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

PHA Plans

5 Year Plan for Fiscal Years 2005 - 2009
Annual Plan for Fiscal Year 2009

Submitted
November 6, 2008

Revised and Resubmitted
December 11, 2008

Further Revised and Resubmitted
May 13, 2009

Further Revised
July 28, 2009 and Resubmitted September 11, 2009

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: Holyoke Housing Authority **PHA Number:** MA005

PHA Fiscal Year Beginning: (mm/yyyy) 12/2009

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 2008 - 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)

1. To ensure the delivery and availability of decent, safe, and sanitary affordable housing as defined in compliance with all applicable federal, state and local statutes and regulations.

2. The Holyoke Housing Authority is committed to ensuring that each employee of the Authority is provided with the necessary training and supervision to accomplish their assigned responsibilities and to promote the mission of the Holyoke Housing Authority.

3. The Holyoke Housing Authority is committed to using established and innovative financial and human resources to ensure that each Holyoke Housing Authority resident and housing community has the opportunity to achieve its maximum potential.

4. The Holyoke Housing Authority is committed to ensuring the valuable recognition of the role and importance of the public housing communities within the city of Holyoke. The authority is committed to promoting the integration of public housing within the larger community.

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.

Other PHA Goals and Objectives: (list below)

Goal One: The Holyoke Housing Authority will work to expand the supply of affordable housing and improve its existing housing stock, in these times of budget cuts and limited funding, by seeking innovative financial resources for these endeavors in alternative markets.

Objectives:

- To meet this goal the Authority will leverage private or other public funds to create additional housing opportunities,
- To work with other Massachusetts Public Housing Authorities to join MassHousing's Public Housing Bond Finance program as a way to provide needed capital for major rehabilitation improvements for Lyman Terrace development.
- Will educate staff and its Board of Commissioners of alternative finance models that may provide financing for modernization improvements.

2005 Progress Statement- The Authority partnered with Habitat For Humanities to build a Habitat home in the HOPE VI target area. Construction of the home began in the fall of 2005.

2006 Progress Statement- Due to the limited amount of MassHousing Bond funds available the Authority will seek funding for the rehabilitation of Lyman Terrace through the HOPE VI program. Should the Authority be successful in its attempt to secure HOPE VI funds it will apply for additional funds through the MassHousing Bond Financing program.

2007 Progress Statement- Cornerstone Housing was hired to assist the Authority with its HOPE VI application for the rehabilitation of Lyman Terrace. Prior to the issuance of the HOPE VI NOFA Authority staff worked with the consulting group to begin the application process. Community meetings were held with Lyman Terrace residents and an advisory meeting was held with City officials, local business people and abutters. To assure that the residents of Lyman Terrace had a voice in what services would be included as programming all residents were surveyed and asked questions regarding security, FSS needs, transportation and relocation options. 87% of residents participated in the survey.

2008 Progress Statement- Upon learning that the Authority did not receive funding for its 2007 HOPE VI application for Lyman Terrace the Authority again hired Cornerstone Housing to assist the Authority with its second HOPE VI application for the rehabilitation of Lyman Terrace. Prior to the issuance of the 2008 HOPE VI NOFA Authority staff worked with the consulting group to begin the application process. Community meetings were held with Lyman Terrace residents and an advisory meeting was held with City officials, local business people and abutters. Additional services providers were brought on to compliment the services included in the 2008 application. These providers included the Basketball and Volley Ball Halls of Fame and the Holyoke Health Center. The site plan was adjusted to include more green space and better energy efficiency designs.
The Authority had learned before this Plan was submitted that it did not receive funding of its 2nd Lyman Terrace 2008 HOPE VI application. The Authority hopes to reapply for funding in FY 2009.

Goal Two: To meet the needs of those low-income frail seniors in need of decent, safe, and affordable housing, while at the same time offering them the needed services to improve their quality of life, the Authority will develop an assisted living facility at Falcetti Towers.

