

PHA Plans

Streamlined Annual Version

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

OMB No. 2577-0226
(exp. 08/31/2009)

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

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

Streamlined Annual PHA Plan

for Fiscal Year: 2008

PHA Name: Housing Authority of the City of Shamokin

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

Streamlined Annual PHA Plan Agency Identification

PHA Name: Shamokin Housing Authority

PHA Number: PA055

PHA Fiscal Year Beginning: (mm/yyyy) 10/2007

PHA Programs Administered:

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

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

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

PHA Plan Contact Information:

Name: Ronald A. Miller Phone: 570/644-0431
 TDD: Email (if available): sha2@ptd.net

Public Access to Information

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

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

Display Locations For PHA Plans and Supporting Documents

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

If yes, select all that apply:

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

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

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

Streamlined Annual PHA Plan
Fiscal Year 2008
[24 CFR Part 903.12(c)]

Table of Contents
[24 CFR 903.7(r)]

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

A. PHA PLAN COMPONENTS

- 1. Site-Based Waiting List Policies
903.7(b)(2) Policies on Eligibility, Selection, and Admissions
- 2. Capital Improvement Needs
903.7(g) Statement of Capital Improvements Needed
- 3. Section 8(y) Homeownership
903.7(k)(1)(i) Statement of Homeownership Programs
- 4. Project-Based Voucher Programs
- 5. PHA Statement of Consistency with Consolidated Plan. Complete only if PHA has changed any policies, programs, or plan components from its last Annual Plan.
- 6. Supporting Documents Available for Review
- 7. Capital Fund Program and Capital Fund Program Replacement Housing Factor, Annual Statement/Performance and Evaluation Report
- 8. Capital Fund Program 5-Year Action Plan

B. SEPARATE HARD COPY SUBMISSIONS TO LOCAL HUD FIELD OFFICE

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

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

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

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

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

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

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

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

A. Site-Based Waiting Lists-Previous Year

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

Site-Based Waiting Lists				
Development Information: (Name, number, location)	Date Initiated	Initial mix of Racial, Ethnic or Disability Demographics	Current mix of Racial, Ethnic or Disability Demographics since Initiation of SBWL	Percent change between initial and current mix of Racial, Ethnic, or Disability demographics

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

B. Site-Based Waiting Lists – Coming Year

If the PHA plans to operate one or more site-based waiting lists in the coming year, answer each of the following questions; if not, skip to next component.

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

2. Capital Improvement Needs

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

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

A. Capital Fund Program

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

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

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

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

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

3. Yes No: Does the PHA expect to apply for a HOPE VI Revitalization grant in the Plan year?
If yes, list development name(s) below:

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

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

3. Section 8 Tenant Based Assistance--Section 8(y) Homeownership Program
(if applicable) [24 CFR Part 903.12(c), 903.7(k)(1)(i)]

1. Yes No: Does the PHA plan to administer a Section 8 Homeownership program pursuant to Section 8(y) of the U.S.H.A. of 1937, as implemented by 24 CFR part 982 ? (If “No”, skip to the next component; if “yes”, complete each program description below (copy and complete questions for each program identified.)

2. Program Description:

a. Size of Program

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

If the answer to the question above was yes, what is the maximum number of participants this fiscal year?

b. PHA-established eligibility criteria

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

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

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

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

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

4. Use of the Project-Based Voucher Program

Intent to Use Project-Based Assistance

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

1. Yes No: Are there circumstances indicating that the project basing of the units, rather than tenant-basing of the same amount of assistance is an appropriate option? If yes, check which circumstances apply:
 - low utilization rate for vouchers due to lack of suitable rental units
 - access to neighborhoods outside of high poverty areas
 - other (describe below):
2. Indicate the number of units and general location of units (e.g. eligible census tracts or smaller areas within eligible census tracts):

5. PHA Statement of Consistency with the Consolidated Plan

[24 CFR Part 903.15]

