

**PHA 5-Year and Annual Plan**

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

**OMB No. 2577-0226  
Expires 4/30/2011**

<b>1.0</b>	<b>PHA Information</b> PHA Name: _____ Housing Authority of the City of Freeport _____ PHA Code: <u>IL 029</u> PHA Type: Small _____ High Performing _____ Standard _____ HCV (Section 8) PHA Fiscal Year Beginning: (MM/YYYY): 04/2009 _				
<b>2.0</b>	<b>Inventory</b> (based on ACC units at time of FY beginning in 1.0 above) Number of PH units: <u>446</u> Number of HCV units: <u>0</u>				
<b>3.0</b>	<b>Submission Type</b> 5-Year and Annual Plan _____ x Annual Plan Only _____ 5-Year Plan Only _____				
<b>4.0</b>	<b>PHA Consortia</b> PHA Consortia: (Check box if submitting a joint Plan and complete table below.)				
	Participating PHAs	PHA Code	Program(s) Included in the Consortia	Programs Not in the Consortia	No. of Units in Each Program PH HCV
	PHA 1:				
	PHA 2:				
	PHA 3:				
<b>5.0</b>	<b>5-Year Plan.</b> Complete items 5.1 and 5.2 only at 5-Year Plan update. SEE ATTACHED				
<b>5.1</b>	<b>Mission.</b> 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 for the next five years:  N/A				
<b>5.2</b>	<b>Goals and Objectives.</b> Identify the PHA's quantifiable goals and objectives that will enable the PHA to serve the needs of low-income and very low-income, and extremely low-income families for the next five years. Include a report on the progress the PHA has made in meeting the goals and objectives described in the previous 5-Year Plan.  N/A				
<b>6.0</b>	<b>PHA Plan Update</b>  (a) Identify all PHA Plan elements that have been revised by the PHA since its last Annual Plan submission: (b) Identify the specific location(s) where the public may obtain copies of the 5-Year and Annual PHA Plan. For a complete list of PHA Plan elements, see Section 6.0 of the instructions. Display Locations for PHA Plans and Supporting Documents as well as information regarding any activities outlined in this plan can be obtained by contacting the Central Office of the Freeport Housing Authority.				
<b>7.0</b>	<b>Hope VI, Mixed Finance Modernization or Development, Demolition and/or Disposition, Conversion of Public Housing, Homeownership Programs, and Project-based Vouchers.</b> Include statements related to these programs as applicable.  N/A				
<b>8.0</b>	<b>Capital Improvements.</b> Please complete Parts 8.1 through 8.3, as applicable.				
<b>8.1</b>	<b>Capital Fund Program Annual Statement/Performance and Evaluation Report.</b> As part of the PHA 5-Year and Annual Plan, annually complete and submit the <i>Capital Fund Program Annual Statement/Performance and Evaluation Report</i> , form HUD-50075.1, for each current and open CFP grant and CFFP financing. <b>2009 Annual Plan; 2008 Performance and Evaluation Report; and 2007 Performance and Evaluation Report; and 2009 ARRA Performance and Evaluation Report</b>				
<b>8.2</b>	<b>Capital Fund Program Five-Year Action Plan.</b> As part of the submission of the Annual Plan, PHAs must complete and submit the <i>Capital Fund Program Five-Year Action Plan</i> , form HUD-50075.2, and subsequent annual updates (on a rolling basis, e.g., drop current year, and add latest year for a five year period). Large capital items must be included in the Five-Year Action Plan. <b>Capital Fund Program Five-Year Action Plan</b>				
<b>8.3</b>	<b>Capital Fund Financing Program (CFFP).</b> Check if the PHA proposes to use any portion of its Capital Fund Program (CFP)/Replacement Housing Factor (RHF) to repay debt incurred to finance capital improvements.				

9.0

**Housing Needs.** Based on information provided by the applicable Consolidated Plan, information provided by HUD, and other generally available data, make a reasonable effort to identify the housing needs of the low-income, very low-income, and extremely low-income families who reside in the jurisdiction served by the PHA, including elderly families, families with disabilities, and households of various races and ethnic groups, and other families who are on the public housing and Section 8 tenant-based assistance waiting lists. The identification of housing needs must address issues of affordability, supply, quality, accessibility, size of units, and location.

1. Statement of Housing Needs [24 CFR Part 903.79 (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	1,084	5	5	5	3	3	3
Income >30% but <=50% of AMI	935	5	5	5	3	3	3
Income >50% but <80% of AMI	1,310	5	5	5	3	3	3
Elderly	1,237	5	5	5	3	3	3
Families with Disabilities	145	5	5	5	3	3	3
Race/Ethnicity W	1,311	5	5	5	3	3	3
Race/Ethnicity B	1,968	5	5	5	3	3	3
Race/Ethnicity							
Race/Ethnicity							

What sources of information did the PHA use to conduct this analysis?

**U.S.** Census data: the Comprehensive Housing Affordability Strategy ("CHAS") dataset

Housing Needs of Families on the Waiting List			
Waiting list type: (select one)			
0	Section 8 tenant-based assistance		
X	Public Housing Combined Section 8 and Public Housing		
0	Public Housing Site-Based or sub-jurisdictional waiting list (optional)		
0	Public Housing Site-Based or sub-jurisdictional waiting list (optional)		
If used, identify which development/sub-jurisdiction:			
	# of families	% of total families	Annual Turnover
Waiting list total	201	1	98
Extremely low income <=30% AMI	6	0.03	
Very low income (>30~110 but <=50% AMI)	187	0.93	
Low income (>50% but <80% AMI"	6	0.03	
Families with children	123	0.61	
Elderly families	30	0.15	
Families with Disabilities	60	0.34	
Race/ethnicity	White--84	0.42	
Race/ethnicity	Black--113	0.56	
Race/ethnicity	Native American/Pacific Islander--2	0.01	
Race.ethnicity	Hispanic-2	0.01	

Housing Needs of Families on the Waiting List		
Characteristics by Bedroom Size(Public Housing Only)		
1BR	78	39%
2BR	104	52%
3BR	13	7%
4BR	3	1%
5BR	3	1%
5+BR	0	0%

Is the waiting list closed?  
(select one)? [X] No

**Strategy for Addressing Housing 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. **Note: Small, Section 8 only, and High Performing PHAs complete only for Annual Plan submission with the 5-Year Plan.**

9.1

The PHA will 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, undertake measures to ensure access to affordable housing among families assisted by the PHA, regardless of unit size required; participant in the Consolidated Plan development process to ensure coordination with broader community strategies; employ admissions preferences aimed at families who are working; adopt rent policies to support and encourage work; carry out the modifications needed in public housing based on the section 504 Needs Assessment for Public Housing; affirmatively market to races/ethnicities shown to have disproportionate housing needs.

