

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

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# PHA Plans

5 Year Plan for Fiscal Years 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:** Stevens Point Housing Authority

**PHA Number:** WI37

**PHA Fiscal Year Beginning:** (mm/yyyy) 07/2008

**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:  
 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)
- PHA Goal: Improve the quality of assisted housing  
Objectives:
- Improve public housing management: (PHAS score)
  - Improve voucher management: (SEMAP score)
  - Increase customer satisfaction:
  - Concentrate on efforts to improve specific management functions: (list; e.g., public housing finance; voucher unit inspections)
  - Renovate or modernize public housing units:
  - Demolish or dispose of obsolete public housing:
  - Provide replacement public housing:
  - Provide replacement vouchers:

Other: (list below)

PHA Goal: Increase assisted housing choices

Objectives:

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

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

PHA Goal: Provide an improved living environment

Objectives:

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

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

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

Objectives:

- Increase the number and percentage of employed persons in assisted families:
- Provide or attract supportive services to improve assistance recipients' employability:
- Provide or attract supportive services to increase independence for the elderly or families with disabilities.
- Other: (list below)

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

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

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

**Annual PHA Plan**  
**PHA Fiscal Year 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)]

Many of the Goals and Objectives of previous plans have been achieved so are no longer considered necessary to identify. For instance, we have taken affirmative measures to ensure accessible housing to persons with all varieties of disabilities regardless of unit size requirements through an extensive, mixed finance public housing renovation project. We have secured supportive services to increase independence for the elderly and families with disabilities to compliment the mixed finance improvements. We have implemented public housing security improvements at two of our public housing sites. We have an on-going housing rehab and homeownership program aimed at maintaining the affordable, owner - occupied housing stock in our community.

This year we will concentrate on improving our unit turnaround time and generally improving our productivity. We will also continue to modernize our inventory to keep it viable and relevant into the next decade.

**iii. Annual Plan Table of Contents**

[24 CFR Part 903.7 9 (r)]

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

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**Attachments**

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

**Required Attachments:**

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

**Optional Attachments:**

- PHA Management Organizational Chart
- FY 2005 Capital Fund Program 5 Year Action Plan
- Public Housing Drug Elimination Program (PHDEP) Plan
- Comments of Resident Advisory Board or Boards (must be attached if not included in PHA Plan text)
- Other (List below, providing each attachment name)

**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>
	PHA Plan Certifications of Compliance with the PHA Plans	5 Year and Annual Plans

<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	and Related Regulations	
X	State/Local Government Certification of Consistency with the Consolidated Plan	5 Year and Annual Plans
X	Fair Housing Documentation: Records reflecting that the PHA has examined its programs or proposed programs, identified any impediments to fair housing choice in those programs, addressed or is addressing those impediments in a reasonable fashion in view of the resources available, and worked or is working with local jurisdictions to implement any of the jurisdictions' initiatives to affirmatively further fair housing that require the PHA's involvement.	5 Year and Annual Plans
	Consolidated Plan for the jurisdiction/s in which the PHA is located (which includes the Analysis of Impediments to Fair 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
	Public Housing Deconcentration and Income Mixing Documentation: 1. PHA board certifications of compliance with deconcentration requirements (section 16(a) of the US Housing Act of 1937, as implemented in the 2/18/99 <i>Quality Housing and Work Responsibility Act Initial Guidance; Notice</i> and any further HUD guidance) and 2. Documentation of the required deconcentration and income mixing analysis	Annual Plan: Eligibility, Selection, and Admissions Policies
X	Public housing rent determination policies, including the methodology for setting public housing flat rents <input checked="" type="checkbox"/> check here if included in the public housing A & O Policy	Annual Plan: Rent Determination
X	Schedule of flat rents offered at each public housing development <input checked="" type="checkbox"/> check here if included in the public housing A & O Policy	Annual Plan: Rent Determination
	Section 8 rent determination (payment standard) policies <input type="checkbox"/> check here if included in Section 8 Administrative Plan	Annual Plan: Rent Determination
X	Public housing management and maintenance policy documents, including policies for the prevention or eradication of pest infestation (including cockroach	Annual Plan: Operations and Maintenance
X		

<b>List of Supporting Documents Available for Review</b>		
<b>Applicable &amp; On Display</b>	<b>Supporting Document</b>	<b>Applicable Plan Component</b>
	infestation)	
X	Public housing grievance procedures <input checked="" type="checkbox"/> check here if included in the public housing A & O Policy	Annual Plan: Grievance Procedures
	Section 8 informal review and hearing procedures <input type="checkbox"/> check here if included in Section 8 Administrative Plan	Annual Plan: Grievance Procedures
X	The HUD-approved Capital Fund/Comprehensive Grant Program Annual Statement (HUD 52837) for the active grant year	Annual Plan: Capital Needs
	Most recent CIAP Budget/Progress Report (HUD 52825) for any active CIAP grant	Annual Plan: Capital Needs
	Most recent, approved 5 Year Action Plan for the Capital Fund/Comprehensive Grant Program, if not included as an attachment (provided at PHA option)	Annual Plan: Capital Needs
	Approved HOPE VI applications or, if more recent, approved or submitted HOPE VI Revitalization Plans or any other approved proposal for development of public housing	Annual Plan: Capital Needs
	Approved or submitted applications for demolition and/or disposition of public housing	Annual Plan: Demolition and Disposition
	Approved or submitted applications for designation of public housing (Designated Housing Plans)	Annual Plan: Designation of Public Housing
	Approved or submitted assessments of reasonable revitalization of public housing and approved or submitted conversion plans prepared pursuant to section 202 of the 1996 HUD Appropriations Act	Annual Plan: Conversion of Public Housing
	Approved or submitted public housing homeownership programs/plans	Annual Plan: Homeownership
	Policies governing any Section 8 Homeownership program <input type="checkbox"/> check here if included in the Section 8 Administrative Plan	Annual Plan: Homeownership
	Any cooperative agreement between the PHA and the TANF agency	Annual Plan: Community Service & Self-Sufficiency
	FSS Action Plan/s for public housing and/or Section 8	Annual Plan: Community Service & Self-Sufficiency
	Most recent self-sufficiency (ED/SS, TOP or ROSS or other resident services grant) grant program reports	Annual Plan: Community Service & Self-Sufficiency
	The most recent Public Housing Drug Elimination Program (PHEDEP) semi-annual performance report for any open grant and most recently submitted PHDEP application (PHDEP Plan)	Annual Plan: Safety and Crime Prevention
X	The most recent fiscal year audit of the PHA conducted under section 5(h)(2) of the U.S. Housing Act of 1937 (42 U.S.C. 1437c(h)), the results of that audit and the PHA's response to any findings	Annual Plan: Annual Audit
	Troubled PHAs: MOA/Recovery Plan	Troubled PHAs
	Other supporting documents (optional) (list individually; use as many lines as necessary)	(specify as needed)

<b>List of Supporting Documents Available for Review</b>		
<b>Applicable &amp; On Display</b>	<b>Supporting Document</b>	<b>Applicable Plan Component</b>

# 1. Statement of Housing Needs

[24 CFR Part 903.7 9 (a)]

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

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

Housing Needs of Families in the Jurisdiction by Family Type							
Family Type	Overall	Afford-ability	Supply	Quality	Access-ibility	Size	Loca-tion
Income <= 30% of AMI	341	5	3	3	2	2	2
Income >30% but <=50% of AMI	28	4	2	3	3	2	2
Income >50% but <80% of AMI	*						
Elderly	377	4	2	2	4	2	2
Families with Disabilities	198	3	4	4	4	3	3
Race/Ethnicity	5(Hisp)	2	2	3	2	4	3
Race/Ethnicity	4 (Blk)	5	3	3	2	2	3
Race/Ethnicity	7 (Asn)	4	5	4	3	5	3
Race/Ethnicity							

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

- Consolidated Plan of the Jurisdiction/s  
Indicate year:
- U.S. Census data: the Comprehensive Housing Affordability Strategy ("CHAS") dataset
- American Housing Survey data  
Indicate year:
- Other housing market study  
Indicate year: January 30, 2006
- Other sources: U.S. Census Data – FS 3

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

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

Housing Needs of Families on the Waiting List			
Waiting list type: (select one)			
<input type="checkbox"/> Section 8 tenant-based assistance			
<input checked="" type="checkbox"/> Public Housing			
<input type="checkbox"/> Combined Section 8 and Public Housing			
<input type="checkbox"/> Public Housing Site-Based or sub-jurisdictional waiting list (optional)			
If used, identify which development/subjurisdiction:			
	# of families	% of total families	Annual Turnover
Waiting list total	71		30 - 40
Extremely low income <=30% AMI	43	61 %	
Very low income (>30% but <=50% AMI)	28	39 %	
Low income (>50% but <80% AMI)	-0-	-0-	
Families with children	33	46 %	
Elderly families	9	13 %	
Families with Disabilities	9	13 %	
Race/ethnicity	3 (Hisp.)	4 %	
Race/ethnicity	2 (Black)	3 %	
Race/ethnicity	5 (Asian)	7 %	
Race/ethnicity	61 (Cauc)	86 %	
Characteristics by Bedroom Size (Public Housing Only)			
1BR	34	48 %	
2 BR	28	39 %	
3 BR	8	11 %	
4 BR	-0-	-0-	

Housing Needs of Families on the Waiting List			
5 BR	-0-	-0-	
5+ BR	1	1 %	
Is the waiting list closed (select one)? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes If yes: How long has it been closed (# of months)? Does the PHA expect to reopen the list in the PHA Plan year? <input type="checkbox"/> No <input type="checkbox"/> Yes Does the PHA permit specific categories of families onto the waiting list, even if generally closed? <input type="checkbox"/> No <input type="checkbox"/> Yes			

### C. Strategy for Addressing Needs

Provide a brief description of the PHA's strategy for addressing the housing needs of families in the jurisdiction and on the waiting list **IN THE UPCOMING YEAR**, and the Agency's reasons for choosing this strategy.