Objectives:

- The Authority will develop a designated housing plan for Falcetti Towers that will be submitted to HUD for approval by December 2005,
- The Authority will work to create the first affordable assisted living facility for low income seniors in our community
- The Authority will work with community-based organizations and service providers to improve and expand services needed for this population so that they may age in place.
- To continue to apply for funding under the Title IIIB Older Americans Act funding from WestMass ElderCare for the Bridging the Gap program.

2005 Progress Statement- A designated housing plan was developed for Falcetti Towers and submitted to HUD for approval. The Plan was approved October 2005. During the year the Development department researched the feasibility of an assisted living facility at Falcetti Towers. The Authority was awarded funding under the Title IIIB Older Americans Act for it's Bridging the Gaps program.

2006 Progress Statement- The Holyoke Geriatric Authority will develop an assisted living facility next to the HHA's State assisted Congregate House on Lower Westfield Road. Due to this development the Authority will work with the HGA to assure that HHA tenants are able to secure housing in the facility instead of developing its own. The Authority was awarded funding under the Title IIIB Older Americans Act for it's Bridging the Gaps program.

2007 Progress Statement- The Authority received its seventh year of Title III funding for its Bridging the Gaps program. The Authority continues to work with the HGA to assure that HHA tenants are able to secure housing in the facility instead of developing its own.

2008 Progress Statement- The Authority received its eighth year of Title III funding for its Bridging the Gaps program. This will enable the Authority to continue to offer translation and transportation services to its elderly residents. The Authority requested an extension of its 2005 ROSS Elderly/Disabled grant from HUD. If granted the Authority will disburse the remaining funds within a 12 month period.

Goal Three: The Holyoke Housing Authority is committed to expanding the range and quality of housing choices available to participants in its tenant-based assistance program, public housing program and to all low to moderate income Holyoke residents.

Objectives:

- To promote homeownership as a housing option for low/moderate income households. To continue to offer the Section 8 Housing Choice Voucher Homeownership Program to those HCV households who are eligible.

- To educate potential homeowners the Authority proposes to continue to partner with the City of Holyoke to offer First-Time Homebuyer Workshops. The Authority will fund these workshops by applying for funding from the CDBG program.
- To assist buyers with the expenses associated with downpayment and closing costs the Authority proposes to continue to administer the City of Holyoke's Borrower's Assistance Program funded through the HOME program.
- Created a pool of new homes that are affordable for the low/moderate income first-time homebuyer through the HOPE VI program.

2005 Progress Statement- During the year the Section 8 HCV Homeownership program hit a major hurdle when the two lenders, Citizen's Bank and Fleet Bank, who underwrote loans for this program, put a freeze on all HCVHP underwriting. Citizens Bank was a major underwriter for this program underwriting all five HCVHP loans during FY 2003. With its merger with Charter One on November 1, 2004 a halt was put on this type of lending until all documents could be reviewed and approved by the new bank. The Authority had worked hard to establish a relationship with Fleet Bank for program underwriting and had accomplished this goal by receiving approval for underwriting. Fleet Bank's merger with Bank of America put this approval on hold until the new bank re-evaluated this type of lending. To counter these losses staff is actively pursuing new lending opportunities with other local lenders. Staff has met with Westbank, PeoplesBank, MHFA, Countrywide and the Holyoke Credit Union with hopes of establishing underwriting relationships with them. Springfield Neighborhood Housing Services has agreed to fill in the void and underwrite loans as well as finance the debt.

Five (5) series were held throughout the City. These workshops were attended by 68 Holyoke Households. Of these 68 families, 11 households purchased homes.

The Authority loaned $94,981.00 in BAP funds to 17 first-time homebuyers.

All HOPE VI Phase 1 homeownership homes were sold to income eligible first-time homebuyers.

2006 Progress Statement- The Section 8 HCV Homeownership Program is still being offered as an option to HCV holders, however, due to the fact that there are no local lenders able to lend under the program there has been no opportunity for financing. The HCV Homeownership Case Manager works with local lenders to educate them to the value of the program and hopes to have one lender, WestBank, lending under the program during 2007.

