

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

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**PORT CHESTER**  
**HOUSING AUTHORITY**  
PORT CHESTER NEW YORK

**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:** Port Chester Housing Authority    **PHA Number:** NY014

**PHA Fiscal Year Beginning: (mm/yyyy)** 04/2008

**PHA Programs Administered:**

**Public Housing and Section 8**     **Section 8 Only**     **Public Housing Only**  
 Number of public housing units:                      Number of S8 units:                      Number of public housing units: 347  
 Number of S8 units:

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

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

### Public Access to Information

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

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

### Display Locations For PHA Plans and Supporting Documents

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

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

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

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

**5-YEAR PLAN**  
**PHA FISCAL YEARS 2005 - 2009**  
[24 CFR Part 903.5]

**A. Mission**

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

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

**B. Goals**

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

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

- PHA Goal: Expand the supply of assisted housing  
Objectives:
- Apply for additional rental vouchers:
  - Reduce public housing vacancies:
  - Leverage private or other public funds to create additional housing opportunities:
  - Acquire or build units or developments
  - Other (list below)  
*The PHA will work with Village Government to further promote decent, safe and affordable housing*
- PHA Goal: Improve the quality of assisted housing  
Objectives:
- Improve public housing management: (PHAS score)  
*Yearly, over next 5 years*
  - Improve voucher management: (SEMAP score)
  - Increase customer satisfaction:
  - Concentrate on efforts to improve specific management functions: (list; e.g., public housing finance; voucher unit inspections)

- Renovate or modernize public housing units:
- Demolish or dispose of obsolete public housing:
- Provide replacement public housing:
- Provide replacement vouchers:
- Other: (list below)

- PHA Goal: Increase assisted housing choices

Objectives:

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

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

- PHA Goal: Provide an improved living environment

Objectives:

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

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

- PHA Goal: Promote self-sufficiency and asset development of assisted households

Objectives:

- Increase the number and percentage of employed persons in assisted families:
- Provide or attract supportive services to improve assistance recipients' employability:

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

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

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

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

**Annual PHA Plan  
PHA Fiscal Year 2008**

[24 CFR Part 903.7]

**i. Annual Plan Type:**

Select which type of Annual Plan the PHA will submit.

**Standard Plan**

**Troubled Agency Plan**

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

[24 CFR Part 903.7 9 (r)]

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

The Port Chester Housing Authority has prepared this Annual PHA Plan in compliance with Section 511 of the Quality Housing and Work and Work Responsibility Act of 1998 and the ensuing HUD requirements.

The purpose of this Annual Plan is to provide a framework for local accountability and easily identifiable source by which housing residents, participants in the tenant-based assistance program and other members of the public may locate basic PHA policies, rules and requirements related to the operations, programs and services of the agency.

The Mission Statement and the Goals and Objectives were based on information contained in our jurisdiction's Consolidated Plan and will ensure that our residents will receive the best customer service.

Excellent customer service and fulfillment of the Mission Statement and Goals and Objectives is ensured by implementation of a series of policies that are on display with this Plan. The Admissions and Occupancy Policy and Section 8 Administrative Plan are the two primary policies on display. These important documents cover the public housing tenant selection and assignment plan, outreach services, grievance procedures, etc.

The most important challenges to be met by the Port Chester Housing Authority during FY 2008 include:

*Improvement of the physical conditions of the housing developments through the use of Capital Funds*

### **iii. Annual Plan Table of Contents**

[24 CFR Part 903.7 9 (r)]

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

#### **Table of Contents**

	<u>Page #</u>
<b>Annual Plan</b>	
i. Executive Summary	4
ii. Table of Contents	6
1. Housing Needs	9
2. Financial Resources	15
3. Policies on Eligibility, Selection and Admissions	16
4. Rent Determination Policies	25
5. Operations and Management Policies	29
6. Grievance Procedures	30
7. Capital Improvement Needs	31
8. Demolition and Disposition	33
9. Designation of Housing	34
10. Conversion of Public Housing to Tenant-Based Assistance	35
11. Homeownership	36
12. Community Service Programs	38
13. Crime and Safety	41
14. Pets	42
15. Civil Rights Certifications (included with PHA Plan Certifications)	43
16. Audit	43
17. Asset Management	43
18. Other Information	44

#### **Attachments**

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

#### Required Attachments:

- Admissions Policy for Deconcentration
- FY 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)

- ny014a01 Capital Fund Program Annual Statement
- ny014b01 5 Year Action Plan
- ny014c01 P&E Report FY2004 (ny36P014501-04)
- ny014d01 P&E Report FY2005 (ny36P014501-05)
- ny014fe01 P&E Report FY2006 (ny36P014501-06)
- ny014f01 P&E Report FY2007 (ny36P014501-07)
- ny014g01 Organization Chart
- ny014h01 Resident Advisory Board
- ny014i01 Statement of Progress of Agency's goals
- ny014j01 Pet Ownership Policy
- ny014k01 Community Service Policy

### 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
	Section 8 Administrative Plan	Annual Plan: Eligibility, Selection, and Admissions Policies
X	Public Housing Deconcentration and Income Mixing	Annual Plan: Eligibility,

<b>List of Supporting Documents Available for Review</b>		
<b>Applicable &amp; On Display</b>	<b>Supporting Document</b>	<b>Applicable Plan Component</b>
	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	Selection, and Admissions Policies
X	Public housing rent determination policies, including the methodology for setting public housing flat rents <input checked="" type="checkbox"/> check here if included in the public housing A & O Policy	Annual Plan: Rent Determination
X	Schedule of flat rents offered at each public housing development <input checked="" type="checkbox"/> check here if included in the public housing A & O Policy	Annual Plan: Rent Determination
	Section 8 rent determination (payment standard) policies <input type="checkbox"/> check here if included in Section 8 Administrative Plan	Annual Plan: Rent Determination
X	Public housing management and maintenance policy documents, including policies for the prevention or eradication of pest infestation (including cockroach infestation)	Annual Plan: Operations and Maintenance
X	Public housing grievance procedures <input checked="" type="checkbox"/> check here if included in the public housing A & O Policy	Annual Plan: Grievance Procedures
	Section 8 informal review and hearing procedures <input type="checkbox"/> check here if included in Section 8 Administrative Plan	Annual Plan: Grievance Procedures
X	The HUD-approved Capital Fund/Comprehensive Grant Program Annual Statement (HUD 52837) for the active grant year	Annual Plan: Capital Needs
X	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

<b>List of Supporting Documents Available for Review</b>		
<b>Applicable &amp; On Display</b>	<b>Supporting Document</b>	<b>Applicable Plan Component</b>
	Approved or submitted public housing homeownership programs/plans	Annual Plan: Homeownership
	Policies governing any Section 8 Homeownership program <input type="checkbox"/> check here if included in the Section 8 Administrative Plan	Annual Plan: Homeownership
	Any cooperative agreement between the PHA and the TANF agency	Annual Plan: Community Service & Self-Sufficiency
	FSS Action Plan/s for public housing and/or Section 8	Annual Plan: Community Service & Self-Sufficiency
	Most recent self-sufficiency (ED/SS, TOP or ROSS or other resident services grant) grant program reports	Annual Plan: Community Service & Self-Sufficiency
	The most recent Public Housing Drug Elimination Program (PHDEP) semi-annual performance report for any open grant and most recently submitted PHDEP application (PHDEP Plan)	Annual Plan: Safety and Crime Prevention
X	The most recent fiscal year audit of the PHA conducted under section 5(h)(2) of the U.S. Housing Act of 1937 (42 U.S.C. 1437c(h)), the results of that audit and the PHA's response to any findings	Annual Plan: Annual Audit
	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	1,649	5	5	4	4	4	4
Income >30% but <=50% of AMI	1,187	5	5	4	5	4	4
Income >50% but	617	5	5	4	5	4	4

<b>Housing Needs of Families in the Jurisdiction by Family Type</b>							
Family Type	Overall	Afford- ability	Supply	Quality	Access- ibility	Size	Loca- tion
<80% of AMI							
Elderly	984	5	5	4	4	4	4
Families with Disabilities	810	5	5	4	4	4	4
White-non Hisp.	2,060	5	5	4	4	4	4
Black non-Hisp.	570	5	5	4	4	4	4
Native American Non-Hispanic	0						
Pacific Islander Non-Hispanic	4	5	5	4	4	4	4
Asian – Non- Hisp.	74	5	5	4	4	4	4
Hispanic	2,488	5	5	4	4	4	4

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

- Consolidated Plan of the Jurisdiction/s  
Indicate year: 1995
- U.S. Census data: the Comprehensive Housing Affordability Strategy (“CHAS”) dataset
- American Housing Survey data  
Indicate year:
- Other housing market study  
Indicate year:
- Other sources: (list and indicate year of information)

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

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

<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 (Family units)			
<input type="checkbox"/> Combined Section 8 and Public Housing			
<input type="checkbox"/> Public Housing Site-Based or sub-jurisdictional waiting list (optional)			
If used, identify which development/subjurisdiction:			
	# of families	% of total families	Annual Turnover
Waiting list total	242		35
Extremely low income <=30% AMI	195	80	
Very low income (>30% but <=50% AMI)	3	1.23	
Low income (>50% but <80% AMI)	6	2.47	
Families with children	50	20.66	
Elderly families	80	33	
Families with Disabilities	13	5.37	
Black Non-Hisp.	102	42.14	
Hispanic	97	40.08	
White Non-Hisp.	36	14.87	
Asian Non-Hisp.	7	2.89	
Native American. Non-Hisp.	0	0	
Pacific Islander Non-Hisp	0	0	
Characteristics by Bedroom Size (Public Housing Only)			
1BR	95	39.25	10
2 BR	71	29.33	12
3 BR	13	5.37	6
4 BR	4	1.65	1
0 BR	59	24.38	6
5+ BR	N/A	N/A	N/A