#### (1) Strategies

**Need: Shortage of affordable housing for all eligible populations**

**Strategy 1. Maximize the number of affordable units available to the PHA within its current resources by:**

Select all that apply

- Employ effective maintenance and management policies to minimize the number of public housing units off-line
- Reduce turnover time for vacated public housing units
- Reduce time to renovate public housing units
- Seek replacement of public housing units lost to the inventory through mixed finance development
- Seek replacement of public housing units lost to the inventory through section 8 replacement housing resources
- Maintain or increase section 8 lease-up rates by establishing payment standards that will enable families to rent throughout the jurisdiction
- Undertake measures to ensure access to affordable housing among families assisted by the PHA, regardless of unit size required
- Maintain or increase section 8 lease-up rates by marketing the program to owners, particularly those outside of areas of minority and poverty concentration
- Maintain or increase section 8 lease-up rates by effectively screening Section 8 applicants to increase owner acceptance of program
- Participate in the Consolidated Plan development process to ensure coordination with broader community strategies
- Other (list below)

**Strategy 2: Increase the number of affordable housing units by:**

Select all that apply

- Apply for additional section 8 units should they become available
- Leverage affordable housing resources in the community through the creation of mixed - finance housing
- Pursue housing resources other than public housing or Section 8 tenant-based assistance.
- Other: (list below)

**Need: Specific Family Types: Families at or below 30% of median**

**Strategy 1: Target available assistance to families at or below 30 % of AMI**

Select all that apply

- Exceed HUD federal targeting requirements for families at or below 30% of AMI in public housing
- Exceed HUD federal targeting requirements for families at or below 30% of AMI in tenant-based section 8 assistance
- Employ admissions preferences aimed at families with economic hardships
- Adopt rent policies to support and encourage work
- Other: (list below)

**Need: Specific Family Types: Families at or below 50% of median**

**Strategy 1: Target available assistance to families at or below 50% of AMI**

Select all that apply

- Employ admissions preferences aimed at families who are working
- Adopt rent policies to support and encourage work
- Other: (list below)

**Need: Specific Family Types: The Elderly**

**Strategy 1: Target available assistance to the elderly:**

Select all that apply

- Seek designation of public housing for the elderly
- Apply for special-purpose vouchers targeted to the elderly, should they become available
- Other: (list below)

**Need: Specific Family Types: Families with Disabilities**

**Strategy 1: Target available assistance to Families with Disabilities:**

Select all that apply

- Seek designation of public housing for families with disabilities
- Carry out the modifications needed in public housing based on the section 504 Needs Assessment for Public Housing
- Apply for special-purpose vouchers targeted to families with disabilities, should they become available
- Affirmatively market to local non-profit agencies that assist families with disabilities
- Other: (list below)

**Need: Specific Family Types: Races or ethnicities with disproportionate housing needs**

**Strategy 1: Increase awareness of PHA resources among families of races and ethnicities with disproportionate needs:**

Select if applicable

- Affirmatively market to races/ethnicities shown to have disproportionate housing needs
- Other: (list below)

**Strategy 2: Conduct activities to affirmatively further fair housing**

Select all that apply

- Counsel section 8 tenants as to location of units outside of areas of poverty or minority concentration and assist them to locate those units
- Market the section 8 program to owners outside of areas of poverty /minority concentrations
- Other: (list below)

**Other Housing Needs & Strategies: (list needs and strategies below)**

Designate units for the transitional housing needs of those leaving abusive relationships

**(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)  
Counter-productive federal housing policies unresponsive to local needs.

## **2. Statement of Financial Resources**

[24 CFR Part 903.7 9 (b)]

List the financial resources that are anticipated to be available to the PHA for the support of Federal public housing and tenant-based Section 8 assistance programs administered by the PHA during the Plan year. Note: the table assumes that Federal public housing or tenant based Section 8 assistance grant funds are expended on eligible purposes; therefore, uses of these funds need not be stated. For other funds, indicate the use for those funds as one of the following categories: public housing operations, public housing capital improvements, public housing safety/security, public housing supportive services, Section 8 tenant-based assistance, Section 8 supportive services or other.

<b>Financial Resources: Planned Sources and Uses</b>		
<b>Sources</b>	<b>Planned \$</b>	<b>Planned Uses</b>
<b>1. Federal Grants (FY 2005 grants)</b>		
a) Public Housing Operating Fund	341,409	
b) Public Housing Capital Fund	448,574	
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>Financial Resources: Planned Sources and Uses</b>		
<b>Sources</b>	<b>Planned \$</b>	<b>Planned Uses</b>
<b>2. Prior Year Federal Grants (unobligated funds only) (list below)</b>		
FYE 2007 Capital Funds	191,342	Dwell Structures Improvements
<b>3. Public Housing Dwelling Rental Income</b>	628,000	Operations
<b>4. Other income (list below)</b>		
<b>4. Non-federal sources (list below)</b>		
<b>Total resources</b>	819,342	

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

[24 CFR Part 903.7 9 (c)]

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

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

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

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

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

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

- Criminal or Drug-related activity
- Rental history
- Housekeeping
- Other (describe) Debt owed to other governmental agencies.

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

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

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

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

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

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

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

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

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

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

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

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

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

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

**(3) Assignment**

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

- One
- Two
- Three or More

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

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

**(4) Admissions Preferences**

a. Income targeting:

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

b. Transfer policies:

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

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

c. Preferences

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

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

Former Federal preferences:

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

Other preferences: (select below)

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

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

Date and Time

Former Federal preferences:

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

Other preferences (select all that apply)

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

4. Relationship of preferences to income targeting requirements:

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

**(5) Occupancy**

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

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

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

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

**(6) Deconcentration and Income Mixing**

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

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

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

Adoption of site-based waiting lists  
If selected, list targeted developments below:

Employing waiting list “skipping” to achieve deconcentration of poverty or income mixing goals at targeted developments  
If selected, list targeted developments below:

Employing new admission preferences at targeted developments  
If selected, list targeted developments below:

Other (list policies and developments targeted below)

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

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

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

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

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

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

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

## B. Section 8

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

### (1) Eligibility

- a. What is the extent of screening conducted by the PHA? (select all that apply)
- Criminal or drug-related activity only to the extent required by law or regulation
  - Criminal and drug-related activity, more extensively than required by law or regulation
  - More general screening than criminal and drug-related activity (list factors below)
  - Other (list below)
- b.  Yes  No: Does the PHA request criminal records from local law enforcement agencies for screening purposes?
- c.  Yes  No: Does the PHA request criminal records from State law enforcement agencies for screening purposes?
- d.  Yes  No: Does the PHA access FBI criminal records from the FBI for screening purposes? (either directly or through an NCIC-authorized source)
- e. Indicate what kinds of information you share with prospective landlords? (select all that apply)
- Criminal or drug-related activity
  - Other (describe below)

### (2) Waiting List Organization

- a. With which of the following program waiting lists is the section 8 tenant-based assistance waiting list merged? (select all that apply)
- None
  - Federal public housing
  - Federal moderate rehabilitation
  - Federal project-based certificate program
  - Other federal or local program (list below)

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

- PHA main administrative office  
 Other (list below)

**(3) Search Time**

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

If yes, state circumstances below:

**(4) Admissions Preferences**

a. Income targeting

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

b. Preferences

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

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

Former Federal preferences

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

Other preferences (select all that apply)

- Working families and those unable to work because of age or disability  
 Veterans and veterans' families  
 Residents who live and/or work in your jurisdiction  
 Those enrolled currently in educational, training, or upward mobility programs

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

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

Date and Time

Former Federal preferences

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

Other preferences (select all that apply)

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

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

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

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

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

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

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

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

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

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

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

- Through published notices  
 Other (list below)

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

[24 CFR Part 903.7 9 (d)]

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

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

#### **(1) Income Based Rent Policies**

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

a. Use of discretionary policies: (select one)

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

---or---

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

b. Minimum Rent

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

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

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

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

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

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

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

Flat/Ceiling Rent Table

No. of bedrooms	1	2	3	4	5	6	7
Madison View							
Rents	\$225	\$305	\$370	\$425	N/A	\$460	\$490
Scattered Site							
Rents	N/A	\$255	\$375	\$445	\$480	N/A	N/A
Hi-Rise Manor							
Rent	\$385						

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

- For the earned income of a previously unemployed household member
- For increases in earned income
- Fixed amount (other than general rent-setting policy)  
If yes, state amount/s and circumstances below:
- Fixed percentage (other than general rent-setting policy)  
If yes, state percentage/s and circumstances below:
- For household heads
- For other family members
- For transportation expenses
- For the non-reimbursed medical expenses of non-disabled or non-elderly families
- Other (describe below)

e. Ceiling rents

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

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

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

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

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

- Market comparability study
- Fair market rents (FMR)
- 95<sup>th</sup> percentile rents

- 75 percent of operating costs
- 100 percent of operating costs for general occupancy (family) developments
- Operating costs plus debt service
- The "rental value" of the unit
- Other (list below)

f. Rent re-determinations:

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

- Never
- At family option
- Any time the family experiences an income increase
- Any time a family experiences an income increase above a threshold amount or percentage: (if selected, specify threshold)\_\_\_\_\_
- Other (list below)

- 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)  
100 percent of operating costs for general occupancy (family) developments  
The "rental value" of the unit

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

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

**(1) Payment Standards**

Describe the voucher payment standards and policies.