The Authority continues to apply for CDBG funding for its FTHB Education Workshop series. Thus far during 2006 the Authority has held three FTHB workshop series attended by 52 households. Another two are planned before the end of the year.

2007 Progress Statement- The Authority has partnered with the Springfield Neighborhood Housing Services for mortgage lending under its HCV Homeownership program. Thus far this year one loan has closed under the HCV program. Due to the buy-out of WestBank the Authority has begun working with Sovereign Bank in the hope that they will consider working with the program.

The Authority continues to apply for CDBG funding for its FTHB Education Workshop series. Thus far during 2007 the Authority has held two FTHB workshop series attended by 36 households. Another two are planned before the end of the year.

The Authority loaned $24,995.00 in BAP funds to 5 first-time homebuyers.

2008 Progress Statement- The Authority has been informed by Sovereign Bank that it will lend under the HCV Homeownership program beginning in January 2009. The Authority continues to work with the Springfield Neighborhood Housing Services for funding under the program. One HCV Homeownership loan closed in 2008. The Authority received $2,000 in CDBG funding for its FTHB education workshop series. Thus far in 2008 the Authority has held two workshop series which were attended by 31 households. Another two will be held before the end of the year. $105,031 in funds was loaned to FTHBs through the Authority's BAP and HOPE VI Loan To Purchaser programs thus far this year.

Goal Four: Provide a safe and secure environment in the Holyoke Housing Authority's public housing developments.

Objectives:

- The Holyoke Housing Authority will work with the Holyoke Police Department to continue the relationship that currently exists with the assigned Officer Liaison.
- To continue to work with the HPD to assure that staffing at community police substations in the family and elderly developments continues, to have a visible officer presence at all developments, and to offer crime prevention training to all interested residents and staff.
- Implement public housing security improvements by researching the cost and feasibility of remote cameras and other aids that will assist in the surveillance of all Authority properties.

2005 Progress Statement- The Authority is a program Host Agent on a Weed and Seed grant awarded to the City. The Director of Housing Opportunities is a member of the Weed and Seed Steering Committee. The target area of the grant encompasses an area that includes three HHA family developments and four elderly buildings.

2006 Progress Statement- Cameras have been installed in the elevators and common areas at Falcetti Towers. Affordability study being done to see if it is feasible to install cameras at all other elderly buildings. The HPD Elder Liaison Officer continues to be

present at all Tenants Association meetings. The City of Holyoke received its second year funding for its Weed and Seed grant. Through this grant the Authority and the City have been able to make major changes at Lyman Terrace.

2007 Progress Statement- The Authority continues to have a strong presence on the City's Weed and Seed Steering Committee. Community Policing continues at Lyman Terrace and 75% of surveyed residents state that they feel safer at the development than they did one year ago. The "weeding" process has begun at the next weed and seed site, Toepfert Apartments.

2008 Progress Statement- The Authority continues to have a strong presence on the City's Weed and Seed and the Shannon grant Steering Committees. The Director of Housing Opportunities attended a Shannon grant training at Holy Cross College in July 2008. Under the Department of Justice's Project Safe Neighborhood grant the Authority received $12,000 for the installation of cameras in the hallways at Toepfert Apartments. The Authority is working with the Holyoke Police Department to have a camera installed in the parking lot at Rosary Towers. The Authority continues to work with the HPD to help weed out drugs and violent crimes in its developments. In 2008 this relationship has resulted in six evictions for drug related crimes.

Goal Five: The Holyoke Housing Authority will work to provide all households and individuals residing in public housing with the opportunity to access the services needed to improve their quality of life and to increase their economic situation.

Objectives:

- Increase the number and percentage of employed persons in assisted families by 5% over the year.
- Provide or attract supportive services to improve assistance recipients' employability. Continue to apply for funding through the ROSS program to allow for supportive services.
- Provide or attract supportive services to increase independence for the elderly or families with disabilities. Continue to apply for funding through the ROSS RSDM program to allow for supportive services.

2005 Progress Statement- The Authority applied but did not receive FY 2006 ROSS funds. The Authority was awarded funding of its ROSS Elderly application.