**Table Library**

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

**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	885,213.00	
b) Public Housing Capital Fund	586,032.00	
c) HOPE VI Revitalization		
d) HOPE VI Demolition		
e) Annual Contributions for Section 8 Tenant-Based Assistance		
f) Public Housing Drug Elimination Program (including any Technical Assistance funds)		
g) Resident Opportunity and Self-Sufficiency Grants		
h) Community Development Block Grant		
i) HOME		
Other Federal Grants (list below)		
<b>2. Prior Year Federal Grants (unobligated funds only) (list below)</b>		
CFP NY36P014501-07	586,032.00	
CFP NY36P014501-06	261,082.91	
CFP NY36P014501-05	3,395.64	
<b>Subtotal</b>	<b>2,321,755.55</b>	
<b>3. Public Housing Dwelling Rental Income</b>	1,524,248.00	

<b>Financial Resources: Planned Sources and Uses</b>		
<b>Sources</b>	<b>Planned \$</b>	<b>Planned Uses</b>
<b>4. Other income</b> (list below)		
Interest	9,000	
Excess utilities	10,000	
Other income (non-for-profit)	40,000	
<b>5. Non-federal sources</b> (list below)		
Antenas	75,000	
<b>Total resources</b>	<b>3,980,333.55.00</b>	

### **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)  
(*Within 3, per unit size*)
- When families are within a certain time of being offered a unit: (state time)
- Other: (describe)

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

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

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

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

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

**(2)Waiting List Organization**

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

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

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

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

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

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

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

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

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

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

**(3) Assignment**

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

- One
- Two
- Three or More

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

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

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

a. Income targeting:

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

b. Transfer policies:

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

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

c. Preferences

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

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

Former Federal preferences:

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

Other preferences: (select below)

- Working families and those unable to work because of age or disability

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

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

#### 1 Date and Time

Former Federal preferences:

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

Other preferences (select all that apply)

- 1 Working families and those unable to work because of age or disability
- Veterans and veterans' families
- 1 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
- Within 10 days of occurrence

**(6) Deconcentration and Income Mixing**

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

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

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

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

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

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

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

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

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

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

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

## **B. Section 8**

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

### **(1) Eligibility**

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

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

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

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

- d.  Yes  No: Does the PHA access FBI criminal records from the FBI for screening purposes? (either directly or through an NCIC-authorized source)
- e. Indicate what kinds of information you share with prospective landlords? (select all that apply)
- Resident mailing address
- Current and Prior landlords name and mailing address.

**(2) Waiting List Organization**

- a. With which of the following program waiting lists is the section 8 tenant-based assistance waiting list merged? (select all that apply)
- None
- Federal public housing
- Federal moderate rehabilitation
- Federal project-based certificate program
- Other federal or local program (list below)
- b. Where may interested persons apply for admission to section 8 tenant-based assistance? (select all that apply)
- PHA main administrative office
- Other (list below)

**(3) Search Time**

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

If yes, state circumstances below:

**(4) Admissions Preferences**

- a. Income targeting
- Yes  No: Does the PHA plan to exceed the federal targeting requirements by targeting more than 75% of all new admissions to the section 8 program to families at or below 30% of median area income?
- b. Preferences
1.  Yes  No: Has the PHA established preferences for admission to section 8 tenant-based assistance? (other than date and time of application) (if no, skip to subcomponent **(5) Special purpose section 8 assistance programs**)

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

Former Federal preferences

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

Other preferences (select all that apply)

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

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

Date and Time

Former Federal preferences

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

Other preferences (select all that apply)

- Working families and those unable to work because of age or disability
- Veterans and veterans' families
- Residents who live and/or work in your jurisdiction

- Those enrolled currently in educational, training, or upward mobility programs
- Households that contribute to meeting income goals (broad range of incomes)
- Households that contribute to meeting income requirements (targeting)
- Those previously enrolled in educational, training, or upward mobility programs
- Victims of reprisals or hate crimes
- Other preference(s) (list below)

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

- Date and time of application
- Drawing (lottery) or other random choice technique

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

- This preference has previously been reviewed and approved by HUD
- The PHA requests approval for this preference through this PHA Plan

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

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

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

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

- The Section 8 Administrative Plan
- Briefing sessions and written materials
- Other (list below)

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

- Through published notices
- Other (list below)

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

[24 CFR Part 903.7 9 (d)]

## A. Public Housing

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

### (1) Income Based Rent Policies

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

a. Use of discretionary policies: (select one)

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

---or---

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

b. Minimum Rent

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

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

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

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

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

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

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

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

For the earned income of a previously unemployed household member

For increases in earned income

Fixed amount (other than general rent -setting policy)

If yes, state amount/s and circumstances below:

Fixed percentage (other than general rent-setting policy)

If yes, state percentage/s and circumstances below:

For household heads

For other family members

For transportation expenses

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

The Port Chester Housing Authority does not plan to implement any deductions and/or exclusions

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)\_\_\_\_\_
- Within 10 days of occurrence

- 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)

- *Fair Market Rents*

**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. (ny014c01)
- A brief description of the management structure and organization of the PHA follows:

**B. HUD Programs Under PHA Management**

List Federal programs administered by the PHA, number of families served at the beginning of the upcoming fiscal year, and expected turnover in each. (Use “NA” to indicate that the PHA does not operate any of the programs listed below.)

<b>Program Name</b>	<b>Units or Families Served at Year Beginning</b>	<b>Expected Turnover</b>
Public Housing	347	10%
Section 8 Vouchers		
Section 8 Certificates		
Section 8 Mod Rehab		
Special Purpose Section 8 Certificates/Vouchers (list individually)		
Public Housing Drug Elimination Program (PHDEP)		
Other Federal Programs(list individually)		

### **C. Management and Maintenance Policies**

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

(1) Public Housing Maintenance and Management: (list below)

- *ACOPS*
- *Maintenance Policy*

### **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) ny014a01

-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) ny014b01

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**

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

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

**A. Public Housing**

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

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

2. Activity Description

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

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

## B. Section 8 Tenant Based Assistance

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

### 2. Program Description:

#### a. Size of Program

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

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

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

#### b. PHA-established eligibility criteria

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

If yes, list criteria below:

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

[24 CFR Part 903.7 9 (l)]

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

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

#### 1. Cooperative agreements:

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

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

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

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

**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	Access (development office / PHA main office /	Eligibility (public housing or section 8

**Table Library**

		list/random selection/specific criteria/other)	other provider name)	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 2000 Estimate)	Actual Number of Participants (As of: DD/MM/YY)
Public Housing		
Section 8		

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

**C. Welfare Benefit Reductions**

1. The PHA is complying with the statutory requirements of section 12(d) of the U.S. Housing Act of 1937 (relating to the treatment of income changes resulting from welfare program requirements) by: (select all that apply)
- Adopting appropriate changes to the PHA’s public housing rent determination policies and train staff to carry out those policies
  - Informing residents of new policy on admission and reexamination
  - Actively notifying residents of new policy at times in addition to admission and reexamination.
  - Establishing or pursuing a cooperative agreement with all appropriate TANF agencies regarding the exchange of information and coordination of services

- Establishing a protocol for exchange of information with all appropriate TANF agencies
- Other: (list below)

**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)

-Meeting with residents and community leaders to seek answers to this problem.

-Meetings with police staff to coordinate more active participation from police

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

NY141

**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 2000 PHDEP funds must provide a PHDEP Plan meeting specified requirements prior to receipt of PHDEP funds.

- Yes  No: Is the PHA eligible to participate in the PHDEP in the fiscal year covered by this PHA Plan?
- Yes  No: Has the PHA included the PHDEP Plan for FY 2000 in this PHA Plan?
- Yes  No: This PHDEP Plan is an Attachment. (Attachment Filename: ny014a03)

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

[24 CFR Part 903.7 9 (n)]

## **15. Civil Rights Certifications**

[24 CFR Part 903.7 9 (o)]

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

## **16. Fiscal Audit**

[24 CFR Part 903.7 9 (p)]

1.  Yes  No: Is the PHA required to have an audit conducted under section 5(h)(2) of the U.S. Housing Act of 1937 (42 U.S.C. 1437c(h))?  
(If no, skip to component 17.)
2.  Yes  No: Was the most recent fiscal audit submitted to HUD?
3.  Yes  No: Were there any findings as the result of that audit?
4.  Yes  No: If there were any findings, do any remain unresolved?  
If yes, how many unresolved findings remain? \_\_\_\_\_
5.  Yes  No: Have responses to any unresolved findings been submitted to HUD?  
If not, when are they due (state below)?

## **17. PHA Asset Management**

[24 CFR Part 903.7 9 (q)]

Exemptions from component 17: Section 8 Only PHAs are not required to complete this component. High performing and small PHAs are not required to complete this component.

1.  Yes  No: Is the PHA engaging in any activities that will contribute to the long-term asset management of its public housing stock, including how the Agency will plan for long-term operating, capital investment, rehabilitation, modernization, disposition, and other needs that have **not** been addressed elsewhere in this PHA Plan?