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

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

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

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

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

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

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

- Annually
- Other (list below)

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

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

**(2) Minimum Rent**

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

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

b.  Yes  No: Has the PHA adopted any discretionary minimum rent hardship exemption policies? (if yes, list below)

## **5. Operations and Management**

[24 CFR Part 903.7 9 (e)]

Exemptions from Component 5: High performing and small PHAs are not required to complete this section. Section 8 only PHAs must complete parts A, B, and C(2)

### **A. PHA Management Structure**

Describe the PHA's management structure and organization.

(select one)

- An organization chart showing the PHA's management structure and organization is attached.
- A brief description of the management structure and organization of the PHA follows:

### **B. HUD Programs Under PHA Management**

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

<b>Program Name</b>	<b>Units or Families Served at Year Beginning</b>	<b>Expected Turnover</b>
Public Housing	251	30-40 units
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)		
Project Based Section 8	80	5-10 units

**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)  
Resident Handbooks for each project
- (2) Section 8 Management: (list below)  
N/A

**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 A

-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 A

-or-

The Capital Fund Program 5-Year Action Plan is provided below: (if selected, copy the CFP optional 5 Year Action Plan from the Table Library and insert here)

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

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

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

1. Development name:

2. Development (project) number:

3. Status of grant: (select the statement that best describes the current status)

- Revitalization Plan under development
- Revitalization Plan submitted, pending approval
- Revitalization Plan approved
- Activities pursuant to an approved Revitalization Plan underway

Yes  No: c) Does the PHA plan to apply for a HOPE VI Revitalization grant in the Plan year?

If yes, list development name/s below:

Yes  No: d) Will the PHA be engaging in any mixed-finance development activities for public housing in the Plan year?

If yes, list developments or activities below:

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

## **8. Demolition and Disposition**

[24 CFR Part 903.7 9 (h)]

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

1.  Yes  No: Does the PHA plan to conduct any demolition or disposition activities (pursuant to section 18 of the U.S. Housing Act of 1937 (42 U.S.C. 1437p)) in the plan Fiscal Year? (If “No”, skip to component 9; if “yes”, complete one activity description for each development.)

### 2. Activity Description

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

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

**9. Designation of Public Housing for Occupancy by Elderly Families or Families with Disabilities or Elderly Families and Families with Disabilities**

[24 CFR Part 903.7 9 (i)]

Exemptions from Component 9; Section 8 only PHAs are not required to complete this section.

1.  Yes  No: Has the PHA designated or applied for approval to designate or does the PHA plan to apply to designate any public housing for occupancy only by the elderly families or only by families with disabilities, or by elderly families and families with disabilities or will apply for designation for occupancy by only elderly families or only families with disabilities, or by elderly families and families with disabilities as provided by section 7 of the U.S. Housing Act of 1937 (42 U.S.C. 1437e) in the upcoming fiscal year? (If “No”, skip to component 10. If “yes”, complete one activity description for each development, unless the PHA is eligible to complete a streamlined submission; PHAs completing streamlined submissions may skip to component 10.)

2. Activity Description

Yes  No: Has the PHA provided all required activity description information for this component in the **optional** Public Housing Asset Management Table? If “yes”, skip to component 10. If “No”, complete the Activity Description table below.

<b>Designation of Public Housing Activity Description</b>
1a. Development name: 1b. Development (project) number:
2. Designation type: Occupancy by only the elderly <input type="checkbox"/> Occupancy by families with disabilities <input type="checkbox"/> Occupancy by only elderly families and families with disabilities <input type="checkbox"/>
3. Application status (select one) Approved; included in the PHA’s Designation Plan <input type="checkbox"/> Submitted, pending approval <input type="checkbox"/> Planned application <input type="checkbox"/>
4. Date this designation approved, submitted, or planned for submission: (DD/MM/YY)
5. If approved, will this designation constitute a (select one) <input type="checkbox"/> New Designation Plan <input type="checkbox"/> Revision of a previously-approved Designation Plan?
6. Number of units affected:
7. Coverage of action (select one)

- |  |
|--|
| <input type="checkbox"/> Part of the development<br><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)

- Units addressed in a pending or approved demolition application (date submitted or approved: \_\_\_\_\_)
- Units addressed in a pending or approved HOPE VI demolition application (date submitted or approved: \_\_\_\_\_)
- Units addressed in a pending or approved HOPE VI Revitalization Plan (date submitted or approved: \_\_\_\_\_)
- Requirements no longer applicable: vacancy rates are less than 10 percent
- Requirements no longer applicable: site now has less than 300 units
- Other: (describe below)

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

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

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

[24 CFR Part 903.7 9 (k)]

### **A. Public Housing**

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

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

2. Activity Description

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

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

**B. Section 8 Tenant Based Assistance**

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

2. Program Description:

- a. Size of Program

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

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

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

b. PHA-established eligibility criteria

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

If yes, list criteria below:

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

[24 CFR Part 903.7 9 (l)]

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

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

1. Cooperative agreements:

Yes  No: Has the PHA 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. )

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


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

a. Participation Description

<b>Family Self Sufficiency (FSS) Participation</b>		
Program	Required Number of Participants (start of FY 2005 Estimate)	Actual Number of Participants (As of: DD/MM/YY)
Public Housing		
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**

Attachment B

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

[24 CFR Part 903.7 9 (m)]

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

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

1. Describe the need for measures to ensure the safety of public housing residents

(select all that apply)

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

**14. RESERVED FOR PET POLICY**

[24 CFR Part 903.7 9 (n)]

Attachment C

## **15. Civil Rights Certifications**

[24 CFR Part 903.7 9 (o)]

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

## **16. Fiscal Audit**

[24 CFR Part 903.7 9 (p)]

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

## **17. PHA Asset Management**

[24 CFR Part 903.7 9 (q)]

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

1.  Yes  No: Is the PHA engaging in any activities that will contribute to the long-term asset management of its public housing stock, including how the Agency will plan for long-term operating, capital investment, rehabilitation, modernization, disposition, and other needs that have **not** been addressed elsewhere in this PHA Plan?
2. What types of asset management activities will the PHA undertake? (select all that apply)
  - Not applicable
  - Private management
  - Development-based accounting
  - Comprehensive stock assessment
  - Other: (list below)
3.  Yes  No: Has the PHA included descriptions of asset management activities in the **optional** Public Housing Asset Management Table?

## **18. Other Information**

[24 CFR Part 903.7 9 (r)]

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

1.  Yes  No: Did the PHA receive any comments on the PHA Plan from the Resident Advisory Board/s?
  
2. If yes, the comments are: (if comments were received, the PHA **MUST** select one)  
 Attached at Attachment (File name)  
 Provided below:
  
3. In what manner did the PHA address those comments? (select all that apply)  
 Considered comments, but determined that no changes to the PHA Plan were necessary.  
 The PHA changed portions of the PHA Plan in response to comments  
List changes below:  
 Other: (list below)

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

1.  Yes  No: Does the PHA meet the exemption criteria provided section 2(b)(2) of the U.S. Housing Act of 1937? (If no, continue to question 2; if yes, skip to sub-component C.)
  
2.  Yes  No: Was the resident who serves on the PHA Board elected by the residents? (If yes, continue to question 3; if no, skip to sub-component C.)