**10.0 Additional Information.** Describe the following, as well as any additional information HUD has requested.

(a) **Progress in Meeting Mission and Goals.** Provide a brief statement of the PHA's progress in meeting the mission and goals described in the 5-Year Plan.

The HACF has been able to maintain its mission to promote adequate and affordable housing, economic opportunity and a suitable living environment free from discrimination through the utilization of previous Capital funds and the proper application of our public housing policies.

We are continuing to address all vacancies very aggressively and our PHAS and SEMAP scores indicate that other operational issues are being satisfactorily addressed.

The HACF created and continues to facilitate self-sufficiency programs to improve resident employability as well as solicit support services for the elderly and families with disabilities.

The Community Service program has been re-instated per HUD notification and each adult member of every household has been notified as to their status. New market value flat rents are being updated, to replace the original market value flat rents.

We are confident that the HACF will be able to continue to meet and accommodate all our goals and objectives for FY 2009.

(b) **Significant Amendment and Substantial Deviation/Modification.** Provide the PHA's definition of "significant amendment" and "substantial deviation/modification"

**Criteria for Substantial Deviation and Significant Amendments Amendment and Deviation Definitions**

24 CFR Part 903.7(r)

PHAs are required to define and adopt their own standards of substantial deviation from the 5-year Plan and Significant Amendment to the Annual Plan. The definition of significant amendment is important because it defines when the PHA will subject a change to the policies or activities described in the Annual Plan to full public hearing and HUD review before implementation.

**A. Substantial Deviation from the 5-year Plan:**

The Public Housing Authority's (PHA) Definition of Substantial Deviation and Significant Amendment or Modification is as follows:

Additions of non-emergency work items (items not intended in the current 5-Year Action Plan) or change in use of replacement reserve funds under the Capital Fund; and

Any change with regard to demolition or disposition, designation, homeownership programs or conversion activities.

**B. Significant Amendment or Modification to the Annual Plan:**

The Public Housing Authority's (PHA) Definition of Substantial Deviation and Significant Amendment or Modification is as follows:

Additions of non-emergency work items (items not intended in the current Annual Statement) or change in use of replacement reserve funds under the Capital Fund; and

Any change with regard to demolition or disposition, designation, homeownership programs or conversion activities.

**11.0 Required Submission for HUD Field Office Review.** In addition to the PHA Plan template (HUD-50075), PHAs must submit the following documents. Items (a) through (g) may be submitted with signature by mail or electronically with scanned signatures, but electronic submission is encouraged. Items (h) through (i) must be attached electronically with the PHA Plan. **Note:** Faxed copies of these documents will not be accepted by the Field Office.

(a) Form HUD-50077, *PHA Certifications of Compliance with the PHA Plans and Related Regulations* (which includes all certifications relating to Civil Rights)

(b) Form HUD-50070, *Certification for a Drug-Free Workplace* (PHAs receiving CFP grants only)

(c) Form HUD-50071, *Certification of Payments to Influence Federal Transactions* (PHAs receiving CFP grants only)

(d) Form SF-LLL, *Disclosure of Lobbying Activities* (PHAs receiving CFP grants only)

(e) Form SF-LLL-A, *Disclosure of Lobbying Activities Continuation Sheet* (PHAs receiving CFP grants only)

(f) Resident Advisory Board (RAB) comments. Comments received from the RAB must be submitted by the PHA as an attachment to the PHA

Plan. PHAs must also include a narrative describing their analysis of the recommendations and the decisions made on these recommendations.

(g) Challenged Elements

(h) Form HUD-50075.1, *Capital Fund Program Annual Statement/Performance and Evaluation Report* (PHAs receiving CFP grants only)

(i) Form HUD-50075.2, *Capital Fund Program Five-Year Action Plan* (PHAs receiving CFP grants only)

**12.0 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 2009 grants)</b>		
a) Public Housing Operating Fund	\$1,195,842	Low Income Public Housing Operations
b) Public Housing Capital Fund	\$862,000	Capital Improvements
c) HOPE VI Revitalization	0	N/A
d) HOPE VI Demolition	0	N/A
e) Annual Contributions for Section 8 Tenant-Based Assistance	0	N/A
f) Public Housing Drug Elimination Program (including any Technical Assistance funds)	0	N/A
g) Resident Opportunity and Self-Sufficiency Grants	0	N/A
h) Community Development Block Grant	0	N/A
i) HOME	0	N/A
Other Federal Grants (list below)	0	N/A
<b>2. Prior Year Federal Grants (unobligated funds only) (list below)</b>	0	N/A
<b>3. Public Housing Dwelling Rental Income</b>	\$625,826	Low Income Public Housing Operations
<b>4. Other Income (list below)</b>		
a) Interest Income	\$14,243	

### **13.0 PHA Asset Management**

[24 CFR Part 903.79 (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 **By AMP**

Comprehensive stock assessment

Other: (list below) **Capital Fund Financing, Energy Performance Contracting**

3.  Yes  No: Has the PHA included descriptions of asset management activities in the **optional** Public Housing Asset Management Table?

#### 14.0 Carbon Monoxide Statement

In December of 2006, 300 combination smoke and carbon monoxide detectors were purchased from Champion Auto Glass and Electrical Supply. The detectors are BRK model SC9120B, hard-wired with battery back-up. The detectors were all installed in December 2006 all within 15 feet of any sleeping room. With adjustments and multiple floor sleeping units, we not have 302 detectors installed in 267 units.