2. What types of asset management activities will the PHA undertake? (select all that apply)

- Not applicable
- Private management
- Development-based accounting
- Comprehensive stock assessment
- Other: (list below)

- The housing authority has been attending conference and training sessions regarding Project Based accounting and Project Based Management.
- Held strategy meetings with Fee Accountant to plan for Project based Accounting.
- The Housing Authority is waiting for further guidance from HUD (PBM Guidebooks)

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 (Must present a petition signed by 25 eligible residents)
- Other: (describe)

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

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

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

- All adult recipients of PHA assistance (public housing and section 8 tenant-based assistance)
- Representatives of all PHA resident and assisted family organizations
- Other (list)
  - Residents of Public Housing, 18 years or older

### 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: **Westchester County**
2. The PHA has taken the following steps to ensure consistency of this PHA Plan with the Consolidated Plan for the jurisdiction: (select all that apply)
  - The PHA has based its statement of needs of families in the jurisdiction on the needs expressed in the Consolidated Plan/s.
  - The PHA has participated in any consultation process organized and offered by the Consolidated Plan agency in the development of the Consolidated Plan.

- The PHA has consulted with the Consolidated Plan agency during the development of this PHA Plan.
- Activities to be undertaken by the PHA in the coming year are consistent with the initiatives contained in the Consolidated Plan. (list below)
- Other: (list below)

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

**D. Other Information Required by HUD**

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

## **Attachments**

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

**PHA Plan  
Table Library**

**sComponent 7**

**Capital Fund Program Annual Statement  
Parts I, II, and II**

**Annual Statement**

**Capital Fund Program (CFP) Part I: Summary**

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

Original Annual Statement

Line No.	Summary by Development Account	Total Estimated Cost
1	Total Non-CGP Funds	
2	1406 Operations	
3	1408 Management Improvements	
4	1410 Administration	
5	1411 Audit	
6	1415 Liquidated Damages	
7	1430 Fees and Costs	
8	1440 Site Acquisition	
9	1450 Site Improvement	
10	1460 Dwelling Structures	
11	1465.1 Dwelling Equipment-Nonexpendable	
12	1470 Nondwelling Structures	
13	1475 Nondwelling Equipment	
14	1485 Demolition	
15	1490 Replacement Reserve	
16	1492 Moving to Work Demonstration	
17	1495.1 Relocation Costs	
18	1498 Mod Used for Development	
19	1502 Contingency	
20	<b>Amount of Annual Grant (Sum of lines 2-19)</b>	
21	Amount of line 20 Related to LBP Activities	
22	Amount of line 20 Related to Section 504 Compliance	
23	Amount of line 20 Related to Security	
24	Amount of line 20 Related to Energy Conservation Measures	

**Annual Statement  
Capital Fund Program (CFP) Part II: Supporting Table**

Development Number/Name HA-Wide Activities	General Description of Major Work Categories	Development Account Number	Total Estimated Cost

Development Number/Name HA-Wide Activities		All Funds Expended (Quarter Ending Date)

### Optional Table for 5-Year Action Plan for Capital Fund (Component 7)

Complete one table for each development in which work is planned in the next 5 PHA fiscal years. Complete a table for any PHA-wide physical or management improvements planned in the next 5 PHA fiscal year. Copy this table as many times as necessary. Note: PHAs need not include information from Year One of the 5-Year cycle, because this information is included in the Capital Fund Program Annual Statement.

Optional 5-Year Action Plan Tables				
Development Number	Development Name (or indicate PHA wide)	Number Vacant Units	% Vacancies in Development	
Description of Needed Physical Improvements or Management Improvements			Estimated Cost	Planned Start Date (HA Fiscal Year)
<b>Total estimated cost over next 5 years</b>				



## CAPITAL FUND PROGRAM TABLES START HERE

### Annual Statement /Performance and Evaluation Report

4/29/2008

### Capital Funds Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary

PHA Name: <p style="text-align: center;"><b>PORT CHESTER HOUSING AUTHORITY</b></p>	Grant Type and Number: Capital Fund Program No: <span style="float: right;"><b>NY36PO14501-08</b></span> Replacement Housing Factor Grant No:	Federal FY of Grant: <p style="text-align: center;"><b>2008</b></p> <p style="text-align: center;"><b>586,032</b></p>
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- Original Annual Statement   
  Reserved for Disasters/Emergencies   
  Revised Annual Statement/Revision Number \_\_\_\_\_  
 Performance and Evaluation Report for Program Year Ending **9/30/07**   
  Final Performance and Evaluation Report for Program Year Ending \_\_\_\_\_

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total Non-Capital Funds				
2	1406 Operating Expenses	117,206.00	0.00	0.00	0.00
3	1408 Management Improvements	60,000.00	0.00	0.00	0.00
4	1410 Administration	20,000.00	0.00	0.00	0.00
5	1411 Audit	0.00	0.00	0.00	0.00
6	1415 Liquidated Damages	0.00	0.00	0.00	0.00
7	1430 Fees and Costs	32,500.00	0.00	0.00	0.00
8	1440 Site Acquisition	0.00	0.00	0.00	0.00
9	1450 Site Improvement	15,000.00	0.00	0.00	0.00
10	1460 Dwelling Structures	330,326.00	0.00	0.00	0.00
11	1465.1 Dwelling Equipment-Nonexpendable	6,000.00	0.00	0.00	0.00
12	1470 Nondwelling Structures	0.00	0.00	0.00	0.00
13	1475 Nondwelling Equipment	5,000.00	0.00	0.00	0.00
14	1485 Demolition	0.00	0.00	0.00	0.00
15	1490 Replacement Reserve	0.00	0.00	0.00	0.00
16	1492 Moving to Work Demonstration	0.00	0.00	0.00	0.00
17	1495.1 Relocation Costs	0.00	0.00	0.00	0.00
18	1499 Development Activities	0.00	0.00	0.00	0.00
19	1501 Collateralization or Debt Service	0.00	0.00	0.00	0.00
20	1502 Contingency (Limited to 8% of total grant)	0.00	0.00	0.00	0.00
21	<b>Amount of Annual Grant (sums of lines 2-20)</b>	<b>\$586,032.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>
22	Amount of line 21 Related to LBP Activities	0.00	0.00	0.00	0.00
23	Amount of Line 21 Related to Section 504 Compliance	0.00	0.00	0.00	0.00
24	Amount of Line 21 Related to Security - Soft Costs	0.00	0.00	0.00	0.00
25	Amount of Line 21 Related to Security - Hard Costs	0.00	0.00	0.00	0.00
26	Amount of Line 21 Related to Energy Conservation Measures	0.00	0.00	0.00	0.00

**Annual Statement/Performance and Evaluation Report**

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

4/29/2008

**Part II: Supporting Pages**

PHA Name: <b>PORT CHESTER HOUSING AUTHORITY</b>		Grant Type and Number: Capital Fund Program No: <b>NY36PO14501-08</b> Replacement Housing Factor Grant No:				Federal FY of Grant: <b>2008</b>		
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	<b>Operations</b>	1406		117,206.00	0.00	0.00	0.00	
	<b>Total 1406</b>			<b>117,206.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	
	<b>Management Improvements</b>	1408						
	Modernization Coordinator			60,000.00	0.00	0.00	0.00	
	<b>Total 1408</b>			<b>60,000.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	
	<b>Administration:</b>	1410						
	Prorated salaries			20,000.00	0.00	0.00	0.00	
	<b>Total 1410</b>			<b>20,000.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	
	<b>Fees and Costs:</b>	1430						
	A/E Services			30,000.00	0.00	0.00	0.00	
	Advertisement/Printing			1,000.00	0.00	0.00	0.00	
	Pic Monitor			1,500.00	0.00	0.00	0.00	
	<b>Total 1430</b>			<b>32,500.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	
	<b>Site Improvements</b>	1450						
	Resurface Parking Lot			15,000.00	0.00	0.00	0.00	
	<b>Total 1430</b>			<b>15,000.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	
	<b>Dwelling Structures:</b>	1460						
NY014-02	Boiler Improvements			100,000.00	0.00	0.00	0.00	
NY014-01	Boiler Improvements			62,000.00	0.00	0.00	0.00	
NY14-03	Boiler Improvements			81,326.00	0.00	0.00	0.00	
NY14-02	CCTV			17,000.00	0.00	0.00	0.00	
NY14-02	Lobby Improvements			20,000.00	0.00	0.00	0.00	
NY14-01	Exterior Doors			25,000.00	0.00	0.00	0.00	
NY14-3	Key Replacement Program			15,000.00	0.00	0.00	0.00	
NY14-3	Flooring Replacement			10,000.00	0.00	0.00	0.00	
	<b>Total 1460</b>			<b>330,326.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	
				<b>575,032.00</b>				