2006 Progress Statement- The Authority will submit a FY 2007 ROSS application by September 8, 2006. The Authority began offering services to PH elders and those with disabilities under its FY 2006 ROSS Elder grant.

2007 Progress Statement- The Authority continues to offer service under its HUD ROSS Elderly/Disabled persons grant. Due to requests made by residents the grant scope of services will be amended to include English classes for Spanish speakers and

conversational Spanish classes for English speakers. The Authority submitted an application for funding under the HUD ROSS Family FSS and Homeownership program.

2008 Progress Statement- The Authority was awarded $250,000 by HUD for its 2007 ROSS Family/Homeownership grant application. This grant will compliment the services currently being offered through the Authority's Resident Service department and will include the following services: adult computer classes, teen programming, money management skills training, parent education, family counseling and early education and care counseling services and first-time homebuyer education and one-on-one counseling. The Authority applied for an extension of its 2005 ROSS Elderly/Disabled grant. The Authority received funding in 2008 for its 2007 applications for HCV FSS and Homeownership Case Managers and PHA FSS Case Manager. It also applied for continued funding for these positions in 2008.

Other PHA Goals and Objectives: (list below)

The Holyoke Housing Authority will continue to strive to create new and expanded affordable housing opportunities for low, very low and extremely low income families through housing acquisition, conversion, redevelopment and rehabilitation activities.

Should Congress or HUD provide relief from the 1999 Faircloth Amendment baseline cap on Federal public housing units the HHA will attempt to acquire, absorb or federalize a portion of its existing state public housing program units, particularly its 217 unit Beaudoin Village state family development and its 12 unit 705 scattered site development to take full advantage of HUD options which may become available through systemic Section 8 Housing Choice Voucher and Low Rent Public Housing program revisions.

Annual PHA Plan
PHA Fiscal Year 2009
[24 CFR Part 903.7]

i. Annual Plan Type:
Select which type of Annual Plan the PHA will submit.

☒ **Standard Plan**

☐ **Troubled Agency Plan**

ii. Executive Summary of the Annual PHA Plan
[24 CFR Part 903.7 9 (r)]

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

The Holyoke Housing Authority is pleased to provide its FY 2009 PHA plan for public review. The Board of Commissioners and staff of the Authority have been honored to serve the residents of Holyoke and to provide them with quality, safe, decent, affordable housing for over 69 years. This year's Plan contains the Authority's outlined goals as stated in the 2005 Plan with progress statements of achievement.

As always, the Authority is committed to secure funds for building improvements and for the construction of new affordable units. During these times of budget cuts and limited funding, the Authority will be seeking a Hope VI grant to allow it to address the needs at the Authority's oldest development- Lyman Terrace.

To continue its commitment to expanding the range and quality of housing choices available to participants in its tenant-based assistance program, public housing program and to all low to moderate income Holyoke residents the Authority will continue its partnership with the City of Holyoke to provide CDBG funded First-Time Homebuyer Education workshops and to administer the HOME Borrower's Assistance Program (BAP).

To assist residents in their quest for self-sufficiency the Authority will continue to apply for funding under the HUD Resident Opportunity and Supportive Services grant. These grants allow the Authority to form partnerships with agencies that provide the needed service to help our residents gain economic self-sufficiency.

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 -A
- ☐ FY 2005 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- B
- ☒ List of Resident Board Member- C
- ☒ Community Service Description of Implementation- D
- ☒ Information on Pet Policy- E
- ☐ Section 8 Homeownership Capacity Statement, if applicable
- ☒ Description of Homeownership Programs, if applicable- F

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.

