203 Replacement Housing Factor Grant No:	<b>Federal FY of Grant:</b> 2003
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Original Annual Statement  Reserve for Disasters/ Emergencies  Revised Annual Statement (revision no: 2)  
 Performance and Evaluation Report for Period Ending: 06/30/07  Final Performance and Evaluation Report

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
20	1502 Contingency				
21	Amount of Annual Grant: (sum of lines 2 – 20)	107,631.00	107,631.00	107,631.00	82,866.33
22	Amount of line 21 Related to LBP Activities				
23	Amount of line 21 Related to Section 504 compliance				
24	Amount of line 21 Related to Security – Soft Costs				
25	Amount of Line 21 Related to Security – Hard Costs				
26	Amount of line 21 Related to Energy Conservation Measures				

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

PHA Name: Northwest Florida Regional Housing Authority		Grant Type and Number Capital Fund Program Grant No: FL29P01550203 Replacement Housing Factor Grant No:				Federal FY of Grant: 2003		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
PHA WIDE	Software/New Computer System*	1408		21,256.00	0.00	0.00	0.00	
	Consulting Fee/New Comp.System*	1430		17,763.00	0.00	0.00	0.00	
	Computer Equipment & Phone System Upgrade*	1475		68,342.00	0.00	0.00	0.00	
	*Revision to #501-02 to include the above							
15-05A&B/15-16 A&B Bonifay	LBP Abatement/Modernization Phase III (Phase I & II in CFP 501-01 & 501-02)	1460	56 Units	0.00	107,631.00	107,631.00	82,866.33	
	TOTAL			107,631.00	107,631.00	107,631.00	82,866.33	

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

PHA Name: Northwest Florida Regional Housing Authority		Grant Type and Number Capital Fund Program Grant No: FL29P01550203 Replacement Housing Factor Grant No:			Federal FY of Grant: 2003			
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	

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

PHA Name: Northwest Florida Regional Housing Authority		Grant Type and Number Capital Fund Program No: FL29P01550203 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	
PHA WIDE	02/12/06			02/12/08			







# Capital Fund Program Five-Year Action Plan

## Part I: Summary

**FL015/5YRv04**

PHA Name Northwest Florida Regional Housing Authority					<input type="checkbox"/> Original 5-Year Plan <input checked="" type="checkbox"/> Revision No: 2
Development Number/Name/HA- Wide	Year 1 <b>2008</b>	Work Statement for Year 2 FFY Grant: <b>FL29P015501-09</b> PHA FY: <b>2009</b>	Work Statement for Year 3 FFY Grant: <b>FL29P015501-10</b> PHA FY: <b>2010</b>	Work Statement for Year 4 FFY Grant: <b>FL29P015501-11</b> PHA FY: <b>2011</b>	Work Statement for Year 5 FFY Grant: <b>FL29P015501-12</b> PHA FY: <b>2012</b>
	Annual Statement				
OPERATIONS		118,000.00	91,000.00	58,000.00	80,000.00
ADMINISTRATION		59,600.00	99,000.00	59,500.00	60,000.00
A&E FEES		60,000.00	60,000.00	60,000.00	60,000.00
DWELLING EQUIP				9,487.00	
NON-DWELLING EQUIP		31,961.00		40,000.00	30,000.00
RELOCATION COSTS			23,132.00		
FL15-1 Graceville		127,800.00	72,000.00	256,124.00	
FL15-2 Cottondale		40,000.00	2,000.00		
CFP Funds Listed for 5-year planning					
Replacement Housing Factor Funds					

# Capital Fund Program Five-Year Action Plan

## Part I: Summary

PHA Name Northwest Florida Regional Housing Authority		<input type="checkbox"/> Original 5-Year Plan <input checked="" type="checkbox"/> Revision No: 2			
Development Number/Name/HA- Wide	Year 1 <b>2008</b>	Work Statement for Year 2 FFY Grant: <b>FL29P015501-09</b> PHA FY: <b>2009</b>	Work Statement for Year 3 FFY Grant: <b>FL29P015501-10</b> PHA FY: <b>2010</b>	Work Statement for Year 4 FFY Grant: <b>FL29P015501-11</b> PHA FY: <b>2011</b>	Work Statement for Year 5 FFY Grant: <b>FL29P015501-12</b> PHA FY: <b>2012</b>
	Annual Statement				
FL15-03 Malone			81,300.00		
FL15-04 Sneads					
FL15-05 Bonifay					
FL15-06 Cross City			81,879.00		65,000.00
FL15-07 Jasper					116,711.00
FL15-09 Blountstown		45,800.00		98,600.00	200,000.00
FL15-10 Havana					
FL15-11 Graceville		8,000.00	17,400.00		
FL15-12 Carrabelle					
CFP Funds Listed for 5-year planning					
Replacement Housing Factor Funds					