# Capital Fund Program Five-Year Action Plan

## Part I: Summary

4/29/2008

HA Name:		<input checked="" type="checkbox"/> Original <input type="checkbox"/> Revision No. _____				
Freeport Housing Authority		Year 1	Work Statement for Year 2	Work Statement for Year 3	Work Statement for Year 4	Work Statement for Year 5
Development Number/Name/HA-Wide	2008	FFY Grant: 2009 PHA FY: 2009	FFY Grant: 2010 PHA FY: 2010	FFY Grant: 2011 PHA FY: 2011	FFY Grant: 2012 PHA FY: 2012	
NY50-000101	Annual	65,000.00	50,000.00	88,636.00	200,000.00	
NY50-002001	Statement	204,636.00	203,636.00	180,000.00	69,000.00	
<b>Total Physical Improvements:</b>		<b>\$269,636.00</b>	<b>\$253,636.00</b>	<b>\$268,636.00</b>	<b>\$269,000.00</b>	
Operations		124,600.00	124,600.00	124,600.00	124,600.00	
Management Improvements		59,000.00	59,000.00	59,000.00	59,000.00	
Administration		62,000.00	62,000.00	62,000.00	62,000.00	
Fees & Costs		83,000.00	84,000.00	84,000.00	84,000.00	
Site Improvement		15,000.00	5,000.00	15,000.00	8,000.00	
Dwelling Structure		254,636.00	248,636.00	253,636.00	261,000.00	
Dwelling Equipment		15,000.00	15,000.00	15,000.00	15,000.00	
Non-Dwelling Equipment		10,000.00	25,000.00	10,000.00	9,636.00	
<b>Total HA - Wide:</b>		<b>\$623,236.00</b>	<b>\$623,236.00</b>	<b>\$623,236.00</b>	<b>\$623,236.00</b>	
CFP Funds Listed for						
5-Year planning						
Replacement Housing		0.00	0.00	0.00	0.00	
Factor Funds						





HA Name: <b>PORT CHESTER HOUSING AUTHORITY</b>			Capital Fund Program: <b>NY36P01450104</b> <b>2004</b>		
Original Annual Statement Performance and Evaluation Report for Program Year Ending			Reserve for Disasters/Emergencies.  <b>X Final Performance and Evaluation Report.</b>		
<b>TOTAL ESTIMATED COST</b>			<b>TOTAL ACTUAL COST (2)</b>		
Line No.	Summary by Development Account	Original		Obligated	Expended
1	Total Non-CGP Funds				
2	1406 Operations (May not to exceed 20% of line 20)	\$110,000.00	\$110,000.00	\$110,000.00	\$110,000.00
3	1408 Management Improvements				
4	1410 Administration	\$63,350.00	\$62,222.07	\$62,222.07	\$62,222.07
5	1411 Audit				
6	1415 Liquidated damages				
7	1430 Fees and Costs	\$61,000.00	\$31,615.13	\$31,615.13	\$31,615.13
8	1440 Site Acquisition				
9	1450 Site Improvements				
10	1460 Dwelling Structures	\$401,498.00	\$427,721.48	\$427,721.48	\$427,721.48
11	1465.1 Dwelling Equipment - Nonexpandable	\$10,000.00	\$7,850.00	\$7,850.00	\$7,850.00
12	1470 Nondwelling Structures	\$15,000.00	\$21,439.32	\$21,439.32	\$21,439.32
13	1475 Nondwelling Equipment				
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1498 Mod Used for Development				
19	1502 Contingency (May not to exceed 8% of line 20)				
20	Amount of Annual Grant (Sum of lines 2 - 19)	<b>\$660,848.00</b>	<b>\$660,848.00</b>	<b>\$660,848.00</b>	<b>\$660,848.00</b>
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 Compliance				Note: Expenditures includes
23	Amount of line 20 Related to Security				Req. on Sept. 23 of \$293.
24	Amount of line 20 Related to Energy Conservation Measures				
Signature of Executive Director & Date:			Signature of public Housing Director/Office of Native American Programs Administrator & Date:		

1- To be completed for the Performance and Evaluation Report or a Revised Annual Statement  
 2- To be completed for the Performance and Evaluation Report.

FFY 2004

Development Number/Name HA-wide Activities	General Description of Major Work Categories	Development Account Number	Quantity	Estimated Cost		Total Actual Cost		Status of Proposed Work (2)
				Original	Revised (1)	Funds Obligated (2)	Fund Expended (2)	
PHA-Wide	<b>Operations</b>	1406						
	Operations			\$110,000.00	\$110,000.00	\$110,000.00	\$110,000.00	100% Complete
	<b>Total Account # 1406</b>			<b>\$110,000.00</b>	<b>\$110,000.00</b>	<b>\$110,000.00</b>	<b>\$110,000.00</b>	
PHA-Wide	<b>Administration</b>	1410						
	Director of Modernization			\$53,400.00	\$53,400.00	\$53,400.00	\$53,400.00	100% Complete
	Prorated Salaries			\$8,450.00	\$8,450.00	\$8,450.00	\$8,450.00	100% Complete
	Supplies			\$1,500.00	\$372.07	\$372.07	\$372.07	100% Complete
	<b>Total Account # 1410</b>			<b>\$63,350.00</b>	<b>\$62,222.07</b>	<b>\$62,222.07</b>	<b>\$62,222.07</b>	
PHA-Wide	<b>Fees and Costs</b>	1430						
	A/E Services			\$35,000.00	\$21,700.00	\$21,700.00	\$21,700.00	100% Complete
	Inspection Costs			\$25,000.00	\$0.00	\$0.00	\$0.00	No Activity
	Printing Costs			\$1,000.00	\$1,146.38	\$1,146.38	\$1,146.38	100% Complete
	Program License (Computer)			\$0.00	\$8,768.75	\$8,768.75	\$8,768.75	100% Complete
	<b>Total Account # 1430</b>			<b>\$61,000.00</b>	<b>\$31,615.13</b>	<b>\$31,615.13</b>	<b>\$31,615.13</b>	
PHA-Wide	<b>Dwelling Structures</b>	1460						
	New Closet Doors			\$158,000.00	\$66,040.00	\$66,040.00	\$66,040.00	100% Complete
	New Interior Doors and Hardware			\$125,498.00	\$6,451.50	\$6,451.50	\$6,451.50	100% Complete
	Apartment Painting			\$48,000.00	\$28,777.82	\$28,777.82	\$28,777.82	100% Complete
	Floor Re-surfacing - CFP 2003 item			\$70,000.00	\$1,995.00	\$1,995.00	\$1,995.00	100% Complete
	Mail Boxes			\$0.00	\$1,906.12	\$1,906.12	\$1,906.12	100% Complete
	Bathroom Renovations			\$0.00	\$190,283.24	\$190,283.24	\$190,283.24	100% Complete
	Lighting			\$0.00	\$8,077.07	\$8,077.07	\$8,077.07	100% Complete
	Elevator			\$0.00	\$840.00	\$840.00	\$840.00	100% Complete
	Boilers (CFP 2005 item)			\$0.00	\$101,465.20	\$101,465.20	\$101,465.20	100% Complete
	REAC Inspection Readiness			\$0.00	\$10,688.03	\$10,688.03	\$10,688.03	100% Complete
	Glass Replacement			\$0.00	\$4,185.00	\$4,185.00	\$4,185.00	100% Complete
	Roof Repair			\$0.00	\$6,000.00	\$6,000.00	\$6,000.00	100% Complete
	Sewer Repair			\$0.00	\$1,012.50	\$1,012.50	\$1,012.50	100% Complete
	<b>Total Account # 1460</b>			<b>\$401,498.00</b>	<b>\$427,721.48</b>	<b>\$427,721.48</b>	<b>\$427,721.48</b>	

Signature of Executive Director & Date:

X

Signature of Public Housing Director/Office of Native American Programs Administrator & Date:

X

1 To be Completed for the Performance and Evaluation Report or a Revised Annual Statement

2 To be Completed for the Performance Evaluation Report.

Annual Statement/Performance and Evaluation Report  
 Capital Fund Program (CFP) PART III: Implementation Schedule  
**PORT CHESTER HOUSING AUTHORITY**  
**(CFP2004)**

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

Development Number/Name HA-Wide Activities	All Funds Obligated (Quarter Ending Date)			All Funds Expended (Quarter Ending Date)			Reason for revised Target Dates (2)
	Original	Revised (1)	Actual (2)	Original	Revised (1)	Actual (2)	
Operations PHA-Wide	9/13/2006		8/31/2006	9/13/2008		4/30/2007	
Administration PHA-Wide	9/13/2006		8/31/2006	9/13/2008		4/30/2007	
Fees & Costs PHA-Wide	9/13/2006		8/31/2006	9/13/2008		4/30/2007	
Dwelling Structures PHA-Wide	9/13/2006		8/31/2006	9/13/2008		4/30/2007	
Dwelling Equipment PHA-Wide	9/13/2006		8/31/2006	9/13/2008		4/30/2007	
Non-Dwelling Equipment PHA-Wide	9/13/2006		8/31/2006	9/13/2008		4/30/2007	
Signature of Executive Director & Date:				Signature of Public Housing Director/Office of Native American Programs Administrator & Date:			
X				X			

1 To be Completed for the Performance and Evaluation Report or a Revised Annual Statement

2 To be Completed for the Performance and Evaluation Report.

## CAPITAL FUND PROGRAM TABLES START HERE

### Annual Statement /Performance and Evaluation Report

4/29/2008

### Capital Funds Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary

PHA Name: <p style="text-align: center;"><b>PORT CHESTER HOUSING AUTHORITY</b></p>	Grant Type and Number: Capital Fund Program No: <span style="float: right;"><b>NY36PO14501-05</b></span> Replacement Housing Factor Grant No:	Federal FY of Grant: <p style="text-align: center;"><b>2005</b></p>
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- Original Annual Statement   
  Reserved for Disasters/Emergencies   
  Revised Annual Statement/Revision Number \_\_\_\_\_  
 Performance and Evaluation Report for Program Year Ending **9/30/07**   
  Final Performance and Evaluation Report for Program Year Ending \_\_\_\_\_