#### 3. Description of Resident Election Process

- a. Nomination of candidates for place on the ballot: (select all that apply)  
 Candidates were nominated by resident and assisted family organizations  
 Candidates could be nominated by any adult recipient of PHA assistance  
 Self-nomination: Candidates registered with the PHA and requested a place on ballot  
 Other: (describe)
  
- b. Eligible candidates: (select one)  
 Any recipient of PHA assistance  
 Any head of household receiving PHA assistance  
 Any adult recipient of PHA assistance

- Any adult member of a resident or assisted family organization
- Other (list)

c. Eligible voters: (select all that apply)

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

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

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

1. Consolidated Plan jurisdiction: (provide name here)  
State of Wisconsin
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

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

### Annual Statement

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

Capital Fund Grant Number WI39PO37502-08 FFY of Grant Approval: June 30, 2008

Original Annual Statement

Line No.	Summary by Development Account	Total Estimated Cost
1	Total Non-CGP Funds	
2	1406 Operations	44300
3	1408 Management Improvements	44300
4	1410 Administration	44300
5	1411 Audit	
6	1415 Liquidated Damages	
7	1430 Fees and Costs	15000
8	1440 Site Acquisition	
9	1450 Site Improvement	20000
10	1460 Dwelling Structures	98015
11	1465.1 Dwelling Equipment-Nonexpendable	
12	1470 Nondwelling Structures	
13	1475 Nondwelling Equipment	60000
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	122659
20	<b>Amount of Annual Grant (Sum of lines 2-19)</b>	<b>448574</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
HA Wide 37-2,3,8	A&E	1430	15000
HA Wide 37-2,3,8	ADA Improvements	1460	7500
HA Wide 37-2,3,8	Administration	1410	44300
SS & MV 37-2,3,8	Hot Water Heater Replace	1460	5000
HA Wide 37-2,3,8	Computer Replace	1475	5000
HA Wide 37-2,3,8	Floor & Cupboard Replace	1460	35515
SS & MV 37-2,3,8	Siding Replace	1460	50000
HA Wide 37-2,3,8	Maintenance Vehicle Replace	1475	50000
HA Wide 37-2,3,8	Landscaping	1450	5000
HA Wide 37-2,3,8	Maint Tool/Equipment Replace	1475	5000
HA Wide 37-2,3,8	Management Improvements	1408	44300
HA Wide 37-2,3,8	Operations	1406	44300
HA Wide 37-2,3,8	Sealcoating	1450	15000
HR 37-1	Debt Service	1502	122659

**Annual Statement**

**Capital Fund Program (CFP) Part III: Implementation Schedule**

Development Number/Name HA-Wide Activities	All Funds Obligated (Quarter Ending Date)	All Funds Expended (Quarter Ending Date)
HA Wide 37-2,3,8 A&E	06/30/2010	06/30/2010
HA Wide 37-2,3,8 ADA Improvements	06/30/2010	06/30/2010
HA Wide 37-2,3,8 Administration	06/30/2010	06/30/2010
SS & MV 37-2,3,8 Hot Water Heater Replace	06/30/2010	06/30/2010
HA Wide 37-2,3,8 Computer Replace	06/30/2010	06/30/2010
HA Wide 37-2,3,8 Floor & Cupboard Replace	06/30/2010	06/30/2010
SS & MV 37-2,3,8 Siding Replace	06/30/2010	06/30/2010
HA Wide 37-2,3,8 Maintenance Vehicle Replace	06/30/2010	06/30/2010
HA Wide 37-2,3,8 Landscaping	06/30/2010	06/30/2010
HA Wide 37-2,3,8 Maint Tool/Equip Replace	06/30/2010	06/30/2010
HA Wide 37-2,3,8 Management Improvements	06/30/2010	06/30/2010
HA Wide 37-2,3,8 Operations	06/30/2010	06/30/2010
HA Wide 37-2,3,8 Sealcoating	06/30/2010	06/30/2010
HR 37-1 Debt Service	06/30/2010	06/30/2010

## 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

### Annual Statement/Performance and Evaluation Report

### Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPF)

PHA Name: Stevens Point Housing Authority	<b>Grant Type and Number</b> Capital Fund Program Grant No: WI39P03 Replacement Housing Factor Grant No:
--	--

Original Annual Statement     
  Reserve for Disasters/Emergencies     
  Revised Annual Statement  
 Performance and Evaluation Report for Period Ending:     
  Final Performance Report

Line No.	Summary by Development Account	Total Estimated Cost
		Original
1	Total non-CFP Funds	
2	1406 Operations	49,843
3	1408 Management Improvements	49,843
4	1410 Administration	48,943
5	1411 Audit	
6	1415 Liquidated Damages	
7	1430 Fees and Costs	10,000
8	1440 Land Acquisition	
9	1450 Site Improvement	11,613
10	1460 Dwelling Structures	119,123
11	1465.1 Dwelling Equipment	
12	1470 Nondwelling Structures	
13	1475 Nondwelling Equipment	78,400
14	1485 Demolition	
15	1490 Replacement Reserve	
16	1492 Moving to Work Demonstration	
17	1495.1 Relocation Costs	
18	1499 Development Activities	
19	1501 Collaterization or Debt Service	121,669
20	1502 Contingency	

489,434



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

PHA Name:		<b>Grant Type and Number</b>			
Stevens Point Housing Authority		Capital Fund Program Grant No:		No: WI39P037501-05	
		Replacement Housing Factor Grant No:			
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct. No.	Quantity	Total Estimated Cost	
				Original	Revised
HA Wide 37-1,2,3,8	A&E	1430	1	10,000	
HR 37-1	Debt Service	1501	1	121,669	
HA Wide 37-1,2,3,8	ADA Improvement	1460	1	5,000	
HA Wide 37-1,2,3,8	Administration	1410	1	48,943	
HR & MV 37-1 & 8	Boiler Repairs	1460	1	5,000	
HA Wide 37-1,2,3,8	Computer Replacement	1475	1	75,000	
HA Wide 37-1,2,3,8	Floor & Cupboard	1460	1	75,952	
SS & MV 37-2,3,8	Washing & Tuck	1460	1	0	
SS & MV 37-2,3,8	Hot Water Heater	1460	1	0	
MV 37-8	Bathroom Upgrade	1460	1	0	
MV 37-8	Car Heater Outlet	1450	1	0	
MV 37-8	Washer & Dryer	1475	1	0	
MV 37-8	Kitchen Outlets	1460	1	0	
HA Wide 37-1,2,3,8	Maintenance Tool/Equipment Replace	1475	1	3,400	
HA Wide 37-1,2,3,8	Clean Furnace Ducts	1460	1	0	
HA Wide 37-1,2,3,8	Landscaping	1450	1	995	
HA Wide 37-1,2,3,8	Management Improvement	1408	1	49,843	
HA Wide 37-1,2,3,8	Operations	1406	1	49,843	
MV 37-8	Siding Replacement	1460	1	0	

MV 37-8	601/733 Courtya	1460	1	0	
MV 37-8	Add Phone/Cabl	1460	1	0	
MV 37-8	Interior Door/Kit	1460	1	0	
HA Wide 37-1,2,3,8	Sealcoating	1450	1	618	
HA Wide 37-1,2,3,8	Clothesline Pole	1450	1	10,000	
MV 37-8	Laundry Room U	1460	1	1,971	
SS 37-2,3	Roof Replace	1460	1	31,200	

489,434

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

PHA Name: Stevens Point Housing Authority	<b>Grant Type and Number</b> Capital Fund Program ( No: WI39P Replacement Housing Factor Grant No:
--	--

Development Number Name/HA-Wide Activities	All Funds Obligated (Quarter Ending Date)			All Func (Quarter
	Original	Revised	Actual	Original
HA Wide 37-1,2,3,8 A&E	6/30/2007			6/30/2007
HA Wide 37-1,2,3,8 ADA Improvements	6/30/2007			6/30/2007
HA Wide 37-1,2,3,8 Administration	6/30/2007			6/30/2007
HR & MV 37-1 & 8 Boiler Repairs	6/30/2007			6/30/2007
HA Wide 37-1,2,3,8 Computer Replacement	6/30/2007			6/30/2007
HA Wide 37-1,2,3,8 Floor & Cupboard Replace	6/30/2007			6/30/2007
SS & MV 37-2,3,8 Washing & Tuckpointing	6/30/2007			6/30/2007
SS & MV 37-2,3,8 Hot Water Heater Replace	6/30/2007			6/30/2007
MV 37-1 Bathroom Upgrades	6/30/2007			6/30/2007
MV 37-1 Car Heater Outlets	6/30/2007			6/30/2007
MV 37-1 Washer & Dryer Replace	6/30/2007			6/30/2007
MV 37-1 Kitchen Outlets	6/30/2007			6/30/2007
HA Wide 37-1,2,3,8 Maintenance Tool/Equipment Replace	6/30/2007			6/30/2007
HA Wide 37-1,2,3,8 Management Improvements	6/30/2007			6/30/2007
HA Wide 37-1,2,3,8 Operations	6/30/2007			6/30/2007
MV 37-1 Siding Replace	6/30/2007			6/30/2007
MV 37-1 601/733 Courtyard Remodel	6/30/2007			6/30/2007
MV 37-1 Add Phone/Cable Outlets	6/30/2007			6/30/2007
MV 37-1 Interior Door/Kitchen Shelves	6/30/2007			6/30/2007
HA Wide 37-1,2,3,8 Sealcoating	6/30/2007			6/30/2007