  
Larry Williams  
Executive Director

Annual Statement/Performance and Evaluation Report  
 Capital Fund Program, Capital Fund Program Replacement Housing Factor and  
 Capital Fund Financing Program

U.S. Department of Housing and Urban Development  
 Office of Public and Indian Housing  
 OMB No. 2577-0226  
 Expires 4/30/2011

<b>Part I: Summary</b>		<b>PHA Name: Housing Authority of the City of Freeport</b>		<b>Grant Type and Number</b> Capital Fund Program Grant No. 11.06P029501-07 Replacement Housing Factor Grant No: Date of CFP:		<b>FFY of Grant: 2007</b> <b>FFY of Grant Approval: 2007</b>	
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Line	Type of Grant <input type="checkbox"/> Original Annual Statement <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 3/31/07	Reserve for Disasters/Emergencies <input type="checkbox"/>	Revised Annual Statement (revision no: ) <input type="checkbox"/> Final Performance and Evaluation Report		Total Actual Cost <sup>1</sup>	
			Original	Revised <sup>2</sup>	Obligated	Expended
1	Total non-CFP Funds					
2	1406 Operations (may not exceed 20% of line 21) <sup>3</sup>		176,458.00		176,458.00	176,458.00
3	1408 Management Improvements		176,458.00		176,458.00	176,458.00
4	1410 Administration (may not exceed 10% of line 21)		88,229.00		88,229.00	88,229.00
5	1411 Audit					
6	1415 Liquidated Damages					
7	1430 Fees and Costs					
8	1440 Site Acquisition		72,614.00		72,614.00	55,936.28
9	1450 Site Improvement					
10	1460 Dwelling Structures		55,000.00		55,000.00	22,860.30
11	1465.1 Dwelling Equipment—Nonexpendable		283,531.00		283,531.00	283,531.00
12	1470 Non-dwelling Structures					
13	1475 Non-dwelling Equipment		30,000.00		30,000.00	24,145.96
14	1485 Demolition					
15	1492 Moving to Work Demonstration					
16	1495.1 Relocation Costs					
17	1499 Development Activities <sup>4</sup>					

<sup>1</sup> To be completed for the Performance and Evaluation Report  
<sup>2</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement  
<sup>3</sup> PHAs with under 250 units in management may use 100% of CFP Grants for operations.  
<sup>4</sup> RHF funds shall be included here.

Annual Statement/Performance and Evaluation Report  
 Capital Fund Program, Capital Fund Program Replacement Housing Factor and  
 Capital Fund Financing Program

U.S. Department of Housing and Urban Development  
 Office of Public and Indian Housing  
 OMB No: 2577-0226  
 Expires 4/30/2011

<b>Part I: Summary</b>		FFY of Grant: 2007	
<b>PHA Name:</b> Housing Authority of the City of Freepor	<b>Grant Type and Number</b> Capital Fund Program Grant No: IL06P029501-07 Replacement Housing Factor Grant No: Date of CFFP:	FFY of Grant Approval: 2007	

Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost <sup>1</sup>	
		Original	Revised <sup>2</sup>	Obligated	Expended
18a	1501 Collateralization or Debt Service paid by the PHA				
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment				
19	1502 Contingency (may not exceed 8% of line 20)				
20	Amount of Annual Grant: (sum of lines 2 - 19)	882,290.00		882,290.00	827,618.54
21	Amount of line 20 Related to LBP Activities	276,454.25			
22	Amount of line 20 Related to Section 504 Activities				
23	Amount of line 20 Related to Security - Soft Costs				
24	Amount of line 20 Related to Security - Hard Costs				
25	Amount of line 20 Related to Energy Conservation Measures				
<b>Signature of Executive Director</b> <i>Ray V. [Signature]</i>		<b>Date</b> 8/09/09		<b>Signature of Public Housing Director</b>	
				<b>Date</b>	

<sup>1</sup> To be completed for the Performance and Evaluation Report.  
<sup>2</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.  
<sup>3</sup> PHAs with under 250 units in management may use 100% of CFFP Grants for operations.  
<sup>4</sup> RHF funds shall be included here.

Annual Statement/Performance and Evaluation Report  
 Capital Fund Program, Capital Fund Program Replacement Housing Factor and  
 Capital Fund Financing Program

U.S. Department of Housing and Urban Development  
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 Expires 4/30/2011

Part II: Supporting Pages		Grant Type and Number		Federal FFY of Grant: 2007			
PHA Name: Housing Authority of the City of Freeport		Capital Fund Program Grant No: IL06P029501-07					
		CFFP (Yes/ No):					
		Replacement Housing Factor Grant No:					
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost	Total Actual Cost	Status of Work	
PHA-Wide	Operations	1406		Original 176,458.00	Funds Obligated <sup>2</sup> 176,458.00	Funds Expended <sup>2</sup> 176,458.00	Complete
PHA-Wide	Management Improvements	1408		176,458.00	176,458.00	176,458.00	Complete
PHA-Wide	Administration	1410		88,229.00	88,229.00	88,229.00	Complete
PHA-Wide	Fees and Costs	1430		72,614.00	72,614.00	55,936.28	Started
IL 029-2	Sidewalks	1450		5,000.00	5,000.00	5,000.00	Complete
IL 029-1	Parking Lots	1450		30,000.00	30,000.00	0.00	Started
IL 029-3	Parking Lots	1450		20,000.00	20,000.00	17,860.30	Started
	Subtotal			55,000.00	55,000.00	22,860.30	
IL 029-2	Siding and Abatement	1460		276,454.25	276,454.25	276,454.25	Complete
IL 029-3	Plumbing Improvement	1460		7,076.75	7,076.25	7,076.25	Complete
	Subtotal			283,531.00	283,531.00	283,531.00	
IL 029-1	Community Building Improvement	1470		30,000.00	30,000.00	24,145.96	Started

<sup>1</sup>To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

<sup>2</sup>To be completed for the Performance and Evaluation Report.