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

1. Consolidated Plan jurisdiction: (provide name here)

Commonwealth of Pennsylvania

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

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

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

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

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

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

List of Supporting Documents Available for Review		
Applicable & On Display	Supporting Document	Related Plan Component
X	Results of latest Section 8 Management Assessment System (SEMAP)	Annual Plan: Management and Operations
N/A	Any policies governing any Section 8 special housing types <input type="checkbox"/> Check here if included in Section 8 Administrative Plan	Annual Plan: Operations and Maintenance
X	Public housing grievance procedures <input checked="" type="checkbox"/> Check here if included in the public housing A & O Policy	Annual Plan: Grievance Procedures
X	Section 8 informal review and hearing procedures. <input checked="" type="checkbox"/> Check here if included in Section 8 Administrative Plan.	Annual Plan: Grievance Procedures
X	The Capital Fund/Comprehensive Grant Program Annual Statement /Performance and Evaluation Report for any active grant year.	Annual Plan: Capital Needs
N/A	Most recent CIAP Budget/Progress Report (HUD 52825) for any active CIAP grants.	Annual Plan: Capital Needs
N/A	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
N/A	Self-evaluation, Needs Assessment and Transition Plan required by regulations implementing Section 504 of the Rehabilitation Act and the Americans with Disabilities Act. See PIH Notice 99-52 (HA).	Annual Plan: Capital Needs
N/A	Approved or submitted applications for demolition and/or disposition of public housing.	Annual Plan: Demolition and Disposition
N/A	Approved or submitted applications for designation of public housing (Designated Housing Plans).	Annual Plan: Designation of Public Housing
N/A	Approved or submitted assessments of reasonable revitalization of public housing and approved or submitted conversion plans prepared pursuant to section 202 of the 1996 HUD Appropriations Act, Section 22 of the US Housing Act of 1937, or Section 33 of the US Housing Act of 1937.	Annual Plan: Conversion of Public Housing
N/A	Documentation for required Initial Assessment and any additional information required by HUD for Voluntary Conversion.	Annual Plan: Voluntary Conversion of Public Housing
N/A	Approved or submitted public housing homeownership programs/plans.	Annual Plan: Homeownership
N/A	Policies governing any Section 8 Homeownership program (Section _____ of the Section 8 Administrative Plan)	Annual Plan: Homeownership
X	Public Housing Community Service Policy/Programs <input checked="" type="checkbox"/> Check here if included in Public Housing A & O Policy	Annual Plan: Community Service & Self-Sufficiency
N/A	Cooperative agreement between the PHA and the TANF agency and between the PHA and local employment and training service agencies.	Annual Plan: Community Service & Self-Sufficiency
X	FSS Action Plan(s) for public housing and/or Section 8.	Annual Plan: Community Service & Self-Sufficiency
X	Section 3 documentation required by 24 CFR Part 135, Subpart E for public housing.	Annual Plan: Community Service & Self-Sufficiency
N/A	Most recent self-sufficiency (ED/SS, TOP or ROSS or other resident services grant) grant program reports for public housing.	Annual Plan: Community Service & Self-Sufficiency
X	Policy on Ownership of Pets in Public Housing Family Developments (as required by regulation at 24 CFR Part 960, Subpart G). <input checked="" type="checkbox"/> Check here if included in the public housing A & O Policy.	Annual Plan: Pet Policy
X	The results of the most recent fiscal year audit of the PHA conducted under the Single Audit Act as implemented by OMB Circular A-133, the results of that audit and the PHA's response to any findings.	Annual Plan: Annual Audit
	Other supporting documents (optional) (list individually; use as many lines as necessary)	(specify as needed)
N/A	Consortium agreement(s) and for Consortium Joint PHA Plans <u>Only</u> : Certification that consortium agreement is in compliance with 24 CFR Part 943 pursuant to an opinion of counsel on file and available for inspection.	Joint Annual PHA Plan for Consortia: Agency Identification and Annual Management and Operations

8. Capital Fund Program Five-Year Action Plan

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I: Summary					
PHA Name: Housing Authority of the City of Shamokin			Grant Type and Number Capital Fund Program Grant No: PA26P055501-08 Replacement Housing Factor Grant No:		Federal FY of Grant: 2008
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) <input type="checkbox"/> Performance and Evaluation Report for Period Ending: <input type="checkbox"/> Final Performance and Evaluation Report					
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations	30,000	30,000		
3	1408 Management Improvements				
4	1410 Administration	8,000	13,000		
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	12,000	9,000		
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	121,931	127,129		
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Nondwelling Structures				
13	1475 Nondwelling Equipment				
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1499 Development Activities				
19	9001 Collateralization or Bond Debt Obligation	100,000	96,862		
20	1502 Contingency				
21	Amount of Annual Grant: (sum of lines 2 – 20)	271,931	275,991		
22	Amount of line 21 Related to LBP Activities				
23	Amount of line 21 Related to Section 504 compliance				
24	Amount of line 21 Related to Security – Soft Costs				
25	Amt of Line 21 Related to Security – Hard Costs				
26	Amt of line 21 Related to Energy Conservation Measures				