## CAPITAL FUND PROGRAM TABLES START HERE

Annual Statement/Performance and Evaluation Report			
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)			
PHA Name: Stevens Point Housing Authority		Grant Type and Number Capital Fund Program Grant No: WI39P03 Replacement Housing Factor Grant No:	
<input type="checkbox"/> Original Annual Statement		<input type="checkbox"/> Reserve for Disasters/Emergencies	Revised Annual Statement
<input type="checkbox"/> Performance and Evaluation Report for Period Ending:			Final Performance
Line No.	Summary by Development Account	Total Estimated Cost	
		Original	Revised
1	Total non-CFP Funds		
2	1406 Operations	44,300	45,619
3	1408 Management Improvements	44,300	45,619
4	1410 Administration	44,300	45,619
5	1411 Audit		
6	1415 Liquidated Damages		
7	1430 Fees and Costs	25,000	15,000
8	1440 Land Acquisition		
9	1450 Site Improvement	40,000	10,900
10	1460 Dwelling Structures	180,916	112,665
11	1465.1 Dwelling Equipment		
12	1470 Nondwelling Structures		19,100
13	1475 Nondwelling Equipment	17,100	40,000
14	1485 Demolition		
15	1490 Replacement Reserve		
16	1492 Moving to Work Demonstration		
17	1495.1 Relocation Costs		
18	1499 Development Activities		
19	1501 Collateralization or Debt Service	47,184	121,669
20	1502 Contingency		

443,100

456,191



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

PHA Name:		Grant Type and Number				Federal FY of Grant:		
Stevens Point Housing		Capital Fund Program #: WI39P037501-06 Replacement Housing Factor Grant No:				6/30/2006		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Inv. Acct. No	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
HA Wide 37-1,2,3,8	A&E	1430	1	15,000				
HA Wide 37-1,2,3,8	ADA Impro	1460	1	5,000				
HA Wide 37-1,2,3,8	Administrative	1410	1	45,619				
HR & MV 37-1 & 8	Boiler Repa	1460	1	10,000				
SS 37-2,3	Clothesline	1450	1	2,300				
HA Wide 37-1,2,3,8	Computer	1475	1	20,000				Ongoing
HA Wide 37-1,2,3,8	Floor & Cur	1460	1	65,165				Ongoing
SS & MV 37-2,3,8	Handrails	1450	1	500				
MV 37-8	Washer & D	1465	1	0				
SS & MV 37-2,3,8	Hot Water	1460	1	1,500				
MV 37-8	Medicine C	1460	1	0				
MV 37-8	Stoves and	1465	1	0				
HA Wide 37-1,2,3,8	Landscaping	1450	1	1,000				Ongoing

HA Wide 37-1,2,3,8	Mainten ance Tool/Equi pment Replace	1475	1	20,000				Ongoing
HA Wide 37-1,2,3,8	Managem	1408	1	45,619				
MV 37-8	Dumpster	1470	1	6,000				
MV 37-8	Entryways	1460	1	25,000				
HA Wide 37-1,2,3,8	Operations	1406	1	45,619				
SS & MV 37-2,3,8	Replace Ro	1460	1	0				
SS 37-2,3	Roof Repla	1460	1	0				
MV 37-8	Laundry Ro	1460	1	1,000				
HR 37-1	Office Rem	1470	1	13,100				
HA Wide 37-1,2,3,8	Sealcoating	1450	1	7,100				Ongoing
SS & MV 37-2,3,8	Smoke Alar	1460	1	5,000				
HR 37-1	Debt Servic	1501	1	121,669				

456,191

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

PHA Name:	<b>Grant Type and Number</b>	<b>Federal FY of Grant:</b>
Stevens Point Housing	Capital Fund Program #: WI39P037501-06 Replacement Housing Factor Grant No:	6/30/2006

Development Number 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	
HA Wide 37-1,2,3,8 A&E	6/30/2008	6/30/2008		6/30/2008	6/30/2008		
HA Wide 37-1,2,3,8 ADA Impro	6/30/2008	6/30/2008		6/30/2008	6/30/2008		
HA Wide 37-1,2,3,8 Administra	6/30/2008	6/30/2008		6/30/2008	6/30/2008		
HR & MV 37-1 & 8 Boiler Repa	6/30/2008	6/30/2008		6/30/2008	6/30/2008		
HA Wide 37-1,2,3,8 Computer	6/30/2008	6/30/2008		6/30/2008	6/30/2008		
SS & MV 37-2,3,8 Floor & Cu	6/30/2008	6/30/2008		6/30/2008	6/30/2008		
HA Wide 37-1,2,3,8 Washer & I	6/30/2008	6/30/2008		6/30/2008	6/30/2008		
SS & MV 37-2,3,8 Hot Water	6/30/2008	6/30/2008		6/30/2008	6/30/2008		
SS & MV 37-2,3,8 Medicine C	6/30/2008	6/30/2008		6/30/2008	6/30/2008		
MV 37-1 Stoves and	6/30/2008	6/30/2008		6/30/2008	6/30/2008		
SS & MV 37-2,3,8 Landscapin	6/30/2008	6/30/2008		6/30/2008	6/30/2008		
HA Wide 37-1,2,3,8 Maintena nce Tool/Equi pment Replace	6/30/2008	6/30/2008		6/30/2008	6/30/2008		
SS 37-2,3 Managemen	6/30/2008	6/30/2008		6/30/2008	6/30/2008		

SS & MV 37-2,3,8	Operations	6/30/2008	6/30/2008		6/30/2008	6/30/2008		
HA Wide 37-1,2,3,8	Paint Roof	6/30/2008	6/30/2008		6/30/2008	6/30/2008		
SS 37-2,3	Roof Repla	6/30/2008	6/30/2008		6/30/2008	6/30/2008		
HR 37-1	Office Rem	6/30/2008	6/30/2008		6/30/2008	6/30/2008		
MV 37-8	Laundry R	6/30/2008	6/30/2008		6/30/2008	6/30/2008		
HA Wide 37-1,2,3,8	Sealcoating	6/30/2008	6/30/2008		6/30/2008	6/30/2008		

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# APITAL FUND PROGRAM TABLES START HER

## Annual Statement/Performance and Evaluation Report

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

PHA Name: Stevens Point Housing	Grant Type and Number: Capital Fund Program	Federal FY of Grant: 6/30/2007
Replacement Housing Factor Grant No:		

Original Annual Statement | Reserve for Disasters/Emergency  
 Performance and Evaluation Report for Period Ending:

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operat	44,300			
3	1408 Mana	44,300			
4	1410 Admi	44,857			
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees	5,000			
8	1440 Land Acquisition				
9	1450 Site In	20,000			
10	1460 Dwell	30,574			
11	1465.1 Dwelling Equipment				
12	1470 Nondwelling Structures	84,443			
13	1475 Nondwelling Equipment	52,441			
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1499 Development Activities				
19	1501 Collat	122,659			
20	1502 Contingency				

448,574

0

## Part I: Summary

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

PHA Name:		Grant Type and Number				Federal FY of Grant:		
Stevens Point Housing		Capital Fund Program #: WI39P037501-07 Replacement Housing Factor Grant No:				6/30/2007		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Inv. Acct. No	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
HA Wide 37-2,3,8	A&E	1430	1	5,000				
HA Wide 37-2,3,8	ADA Impro	1460	1	5,000				
HA Wide 37-2,3,8	Administrat	1410	1	44,857				
HR & MV 37-1 & 8	Boiler Repa	1460	1	10,000				
HA Wide 37-2,3,8	Computer	1475	1	10,000				
HA Wide 37-2,3,8	Floor & Cu	1460	1	15,574				
Hi-Rise Manor 37-1	Office Rem	1470	1	50,000				
Hi-Rise Manor 37-1	Office Equi	1475		35,341				
HA Wide 37-2,3,8	Landscapin	1450	1	10,000				
HA Wide 37-2,3,8	Mainten nce Tool/Equi pment Replace	1475	1	7,100				
HA Wide 37-2,3,8	Managemen	1408	1	44,300				
HA Wide 37-2,3,8	Operations	1406	1	44,300				
MV 37-8	Recycle She	1470	1	34,443				

HA Wide								
37-2,3,8	Sealcoating	1450	1	10,000				
HR 37-1	Debt Serv	1501	1	122,659				

448,574

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

PHA Name: Stevens Point Housing	<b>Grant Type and Number</b> Capital Fund Program #: WI39P037501-07 Replacement Housing Factor Grant No:	<b>Federal FY of Grant:</b> 6/30/2007
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Development Number 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	
HA Wide 37-2,3,8 A&E	6/30/2009			6/30/2009			
HA Wide 37-2,3,8 ADA Impro	6/30/2009			6/30/2009			
HA Wide 37-2,3,8 Administra	6/30/2009			6/30/2009			
HR & MV 37-1 & 8 Boiler Repa	6/30/2009			6/30/2009			
HA Wide 37-2,3,8 Computer	6/30/2009			6/30/2009			
HA Wide 37-2,3,8 Floor & Cur	6/30/2009			6/30/2009			
Hi-Rise Manor 37-1 Office Rem	6/30/2009			6/30/2009			
Hi-Rise Manor 37-1 Office Equi	6/30/2009			6/30/2009			
HA Wide 37-2,3,8 Landscapin	6/30/2009			6/30/2009			
HA Wide 37-2,3,8 Maintena nce Tool/Equi pment Replace	6/30/2009			6/30/2009			
HA Wide 37-2,3,8 Managemen	6/30/2009			6/30/2009			
HA Wide 37-2,3,8 Operations	6/30/2009			6/30/2009			
MV 37-8 Recycle She	6/30/2009			6/30/2009			
HA Wide 37-2,3,8 Sealcoating	6/30/2009			6/30/2009			
HR 37-1 Debt Servid	6/30/2009			6/30/2009			