Annual Statement/Performance and Evaluation Report  
 Capital Fund Program, Capital Fund Program Replacement Housing Factor and  
 Capital Fund Financing Program

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 Expires 4/30/2011

<b>Part I: Summary</b>		<b>FFY of Grant: 2008</b>	
PHA Name: Housing Authority of the City of Freeport		FFY of Grant Approval: 2008	
Grant Type and Number Capital Fund Program Grant No: IL06P029501-08 Replacement Housing Factor Grant No: Date of CFPP:			

Line	Type of Grant <input type="checkbox"/> Original Annual Statement <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 3/31/08	Summary by Development Account	Original	Total Estimated Cost		Obligated	Total Actual Cost <sup>1</sup>
				Revised <sup>2</sup>	Final Performance and Evaluation Report		
1		Total non-CFP Funds					
2		1406 Operations (may not exceed 20% of line 21) <sup>3</sup>	172,760.00			172,760.00	172,760.00
3		1408 Management Improvements	172,760.00			172,760.00	172,760.00
4		1410 Administration (may not exceed 10% of line 21)	86,380.00			86,380.00	86,380.00
5		1411 Audit					
6		1415 Liquidated Damages					
7		1430 Fees and Costs	43,189.00			5,000.00	5,000.00
8		1440 Site Acquisition					
9		1450 Site Improvement	40,930.00			38,533.20	38,533.20
10		1460 Dwelling Structures	290,747.00			240,082.47	240,082.47
11		1465.1 Dwelling Equipment—Nonexpendable					
12		1470 Non-dwelling Structures	17,032.00			913.77	913.77
13		1475 Non-dwelling Equipment	40,000.00			12,495.00	12,495.00
14		1485 Demolition					
15		1492 Moving to Work Demonstration					
16		1495.1 Relocation Costs					
17		1499 Development Activities <sup>4</sup>					

<sup>1</sup> To be completed for the Performance and Evaluation Report.  
<sup>2</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.  
<sup>3</sup> PHAs with under 250 units in management may use 100% of CFP Grants for operations.  
<sup>4</sup> RHF funds shall be included here.

Annual Statement/Performance and Evaluation Report  
 Capital Fund Program, Capital Fund Program Replacement Housing Factor and  
 Capital Fund Financing Program

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<b>Part I: Summary</b>		FFY of Grant: 2008	
PHA Name: Housing Authority of the City of Freepor		Grant Type and Number Capital Fund Program Grant No: IL06P029501-08 Replacement Housing Factor Grant No: Date of CFFP:	
FFY of Grant: 2008 FFY of Grant Approval: 2008			

Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost <sup>1</sup>	
		Original	Revised <sup>2</sup>	Obligated	Expended
18a	1501 Collateralization or Debt Service paid by the PHA				
18Ba	9000 Collateralization or Debt Service paid Via System of Direct Payment				
19	1502 Contingency (may not exceed 8% of line 20)				
20	Amount of Annual Grant:: (sum of lines 2 - 19)	863,798.00		728,924.44	728,924.44
21	Amount of line 20 Related to LBP Activities	120,034.00			
22	Amount of line 20 Related to Section 504 Activities				
23	Amount of line 20 Related to Security - Soft Costs				
24	Amount of line 20 Related to Security - Hard Costs				
25	Amount of line 20 Related to Energy Conservation Measures				

Type of Grant  
 Original Annual Statement  
 Performance and Evaluation Report for Period Ending: 3/31/08  
 Reserve for Disasters/Emergencies  
 Revised Annual Statement (revision no: )  
 Final Performance and Evaluation Report

Signature of Executive Director: *[Signature]* Date: 10/3/09

Signature of Public Housing Director: \_\_\_\_\_ Date: \_\_\_\_\_

<sup>1</sup> To be completed for the Performance and Evaluation Report.  
<sup>2</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement  
<sup>3</sup> PHAs with under 250 units in management may use 100% of CFP Grants for operations.  
<sup>4</sup> RHF funds shall be included here.

**Part II: Supporting Pages**

PHA Name: Housing Authority of the City of Freeport		Grant Type and Number Capital Fund Program Grant No: IL06P029501-08 CFPP (Yes/No): Replacement Housing Factor Grant No:		Federal FFY of Grant: 2008				
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost Original	Revised <sup>1</sup>	Total Actual Cost Funds Obligated <sup>2</sup>	Funds Expended <sup>2</sup>	Status of Work
PHA-Wide	Operations	1406		172,760.00		172,760.00	172,760.00	Complete
PHA-Wide	Management Improvements	1408		172,760.00		172,760.00	172,760.00	Complete
PHA-Wide	Administration	1410		86,380.00		86,380.00	83,380.00	Complete
PHA-Wide	Fees and Costs	1430		43,189.00		5,000.00	5,000.00	Started
IL 029-2	Sidewalks	1450		40,930.00		38,533.20	38,533.20	Started
IL 029-1	Siding and Abatement Windows	1460		120,034.00		120,034.00	120,034.00	Complete
IL 029-1	Siding and Abatement Windows	1460		10,233.00		10,233.00	10,233.00	Complete
IL 029-2	Siding and Abatement Windows	1460		85,271.00		85,271.00	85,271.00	Complete
IL 029-2	Subtotal	1460		75,209.00		24,544.47	24,544.47	Started
	Subtotal			290,747.00		240,082.47	240,082.47	
IL 029-3	Re-Tile public Bathrooms	1470		6,532.00		0	0	Not Started
IL 029-2	Community Stage and Roof Subtotal	1470		10,500.00		913.77	913.77	Started
	Subtotal			17,032.00		913.77	913.77	

<sup>1</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

<sup>2</sup> To be completed for the Performance and Evaluation Report







Annual Statement/Performance and Evaluation Report  
 Capital Fund Program, Capital Fund Program Replacement Housing Factor and  
 Capital Fund Financing Program

U.S. Department of Housing and Urban Development  
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Part I: Summary		FFY of Grant: 2009 FFY of Grant Approval:	
PHA Name: Housing Authority of the City of Freeport		Grant Type and Number Capital Fund Program Grant No: IL06P029501-09 Replacement Housing Factor Grant No: Date of CFPP:	
Type of Grant	<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Performance and Evaluation Report for Period Ending:	<input checked="" type="checkbox"/> Revised Annual Statement (revision no:06 ) <input type="checkbox"/> Final Performance and Evaluation Report	Total Actual Cost <sup>1</sup>
Line	Summary by Development Account	Total Estimated Cost Revised <sup>2</sup>	Obligated Expended
1	Total non-CFP Funds		
2	1406 Operations (may not exceed 20% of line 21) <sup>3</sup>	171,857	
3	1408 Management Improvements	106,502,	
4	1410 Administration (may not exceed 10% of line 21)	85,928	
5	1411 Audit	0	
6	1415 Liquidated Damages		
7	1430 Fees and Costs	25,000	
8	1440 Site Acquisition		
9	1450 Site Improvement	205,000	
10	1460 Dwelling Structures	200,000	
11	1465.1 Dwelling Equipment—Nonexpendable		
12	1470 Non-dwelling Structures	15,000	
13	1475 Non-dwelling Equipment	50,000	
14	1485 Demolition		
15	1492 Moving to Work Demonstration		
16	1495.1 Relocation Costs		
17	1499 Development Activities <sup>4</sup>		

<sup>1</sup> To be completed for the Performance and Evaluation Report.