# Capital Fund Program Five-Year Action Plan

## Part I: Summary

PHA Name Northwest Florida Regional Housing Authority		<input type="checkbox"/> Original 5-Year Plan <input checked="" type="checkbox"/> Revision No: 2			
Development Number/Name/HA- Wide	Year 1 2008	Work Statement for Year 2 FFY Grant: <b>FL29P015501-09</b> PHA FY: <b>2009</b>	Work Statement for Year 3 FFY Grant: <b>FL29P015501-10</b> PHA FY: <b>2010</b>	Work Statement for Year 4 FFY Grant: <b>FL29P015501-11</b> PHA FY: <b>2011</b>	Work Statement for Year 5 FFY Grant: <b>FL29P015501-12</b> PHA FY: <b>2012</b>
	Annual Statement				
FL15-13 Wewahitchka					
FL15-14 Bristol					
FL15-16 Bonifay				30,000.00	
FL15-18 Jasper		120,550.00	84,000.00		
CFP Fund, Listed for 5-year planning		\$611,711.00	\$611,711.00	\$611,711.00	\$611,711.00
Replacement Housing Factor Funds					







**3-III.F. PROHIBITION AGAINST DENIAL OF ASSISTANCE TO VICTIMS OF DOMESTIC VIOLENCE, DATING VIOLENCE, AND STALKING [Pub.L. 109-162]**

The Violence against Women Reauthorization Act of 2005 (VAWA) prohibits denial of admission to an otherwise qualified applicant on the basis that the applicant is or has been a victim of domestic violence, dating violence, or stalking. Specifically, Section 607(2) of VAWA adds the following provision to Section 6 of the U.S. Housing Act of 1937, which lists contract provisions and requirements for the public housing program:

Every contract for contributions shall provide that . . . the public housing agency shall not deny admission to the project to any applicant on the basis that the applicant is or has been a victim of domestic violence, dating violence, or stalking if the applicant otherwise qualifies for assistance or admission, and that nothing in this section shall be construed to supersede any provision of any Federal, State, or local law that provides greater protection than this section for victims of domestic violence, dating violence, or stalking.

**Definitions**

As used in VAWA:

- The term *domestic violence* includes felony or misdemeanor crimes of violence committed by a current or former spouse of the victim, by a person with whom the victim shares a child in common, by a person who is cohabitating with or has cohabitated with the victim as a spouse, by a person similarly situated to a spouse of the victim under the domestic or family violence laws of the jurisdiction receiving grant monies, or by any other person against an adult or youth victim who is protected from that person's acts under the domestic or family violence laws of the jurisdiction.
- The term *dating violence* means violence committed by a person who is or has been in a social relationship of a romantic or intimate nature with the victim; and where the existence of such a relationship shall be determined based on a consideration of the following factors:
  - The length of the relationship
  - The type of relationship
  - The frequency of interaction between the persons involved in the relationship
- The term *stalking* means:
  - To follow, pursue, or repeatedly commit acts with the intent to kill, injure, harass, or intimidate; or
  - To place under surveillance with the intent to kill, injure, harass, or intimidate another person; and
  - In the course of, or as a result of, such following, pursuit, surveillance, or repeatedly committed acts, to place a person in reasonable fear of the death of, or

serious bodily injury to, or to cause substantial emotional harm to (1) that person, (2) a member of the immediate family of that person, or (3) the spouse or intimate partner of that person.

- The term *immediate family member* means, with respect to a person –
  - A spouse, parent, brother or sister, or child of that person, or an individual to whom that person stands in the position or place of a parent; or
  - Any other person living in the household of that person and related to that person by blood and marriage.