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## CAPITAL FUND PROGRAM TABLES START HERE

Annual Statement/Performance and Evaluation Report					
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I: Summary					
PHA Name: Stevens Point Housing Authority		Grant Type and Number Capital Fund Program Grant No: WI39P037502-08 Replacement Housing Factor Grant No:		Federal FY of Grant: 6/30/2008	
<input checked="" type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement revision no: <input type="checkbox"/> Performance and Evaluation Report for Period Ending: <input type="checkbox"/> Final Performance and Evaluation Report					
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations	44,300			
3	1408 Management Improvements	44,300			
4	1410 Administration	44,300			
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	15,000			
8	1440 Land Acquisition				
9	1450 Site Improvement	20,000			
10	1460 Dwelling Structures	102,346			
11	1465.1 Dwelling Equipment				
12	1470 Nondwelling Structures				
13	1475 Nondwelling Equipment	60,000			
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1499 Development Activities				
19	1501 Collateralization or Debt Service	122,659			
20	1502 Contingency				
		452,905	0		

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

PHA Name: Stevens Point Housing Authority		<b>Grant Type and Number</b> Capital Fund Program Grant No: WI39P037502-08 Replacement Housing Factor Grant No:				<b>Federal FY of Grant:</b> 6/30/2008		
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 37-2,3,8	A&E	1430	1	15,000				
HA Wide 37-2,3,8	ADA Improvements	1460	1	7,500				
HA Wide 37-2,3,8	Administration	1410	1	44,300				
SS & MV 37-2,3,8	Hot Water Heater Replace	1460	1	5,000				
HA Wide 37-2,3,8	Computer Replacement	1475	1	5,000				
HA Wide 37-2,3,8	Floor & Cupboard Replace	1460	1	39,846				
SS & MV 37-2,3,8	Siding Replace	1460	1	50,000				
HA Wide 37-2,3,8	Maintenance Vehicle Replace	1475	1	50,000				
HA Wide 37-2,3,8	Landscaping	1450	1	5,000				
HA Wide 37-2,3,8	Maintenance Tool/Equipment Replace	1475	1	5,000				
HA Wide 37-2,3,8	Management Improvements	1408	1	44,300				
HA Wide 37-2,3,8	Operations	1406	1	44,300				
HA Wide 37-2,3,8	Sealcoating	1450	1	15,000				
HR 37-1	Debt Service	1501	1	122,659				
				452,905		0		

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

PHA Name: Stevens Point Housing Authority		<b>Grant Type and Number</b> Capital Fund Program Grant No: WI39P037502-08 Replacement Housing Factor Grant No:			<b>Federal FY of Grant:</b> 6/30/2008			
Development Number 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	
HA Wide 37-2,3,8	A&E	6/30/2009			6/30/2009			
HA Wide 37-2,3,8	ADA Improvements	6/30/2009			6/30/2009			
HA Wide 37-2,3,8	Administration	6/30/2009			6/30/2009			
SS & MV 37-2,3,8	Hot Water Heater Replace	6/30/2009			6/30/2009			
HA Wide 37-2,3,8	Computer Replacement	6/30/2009			6/30/2009			
HA Wide 37-2,3,8	Floor & Cupboard Replace	6/30/2009			6/30/2009			
SS & MV 37-2,3,8	Siding Replace	6/30/2009			6/30/2009			
HA Wide 37-2,3,8	Maintenance Vehicle Replace	6/30/2009			6/30/2009			
HA Wide 37-2,3,8	Landscaping	6/30/2009			6/30/2009			
HA Wide 37-2,3,8	Maintenance Tool/Equipment Replace	6/30/2009			6/30/2009			
HA Wide 37-2,3,8	Management Improvements	6/30/2009			6/30/2009			
HA Wide 37-2,3,8	Operations	6/30/2009			6/30/2009			
HA Wide 37-2,3,8	Sealcoating	6/30/2009			6/30/2009			

# Five-Year Action Plan

OMB Approval No. 22577-0157 (exp. 7/31/98)

## Part I: Summary

### Comprehensive Grant Program (CGP)

HA Name: Stevens Point Housing Authority		Locality: (City/County & State) #N/A			
A. Development Number/Name	Work Stmt. for Year 1 FFY: <u>06/30/2008</u>	Work Statement for Year 2 FFY: <u>06/30/2009</u>	Work Statement for Year 3 FFY: <u>06/30/2010</u>	Work Statement for Year 4 FFY: <u>06/30/2011</u>	Work Statement for Year 5 FFY: <u>06/30/2012</u>
WI 37-2, 3 Scattered Sites		10,000	22,500	23,015	23,015
WI 37-8 Madison View		140,515	133,015	62,500	62,500
WI 37-2, 3 & 8 Scattered & Madison View		15,000	10,000	80,000	80,000
PHA Wide Collateralization/Debt Service	<b>See Annual Statement</b>	27,500 122,659	27,500 122,659	27,500 122,659	27,500
<b>B. Physical Improvements Subtotal</b>		315,674	315,674	315,674	315,674
<b>C. Management Improvements</b>		44,300	44,300	44,300	44,300
<b>D. HA-Wide Nondwelling Structures and Equipment</b>					
<b>E. Administration</b>		44,300	44,300	44,300	44,300
<b>F. Other</b>					
<b>G. Operations</b>		44,300	44,300	44,300	44,300
<b>H. Demolition</b>					
<b>I. Replacement</b>					
<b>J. Mod Used for Replacement</b>					
<b>K. Total CGP Funds</b>		448,574	448,574	448,574	448,574
<b>L. Total Non-CGP Funds</b>					
<b>M. Grand Total</b>		448,574	448,574	448,574	448,574

Signature of Executive Director & Date:

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

**Five-Year Action Plan**  
**Part II: Supporting Pages**  
**Physical Needs Work Statement(s)**  
**Comprehensive Grant Program (CGP)**

OMB Approval No. 22577-0157 (exp. 7/31/98)

Work Statement for Year 1 FFY: <b>06/30/2008</b>	Work Statement for Year <u>2</u> FFY: <b>06/30/2009</b>			Work Statement for Year <u>3</u> FFY: <b>06/30/2010</b>			
	Development Number/Name/General Description of Major Work Categories	Quantity	Estimated Cost	Development Number/Name/General Description of Major Work Categories	Quantity	Estimated Cost	
<b>See Annual Statement</b>	WI 37-8 Madison View			WI 37-8 Madison View			
	Community Entryways	100	100,000	Community Entryways	100	70,515	
	Stairs Replacement	100	10,000	Stairs Replacement	100	5,000	
	Boiler Replace/Repair	100	2,500	Boiler Replace/Repair	100	2,500	
	Security Camera Upgrade/Repair	100	5,000	Concrete Replace/Repair	100	2,500	
	Dumpster Enclosure	100	23,015	Security Camera Upgrade/Repair	100	2,500	
				Tractor Replace	100	50,000	
	WI 37-2 & 3 Scattered Sites			WI 37-2 & 3 Scattered Sites			
	Water Heater Replace/Repair	100	5,000	Water Heater Replace/Repair	100	2,500	
	Handrails	100	5,000	Stove and Refrigerator Replace	100	20,000	
	WI 37-2,3,8 Scattered Sites and Madison View			WI 37-2,3,8 Scattered Sites and Madison View			
	Floor and Cupboard Replace	100	5,000	Floor and Cupboard Replace	100	5,000	
	Hot Water Heater Replace	100	5,000	Hot Water Heater Replace	100	5,000	
	Concrete Replace/Repair	100	5,000				
	PHA Wide			PHA Wide			
	ADA Requirements	100	5,000	ADA Requirements	100	5,000	
	Sealcoating	100	10,000	Sealcoating	100	10,000	
	Landscaping	100	2,500	Landscaping	100	2,500	
	Maintenance Tool/Equipment Replace	100	5,000	Maintenance Tool/Equipment Replace	100	5,000	
	Computer Replace	100	5,000	Computer Replace	100	5,000	
Collateralization or Debt Service	100	122,659	Collateralization or Debt Service	100	122,659		
<b>Subtotal of Estimated Cost</b>			<b>315,674</b>	<b>Subtotal of Estimated Cost</b>			<b>315,674</b>

**Five-Year Action Plan**  
**Part II: Supporting Pages**  
**Physical Needs Work Statement(s)**  
**Comprehensive Grant Program (CGP)**