8. Capital Fund Program Five-Year Action Plan

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part II: Supporting Pages								
PHA Name: Housing Authority of the City of Shamokin			Grant Type and Number Capital Fund Program Grant No: PA26P05550108 Replacement Housing Factor Grant No:			Federal FY of Grant: 2008		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
HA Wide 2008-1	Operations	1406	202	30,000				
HA Wide 2008-2	Administration	1410	202	13,000				
HA Wide 2008-3	Engineering Fees	1430	202	9,000				
AMP 2 2008-4	Dwelling Structure Flooring, AMP 2	1460	102	127,129				
AMP 1 2008-5	Bond Debt Obligation, HET High Rise Additions	9001	100	96,862				

8. Capital Fund Program Five-Year Action Plan

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part III: Implementation Schedule							
PHA Name: Housing Authority of the City of Shamokin			Grant Type and Number Capital Fund Program No: PA26P05550108 Replacement Housing Factor No:				Federal FY of Grant: 2008
Development Number Name/HA-Wide Activities	All Fund Obligated (Quarter Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates
	Original	Revised	Actual	Original	Revised	Actual	
1406 Operation	06/10			06/12			In application
1410 Administration	06/10			06/12			In application
1430 Engineering Fees	06/10			06/12			In application
1460 Dwelling Structure Flooring, AMP 2	06/10			06/12			In application
9001 Bond Debt Obligation, HET High Rise Additions	06/10			06/12			In application

8. Capital Fund Program Five-Year Action Plan

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I: Summary					
PHA Name: Housing Authority of the City of Shamokin			Grant Type and Number Capital Fund Program Grant No: PA26P055501-07 Replacement Housing Factor Grant No:		Federal FY of Grant: 2007
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input checked="" type="checkbox"/> Revised Annual Statement (revision no: 1)					
<input type="checkbox"/> Performance and Evaluation Report for Period Ending: <input type="checkbox"/> Final Performance and Evaluation Report					
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations	30,000	33,333	33,333	
3	1408 Management Improvements	8,000		8,000	
4	1410 Administration				
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	12,000			
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	121,931	125,069		
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Nondwelling Structures				
13	1475 Nondwelling Equipment				
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1499 Development Activities				
19	9001 Collateralization or Bond Debt Obligation	100,000	96,862	96,862	
20	1502 Contingency				
21	Amount of Annual Grant: (sum of lines 2 – 20)	271,931	255,264	138,195	
22	Amount of line 21 Related to LBP Activities				
23	Amt of line 21 Related to Section 504 compliance				
24	Amount of line 21 Related to Security – Soft Costs				
25	Amt of Line 21 Related to Security – Hard Costs				
26	Amt of line 21 Related to Energy Conservation Measures				

8. Capital Fund Program Five-Year Action Plan

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part II: Supporting Pages								
PHA Name: Housing Authority of the City of Shamokin			Grant Type and Number Capital Fund Program Grant No: PA26P055501-07 Replacement Housing Factor Grant No:			Federal FY of Grant: 2007		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
HA Wide 2007-1	Operations	1406	202	30,000	33,333	33,333		
HA Wide 2007-2	Administration Salaries & Benefits	1410	202	8,000		8,000		
AMP 2 2007-3	A & E Fees	1430	102	12,000				
AMP 2 2007-4	Dwelling Structures Vinyl Siding, Fascia/ Roofing (Force Acct)	1460	102	121,931	125,069			
AMP 1 2007-5	Bond Debt Obligation, HET High Rise Additions	9001	100	100,000	96,862	96,862		