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

List of Supporting Documents Available for Review		
Applicable & On Display	**Supporting Document**	**Applicable Plan Component**
	income mixing analysis	
X	Public housing rent determination policies, including the methodology for setting public housing flat rents ☐ 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 ☐ check here if included in the public housing A & O Policy	Annual Plan: Rent Determination
X	Section 8 rent determination (payment standard) policies ☐ check here if included in Section 8 Administrative Plan	Annual Plan: Rent Determination
X	Public housing management and maintenance policy documents, including policies for the prevention or eradication of pest infestation (including cockroach infestation)	Annual Plan: Operations and Maintenance
X	Public housing grievance procedures ☐ check here if included in the public housing A & O Policy	Annual Plan: Grievance Procedures
X	Section 8 informal review and hearing procedures ☐ check here if included in Section 8 Administrative Plan	Annual Plan: Grievance Procedures
X	The HUD-approved Capital Fund/Comprehensive Grant Program Annual Statement (HUD 52837) for the active grant year	Annual Plan: Capital Needs
X	Most recent CIAP Budget/Progress Report (HUD 52825) for any active CIAP grant	Annual Plan: Capital Needs
	Most recent, approved 5 Year Action Plan for the Capital Fund/Comprehensive Grant Program, if not included as an attachment (provided at PHA option)	Annual Plan: Capital Needs
X	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
X	Approved or submitted applications for designation of public housing (Designated Housing Plans)	Annual Plan: Designation of Public Housing
X	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
X	Approved or submitted public housing homeownership programs/plans	Annual Plan: Homeownership
X	Policies governing any Section 8 Homeownership program ☐ check here if included in the Section 8 Administrative Plan	Annual Plan: Homeownership
X	Any cooperative agreement between the PHA and the TANF agency	Annual Plan: Community Service & Self-Sufficiency

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

1. Statement of Housing Needs

[24 CFR Part 903.7 9 (a)]

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

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

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	3,331	5	5	5	5	3	1
Income >30% but <=50% of AMI	1,570	5	5	5	5	3	1
Income >50% but <80% of AMI	1,671	3	3	3	3	3	1
Elderly	1,554	4	3	3	3	1	1
Families with Disabilities	2,420	5	5	5	5	5	1
Race/Ethnicity White	2,651	3	5	5	5	3	1
Race/Ethnicity Black	168	5	5	5	5	3	1
Race/Ethnicity Hispanic	3,795	5	5	5	5	3	1
Race/Ethnicity All Other	0	5	5	5	5	3	1

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 2000

☐ American Housing Survey data
Indicate year:

☐ Other housing market study
Indicate year:

☐ Other sources: (list and indicate year of information)

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

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

Housing Needs of Families on the Waiting List			
Waiting list type: (select one) ☐ Section 8 tenant-based assistance ☒ Public Housing ☐ Combined Section 8 and Public Housing ☐ 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	602		
Extremely low income <=30% AMI	545	91.00%	
Very low income (>30% but <=50% AMI)	49	8.00%	
Low income (>50% but <80% AMI)	8	1.00%	
Families with children	365	60.63%	
Elderly families	37	6.15%	
Families with Disabilities	200	33.22%	
Race/ethnicity White non-Hispanic	71	12%	
Race/ethnicity Black non-Hispanic	13	2%	
Race/ethnicity Hispanic	500	83%	
Race/ethnicity Asian	1	.5%	
Race/ethnicity Pacific Islander	2	.5%	
Race/ethnicity American Indian	0	0%	
Race/ethnicity other	15	2%	

Housing Needs of Families on the Waiting List			
Characteristics by Bedroom Size (Public Housing Only)			
1BR	317	52.66%	
2 BR	191	31.73%	
3 BR	76	12.62%	
4 BR	12	1.99%	
5 BR	5	0.83%	
5+ BR	1	0.17%	

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

If yes:

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

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

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

Housing Needs of Families on the Waiting List

Waiting list type: (select one)

☐ Section 8 tenant-based assistance

☐ Public Housing

☐ Combined Section 8 and Public Housing

☒ Public Housing Site-Based or sub-jurisdictional waiting list (optional)

If used, identify which development/subjurisdiction: Churchill Homes

	# of families	% of total families	Annual Turnover
Waiting list total	102		
Extremely low income <=30% AMI	92	90.20%	
Very low income (>30% but <=50% AMI)	9	8.82%	
Low income (>50% but <80% AMI)	1	0.98%	
Families with children	86	84.31%	
Elderly families	2	2%	
Families with Disabilities	31	33.39%	
Race/ethnicity	6	5.88%	