Work Statement for Year 1 06/30/2006	Work Statement for Year <u>4</u> FFY: 06/30/2011			Work Statement for Year <u>5</u> FFY: 06/30/2012		
	Development Number/Name/General Description of Major Work Categories	Quantity	Estimated Cost	Development Number/Name/General Description of Major Work Categories	Quantity	Estimated Cost
<b>See Annual Statement</b>	WI 37-8 Madison View			WI 37-8 Madison View		
	Community Entryways	100	50,000	Community Entryways	100	50,000
	Stairs Replacement	100	5,000	Stairs Replacement	100	5,000
	Boiler Replace/Repair	100	2,500	Boiler Replace/Repair	100	2,500
	Concrete Replace/Repair	100	2,500	Concrete Replace/Repair	100	2,500
	Security Camera Upgrade/Repair	100	2,500	Security Camera Upgrade/Repair	100	2,500
	WI 37-2 & 3 Scattered Sites			WI 37-2 & 3 Scattered Sites		
	Water Heater Replace/Repair	100	2,500	Water Heater Replace/Repair	100	2,500
	Exterior Doors	100	14,515	Storage Sheds	100	20,515
	Mailboxes	100	6,000			
	WI 37-2,3,8 Scattered Sites and Madison View			WI 37-2,3,8 Scattered Sites and Madison View		
	Floor and Cupboard Replace	100	5,000	Floor and Cupboard Replace	100	5,000
	Hot Water Heater Replace	100	5,000	Hot Water Heater Replace	100	5,000
	Bathroom Upgrades	100	20,000	Bathroom Upgrades	100	20,000
	Furnace Replace	100	50,000	Furnace Replace	100	50,000
	PHA Wide			PHA Wide		
	ADA Requirements	100	5,000	ADA Requirements	100	5,000
	Sealcoating	100	10,000	Sealcoating	100	10,000
	Landscaping	100	2,500	Landscaping	100	2,500
	Maintenance Tool/Equipment Replace	100	5,000	Maintenance Tool/Equipment Replace	100	5,000
	Computer Replace	100	5,000	Computer Replace	100	5,000
				Collaterization or Debt Service	100	122,659
	Collaterization or Debt Service	100	122,659			
			315,674			315,674

**Five-Year Action Plan**  
**Part III: Supporting Pages**  
**Management Needs Work Statement(s)**  
**Comprehensive Grant Program (CGP)**

Work Statement for Year 1 FFY: <u>06/30/2008</u>	Work Statement for Year <u>2</u> FFY: <u>06/30/2009</u>			Work Statement for Year <u>3</u> FFY: <u>06/30/2010</u>		
	Development Number/Name/General Description of Major Work Categories	Quantity	Estimated Cost	Development Number/Name/General Description of Major Work Categories	Quantity	Estimated Cost
<b>See Annual Statement</b>	Support Staff	100	22,300	Support Staff	100	22,300
	Occupancy Training	100	1,000	Occupancy Training	100	1,000
	Computer Software	100	1,000	Computer Software	100	1,000
	Apartment Advertisement	100	18,000	Apartment Advertisement	100	18,000
	Maintenance Uniforms	100	2,000	Maintenance Uniforms	100	2,000
	<b>Subtotal of Estimated Cost</b>		44,300	<b>Subtotal of Estimated Cost</b>		44,300

**Five-Year Action Plan**  
**Part III: Supporting Pages**  
**Management Needs Work Statement(s)**  
**Comprehensive Grant Program (CGP)**

Work Statement for Year 1 FFY: <u>06/30/2008</u>	Work Statement for Year <u>4</u> FFY: <u>06/30/2011</u>			Work Statement for Year <u>5</u> FFY: <u>06/30/2012</u>		
	Development Number/Name/General Description of Major Work Categories	Quantity	Estimated Cost	Development Number/Name/General Description of Major Work Categories	Quantity	Estimated Cost
<b>See Annual Statement</b>	Support Staff	100	22,300	Support Staff	100	22,300
	Occupancy Training	100	1,000	Occupancy Training	100	1,000
	Computer Software	100	1,000	Computer Software	100	1,000
	Apartment Advertisement	100	18,000	Apartment Advertisement	100	18,000
	Maintenance Uniforms	100	2,000	Maintenance Uniforms	100	2,000
	<b>Subtotal of Estimated Cost</b>		44,300	<b>Subtotal of Estimated Cost</b>		44,300

## **Community Service and Self-Sufficiency Program** **Annual Recertification**

The Housing Authority received notice from the U.S. Department of Housing and Urban Development on June 20, 2003 that **every adult resident in public housing is required to contribute eight hours of community service each month that they live in public housing.**

This requirement applies to all residents except for those adults considered exempt under the program. (See attached).

This letter is being sent to you as HUD requires that you verify your participation or exemption each year at the annual rent recertification. Your rent recertification is now due.

### **GENERAL INFORMATION:**

The Community Service and Self-Sufficiency requirement is intended to assist adult public housing residents in improving their own economic and social well-being and give residents a greater stake in their communities.

### **HOW TO BEGIN:**

New residents must begin their service within 30 days after moving into public housing.

The Housing Authority does not choose where residents volunteer. However, some volunteer opportunities are available with the agency if you are interested.

Residents are free to choose the organization, agency, etc. where they will perform the volunteer service. Residents will need to contact the service location and follow their guidelines regarding volunteer service. Community service is not employment and may not include political activities.

## **DOCUMENTING VOLUNTEER SERVICE:**

Residents are responsible for providing written proof to the Housing Authority that the 8 hour per month requirement has been met. Written proof is a statement of the hours worked signed by the person supervising the volunteer activities; including name, address, and phone number of the volunteer work-site.

The Housing Authority is required to verify volunteer service each year. This will take place during the annual rent recertification.

## **CONSEQUENCES OF NOT PERFORMING VOLUNTEER SERVICE:**

If there is a family member(s) who is required to fulfill a service requirement, but who has violated this obligation, the Housing Authority must notify the household of this determination.

The household will be informed that the Housing Authority will **NOT** renew their Lease at the end of the 12 (twelve) month Lease term unless: the resident enters into a written agreement to meet the original volunteer service requirement, and continues to meet the current volunteer service requirement.

Residents retain the right to request a grievance hearing on the determination of non-renewal of the Lease.

If the status of a resident who is required to participate in the program changes this should be reported to the Management within 10 days as is required in your Dwelling Lease. It will then be determined if the resident is exempt or not exempt from the volunteer service requirement.

## **YOUR STATUS:**

**You are required to verify your volunteer hours or exemption from service with your annual rent review.**

Please feel free to contact me with any questions you may have about the Community Service and Self-Sufficiency Program. I can be reached at 341-3444, ext. 27.

Sincerely,

Sharon Rolstad  
Occupancy Specialist

## Community Service and Self-Sufficiency Program

### EXEMPTIONS FROM PARTICIPATION

- Age 62 years or older.
- Blind or disabled (as defined under the Social Security Act; And who certify that because of this disability they are unable to comply with the service provisions; or primary caretakers of such individuals.
- Engaged in work activities as defined in the Social Security Act specified below:
  1. Employed a minimum of 20 hours per week.
  2. Job-search and job-readiness assistance.
  3. Community service programs.
  4. Vocational educational training (not to exceed 12 months with respect to any individual).
  5. Job-skills training directly related to employment.
  6. Education directly related to employment in the case of a recipient who has not received a high school diploma or a certificate of high school equivalency.
  7. Satisfactory attendance at secondary school or in a course of study leading to a certificate of general equivalence, in the case of a recipient who has not completed secondary school or received such a certificate.
  8. The provision of childcare services to an individual who is participating in a community service program.
- Meet the requirements for being exempt from having to engage in a work activity under the State program funded under part A of title IV of the Social Security Act or under any other welfare program of the State in which the PHA is located, including a State-administered welfare-to-work program.
- If a member of a family receiving TANF assistance, benefits, or service under the State program funded under part A of title IV of the Social Security Act; or under any other welfare program of the State in which the PHA is located, including a State administered welfare-to-work program and has not been found by the State or other administering entity to be in non-compliance with such program.

## Community Service and Self-Sufficiency Program

### VOLUNTEER OPPORTUNITIES

The list below gives contact information for many of the agencies and organizations in Portage County that use volunteers. Feel free to use this list or look for other opportunities.