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total Non-Capital Funds				
2	1406 Operating Expenses	126,850.00	126,850.00	126,850.00	126,850.00
3	1408 Management Improvements	70,000.00	85,223.49	85,223.49	82,013.49
4	1410 Administration	50,000.00	50,000.00	50,000.00	50,000.00
5	1411 Audit	0.00	0.00	0.00	0.00
6	1415 Liquidated Damages	0.00	0.00	0.00	0.00
7	1430 Fees and Costs	36,000.00	34,435.00	34,435.00	10,785.00
8	1440 Site Acquisition	0.00	0.00	0.00	0.00
9	1450 Site Improvement	0.00	0.00	0.00	0.00
10	1460 Dwelling Structures	275,661.00	322,123.25	322,123.25	111,176.05
11	1465.1 Dwelling Equipment-Nonexpendable	10,000.00	3,395.64	0.00	0.00
12	1470 Nondwelling Structures	0.00	0.00	0.00	0.00
13	1475 Nondwelling Equipment	15,000.00	12,223.62	12,223.62	12,223.62
14	1485 Demolition	0.00	0.00	0.00	0.00
15	1490 Replacement Reserve	0.00	0.00	0.00	0.00
16	1492 Moving to Work Demonstration	0.00	0.00	0.00	0.00
17	1495.1 Relocation Costs	0.00	0.00	0.00	0.00
18	1499 Development Activities	0.00	0.00	0.00	0.00
19	1501 Collateralization or Debt Service	0.00	0.00	0.00	0.00
20	1502 Contingency (Limited to 8% of total grant)	50,740.00	0.00	0.00	0.00
21	<b>Amount of Annual Grant (sums of lines 2-20)</b>	<b>\$634,251.00</b>	<b>\$634,251.00</b>	<b>\$630,855.36</b>	<b>\$393,048.16</b>
22	Amount of line 21 Related to LBP Activities	0.00	0.00	0.00	0.00
23	Amount of Line 21 Related to Section 504 Compliance	0.00	0.00	0.00	0.00
24	Amount of Line 21 Related to Security - Soft Costs	0.00	0.00	0.00	0.00
25	Amount of Line 21 Related to Security - Hard Costs	0.00	0.00	0.00	0.00
26	Amount of Line 21 Related to Energy Conservation Measures	0.00	0.00	0.00	0.00

**Annual Statement/Performance and Evaluation Report**

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

4/29/2008

**Part II: Supporting Pages**

PHA Name: <b>PORT CHESTER HOUSING AUTHORITY</b>		Grant Type and Number: Capital Fund Program No: <b>NY36PO14501-05</b> Replacement Housing Factor Grant No:						Federal FY of Grant: <b>2005</b>
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	<b>Operations</b>	1406		126,850.00	126,850.00	126,850.00	126,850.00	100% Completed
	<b>Total 1406</b>			<b>126,850.00</b>	<b>126,850.00</b>	<b>126,850.00</b>	<b>126,850.00</b>	
	<b>Management Improvements:</b>	1408						
	Director of Modernization			70,000.00	70,000.00	70,000.00	66,790.00	95% Completed
	Computer Software			0.00	15,003.49	15,003.49	15,003.49	100% Completed
	Training			0.00	220.00	220.00	220.00	100% Completed
	<b>Total 1408</b>			<b>70,000.00</b>	<b>85,223.49</b>	<b>85,223.49</b>	<b>82,013.49</b>	
	<b>Administration:</b>	1410						
	Prorated salaries			50,000.00	50,000.00	50,000.00	50,000.00	100% Completed
	<b>Total 1410</b>			<b>50,000.00</b>	<b>50,000.00</b>	<b>50,000.00</b>	<b>50,000.00</b>	
	<b>Fees and Costs:</b>	1430						
	A/E Services			35,000.00	32,650.00	32,650.00	9,000.00	28% Completed
	Advertisement/Printing			1,000.00	605.00	605.00	605.00	100% Completed
	Computer Consultant			0.00	1,180.00	1,180.00	1,180.00	100% Completed
	<b>Total 1430</b>			<b>36,000.00</b>	<b>34,435.00</b>	<b>34,435.00</b>	<b>10,785.00</b>	
	<b>Dwelling Structures:</b>	1460						
	Bathroom Renovations			138,897.00	245,448.21	245,448.21	34,501.01	14% Completed
	Elec. System Overhead Replacement			40,000.00	260.00	260.00	260.00	100% Completed
	Boilers			96,764.00	29,563.04	29,563.04	29,563.04	100% Completed
	REAC Insp. Items			0.00	21,102.00	21,102.00	21,102.00	100% Completed
	Lock System Replacement			0.00	671.00	671.00	671.00	100% Completed
	Painting			0.00	1,900.00	1,900.00	1,900.00	100% Completed
	Parapet Repairs			0.00	15,100.00	15,100.00	15,100.00	100% Completed
	Refuse Hoper Doors			0.00	8,079.00	8,079.00	8,079.00	100% Completed
	<b>Total 1460</b>			<b>275,661.00</b>	<b>322,123.25</b>	<b>322,123.25</b>	<b>111,176.05</b>	





## CAPITAL FUND PROGRAM TABLES START HERE

### Annual Statement /Performance and Evaluation Report 4/29/2008 Capital Funds Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary

PHA Name: <p style="text-align: center;"><b>PORT CHESTER HOUSING AUTHORITY</b></p>	Grant Type and Number: Capital Fund Program No: <span style="float: right;"><b>NY36PO14501-06</b></span> Replacement Housing Factor Grant No:	Federal FY of Grant: <p style="text-align: center;"><b>2006</b></p>
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- Original Annual Statement   
  Reserved for Disasters/Emergencies   
  Revised Annual Statement/Revision Number \_\_\_\_\_  
 Performance and Evaluation Report for Program Year Ending **9/30/07**   
  Final Performance and Evaluation Report for Program Year Ending \_\_\_\_\_

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total Non-Capital Funds				
2	1406 Operating Expenses	115,523.00	115,523.00	115,523.00	115,523.00
3	1408 Management Improvements	0.00	0.00	0.00	0.00
4	1410 Administration	56,100.00	56,100.00	56,100.00	0.00
5	1411 Audit	0.00	0.00	0.00	0.00
6	1415 Liquidated Damages	0.00	0.00	0.00	0.00
7	1430 Fees and Costs	31,000.00	32,500.00	1,500.00	375.00
8	1440 Site Acquisition	0.00	0.00	0.00	0.00
9	1450 Site Improvement	0.00	0.00	0.00	0.00
10	1460 Dwelling Structures	323,109.00	351,987.00	143,409.09	23,440.00
11	1465.1 Dwelling Equipment-Nonexpendable	6,000.00	6,000.00	0.00	0.00
12	1470 Nondwelling Structures	0.00	0.00	0.00	0.00
13	1475 Nondwelling Equipment	1,000.00	7,000.00	0.00	0.00
14	1485 Demolition	0.00	0.00	0.00	0.00
15	1490 Replacement Reserve	0.00	0.00	0.00	0.00
16	1492 Moving to Work Demonstration	0.00	0.00	0.00	0.00
17	1495.1 Relocation Costs	0.00	0.00	0.00	0.00
18	1499 Development Activities	0.00	0.00	0.00	0.00
19	1501 Collateralization or Debt Service	0.00	0.00	0.00	0.00
20	1502 Contingency (Limited to 8% of total grant)	44,883.00	8,505.00	0.00	0.00
21	<b>Amount of Annual Grant (sums of lines 2-20)</b>	<b>\$577,615.00</b>	<b>\$577,615.00</b>	<b>\$316,532.09</b>	<b>\$139,338.00</b>
22	Amount of line 21 Related to LBP Activities	0.00	0.00	0.00	0.00
23	Amount of Line 21 Related to Section 504 Compliance	0.00	0.00	0.00	0.00
24	Amount of Line 21 Related to Security - Soft Costs	0.00	0.00	0.00	0.00
25	Amount of Line 21 Related to Security - Hard Costs	0.00	0.00	0.00	0.00
26	Amount of Line 21 Related to Energy Conservation Measures	0.00	0.00	0.00	0.00