Housing Needs of Families on the Waiting List			
White non-Hispanic			
Race/ethnicity Black	1	0.98%	
Race/ethnicity Hispanic	95	93.14%	
Characteristics by Bedroom Size (Public Housing Only)			
1BR	16	15.69%	
2 BR	50	49.02%	
3 BR	28	27.45%	
4 BR	8	7.84%	
5 BR	N/A		
5+ BR	N/A		

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

If yes:

How long has it been closed (# of months)? 18 months

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

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

Housing Needs of Families on the Waiting List			
Waiting list type: (select one) ☒ Section 8 tenant-based assistance **Mass NAHRO Centralized Waiting List** ☐ Public Housing ☐ Combined Section 8 and Public Housing ☐ 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	44798		
Extremely low income <=30% AMI	40665	91%	
Very low income (>30% but <=50% AMI)	3760	8%	
Low income (>50% but <80% AMI)	220	1%	

Housing Needs of Families on the Waiting List			
Families with children	28323	63%	
Elderly families	2512	6%	
Families with Disabilities	14392	32%	
Race/ethnicity White	20590	46%	
Race/ethnicity Black	8573	19%	
Race/ethnicity Asian	1393	3%	
Race/ethnicity Pacific Islander	99	0%	
Race/ethnicity American Indian	786	2%	
Race/ethnicity Hispanic	14054	31%	
Characteristics by Bedroom Size (Public Housing Only)			
1BR	N/A		
2 BR	N/A		
3 BR	N/A		
4 BR	N/A		
5 BR	N/A		
5+ BR	N/A		

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

If yes:

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

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

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

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 – Undertake measures to ensure access to affordable housing among families assisted by the HHA, regardless of unit size required: the HHA will attempt to acquire, absorb or federalize its State public housing family program units, particularly its 217 unit Beaudoin Village state family development and its 12 unit 705 scattered site development, in order to maintain affordability for occupant households.

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. – utilize ARRA formula stimulus funding to acquire, absorb or or federalize its State public housing family program units, particularly its 217 unit Beaudoin Village state family development and its 12 unit 705 scattered site development.
☐ Other: (list below) Provide utilization plan to HUD for renewal of the Housing Replacement factor funds.

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) The Authority has an FSS program in place that works with families to help them become self-sufficient. The Authority has received a $250,000 HUD ROSS Family/Homeownership grant. Services provided through this grant will help families reach self-sufficiency.

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) The Authority has an FSS program in place that works with families to help them become self-sufficient. The Authority has received a $250,000 HUD ROSS Family/Homeownership grant. Services provided through this grant will help families reach self-sufficiency.

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) The Authority received its 8th year of funding for its Title III Bridging the Gaps program. This program provides transportation and translation services for both PH and HCV elderly. The Authority requested an extension of its 2005 ROSS Elderly/Disabled grant.

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) The Authority requested an extension of its 2005 ROSS Elderly/Disabled grant.

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) Translation of all important documents and correspondence to Spanish

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) have the Massachusetts Fair Housing Center present at all HCV briefings and CDBG funded First-Time Homebuyer Education workshops.

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

- Due to the age of its housing stock and the reduction in funding and resources to make needed improvements the Authority will apply for a HOPE VI grant to modernize Lyman Terrace- MA005-01
- The Authority will continue to try to build upon the successes of its Section 8 HCV Homeownership program by working with local lenders so that they will be willing to make mortgages under the program.
- The Resident Services Department will continue to counsel all interested residents with the goal of helping them reach economic sufficiency so that the ultimate goal of homeownership and economic self sufficiency is achieved.
- Comprehensive Grant funding for FY 2009 will continue to be targeted toward elderly developments. It is our hope that this will make them more competitive with some of the local elderly high-rises. The Authority will begin a

progressive marketing campaign to attract Holyoke elders to our elderly developments.