8. Capital Fund Program Five-Year Action Plan

Annual Statement/Performance and Evaluation Report							
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)							
Part III: Implementation Schedule							
PHA Name: Housing Authority of the City of Shamokin			Grant Type and Number Capital Fund Program No: PA26P055501-07 Replacement Housing Factor No:			Federal FY of Grant: 2007	
Development Number Name/HA-Wide Activities	All Fund Obligated (Quarter Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates
	Original	Revised	Actual	Original	Revised	Actual	
1406 Operation	09/09	03/08	03/08	09/10			In Process
1410 Administration	09/09	03/08	03/08	06/10			In Process
1430 A & E Fees	09/09			06/10			In Process
1460 Dwelling Structures	09/09			06/10			In Process
9001 Debt Service, Capital Fund Bond, HET High Rise Additions	09/09	03/08	03/08	12/09			In Process

8. Capital Fund Program Five-Year Action Plan

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I: Summary					
PHA Name: Housing Authority of the City of Shamokin			Grant Type and Number Capital Fund Program Grant No: PA26P055501-06 Replacement Housing Factor Grant No:		Federal FY of Grant: 2006
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input checked="" type="checkbox"/> Revised Annual Statement (revision no:)					
<input type="checkbox"/> Performance and Evaluation Report for Period Ending: <input type="checkbox"/> Final Performance and Evaluation Report					
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations	30,000	38,034	38,034	30,000
3	1408 Management Improvements				
4	1410 Administration	8,000		8,000	
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	12,000			
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	120,509	125,009	125,009	
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Nondwelling Structures				
13	1475 Nondwelling Equipment				
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1499 Development Activities				
19	1501 Collateralization or Debt Service	4,500			
20	9001 Collateralization or Bond Debt Obligation	95,500	96,922	96,922	96,922
21	Amount of Annual Grant: (sum of lines 2 – 20)	270,509	279,965	267,965	126,922
22	Amount of line 21 Related to LBP Activities				
23	Amt of line 21 Related to Section 504 compliance				
24	Amount of line 21 Related to Security – Soft Costs				
25	Amt of Line 21 Related to Security – Hard Costs				
26	Amt of line 21 Related to Energy Conservation Measures				

8. Capital Fund Program Five-Year Action Plan

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part II: Supporting Pages								
PHA Name: Housing Authority of the City of Shamokin			Grant Type and Number Capital Fund Program Grant No: PA26P055501-06 Replacement Housing Factor Grant No:			Federal FY of Grant: 2006		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
HA-Wide	Operation	1406	202	30,000	38,034	38,034	30,000	In Process
HA-Wide	Administration							
	Salaries & Benefits	1410	202	8,000		8,000		In Process
	A & E Fees							
PA55-2, AMP 2	Dwelling Structures	1430	80	12,000				In Process
PA 55-2, AMP 2	Vinyl Siding & Fascia Force Account	1460	80	121,931	125,009	125,009		In Process
PA55-1, AMP 1	Bond Debt Obligation, HET High Rise Additions	1502	100	4,500		4,500		Reprogrammed
PA55-1, AMP 1	Bond Debt Oligation, HET High Rise Additions	9001	100	95,500	96,922	96,922	96,922	Complete

8. Capital Fund Program Five-Year Action Plan

Annual Statement/Performance and Evaluation Report							
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)							
Part III: Implementation Schedule							
PHA Name: Housing Authority of the City of Shamokin			Grant Type and Number Capital Fund Program No: PA26P055501-06 Replacement Housing Factor No:				Federal FY of Grant: 2006
Development Number Name/HA-Wide Activities	All Fund Obligated (Quarter Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates
	Original	Revised	Actual	Original	Revised	Actual	
1406 Operation	09/08			09/08			In Progress
1410 Administration	09/08			06/10			In Progress
1430 A & E Fees	09/08			06/10			In Progress
1460 Dwelling Structures	09/08			06/10			In Progress
9001 Bond Debt Obligation	09/08			12/09	05/07	05/07	Complete