**Annual Statement/Performance and Evaluation Report**

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

4/29/2008

**Part II: Supporting Pages**

PHA Name: <b>PORT CHESTER HOUSING AUTHORITY</b>		Grant Type and Number: Capital Fund Program No: <b>NY36PO14501-06</b> Replacement Housing Factor Grant No:						Federal FY of Grant: <b>2006</b>
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	<b>Operations</b>	1406		115,523.00	115,523.00	115,523.00	115,523.00	100% Completed
	<b>Total 1406</b>			<b>115,523.00</b>	<b>115,523.00</b>	<b>115,523.00</b>	<b>115,523.00</b>	
	<b>Administration:</b>	1410						
	Prorated salaries			5,000.00	5,000.00	5,000.00	0.00	0% Completed
	Director of Modernization			51,100.00	51,100.00	51,100.00	0.00	0% Completed
	<b>Total 1410</b>			<b>56,100.00</b>	<b>56,100.00</b>	<b>56,100.00</b>	<b>0.00</b>	
	<b>Fees and Costs:</b>	1430						
	A/E Services			30,000.00	30,000.00	0.00	0.00	0% Completed
	Advertisement/Printing			1,000.00	1,000.00	0.00	0.00	0% Completed
	Pic Monitor			0.00	1,500.00	1,500.00	375.00	25% Completed
	<b>Total 1430</b>			<b>31,000.00</b>	<b>32,500.00</b>	<b>1,500.00</b>	<b>375.00</b>	
	<b>Dwelling Structures:</b>	1460						
	Boiler Upgrades			154,042.00	116,053.71	0.00	0.00	0% Completed
	Kitchen/Bathroom Renovations			164,067.00	164,067.00	73,492.80	6,190.00	4% Completed
	Apartment Painting			5,000.00	5,000.00	3,050.00	3,050.00	61% Completed
	Bathrooms			0.00	52,666.29	52,666.29	0.00	0% Completed
	Painting			0.00	3,400.00	3,400.00	3,400.00	100% Completed
	Electrical Work			0.00	1,132.00	1,132.00	1,132.00	100% Completed
	Roof Work			0.00	7,498.00	7,498.00	7,498.00	100% Completed
	Footing Drains			0.00	2,170.00	2,170.00	2,170.00	100% Completed
	<b>Total 1460</b>			<b>323,109.00</b>	<b>351,987.00</b>	<b>143,409.09</b>	<b>23,440.00</b>	
	<b>Dwelling Equipment:</b>	1465						
	Stoves and Refrigerators			6,000.00	6,000.00	0.00	0.00	0% Completed
	<b>Total 1465</b>			<b>6,000.00</b>	<b>6,000.00</b>	<b>0.00</b>	<b>0.00</b>	
	<b>Non-Dwelling Equipment:</b>	1475						
	Tools			1,000.00	1,000.00	0.00	0.00	0% Completed
	<b>Total 1475</b>			<b>1,000.00</b>	<b>7,000.00</b>	<b>0.00</b>	<b>0.00</b>	

**Annual Statement/Performance and Evaluation Report**

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

4/29/2008

**Part II: Supporting Pages**

PHA Name: <b>PORT CHESTER HOUSING AUTHORITY</b>		Grant Type and Number: Capital Fund Program No: <b>NY36PO14501-06</b> Replacement Housing Factor Grant No:				Federal FY of Grant: <b>2006</b>		
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	
	<b>Contingency:</b>	1502						
	Contingency:			44,883.00	8,505.00	0.00	0.00	0% Completed
	<b>Total 1502</b>			<b>44,883.00</b>	<b>8,505.00</b>	<b>0.00</b>	<b>0.00</b>	
	<b>Total Capital Funds for 2005</b>			<b>\$577,615.00</b>	<b>\$577,615.00</b>	<b>\$316,532.09</b>	<b>\$139,338.00</b>	<b>24% Completed</b>

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

4/29/2008

PHA Name: <b>PORT CHESTER HOUSING AUTHORITY</b>	Grant Type and Number: Capital Fund Program No: <b>NY36PO14501-06</b> Replacement Housing Factor Grant No:	Federal FY of Grant: <b>2006</b>
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Development No. Name/HA-Wide Activities	All Funds Obligated (Quarter Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates
	Original	Revised	Actual	Original	Revised	Actual	
1406	7/17/2008			7/17/2010			
1408	7/17/2008			7/17/2010			
1410	7/17/2008			7/17/2010			
1430	7/17/2008			7/17/2010			
1460	7/17/2008			7/17/2010			
1465	7/17/2008			7/17/2010			
1475	7/17/2008			7/17/2010			
1502	7/17/2008			7/17/2010			

HA Name: <b>Port Chester Housing Authority</b>		Comprehensive Grant Number <b>NY36P014501-07</b>		FFY of Grant Program <b>2007</b>	
Original Annual Statement <b>Performance and Evaluation Report for Program Year Ending: 9/30/2007</b>		Reserve for Disasters/Emergencies.		Revised Annual Statement/Revision Number____ Final Performance and Evaluation Report	
		<b>TOTAL ESTIMATED COST</b>		<b>TOTAL ACTUAL COST (2)</b>	
Line No.	Summary by Development Account	Original	Revised	Obligated	Expended
1	Total Non-CGP Funds				
2	1406 Operations (May not to exceed 20% of line 20)	\$117,206.00	\$117,206.00	\$0.00	\$0.00
3	1408 Management Improvements	\$60,000.00	\$60,000.00	\$0.00	\$0.00
4	1410 Administration	\$20,000.00	\$20,000.00	\$0.00	\$0.00
5	1411 Audit				
6	1415 Liquidated damages				
7	1430 Fees and Costs	\$31,000.00	\$31,000.00	\$0.00	\$0.00
8	1440 Site Acquisition				
9	1450 Site Improvements				
10	1460 Dwelling Structures	\$294,944.00	\$294,944.00	\$0.00	\$0.00
11	1465.1 Dwelling Equipment - Nonexpandable	\$8,000.00	\$8,000.00	\$0.00	\$0.00
12	1470 Nondwelling Structures				
13	1475 Nondwelling Equipment	\$8,000.00	\$8,000.00	\$0.00	\$0.00
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 (May not to exceed 8% of line 20)	\$46,882.00	\$46,882.00	\$0.00	\$0.00
20	<b>Amount of Annual Grant (Sum of lines 2 - 19)</b>	<b>\$586,032.00</b>	<b>\$586,032.00</b>	<b>\$0.00</b>	<b>\$0.00</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				
Signature of Executive Director & Date:			Signature of public Housing Director/Office of Native American Programs Administrator & Date:		

Development Number/Name HA-wide Activities	General Description of Major Work Categories	Development Account Number	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work (2)
				Original	Revised (1)	Funds Obligated (2)	Fund Expended (2)	
PHA-Wide	<b>Operations</b>	1406						
	Operations			\$117,206.00	\$117,206.00	\$0.00	\$0.00	No Activity
	<b>Total Account # 1406</b>			<b>\$117,206.00</b>	<b>\$117,206.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	
	<b>Management Improvements</b>	1408						
	Modernization Coordinator			\$60,000.00	\$60,000.00	\$0.00	\$0.00	No Activity
	<b>Total Account #1408</b>			<b>\$60,000.00</b>	<b>\$60,000.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	
PHA-Wide	<b>Administration</b>	1410						
	Prorated Salaries			\$20,000.00	\$20,000.00	\$0.00	\$0.00	No Activity
	<b>Total Account # 1410</b>			<b>\$20,000.00</b>	<b>\$20,000.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	
PHA-Wide	<b>Fees and Costs</b>	1430						
	A/E Services			\$30,000.00	\$30,000.00	\$0.00	\$0.00	No Activity
	Printing Costs			\$1,000.00	\$1,000.00	\$0.00	\$0.00	No Activity
	<b>Total Account # 1430</b>			<b>\$31,000.00</b>	<b>\$31,000.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	
PHA-Wide	<b>Dwelling Structures</b>	1460						
	Replace Radiator Valves - Weber			\$45,000.00	\$45,000.00	\$0.00	\$0.00	No Activity
	Flooring in Hallways - PHA-Wide			\$109,949.00	\$109,949.00	\$0.00	\$0.00	No Activity
	New Light Fixtures - Weber			\$23,000.00	\$23,000.00	\$0.00	\$0.00	No Activity
	Closet Doors - Weber			\$89,000.00	\$89,000.00	\$0.00	\$0.00	No Activity
	Apartment Painting			\$10,000.00	\$10,000.00	\$0.00	\$0.00	No Activity
	Srairway Doors & Hardware			\$17,995.00	\$17,995.00	\$0.00	\$0.00	No Activity
	<b>Total Account # 1460</b>			<b>\$294,944.00</b>	<b>\$294,944.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	
PHA-Wide	<b>Dwelling Equipment</b>	1465						
	Stoves and Refrigerators			\$8,000.00	\$8,000.00	\$0.00	\$0.00	No Activity
	<b>Total Account # 1465</b>			<b>\$8,000.00</b>	<b>\$8,000.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	
PHA-Wide	<b>Non-Dwelling Structures</b>	1475						
	Tools			8,000.00	8,000.00	0.00	0.00	No Activity
	<b>Total Account # 1475</b>			<b>8,000.00</b>	<b>8,000.00</b>	<b>0.00</b>	<b>0.00</b>	
	<b>Contingency</b>	1502						
	Contingency			46,882.00	46,882.00	0.00	0.00	No Activity
	<b>Total Account #1502</b>			<b>46,882.00</b>	<b>46,882.00</b>	<b>0.00</b>	<b>0.00</b>	
	<b>CFP 2007 Total</b>			<b>\$586,032.00</b>	<b>\$586,032.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	
Signature of Executive Director & Date:				Signature of Public Housing Director/Office of Native American Programs Administrator & Date:				
X				X				

1 To be Completed for the Performance and Evaluation Report or a Revised Annual Statement  
 2 To be Completed for the Performance Evaluation Report.