### **Notification and Victim Documentation**

The NWFRHA acknowledges that a victim of domestic violence, dating violence, or stalking may have an unfavorable history that would warrant denial under the NWFRHA's policies. Therefore, if the NWFRHA makes a determination to deny admission to an applicant family on the basis of an unfavorable history, the NWFRHA will include in its notice of denial a statement of the protection against denial provided by VAWA and will offer the applicant the opportunity to provide documentation affirming that the cause of the unfavorable history is that a member of the applicant family is or has been a victim of domestic violence, dating violence, or stalking.

The documentation must include two elements:

- A signed statement by the victim that provides the name of the perpetrator and certifies that the incidents in question are bona fide incidents of actual or threatened domestic violence, dating violence, or stalking
- One of the following:
  - A police or court record documenting the actual or threatened abuse
  - A statement signed by an employee, agent, or volunteer of a victim service provider; an attorney; a medical professional; or another knowledgeable professional from whom the victim has sought assistance in addressing the actual or threatened abuse. The professional must attest under penalty of perjury that the incidents in question are bona fide incidents of abuse, and the victim must sign or attest to the statement.

The applicant must submit the required documentation with her or his request for an informal hearing (see section 14-I.B) or must request an extension in writing at that time. If the applicant so requests, the NWFRHA will grant an extension of 10 business days, and will postpone scheduling the applicant's informal hearing until after it has received the documentation or the extension period has elapsed. If after reviewing the documentation provided by the applicant the NWFRHA determines the family is eligible for assistance, no informal hearing will be scheduled and the NWFRHA will proceed with admission of the applicant family.

### **Perpetrator Removal or Documentation of Rehabilitation**

In cases where an applicant family includes the perpetrator as well as the victim of domestic violence, dating violence, or stalking, the NWRHA will proceed as above but will require, in addition, either (a) that the perpetrator be removed from the applicant household and not reside in the public housing unit or (b) that the family provide documentation that the perpetrator has successfully completed, or is successfully undergoing, rehabilitation or treatment.

If the family elects the second option, the documentation must be signed by an employee or agent of a domestic violence service provider or by a medical or other knowledgeable professional from whom the perpetrator has sought or is receiving assistance in addressing the abuse. The signer must attest under penalty of perjury to his or her belief that the rehabilitation was successfully completed or is progressing successfully. The victim and perpetrator must also sign or attest to the documentation.

This additional documentation must be submitted within the same time frame as the documentation required above from the victim.

### **NWRHA Confidentiality Requirements**

All information provided to the NWRHA regarding domestic violence, dating violence, or stalking, including the fact that an individual is a victim of such violence or stalking, must be retained in confidence and may neither be entered into any shared database nor provided to any related entity, except to the extent that the disclosure (a) is requested or consented to by the individual in writing, (b) is required for use in an eviction proceeding, or (c) is otherwise required by applicable law.

### **3-III.G. NOTICE OF ELIGIBILITY OR DENIAL**

The NWRHA will notify an applicant family of its final determination of eligibility in accordance with the policies in Section 4-III.E.

If the NWRHA uses a criminal record or sex offender registration information obtained under 24 CFR 5, Subpart J, as the basis of a denial, a copy of the record must precede the notice to deny, with an opportunity for the applicant to dispute the accuracy and relevance of the information before the NWRHA can move to deny the application. In addition, a copy of the record must be provided to the subject of the record [24 CFR 5.903(f) and 5.905(d)].

If, based on a criminal record or sex offender registration information an applicant family appears to be ineligible, the NWRHA will notify the family in writing of the proposed denial and provide a copy of the record to the applicant and to the subject of the record. The family will be given 10 business days to dispute the accuracy and relevance of the information. If the family does not contact the NWRHA to dispute the information within that 10 day period, the NWRHA will proceed with issuing the notice of denial of admission. A family that does not exercise their right to dispute the accuracy of the information prior to issuance of the official denial letter will still be given the opportunity to do so as part of the informal hearing process.

Notice requirements related to denying admission to noncitizens are contained in Section 3-II.B.

Notice policies related to denying admission to applicants who may be victims of domestic violence, dating violence, or stalking are contained in Section 3-III.F.