- Portage County Department on Aging, 1519 Water Street, 346-1401
- Humane Society, Bukolt Park, 344 6012
- Head Start, CAP Services, Inc., 343-7539
- Portage County Health & Human Services, 817 Whiting Ave., 345-5350
- Portage County Health Care Center, 825 Whiting Ave., 346-1374
- Stevens Point Care Center, 1800 Sherman Ave., 344-1800
- Stevens Point Schools, Bliss Educational Services Center, 345-5456
- St. Vincent de Paul, 2700 Post Road, Plover, 344-7395
- Salvation Army, 1600 Briggs St., 341-2437
- St. Michael's Hospital, 900 Illinois Ave., 346-5000
- YMCA, 1000 Division St., 342-2980
- Boys & Girls Club, 1007 Ellis St., 341-4386
- American Red Cross, 3057 Michigan Ave., 344-4052
- Interfaith Volunteer Caregivers, P.O. Box 844, 342-4084
- Meals on Wheels, 3057 Michigan Ave., #A, 341-0081
- Po. County Child Passenger Safety Accoc., 53 Sunset Blvd., 341-7328

If you need additional assistance in finding volunteer service you may wish to contact the **Volunteer Center, 1100 Centerpoint Dr., 341 6740**. The sole purpose of the Volunteer Center is to match volunteers to volunteer opportunities.

**Pet Policy**  
**Lease Addendum No. 5**  
**Stevens Point Housing Authority**

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The following rules are established to govern the keeping of pets in and on properties owned and operated by the Stevens Point Housing Authority.

All pets must be registered with the Housing Authority **BEFORE** they are brought onto the premises. Residents must receive a written permit to keep any animal on the premises. This privilege may be revoked at any time subject to the Housing Authority grievance procedure if the animal becomes destructive, a nuisance or safety hazard to other residents, or if the resident/owner fails to comply with the following:

- 1) A maximum number of **ONE** pet is allowed.
- 2) A window sticker indicating a pet permit has been issued to the resident shall be placed in a window and at a location deemed most appropriate by the Maintenance Supervisor or staff designee.
- 3) Permitted pets are domesticated dogs, cats, fish in aquariums, birds, rabbits, hamsters, and other caged animals of similar size. Dogs must weigh less than 45 pounds when fully grown, (i.e.: puppies that are likely to exceed 45 pounds when full grown will not be permitted.) No vicious or intimidating dogs are allowed.

NOTICE: On August 8, 1995, at the request of the Madison View Resident Council, Inc. the Stevens Point Housing Authority Board of Commissioners voted to prohibit dogs for any residents moving into Madison View Apartments on or after August 9, 1995. Residents who require the assistance of a dog in accordance with the American With Disabilities Act are exempt from this prohibition.

- 4) Farm animals are not allowed in the City of Stevens Point. Any animal used for "food or fiber" is not allowed. Chickens and pot-bellied pigs, exotic, venomous or poisonous animals are not permitted.
- 5) Dogs and cats are to be licensed yearly with the City of Stevens Point, through the City Treasurer's Office. Residents must show proof of yearly distemper and rabies boosters for cats and dogs.
- 6) All cats and dogs must be spayed or neutered. Therefore, breeding of pets is not allowed under any circumstances.
- 7) Residents shall pay a **Damage Deposit** for their pet as follows: **a dog or cat--\$50.00, caged animals--\$25.00, fish—none**. This deposit shall be paid in advance on the acceptance of the pet by the resident. This deposit is refundable if no damage is done, as verified by the Housing Authority after the resident disposes of the pet or moves. The resident is responsible for all damages including cost of fumigation caused as a result of having a pet.
- 8) If a pet is removed from the premises or dies, the Housing Authority must be notified. At that time an inspection of the apartment can be arranged for the return of the Damage Deposit providing the pet has caused no damages. The Damage Deposit may

be kept on the residents' account if resident would wish to permit a new pet in the future. At that time a new Pet Policy would be required.

- 9) No pet may be kept in violation of state humane or health laws or public ordinances.
- 10) Dogs and cats shall remain inside a resident's apartment unless they are on a leash **AND** directly controlled. **Pets may not be tied-out outside** of the apartment at any time for any reason. Chains, ropes, leashes and other tie-outs are not permitted. Birds, rabbits, hamsters, etc. must be confined to cages at all times. Pets found outside of a unit or not directly controlled will be transported as in No. 16.
- 11) Residents shall not alter their unit, patio, or unit area to create an enclosure for an animal. Among other things, this means no pet houses, shelters, pens or cages will be permitted on Housing Authority grounds. The Housing Authority will remove and/or restore to its original condition any alteration made and charge the resident accordingly.
- 12) Residents are to provide litter boxes for cat waste which are to be kept in the unit. The resident is not allowed to let waste accumulate. Residents are responsible for properly disposing of cat waste in containers (covered trashcans or dumpsters) provided by the Housing Authority outside of the building.
- 13) Residents are responsible for promptly cleaning up pet droppings outside of the unit on Housing Authority property, or any public or private property, and properly disposing of said droppings in the containers provided by the Housing Authority outside of the building.
- 14) Residents shall take adequate precautions to eliminate any pet odors within or around the unit and maintain the unit in a sanitary condition at all times.
- 15) The resident shall not permit any disturbance by their pet which would interfere with the peaceful enjoyment of other residents such as loud barking, howling, biting, scratching, chirping or other such activities.
- 16) If pets are left unattended for twelve (12) hours or more, a Housing Authority representative may enter the unit to facilitate the removal of the pet by the proper authorities subject to the provisions of Section 948.15 of Wisconsin State Law or local ordinances. The Housing Authority accepts no responsibility for the pet under such circumstances.
- 17) Residents are prohibited from feeding stray animals. The feeding of stray animals shall constitute as having a pet without the permission of the Housing Authority.
- 18) Pets will not be allowed in any common area such as courtyards, community rooms, sitting rooms, or laundry rooms.
- 19) Non-residents are not permitted to bring pets onto any Housing Authority property for any reason.
- 20) Residents must identify an alternate custodian for the pet in the event of resident illness or other absence from the unit. Space for this information is provided on the Pet Permit.
- 21) Residents who violate these rules are subject to:
  - a) Being required to get rid of the pet within 14 days of notice by the Housing Authority; and/or
  - b) eviction.

# STEVENS POINT HOUSING AUTHORITY

1300 Briggs Court  
Stevens Point, Wisconsin 54481

ADMINISTRATIVE OFFICE:  
TDD Relay: 1-800-947-3529  
FAX: 715-341-4656  
PHONE: 715-341-3444

EDGEWATER MANOR:  
1450 Water Street  
Stevens Point, WI 54481  
Phone: 715-345-0770

## Resolution 08-2 Amending Section 4 and 5 of the Admissions and Occupancy Policies Incorporating Protections from Eviction for Victims of Domestic Violence

WHEREAS, Congress passed and the President signed the Violence Against Women and Justice Department Reauthorization Act of 2005 (aka: the Violence Against Women Act or VAWA), and

WHEREAS, VAWA protects tenants and family members of tenants who are the victims of domestic violence, dating violence, or stalking from being evicted or denied admission from public housing based on acts of such violence against them, and

WHEREAS, Public Housing Agencies administering the Public Housing Program are required by VAWA to amend their Admissions and Occupancy Policy to incorporate the protections of the law.

NOW, THEREFORE, BE IT RESOLVED that Section 4 of the Admissions and Occupancy Policies is amended by adding subsection 4.5 A.

4. Being a victim of domestic violence, dating violence, or stalking, as these terms are defined in the law (hereafter collectively referred to as "abuse"), is not a basis for denial of admission to public housing if the applicant otherwise qualifies for assistance or admission.

BE IT FURTHER RESOLVED that Section 5 of the Admissions and Occupancy Policies is amended by adding subsection 5.2.1 RESTRICTION ON EVICTION OF VICTIMS OF DOMESTIC VIOLENCE, DATING VIOLENCE, OR STALKING (hereafter collectively referred to as "abuse")

Incidents or threats of abuse will not be construed as serious or repeated violations of the lease or other "good cause" for termination of tenancy, or occupancy rights of a victim of abuse; and

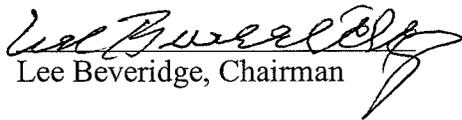
Criminal activity directly relating to abuse, engaged in by a member of a tenant's household or any guest or other person under the tenant's control, shall not be cause for termination of tenancy, or occupancy rights if the tenant or an immediate member of the tenant's family is the victim or threatened victim of that abuse.

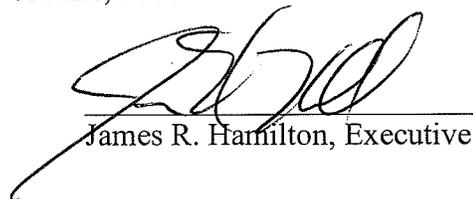
Notwithstanding the above, Management may "bifurcate" a lease under this



section, or remove a household member from a lease under this section, without regard to whether a household member is a signatory to the lease, in order to evict, remove, or terminate occupancy rights, to any individual who is a tenant or lawful occupant and who engages in criminal acts of physical violence against family members or others, without evicting, removing, or otherwise penalizing the victim of such violence who is also a tenant or lawful occupant, and such eviction, removal, or termination of occupancy rights shall be effected in accordance with the procedures prescribed by federal, state, and local law for the termination of leases under the relevant program of HUD-assisted housing.

Resolution 08-2 adapted this 10<sup>th</sup> day of June, 2008.

  
Lee Beveridge, Chairman

  
James R. Hamilton, Executive Director