<sup>2</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

<sup>3</sup> PHAs with under 250 units in management may use 100% of CFP Grants for operations.

<sup>4</sup> RHF funds shall be included here.

Annual Statement/Performance and Evaluation Report  
 Capital Fund Program, Capital Fund Program Replacement Housing Factor and  
 Capital Fund Financing Program

U.S. Department of Housing and Urban Development  
 Office of Public and Indian Housing  
 OMB No. 2577-0226  
 Expires 4/30/2011

<b>Part I: Summary</b>		FFY of Grant: 2009	
PHA Name: Housing Authority of the City of Freeport		FFY of Grant Approval:	
Grant Type and Number Capital Fund Program Grant No: IL06P029501-09 Replacement Housing Factor Grant No: Date of CFFP:			
Type of Grant <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Performance and Evaluation Report for Period Ending: Summary by Development Account		<input checked="" type="checkbox"/> Revised Annual Statement (revision no: 06 ) <input type="checkbox"/> Final Performance and Evaluation Report	
Line		Total Estimated Cost	Total Actual Cost <sup>1</sup>
		Original	Revised <sup>2</sup>
			Obligated
			Expended
18a	1501 Collateralization or Debt Service paid by the PHA		
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment		
19	1502 Contingency (may not exceed 8% of line 20)		
20	Amount of Annual Grant: (sum of lines 2 - 19)	859,287	
21	Amount of line 20 Related to LBP Activities	50,000	
22	Amount of line 20 Related to Section 504 Activities	100,000	
23	Amount of line 20 Related to Security - Soft Costs		
24	Amount of line 20 Related to Security - Hard Costs		
25	Amount of line 20 Related to Energy Conservation Measures		
Signature of Executive Director		Signature of Public Housing Director	
Date		Date	

<sup>1</sup> To be completed for the Performance and Evaluation Report.

<sup>2</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

<sup>3</sup> PHAs with under 250 units in management may use 100% of CFFP Grants for operations.

<sup>4</sup> RHF funds shall be included here.

Annual Statement/Performance and Evaluation Report  
 Capital Fund Program, Capital Fund Program Replacement Housing Factor and  
 Capital Fund Financing Program

U.S. Department of Housing and Urban Development  
 Office of Public and Indian Housing  
 OMB No. 2577-0226  
**Expires 4/30/2011**

Part II: Supporting Pages		Federal FFY of Grant: 2009						
PHA Name: Housing Authority of the City of Freeport		Grant Type and Number Capital Fund Program Grant No: IL06P029501-09 CFFP (Yes/ No): Replacement Housing Factor Grant No:						
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised <sup>1</sup>	Funds Obligated <sup>2</sup>	Funds Expended <sup>2</sup>	
PHA-Wide	Operations	1406		171,857				
PHA-Wide	Management Improvements	1408		106,502				
PHA-Wide	Administration	1410		85,928				
PHA-Wide	Fees and Costs	1430		25,000				
IL 029-1	Site Improvement Concrete, Stoops, and Parking Lots	1450		65,000				
IL029-2	Concrete, Stoops, and Sidewalks Parking Lot repairs and resurface			90,000				
IL029-2	Gilmore Concrete, Parking, Sidewalk Sub Total Site Improvement	1450		50,000				
				205,000				
IL029-1	Dwelling Structures Interior Floor replacement, Kitchens Bath, Electrical Updates Deadbolts Parkside Lead Abatement & Siding	1460		100,000				
				10,000				
				50,000				

<sup>1</sup>To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

<sup>2</sup>To be completed for the Performance and Evaluation Report.

Part II: Supporting Pages		Federal FFY of Grant: 2009						
PHA Name: Housing Authority of the City of Freeport		Grant Type and Number Capital Fund Program Grant No: IL06P029501-09 CFFP (Yes/ No): Replacement Housing Factor Grant No:						
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised <sup>1</sup>	Funds Obligated <sup>2</sup>	Funds Expended <sup>2</sup>	
IL029-2	Deadbolts	1460		10,000				
IL029-3	Hosmer Roof Replacement SubTotal Dwelling Structure	1460 1460		30,000 200,000				
IL029-2	Non-Dwelling Structure Westview Office Roof Replacement Subtotal Non-Dwelling Structure	1470 1470		15,000 15,000				
IL029-1	Non-Dwelling Equipment Playground Equipment	1475		25,000				
IL029-2	Playground Equipment Subtotal Non-Dwelling Equipment	1475		25,000 50,000				
	Grant Total			859,287				

<sup>1</sup>To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

<sup>2</sup>To be completed for the Performance and Evaluation Report.





**Capital Fund Program—Five-Year Action Plan**

U.S. Department of Housing and Urban Development  
Office of Public and Indian Housing  
Expires 4/30/2011

**Part I: Summary**

PHA Name/Number		Freeport HA IL029	Locality (City/County & State)		Freeport/Stephenson/Illinois	<input type="checkbox"/> Original 5-Year Plan	<input checked="" type="checkbox"/> Revision No: 05
A.	Development Number and Name	Work Statement for Year 1 FFY 2009	Work Statement for Year 2 FFY 2010	Work Statement for Year 3 FFY 2011	Work Statement for Year 4 FFY 2012	Work Statement for Year 5 FFY 2013	
B.	Physical Improvements Subtotal	Approved Statement	479,882	517,000	279,000	224,000	
C.	Management Improvements		114,000	117,000	128,000	135,000	
D.	PHA-Wide Non-dwelling Structures and Equipment		204,900	182,950	405,000	452,000	
E.	Administration		119,112	120,993	119,572	120,143	
F.	Other		35,000	30,000	25,000	30,000	
G.	Operations		238,223	241,986	239,143	240,286	
H.	Demolition						
I.	Development						
J.	Capital Fund Financing - Debt Service						
K.	Total CFP Funds		1,191,117	1,209,929	1,195,715	1,201,429	
L.	Total Non-CFP Funds						
M.	Grand Total		1,191,117	1,209,929	1,195,715	1,201,429	