Annual Statement/Performance and Evaluation Report  
 Capital Fund Program (CFP) PART III: Implementation Schedule  
**PORT CHESTER HOUSING AUTHORITY**  
**(CFP2007)**

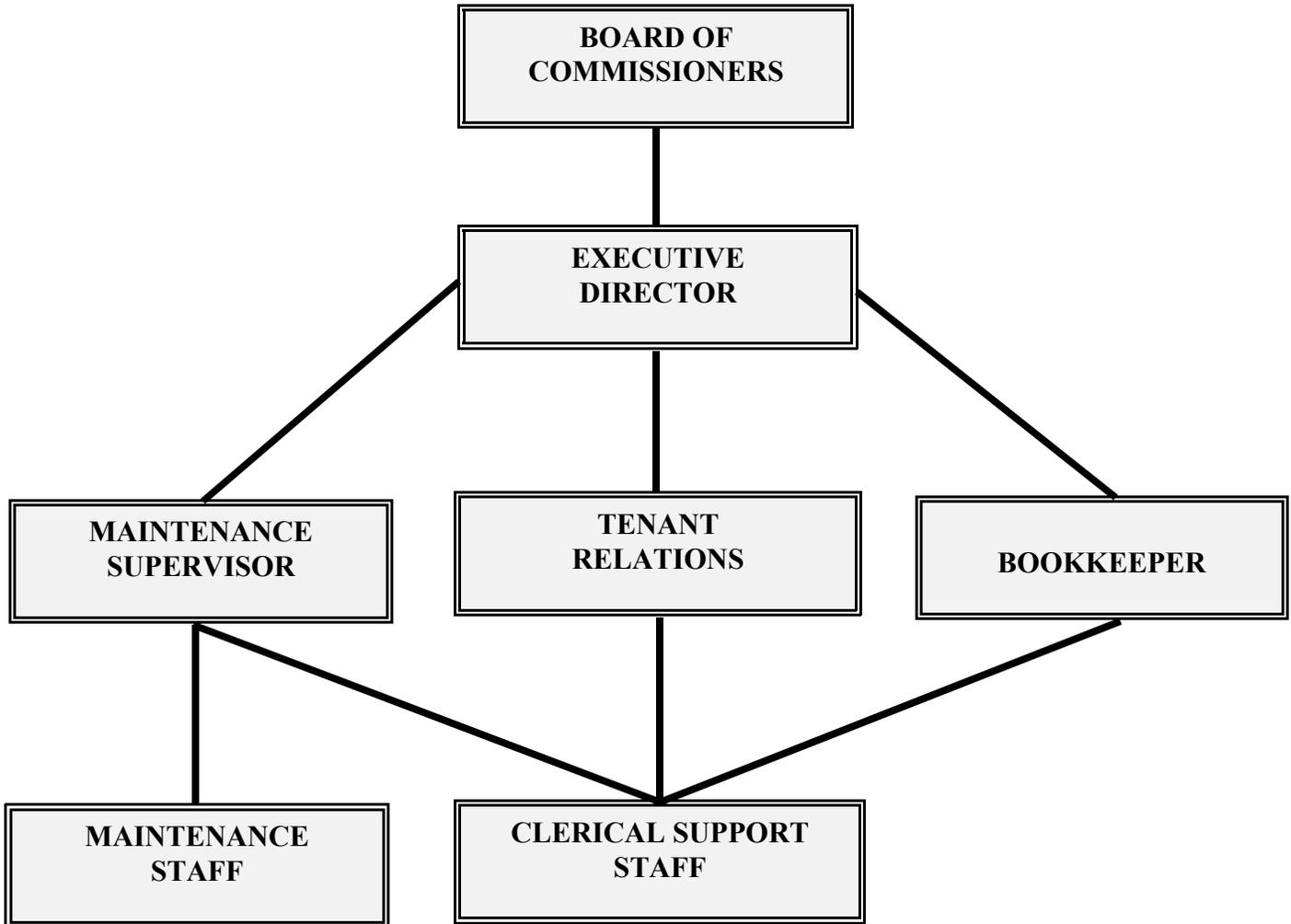
**U.S. Department of Housing  
 and Urban Development**  
 Office of Public and Indian Housing

Development Number/Name HA-Wide Activities	All Funds Obligated (Quarter Ending Date)			All Funds Expended (Quarter Ending Date)			Reason for revised Target Dates (2)
	Original	Revised (1)	Actual (2)	Original	Revised (1)	Actual (2)	
Operations	9/12/2009			9/12/2011			
Management Improvements	9/12/2009			9/12/2011			
Administration	9/12/2009			9/12/2011			
Fees & Costs	9/12/2009			9/12/2011			
Dwelling Structures	9/12/2009			9/12/2011			
Dwelling Equip.	9/12/2009			9/12/2011			
Non-Dwelling Structures	9/12/2009			9/12/2011			
Signature of Executive Director & Date:				Signature of Public Housing Director/Office of Native American Programs Administrator & Date:			
X				X			

1 To be Completed for the Performance and Evaluation Report or a Revised Annual Statement

2 To be Completed for the Performance and Evaluation Report.

**PORT CHESTER HOUSING AUTHORITY  
ORGANIZATION CHART**



# **Port Chester Housing Authority**

## **Required Attachment : Membership of the Resident Advisory Board or Boards**

1. Betina Foust
2. Sergio Diaz

## PORT CHESTER HOUSING AUTHORITY

### STATEMENT OF PROGRESS OF AGENCIES GOALS

1.     **Goal:**     Expand the supply of assisted housing

**Result:**    The housing authority has worked with the village of Port Chester to promote decent, safe and affordable housing. Additionally, the H.A. is beginning to plan for additional senior housing through a non for profit agency.
2.     **Goal:**     Improve public housing management (PHAS score)

**Result:**    We have continued to modernize our units. We have completed the renovations of bathrooms at Traverse Ave and we are now renovating the bathrooms at Purdy Ave. We effected various modifications and repairs to correct deficiencies that could affect our score at Midland Ave and we are now planning to implement many modifications to the common areas of Traverse and Purdy Ave.
3.     **Goal:**     Provide an improved living environment.

**Result:**    Again, with the recent physical improvements we believe that we can improve the living environment of our housing stock.
4.     **Goal:**     Increase the number and percentage of employed persons in assisted housing.

**Result:**    The housing authority's Admissions and Continued Occupancy Policy gives additional points for housing to those families that are employed.
5.     **Goal:**     Ensure equal opportunity and affirmatively further fair housing.

**Result:**    The housing authority has completed two Voluntary Compliance Agreements correcting the deficiencies observed by FHEO .

PCHA PET OWNERSHIP

**PORT CHESTER HOUSING AUTHORITY**

**PET OWNERSHIP**

## **PET OWNERSHIP**

Housing Authority residents who are elderly and/or handicap are permitted to own and keep pets in their dwelling units. The Port Chester Housing Authority notifies eligible new residents of that right and provides them copies of the Authority's Pet Ownership Rules. To obtain permission, pet owners must agree to abide by those Rules.

In consulting with residents currently living in the Authority's developments for the elderly or handicapped, the PHA will notify all such residents that:

- A. elderly or handicapped residents are permitted to own and keep common domesticated household pets, such as a cat, dog, bird, and fish in their dwelling units, in accordance with PHA pet ownership rules;
- B. animals that are used to assist the handicapped are excluded from requirements pertaining to pet ownership;
- C. residents may request a copy of PHA pet ownership rules or proposed amendments to the rules at any time; and,
- D. if the dwelling lease of an elderly or handicapped resident prohibits pet ownership, the resident may request that the lease be amended to permit pet ownership, in accordance with the Authority's pet ownership rules shown below.

## **PORT CHESTER HOUSING AUTHORITY**

### **Pet Ownership Rules**

1. Common household pet means a domesticated cat, dog, bird, fish in aquariums. These definitions do not include any wild animal, bird or fish.
2. Each household shall have only one pet (except fish).
3. The pet owner shall have only a small cat or a dog. The animal's weight shall not exceed 20 pounds. The animal's height shall not exceed sixteen (16) inches. Such limitations do not apply to a seeing-eye dog used to assist a handicapped or disabled resident.
4. Pet owners shall license their pets yearly with the Village of Port Chester. The pet owner must show the Authority proof of annual rabies and distemper booster inoculations.
5. No pet owner shall keep a pet in violation of State or local health or humane laws or ordinances. Any failure of these pet ownership rules to contain other applicable State or local laws or ordinances does not relieve the pet owner of the responsibility for complying with such requirements.
6. The pet owner shall have his or her cat or dog spayed or neutered and shall pay the cost thereof. A veterinarian shall verify that the spaying or neutering has been accomplished.
7. The pet owner shall house the pet inside the pet owner's dwelling unit. The pet owner shall keep a cat or a dog on a leash and shall control the animal when it is taken out of the dwelling unit for any purpose. The owner of a bird shall confine the bird to a cage at all times. No pet owner shall allow his or her pet to be unleashed or loose outside the pet owner's dwelling unit.
8. No resident shall keep, raise, train, breed or maintain any pet of any kind at any location, either inside or outside the dwelling unit, for any commercial purpose.