8. Capital Fund Program Five-Year Action Plan

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I: Summary					
PHA Name: Housing Authority of the City of Shamokin		Grant Type and Number Capital Fund Program Grant No: PA26P055501-05 Replacement Housing Factor Grant No:			Federal FY of Grant: 2005
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input checked="" type="checkbox"/> Revised Annual Statement (revision no: 2) <input type="checkbox"/> Performance and Evaluation Report for Period Ending: <input type="checkbox"/> Final Performance and Evaluation Report					
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations	19,050	29,050	29,050	29,050
3	1408 Management Improvements				
4	1410 Administration	8,000	16,000	16,000	16,000
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	36,450	16,819	16,819	16,819
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	128,722	613,757	163,757	154,127
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Nondwelling Structures				
13	1475 Nondwelling Equipment				
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1499 Development Activities				
19	9001 Collateralization or Bond Debt Obligation	100,000	66,596	66,596	66,596
20					
21	Amount of Annual Grant: (sum of lines 2 – 20)	292,222	292,222	292,222	282,592
22	Amount of line 21 Related to LBP Activities				
23	Amt of line 21 Related to Section 504 compliance				
24	Amount of line 21 Related to Security – Soft Costs				
25	Amt of Line 21 Related to Security – Hard Costs				
26	Amt of line 21 Related to Energy Conservation Measures				

8. Capital Fund Program Five-Year Action Plan

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part II: Supporting Pages								
PHA Name: Housing Authority of the City of Shamokin			Grant Type and Number Capital Fund Program Grant No: PA26P055501-05 Replacement Housing Factor Grant No:			Federal FY of Grant: 2005		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
HA-Wide	Operations	1406	202	19,050	29,050	29,050	29,050	Complete
HA-Wide	Administration							
	Salaries, benefits & misc. exp	1410	202	8,000	16,000	16,000	16,000	Complete
	A & E Fees & Costs							
PA55-1, AMP 1	HET High Rise BR Addns	1430	100	26,450		26,450	16,819	Complete
PA55-2, AMP 2	Dwelling Structures	1430	80	8,000				Reprogrammed
PA55-4, AMP 2	Dwelling Structures	1430	22	2,000				Reprogrammed
PA55-2, AMP 2	Vinyl Siding & Fascia, 55-2 Force Acct	1460	80	100,756	163,757	163,757	154,127	In Process
PA55-4, AMP 2	Vinyl Siding & Fascia, 55-4 Force Acct - DELETE	1460	22	27,966				Reprogrammed
PA55-1, AMP 1	Debt Service	1501	100	66,596		66,596		Complete
PA55-1, AMP 1	Bond Debt Obligation	9001	100		66,596	66,596	66,596	Complete

8. Capital Fund Program Five-Year Action Plan

Annual Statement/Performance and Evaluation Report							
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)							
Part III: Implementation Schedule							
PHA Name: Housing Authority of the City of Shamokin			Grant Type and Number Capital Fund Program No: PA26P055501-05 Replacement Housing Factor No:			Federal FY of Grant: 2005	
Development Number Name/HA-Wide Activities	All Fund Obligated (Quarter Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates
	Original	Revised	Actual	Original	Revised	Actual	
1406 HA-Wide Operations	09/07	06/06	06/06	09/07			Complete
1410 Administration	09/07	06/06	06/06	06/09			Complete
1430 A & E Fees	09/07			06/09			Complete
1460 Dwelling Structures	09/07	06/06	06/06	06/09	06/09	06/08	In Process
9001 Bond Debt Obligation, HET High Rise Additions	09/07	12/06	12/06	09/07			Complete

8. Capital Fund Program Five-Year Action Plan

Capital Fund Program Five-Year Action Plan					
Part I: Summary					
PHA Name: Housing Authority of the City of Shamokin				<input type="checkbox"/> Original 5-Year Plan <input checked="" type="checkbox"/> Revision No: 2	
Development Number/Name/HA-Wide	Year 1 2008	Work Statement for Year 2 FFY Grant: 2009 PHA FY:	Work Statement for Year 3 FFY Grant: 2010 PHA FY:	Work Statement for Year 4 FFY Grant: 2011 PHA FY:	Work Statement for Year 5 FFY Grant: 2012 PHA FY:
	Annual Statement				
1406		30,000	30,000	30,000	30,000
1410		13,000	13,000	13,000	13,000
1430		7,000	7,000	7,000	11,800
1450				37,010	
1460		121,931	121,931	84,921	117,131
9001		100,000	100,000	100,000	100,000
CFP Funds Listed for 5-year planning		271,931	271,931	271,931	271,931
Replacement Housing Factor Funds					

October 24, 2007

Dear Mr. Miller:

Following review of eligibility procedures due to the ineligibility of the number of delinquent accounts and credit score, I am recommending the Section 8 Program utilize the individual's credit score only and not the number of delinquent accounts. This will establish a policy with current industry standards. Following the inception of a new credit rating system the net result will increase Management Fees Earned, as well as give the housing Authority a higher score on SEMAP.