**Part I: Summary (Continuation)**

PHA Name/Number	Freeport HA	IL029	Locality (City/county & State)	Freeport/Stephenson/Illinois	<input type="checkbox"/> Original 5-Year Plan	<input checked="" type="checkbox"/> Revision No: 05
A.	Development Number and Name	Work Statement for Year 1 FFY 2009	Work Statement for Year 2 FFY 2010	Work Statement for Year 3 FFY 2011	Work Statement for Year 4 FFY 2012	Work Statement for Year 5 FFY 2013
	IL029 AMP # 1 Parkside	Annual Statement	156,682	246,200	125,000	175,000
	IL029 AMP # 2 Westview	Statement	360,000	358,750	277,000	294,000
	IL029 AMP # 3 Highrises	Statement	168,100	95,000	282,000	207,000
	HA Wide Operation	Statement	238,223	241,986	239,143	240,286
	HA Wide Mgt Improve.	Statement	114,000	117,000	128,000	135,000
	HA Wide Administration	Statement	119,112	120,993	119,572	120,143
	HA Wide Fees	Statement	35,000	30,000	25,000	30,000
		Statement				
		Statement				
	Grand Total		1,191,117	1,209,929	1,195,715	1,201,429

**Part II: Supporting Pages – Physical Needs Work Statement(s)**

Work Statement for Year 1 FFY 2009	Work Statement for Year 2			Work Statement for Year 3		
	Development Number/Name General Description of Major Work Categories	Quantity	Estimated Cost	Development Number/Name General Description of Major Work Categories	Quantity	Estimated Cost
<i>See Annual Statement</i>	AMP 1 IL029 Parkside Concrete Replacement		25,000	AMP 1 IL029 Parkside <i>Kitchen &amp; Electrical Improvements</i>		52,000
	Kitchen & Electrical Improvements		65,000	Entrance Doors & Cameras		49,200
	Parking Lot Resurfacing		30,000	Siding and Abatement		50,000
	Siding Abatement & Windows		36,682	Roof Repair & Concrete Repair		95,000
	Subtotal		156,682	Subtotal		246,200
	AMP 2 IL029 Westview Parking Lot Resurfacing		50,000	AMP 2 IL029 Westview Kitchen Improvements		50,000
	Concrete/Foundation & Roof Repairs		100,000	Roof Repair & Concrete Repair		94,750
	Kitchen Improvements & Plumbing		50,000	Entrance Doors		94,000
	Parking Lot Lighting		45,000	Siding and Lead Abatement		110,000
	Siding and Lead Abatement		115,000	Tub Replacement		10,000
	Subtotal		360,000	Subtotal		358,750
	AMP 3 IL029 Hosmer / Brewster Flooring		45,000	AMP 3 IL029 Hosmer / Brewster Plumbing Improvements		20,000
	Concrete Replacement		20,000	Boilers		25,000
	Plumbing Updates		100,700	Exterior Seal and Tuck Point		50,000
	Security Cameras		2,400	Subtotal		95,000
	Subtotal		168,100			
	Subtotal of Estimated Cost		\$684,782	Subtotal of Estimated Cost		\$699,950

**Part II: Supporting Pages – Physical Needs Work Statement(s)**

Work Statement for Year 1 FFY 2009	Work Statement for Year 4			Work Statement for Year: 5		
	Development Number/Name General Description of Major Work Categories	Quantity	Estimated Cost	Development Number/Name General Description of Major Work Categories	Quantity	Estimated Cost
See Annual Statement	AMP 1 IL029 Parkside Siding Abatement & Roof Replacement		70,000	AMP 1 IL029 Parkside ADA Modernization & Roof Replacement		55,000
	Furnace Replacement		35,000	Concrete Replacement		20,000
	Concrete Replacement		20,000	Plumbing Upgrades		50,000
	Subtotal		125,000	Refrigerators		30,000
				Lighting		20,000
	AMP 2 IL029 Westview Parking Lot & Signage Siding and Lead Abatement		55,000	Subtotal		175,000
			100,000	AMP 2 IL029 Westview Electrical Upgrades		84,000
	Furnace Replacement		55,000	Refrigerators/Lighting		75,000
	Westview Roofing		67,000	Furnace/Fence Replacement		55,000
	Subtotal		277,000	Rain Gutters & ADA Modernization		80,000
	AMP 3 IL029 Hosmer/Brewster Concrete Repairs		50,000	Subtotal		294,000
	Electrical Updates		20,000	AMP 3 IL029 Hosmer/Brewster Kitchen/Plumbing Upgrades		80,000
	Elevator Updates		150,000	Concrete Replacement & ADA Modernization		59,000
	Plumbing Updates		20,000	Electrical and Doors Updates		68,000
	Kitchen Updates		42,000	Subtotal		207,000
	Subtotal		282,000	Subtotal of Estimated Cost		\$676,000
	Subtotal of Estimated Cost		\$684,000			





Annual Statement/Performance and Evaluation Report  
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U.S. Department of Housing and Urban Development  
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 OMB No. 2577-0226  
 Expires 4/30/2011

Part I: Summary		FFY of Grant: 2009 FFY of Grant Approval:	
PHA Name: Housing Authority of the City of Freeport		Grant Type and Number Capital Fund Program Grant No: IL06S029501-09 Replacement Housing Factor Grant No: Date of CFPP: 03/17/2009	
Type of Grant	<input type="checkbox"/> Original Annual Statement <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 9/2009		<input type="checkbox"/> Revised Annual Statement (revision no: ) <input type="checkbox"/> Final Performance and Evaluation Report
Line	Summary by Development Account	Total Estimated Cost	Total Actual Cost <sup>1</sup>
		Original	Revised <sup>2</sup>
		Obligated	Expended
1	Total non-CFP Funds		
2	1406 Operations (may not exceed 20% of line 21) <sup>3</sup>		
3	1408 Management Improvements		
4	1410 Administration (may not exceed 10% of line 21)	109,340	3,410
5	1411 Audit		3,410
6	1415 Liquidated Damages		
7	1430 Fees and Costs		
8	1440 Site Acquisition		
9	1450 Site Improvement		
10	1460 Dwelling Structures		
11	1465.1 Dwelling Equipment—Nonexpendable		
12	1470 Non-dwelling Structures	648,057	637,257
13	1475 Non-dwelling Equipment	317,000	425,730
14	1485 Demolition	19,000	27,000
15	1492 Moving to Work Demonstration		
16	1495.1 Relocation Costs		
17	1499 Development Activities <sup>4</sup>		

<sup>1</sup> To be completed for the Performance and Evaluation Report.  
<sup>2</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.  
<sup>3</sup> PHAs with under 250 units in management may use 100% of CFP Grants for operations.  
<sup>4</sup> RHF funds shall be included here.