9. No pet owner shall keep a vicious or intimidating pet on the premises. If the pet owner declines, delays or refuses to remove the pet from the premises, the Authority shall do so, in order to safeguard the health and welfare of other residents.
10. No pet owner shall permit his or her pet to disturb, interfere or diminish the peaceful enjoyment of the pet owner's neighbors or other residents. The terms "disturb, interfere or diminish" shall include but not be limited to barking, howling, biting, scratching, chirping and other activities of a disturbing nature. If the pet owner declines, delays or refuses to remove the pet from the premises, the Authority shall do so.
11. The owner of a cat shall feed the animal at least once per day; provide a litter box inside the dwelling unit; clean the litter box at least every two (2) days; and take the animal to a veterinarian at least once per year. The pet owner shall not permit refuse from the litter box to accumulate or to become unsanitary or unsightly, and shall dispose of such droppings by placing them in a sack in a designated container outside the building where the pet owner lives.
12. The owner of a dog shall feed the animal at least once per day; take the animal for a walk at least twice per day; remove the animals droppings at least twice per day; and take the animal to a veterinarian at least once per year. The pet owner shall not permit dog droppings to accumulate or to become unsanitary or unsightly, and shall dispose of such droppings by placing them in a sack in a designated container outside the building where the pet owner lives.
13. The pet owner shall take the precautions and measures necessary to eliminate pet odors within and around the dwelling unit, and shall maintain the dwelling unit in a sanitary condition at all times, as determined by the Authority.
14. No pet owner shall alter the dwelling unit or the surrounding premises to create a space, hole, container or enclosure for any pet.
15. Authority staff shall enter a dwelling unit where a pet has been left untended for twenty-four (24) hours, remove the pet and transfer it to the proper local authorities, subject to any provisions of State or local law or ordinances in this regard. The Authority shall accept no responsibility for the pet under such circumstances.
16. Each pet owner shall pay a pet deposit of \$100.00. There is no pet deposit for fish or birds. The pet deposit is not part of the rent payable by the pet owner, and is in addition to any other financial obligation generally imposed

on residents of the development where the pet owner lives. The Authority shall use the pet deposit only to pay reasonable expenses directly attributable to the presence of the pet in the development, including, but not limited to the cost of repairs and replacements to, and the fumigation of, the pet owner's dwelling unit. The Authority shall refund the unused portion of the pet deposit to the pet owner within thirty (30) days after the pet owner moves from the dwelling unit or no longer owns or keeps a pet in the dwelling unit.

17. All residents, including the elderly, handicapped and disabled, are prohibited from feeding, housing or caring for stray animals or birds. Such action shall constitute having a pet without permission of the Authority.
18. Each pet owner shall identify an alternate custodian for his or her pet. If the pet owner is ill or absent from the dwelling unit and unable to care for his or her pet, the alternate custodian shall assume responsibility for the care and keeping of the pet, including, if necessary, the removal of the pet from Authority premises.
19. Should any pet housed in the Authority's facilities give birth to a litter, the residents shall remove from the premises all of said pets except one.
20. If a resident, including a pet owner, breaches any of the rules set forth above, the Authority may revoke the pet permit and evict the resident or pet owner.
21. Resident must furnish proof of liability insurance in the amount of \$100,000 to cover bodily harm to individuals, or for any damages to Housing Authority buildings and property caused by the pets.

I have read and understand the above pet ownership rules and agreed to abide by them.

\_\_\_\_\_  
Resident's Signature

\_\_\_\_\_  
PHA Staff member's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Date

\_\_\_\_\_  
Type of Animal and Breed

\_\_\_\_\_  
Name of Pet

\_\_\_\_\_  
Description of Pet (color, size, weight, sex, etc.)

The alternate custodian for my pet is:

Custodian's first, middle and last name; post office box; street address; zip code; area telephone code and telephone number:

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

\_\_\_\_\_  
Resident's Signature

\_\_\_\_\_  
Date

Damage Deposit \_\_\_\_\_  
Amount Paid

\_\_\_\_\_  
Date

**COMMUNITY SERVICE POLICY  
FOR THE  
PORT CHESTER HOUSING AUTHORITY  
PORT CHESTER, NY**

## COMMUNITY SERVICE POLICY

Section 512 of the Quality Housing and Work Responsibility Act of 1998, which amends Section 12 of the Housing Act of 1937, establishes a new requirement for non-exempt residents of public housing to contribute eight (8) hours of community service each month or to participate in a self-sufficiency program for eight (8) hours each month. Community service is a service for which individuals are not paid. The Housing Authority of the Village of PORT CHESTER (PHA) believes that the community service requirement should not be perceived by the resident to be a punitive or demeaning activity, but rather to be a rewarding activity that will benefit both the resident and the community. Community service offers public housing residents an opportunity to contribute to the communities that support them.

In order to effectively implement this new requirement, the Housing Authority of the Village of PORT CHESTER establishes the following Policy, effective October 1, 1999.

### 1. Community Service

The PHA will provide residents, identified as required to participate in community service, a variety of voluntary activities and locations where the activities can be performed. The activities may include, but are not limited to:

- improving the physical environment of the resident's developments;
- selected office related services in the development or Administrative Office;
- volunteer services in local schools, day care centers, hospitals, nursing homes, youth or senior organizations, drug/alcohol treatment centers, recreation centers, etc;
- neighborhood group special projects;
- self-improvement activities such as household budget, credit counseling, English proficiency, GED classes or other educational activities;
- tutoring elementary or high school age residents; and
- serving in on-site computer training centers.

Voluntary political activities are prohibited.

### 2. Program Administration

The PHA may administer its own community service program in conjunction with the formation of cooperative relationships with other community based entities such as TANF, Social Services Agencies or other organizations which have as their goal, the improvement and advancement of disadvantaged families. The PHA may seek to contract its community service program out to a third-party.

In conjunction with its own or partnership program, the PHA will provide reasonable accommodations for accessibility to persons with disabilities. The PHA may directly supervise community service activities and may develop and provide a directory of

opportunities from which residents may select. When services are provided through partnering agencies, the PHA will confirm the resident's participation. Should contracting out the community service function be determined to be the most efficient method for the PHA to accomplish this requirement, the PHA will monitor the agency for contract compliance.

The PHA will assure that the service is not labor that would normally be performed by PHA employees responsible for the essential maintenance and property services.

### 3. Self Sufficiency

The PHA will inform residents that participation in self-sufficiency activities for eight (8) hours each month can satisfy the community service requirement and encourage non-exempt residents to select such activities to satisfy the requirement. Such activities can include, but are not limited to:

- apprenticeships and job readiness training;
- substance abuse and mental health counseling and treatment;
- English proficiency, GED, adult education, junior college or other formal education;
- household budgeting and credit counseling;
- small business training.

The PHA may sponsor its own economic self-sufficiency program or coordinate with local social services, volunteer organizations and TANF agencies.

### 4. Geographic Location

The PHA recognizes that the intent of this requirement is to have residents provide service to their own communities, either in the PHA's developments or in the broader community in which the PHA operates.

### 5. Exemptions

In accordance with provisions in the Act, the PHA will exempt from participation in community service requirements the following groups:

- adults who are 62 years of age or older;
- persons engaged in work activities as defined under Social Security (full time or part time employment);
- participants in a welfare to work program;
- persons receiving assistance from and in compliance with State programs funded under part A, title IV of the Social Security Act; and
- the disabled but only to the extent that the disability makes the person "unable to comply" with the community service requirements.

The PHA will determine, at the next regularly scheduled reexamination, the status of each household member eighteen (18) years of age or older with respect to the requirement to participate in community service activities. The PHA will use the "PHA Family Community Service Monthly Time-Sheet" to document resident eligibility and the hours of community service. A record for each adult will be established and community service placement selections made. Each non-exempt household member will be provided with forms to be completed by a representative of the service or economic self-sufficiency activity verifying the hours of volunteer service conducted each month.

The PHA will also assure that procedures are in place which provide residents the opportunity to change status with respect to the community service requirement. Such changes include, but are not limited to:

- going from unemployment to employment;
- entering a job training program;
- entering an educational program which exceeds eight (8) hours monthly.

All exemptions to the community service requirement will be verified and documented in the resident file. Required verifications may include, but not be limited to:

- third-party verification of employment, enrollment in a training or education program, welfare to work program or other economic self sufficiency activities;
- birth certificates to verify age 62 or older; or
- if appropriate, verification of disability limitations.

Families who pay flat rents, live in public housing units within market rate developments or families who are over income when they initially occupy a public housing unit will not receive an automatic exception.

#### 6. Cooperative Relationships with Welfare Agencies

The PHA may initiate cooperative relationships with local service agencies that provide assistance to its families to facilitate information exchange, expansion of community service/self-sufficiency program options and aid in the coordination of those activities.

#### 7. Lease Requirements and Documentation

The PHA's lease has a twelve (12)-month term and is automatically renewable except for non-compliance with the community service requirement. The lease also provides for termination and eviction of the entire household for such non-compliance. The lease provisions will be implemented for current residents at the next regularly scheduled reexamination on or after October 1, 1999, and for all new residents effective October 1, 1999. The PHA will not renew or extend the lease if the household contains a non-exempt

member who has failed to comply with the community service requirement.

Documentation of compliance or non-compliance will be placed in each resident file.

8. Noncompliance

If the PHA determines that a resident who is not an “exempt individual” has not complied with the community service requirement, the PHA must notify the resident:

1. of the non-compliance;
2. that the determination is subject to the PHA’s administrative grievance procedure;
3. that unless the resident enters into an agreement under paragraph 4. of this section, the lease of the family of which the non-compliant adult is a member may not be renewed. However, if the non-compliant adult moves from the unit, the lease may be renewed;
4. that before the expiration of the lease term, the PHA must offer the resident an opportunity to cure the non-compliance during the next twelve (12)-month period; such a cure includes a written agreement by the non-compliant adult to complete as many additional hours of community service or economic self-sufficiency activity needed to make up the total number of hours required over the twelve (12)-month term of the lease.