This will assist in the housing of more families and increase Management Fees Earned, as well as give the Housing Authority a higher score on SEMAP.

Sincerely,

Karen E. Wywadis
Section 8 Coordinator

:kew

Memorandum

To: Ronald A. Miller, Executive Director
From: Karen Wywadis, Section 8 Coordinator
Shamokin Housing Authority
Date: 6/26/2008
Re: Screening Criteria

After discussing with Cornelia Adams on Wednesday, June 25, 2008 the following adjustment to our screening criteria is suggested.

We recommend that for Misdemeanor 2, an applicant should have a clean record for 24 months. For Felony 1 & 2, an applicant should have a clean record for 60 months, and for Felony 3, a clean record for seven (7) years.

We also recommend for any violations of Megan's Law, no time frame should be applicable. Applicant should be permanently disbarred from the Section 8 Housing Choice Voucher Program.

We would also stress if an applicant were incarcerated, the clean record should start from the first day of release.

MEETING NO. 606

The regular monthly meeting of the Board of the Housing Authority of the City of Shamokin was held on Thursday, November 15, 2007, at 6:35 p.m. at the Administrative Office, 1 East Independence Street, Shamokin, Pennsylvania.

The following were present at Roll Call:

Mrs. Betsy Richardson, Chairperson; Mr. Daniel C. Johns, Vice Chairman; Mr. R. Craig Rhoades, Member; Mr. Malcom Farrow IV, Member; and Patricia Zarick, Member;

Also present were Mr. Ronald A. Miller, Executive Director; Mr. James J. Rosini, Solicitor;

Mrs. Richardson called for Executive Session for union contract issues at 6:40 p.m.

The meeting was called back to order at 9:35 p.m.

A motion was made by Mr. Farrow to dispense with the reading of the minutes; no second was received.

Mr. Johns made a motion to adopt the minutes of Meeting #604 as presented and was seconded by Mr. Farrow. On Roll Call all ayes.

Mr. Farrow made a motion and was seconded by Mr. Rhoades to ratify the invoices as presented and to accept expenditures for September 2007 in the amount of \$133,911.44 from the Housing Authority Master Fund; invoices in the amount of \$150,823.51 from the Housing Choice Voucher; and invoices in the amount of \$0.00 from the Management Fee Account; expenditures for October 2007 in the amount of \$57,941.00 from the Housing Choice Voucher; and invoices in the amount of \$0.00 from the Management Fee Account. On Roll Call Mrs. Richardson, nay; Mr. Johns, aye; Mr. Rhoades, aye; Mr. Farrow, aye; and Mrs. Zarick, aye; the motion passed.

Mr. Miller presented the completion of the Payment in Lieu of Taxes issue.

Mr. Miller presented the 2007 subsidy reduction correspondence. Reduction in operating subsidy amounted to \$98,540.00.

Mr. Miller presented the 2008 Stop Loss Package submitted to the Department of HUD to reduce future funding reductions.

Mr. Miller presented the Real Estate Assessment Center inspections of Spruce and Harrison Street Townhouses.

MEETING NO. 606

- 2 -

Mr. Miller reviewed the one-year maintenance bond inspection report for the Harold E. Thomas High Rise.

Mr. Miller presented the award to Jones Kohanski for the 2007 and 2008 audits.

Mr. Farrow made a motion to adopt the following change to the Housing Quality Voucher credit eligibility criteria and was seconded by Mr. Johns as follows:

“The Section 8 Program utilize the individual’s credit score only and not the number of delinquent accounts. This will establish a policy with current industry standards. “

Mr. Miller presented Asset Management Project Newsletter #8.

Mr. Farrow made a motion and was seconded by Mr. Johns to adopt Board Resolution #378 for Fiscal Year 2008 Budget. On Roll Call all ayes.

Mr. Farrow made a motion and was seconded by Mr. Rhoades to adopt Board Resolution #379 for Section 8 Management Assessment Program. On Roll Call all ayes.

Mr. Farrow made a motion to permit Board Members and the Executive Director to attend the Commissioners Conference January 13 – 16, 2008 and was seconded by Mr. Rhoades. On Roll Call all ayes.