Annual Statement/Performance and Evaluation Report  
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U.S. Department of Housing and Urban Development  
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Part I: Summary		FFY of Grant: 2009 FFY of Grant Approval:		
PHA Name: Housing Authority of the City of Freeport		Grant Type and Number Capital Fund Program Grant No: IL06S029501-09 Replacement Housing Factor Grant No: Date of CFFP: 03/17/2009		
Type of Grant <input type="checkbox"/> Original Annual Statement <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 9/2009		<input type="checkbox"/> Revised Annual Statement (revision no: ) <input type="checkbox"/> Final Performance and Evaluation Report		
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost <sup>1</sup>
		Original	Revised <sup>2</sup>	
18a	1501 Collateralization or Debt Service paid by the PHA			
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment			
19	1502 Contingency (may not exceed 8% of line 20)			
20	Amount of Annual Grant: (sum of lines 2 - 19)	1,093,397	1,093,397	472,564
21	Amount of line 20 Related to LBP Activities	126,682	126,682	
22	Amount of line 20 Related to Section 504 Activities			
23	Amount of line 20 Related to Security - Soft Costs			
24	Amount of line 20 Related to Security - Hard Costs			
25	Amount of line 20 Related to Energy Conservation Measures			
Signature of Executive Director		Signature of Public Housing Director		Date
				11/27/10

<sup>1</sup> To be completed for the Performance and Evaluation Report.

<sup>2</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

<sup>3</sup> PHAs with under 250 units in management may use 100% of CFP Grants for operations.

<sup>4</sup> RHF funds shall be included here.

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U.S. Department of Housing and Urban Development  
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 Expires 4/30/2011

Part II: Supporting Pages		Federal FFY of Grant: 2009						
PHA Name: Housing Authority of the City of Freeport		Grant Type and Number Capital Fund Program Grant No: IL06S029501-09 CFFP (Yes/ No): Replacement Housing Factor Grant No:						
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised <sup>1</sup>	Funds Obligated <sup>2</sup>	Funds Expended <sup>2</sup>	
PHA-Wide	Administration	1410		109,340	3,410	3,410	3,410	Completed
	Dwelling Structure							
AMP# 1	Roof Replacement	1460		30,625	30,625	30,625	30,625	Completed
AMP# 1	ADA Modernization			15,000	30,000			Not Started
AMP# 1	Siding and Abatement			162,682	126,682	109,585	109,585	Started
AMP# 1	Electrical Upgrade			47,000	0			
AMP# 2	Roof Replacement-Westview			167,000	167,000	155,159	155,159	Started
AMP# 2	ADA Modernization			30,000	45,000			Not Started
AMP# 2	Roof Replacement- Douglas Village			9,750	9,750			Not Started
AMP# 3	Water Line - Brewster			9,000	9,000			Not Started
AMP# 3	Drain Line - Hosmer			13,000	13,000			Not Started
AMP# 3	Tub Valves - Hosmer			70,000	71,200			Not Started
AMP# 3	Roof Replacement			100,000	100,000			Completed
AMP# 3	ADA Modernization			30,000	30,000			Not Started
AMP# 3	Apartment Signage			0	5,000			Not Started
	Total Dwelling Structure	1460		648,057	637,257	472,564	472,564	

<sup>1</sup>To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

<sup>2</sup>To be completed for the Performance and Evaluation Report.

Annual Statement/Performance and Evaluation Report  
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Part II: Supporting Pages		Federal FFY of Grant: 2009						
PHA Name: Housing Authority of the City of Freeport		Grant Type and Number Capital Fund Program Grant No: IL06S029501-09 CFFP (Yes/ No): Replacement Housing Factor Grant No:						
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised <sup>1</sup>	Funds Obligated <sup>2</sup>	Funds Expended <sup>2</sup>	
AMP# 1	Furnace Replacement	1465.1		19,000	38,370			Not Started
AMP# 1	Electrical Upgrades			0	47,000			Not Started
PHA - Wide	Security Cameras			0	3,600	3,438	3,438	Completed
AMP# 2	Furnace Replacement			25,000	73,260			Not Started
AMP# 2	Electrical Updates			84,000	84,000	2,358	2,358	Started
AMP# 2	Bathutub Replacement			0	10,000			Not Started
AMP# 3	Elevator Motor Replacement			150,000	150,000	57,732	57,732	Started
AMP# 3	HVAC Replacement			12,000	12,000			Not Started
AMP#1 & #3	Washers and Dryers			27,000	0			
AMP# 3	Boiler Control Panel			0	3,000	2,928	2,928	Completed
AMP# 3	Water Heater - Hosmer			0	4,500	4,499	4,499	Completed
	Total Dwelling Equipment Nonexp.	1465.1		317,000	425,730	70,955	70,955	
AMP# 2	Roof Replacement	1470		10,000	10,000			Not Started
AMP# 3	ADA Modernization			9,000	9,000			Not Started
AMP# 3	Steel Dock Doors - Hosmer			0	8,000	2,830	2,830	Started
	Total Non-Dwelling	1470		19,000	27,000	2,830	2,830	
	Total			1,093,397	1,093,397	472,564	472,564	

<sup>1</sup>To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

<sup>2</sup>To be completed for the Performance and Evaluation Report.





## **Housing Authority of City of Freeport Violence Against Women Act: Policy**

The Housing Authority of City of Freeport (HACF) will enforce the passage of the **Violence Against Women Act** and the Department of Justice Reauthorization **Act** of 2005 (VAWA) which was originally enacted in 1994. Of significance to the HACF, the VAWA prohibits the eviction of, and removal of assistance from, certain persons living in public housing if the asserted grounds for such actions include an instance wherein they were a victim of domestic **violence**, dating **violence**, sexual assault, or stalking, as those terms are defined in Section 3 of the United States Housing **Act** of 1937 as amended by VAWA (42 U.S.C. 13925) and incorporated in this policy below...

Called the “**Violence Against Women Act**”, this law says that victims of domestic violence, dating **violence**, sexual assault, and stalking are established together in a broad group of protected individuals. This definition includes, among others, children. The purpose is to create new housing opportunities for victims of domestic **violence**; encourage – and in some cases, require the HACF not to deny access or evict victims of domestic **violence** related to their being abused; increase victim confidentiality; and require the HACF to consider the needs of victims of domestic **violence** in HACF’s housing policies. The HACF will recognize and accommodate the special nature of victims of domestic **violence**.

The provisions of this law affect those residents housed in Federally-subsidized public housing units and those individuals who receive Section 8 Housing Choice Vouchers (HCV) from the HACF.

### **Definitions:**

**Dating violence:** Violence committed by person who is or has been in a social relationship of a romantic or intimate nature with the victim; and where the existence of such a relationship shall be determined based on a consideration of the length, type and frequency of interaction between the persons involved in the relationship.

**Domestic violence:** Felony or misdemeanor crimes of violence committed by a current or former spouse of the victim, by a person with whom the victim shares a child in common, by a person who is cohabiting with or has cohabited with the victim as a spouse, by a person similarly situated to a spouse of the victim under the domestic or family violence laws or by any other person against an adult or youth victim who is protected from that person’s acts under the domestic or family violence laws of the jurisdiction.

**Immediate family:** Spouse, parent, brother, sister or child of that person, or an individual to whom that person stands in loco parentis or any other person living in the household related to that person by blood or marriage.

**Sexual assault:** Any conduct prescribed by chapter 109A of title 18, US code whether or not the conduct occurs in the special maritime and jurisdiction of the US or in a federal prison and includes assaults committed by offenders who are strangers to the victim or who are known or related by blood or marriage.

**Stalking:** To follow, pursue, or repeatedly commit acts with the intent to kill, injure, harass, or intimidate another person; and to place under surveillance with the intent to kill, injure, harass or intimidate another person. To place a person in reasonable fear of the death of, or serious bodily injury to, or to cause substantial emotional harm to that person, member of immediate family, spouse or partner.

**Confidentiality:** Information by the victim pursuant to certification shall be retained in confidence and not entered into any shared database nor provided to any related entity except when the disclosure is: consented to by the individual in writing, required for use in eviction proceedings, or otherwise required by law.

**Certification:** The HACF response to subsections (1) (5) or (6) (i.e., a claim of protected status under VAWA) may request that an individual certify via a HUD approved certification form that the individual is a victim of domestic **violence**, dating **violence**, or stalking, and that the incident or incident in question are bona fide incidents of such actual or threatened abuse and meet the requirements set forth in the statute. Such certification shall include the name of the perpetrator.

**Notification of Residents:**

The HACF will notify all residents of their rights under VAWA by written notice and inform all new applicants during the application process and while being tenanted by management staff. The notification will include an explanation of VAWA. The notification will describe the verification (see attaches “**Violence Against Women Act Certification Form**”) that will be required by a resident or applicant claiming protection under the **Act**.

**Documentation:**

Tenant Selection and Management offices will retain Certification Forms (Exhibit A), documentation of applicants/residents that have issues dealing with the VAWA. This documentation will be maintained in the tenant file of said person in the development they at which they reside.

The Certification Form (Exhibit A), will be temporarily utilized until a HUD approved form is made available: The Management, Tenant Selection or Housing Assistance staff will request that an individual certify via this Certification Form that the individual is a victim of domestic violence, dating violence, or stalking, and that the incident or incident in question are bona fide incidents of such actual or threatened abuse and meet the requirements set forth in the aforementioned paragraphs. Such certification shall include the name of the perpetrator.

The resident has **fourteen (14)** business days to reply in writing from day of receipt from the HACF. If the certification is not received within 14 business days of the HACF's written request, nothing would limit the HACF ability to evict/terminate assistance. The Asset Management Project (AMP) Manager may extend the **14 day** deadline at his/her discretion. This form is not required to be executed under penalty of perjury, although HUD may elect to require that in its approved form when promulgated.

An individual may also satisfy the certification requirement by providing Tenant Selection or Management staff with documentation signed by an employee, agent or volunteer of a victim service provider, an attorney, or medical professional, from whom the victim has sought assistance in addressing domestic **violence**, dating **violence**, sexual assault, or stalking, or the effects the abuse, in which the professional attests under penalty of perjury (28 U.S.C. 1746) to the professional's belief that the incident or incidents in question are bona fide incidents of abuse, and the victim of domestic **violence**, dating **violence**, or stalking has signed or attested to the documentation; or "producing a Federal, State, tribal, territorial, or local police or court record."

#### **Training:**

Managers employed by the HACF will be encouraged to participate in training sessions dealing with issues of **Violence Against Women**, in order to recognize residents who are victims.

#### **Implementation:**

The provision of the law which apply to the administration of a Housing Authority's Federal Public Housing Program deal with the ability of the public housing authority to house residents covered by the protections of the **Act**. The HACF's implementation of these provisions will occur as follows:

- An applicant or participant that is or has been a victim of domestic **violence**, dating **violence**, or stalking is not an appropriate basis for denial of program assistance or for denial of admission of an otherwise qualified applicant. The HACF can bifurcate the lease to remove a lawful occupant or tenant who engages in criminal acts of **violence** to family members or others without evicting victimized lawful occupants.
- An incident or incidents of actual or threatened domestic **violence**, dating violence, or stalking will not be constructed as a serious or repeated violation of the lease by the victim or threatened victim of that **violence** and shall not be good cause for terminating assistance, tenancy, or occupancy rights of the victim of such **violence**.
- The HACF will honor court orders regarding rights of access or control of property, including civil protection orders issued to protect the victim and issued to address the distribution or possession of property among household members in cases where a family breaks up.

- The HACF can evict for other good cause unrelated to the incident or incidents of domestic **violence**, as long as the same standards apply to victims and non-victims.
- Eviction is not prohibited by The HACF, if it can “demonstrate an actual and imminent threat to other tenants or those employed at or providing service to the property if that tenant’s tenancy is not terminated.”

**Grievance Procedure:**

All residents have the right to have a Grievance Hearing after a Termination Notice is issued. Upon filing a written request, as provided by The Housing Authority of the City of Freeport’s grievance procedure, any resident who disagrees with the HACF ’s action will be afforded this opportunity.