A motion was made by Mr. Rhoades and seconded by Mr. Farrow to have an employee Christmas Party. On Roll Call ayes.

Mr. Farrow made a motion and was seconded by Mrs. Zarick to have a Christmas Party or gift certificate; Mrs. Zarick and Mrs. Richardson will be in charge of the arrangements. On Roll Call all ayes.

Mr. Farrow made a motion and was seconded by Mr. Rhoades to authorize the Executive Director to apply for grants for the Shroyer Mill property. On Roll Call Mr. Richardson, nay; Mr. Johns, nay; Mr. Farrow, aye; Mr. Rhoades, aye; Mrs. Zarick, nay; the motion failed to pass.

Mr. Farrow made a motion to adjourn at 10:40 p.m. and was seconded by Mr. Rhoades. On Roll Call all ayes.

MEETING NO. 615

The regular monthly meeting of the Board of the Housing Authority of the City of Shamokin was held on Thursday, July 17, 2008, at 7:00 p.m. at the Administrative Office, 1 East Independence Street, Shamokin, Pennsylvania.

The following were present at Roll Call:

Mrs. Betsy Richardson, Chairperson; Mr. Daniel C. Johns, Vice Chairman; Mrs. Patricia Zarick, Member; and Mr. James Picarelli, Member;

Mr. Malcom Farrow IV, Member was absent;

Also present were Mr. Ronald A. Miller, Executive Director; Attorney James Rosini, Solicitor;

Staff present: Mrs. Cornelia Adams, Mrs. Renée Draugelis, Mrs. Frye, Mrs. Kathleen Gonsar, Mr. Barry Richie and Mrs. Karen Wywadis;

Others present: Mr. Gerald Bogetti, IBEW;

Mr. Bogetti addressed the Board as to the grievance procedures.

Mr. Bogetti addressed the Board on Mrs. Adams' position from full-time to part time that was requested by employee and assisted in the budget shortfall.

Mrs. Richardson requested a master list of comp time for all employees for 2007. The majority of the comp time for 2007 was accumulated before the hiring of Mrs. Adams and Mrs. Kinder. Mrs. Draugelis stated there is no master list for comp time because only one employee has any compensatory time available, the rest of the employees have a zero balance. Mrs. Richardson said if she wants to review comp time she wants a master list, even if it stays at a zero balance forever. Mr. Miller stated everyone's comp time is in there with the exception of him. Mrs. Richardson stated Mr. Miller does not get comp time, Mr. Miller disagreed and said according to Mrs. Richardson's Personnel Policy, that he is entitled to comp time and it will be discussed later.

Mrs. Richardson started a discussion regarding the audit findings.

Mrs. Richardson asked Mr. Bogetti what has to be posted for the comp time. It was determined a master list would be helpful, even if a zero balance for all employees, to be posted where the staff, Board, or union representative can review at any time. Mrs. Richardson stated that when they get their bill list and payroll accounting every month then if anyone has comp time and there is no comp time on the master list then we need to check before we are called out. So and of course the Board does not want to be implicated in anything. Mrs. Draugelis stated that comp time does not show up in any of these reports. Mrs. Richardson said, I didn't

MEETING NO. 615- (Continued)

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say it did, I didn't say it did, I said I want to review this and if comp time doesn't show up in the payroll then that's fine, however, if the payroll increases I have every right to ask why the increase in the payroll, and that would be comp time and that would be my prerogative to ask... Mr. Miller told Mrs. Richardson no it doesn't s increase there. Mrs. Richardson said if you pay them, Mr. Miller said you don't get paid for comp time that is the purpose of comp time it shows nowhere. Mrs. Richardson said however, you can pay them. Mr. Miller said yes you could pay them, but then it would not be comp time it would be overtime. As far as comp time goes it does not show up as an increase in anything.

Mrs. Richardson stated the issue at hand is Mrs. Adams's request to go from full-time clerk typist II to a part time clerk typist II position, and at this point I am making a motion that at this time Mrs. Adams remain at a full time clerk typist II position as she was hired. Mr. Miller asked for what purpose Mrs. Richardson? For the purpose that she was hired for, so that is my motion and I would like a second. Mr. Picarelli then seconded the motion. On Roll Call Mr. Picarelli, aye; Mrs. Zarick, aye; and Mrs. Richardson, aye. The motion passed.

If any other request of change, then this Board will be sure to keep in contact with you so that we have it from here and will be right with the union. Mrs. Adams asked whether she could file a grievance. Mr. Bogetti said yes, you could file a grievance. Mrs. Adams added, I also will file with Civil Service because I am working out of classification. I asked to go part-time, I didn't see the problem with that, I don't know who brought that up. Mr. Bogetti said to come over the office tomorrow to file a grievance. Mrs. Adams asked why it is a problem that she is part time. Mrs. Richardson said "nothing". Again Mrs. Adams asked what the problem was with her going part time. Mrs. Richardson answered because we needed to go through protocol for it and now we did and now you are part time so you can take your grievance, that is exactly the way the system works.

Mrs. Wywadis presented a letter of resignation to the Board and Executive Director, which the Board accepted.

A motion to approve the minutes of the meetings May 2008 and June 2008 was made by Mrs. Zarick and seconded by Mr. Picarelli. On Roll Call all ayes.

MEETING NO. 615 – (Continued)

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Mrs. Zarick made a motion and was seconded by Mr. Picarelli to ratify the invoices as presented and to accept expenditures for May 2008 in the amount of \$83,376.66 from the Housing Authority Master Fund; in the amount of \$62,666.90 from the Housing Choice Voucher; and invoices in the amount of \$0.00 from the Management Fee Account; June 2008 expenditures in the amount of \$169,984.84 from the Housing Authority Master fund; in the amount of \$66,203.00 from the Housing Choice Voucher; and invoices in the amount of \$1,368.13 from the Management Fee Account. On Roll Call all ayes.

Mr. Miller presented the 2007 Fiscal Audit.

Mr. Miller presented the rate changes for Geisinger Health Plan coverage effective October 2008 as follows:

<u>Type</u>	<u>Old Contract</u>	<u>New Contract</u>
Employee	\$ 448.26	\$ 470.48
Employee & Spouse	\$1,075.82	\$1,129.15
Family	\$1,213.70	\$1,274.95
Employee & Child	\$ 627.56	\$ 658.67
Employee & Children	\$ 896.52	\$ 940.96

Mr. Miller reviewed audit correspondence invoice and contract that required the cancellation and re-advertising of the audit for the fiscal years 2008 and 2009.

Mr. Miller informed the Board the 2008 Annual Plan is on display as of July 15, 2008.

Mr. Miller submitted changes to the credit eligibility for Public Housing as follows: Misdemeanor 2, an applicant should have a clean record for 24 months. Felony 1 and 2, an applicant should have a clean record for 60 months, and Felony 3, a clean record for seven years. Violations of Megan's Law, no time frame should be applicable. Applicant should be permanently disbarred from the Section 8 Housing Choice Voucher Program. If an applicant were incarcerated, the clean record should start from the first day of release. A motion was made to accept the credit eligibility by Mrs. Richardson and was seconded by Mrs. Zarick.

MEETING NO. 615 – (Continued)

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Mr. Miller presented a revision to the criminal background eligibility criteria as follows: Section 8 Housing Choice Voucher Program will utilize the individual's credit score only, and not the number of delinquent accounts. A motion to adopt the revision of the criminal background eligibility was made by Mrs. Richardson and seconded by Mrs. Zarick. On Roll Call all ayes.

Mr. Rosini reported on the audit.

Mr. Miller reported on the status of the Harrison Street fire repairs to 301, 303 and 305.

Mrs. Richardson called an executive Session for personnel at 8:40 p.m.

The meeting was called back to order at 9:02 p.m.

Mr. Miller reviewed with the Board the excessive amounts of tenant accounts receivables. Mr. Miller stated that verbal and written directives failed to achieve the results due to non-compliance, non-performance with policy by personnel responsible for identifying and reporting delinquencies as follows:

Memo dated October 2, 2007

“As per prior discussions and practices, all tenants in possession that have not paid the prior month's rent by the 7th of the next month will receive a notice to remove and quit, to protect the Authority against extended collection losses.

Please keep this memorandum for use on the 7th of the month or other applicable date when late fees are posted.”

The meeting did not receive a motion to adjourn, Members left at 9:10 p.m.