- The Authority is entering its ninth year of offering Section 8 households the services of a Section 8 Family Self-Sufficiency Services Coordinator. This position has allowed us to expand our counseling efforts to all Section 8 recipients. We have also expanded the Resident Services Department to offer FSS counseling to all subsidized households by hiring a Public Housing Family Self-Sufficiency Services Coordinator. With the announcement by HUD that funding for this position will be terminated the Authority is researching ways to continue to finance this much needed position.
- The HHA will continue to target those individuals for extensive counseling who may be in a position to be first time home buyers. The City's 2005-2009 Consolidated Plan sets homeownership for low and moderate persons as a high priority. The Authority has received funding through HUD for a FSS Homeownership Coordinator. This position has enabled the Authority to provide in house counseling to those residents who wish to purchase their first home. In addition to counseling this position oversees the Authority's First-Time Homebuyer workshop series and the City of Holyoke's Borrower's Assistance program (BAP).
- Both the waiting list and consolidated plan demonstrates that the Hispanic population shows the greatest need for affordable housing. Our front line staff, who are primarily Hispanic, will continue to work closely with this population on economic self sufficiency in addition to housing issues. The Authority's FTHB workshop series are offered in Spanish offering this population the information and counseling needed to purchase their first home.

(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: Particularly the lack of funding available from the State of Massachusetts to maintain the affordability of State assisted public housing units.
- ☒ Staffing constraints
- ☐ Limited availability of sites for assisted housing
- ☐ Extent to which particular housing needs are met by other organizations in the community
- ☒ Evidence of housing needs as demonstrated in the Consolidated Plan and other information available to the PHA
- ☐ Influence of the housing market on PHA programs
- ☐ Community priorities regarding housing assistance
- ☐ Results of consultation with local or state government
- ☐ Results of consultation with residents and the Resident Advisory Board
- ☐ Results of consultation with advocacy groups
- ☐ Other: (list below)

2. Statement of Financial Resources

[24 CFR Part 903.7 9 (b)]

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

Financial Resources: Planned Sources and Uses		
Sources	**Planned $**	**Planned Uses**
1. **Federal Grants (FY 2005 grants)**		
a) Public Housing Operating Fund	2,494,659	
b) Public Housing Capital Fund	1,110,155	
c) HOPE VI Revitalization		
d) HOPE VI Demolition		
e) Annual Contributions for Section 8 Tenant-Based Assistance	6,979,201	
f) Public Housing Drug Elimination Program (including any Technical Assistance funds)		
g) Resident Opportunity and Self-Sufficiency Grants	239,215	
h) Community Development Block Grant		
i) HOME		
Other Federal Grants (list below)		
2. Prior Year Federal Grants (unobligated funds only) (list below)		
MA006P005018	6,528	New Construction
MA06R005502-07	256,291	PH Operations
3. Public Housing Dwelling Rental Income	1,585,881	PH Operations
4. Other income (list below)	42,794	
Investment	46,056	
4. Non-federal sources (list below)		
State/Local	1,746,702	State/Local

Financial Resources: Planned Sources and Uses		
Sources	**Planned $**	**Planned Uses**
Total resources	14,507,482	

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: 1 month

☒ Other: (describe) Households are deemed eligible at time of application. Eligibility is re-verified within one month of offer.

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 PHA

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) Applicants who wish to apply to Churchill Homes may also apply to the management office at the Churchill Homes Community Center.

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?1

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? 5- FPH, MPH, Churchill Homes, HCV, MRVP

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) By mail for those applicants who are disabled, elderly or not able to come to the Authority's offices.

(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, unless the offer is for deconcentration purposes. If declined this does not affect the applicant's placement on the waiting list.

☐ 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) To meet deconcentration goals.

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)

#1- Resident Working Veteran
#2- Resident Working- Elderly, Disabled and Victims of Domestic Violence are included in this preference
#3- Resident Veteran
#4- Resident
#5- Non-Resident Working Veteran
#6- Non-Resident Working- Non-Resident Elderly, Disabled and Victims of Domestic Violence are included in this preference
#7- Non-Resident Veteran
#8- Non-Resident

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)
#2/#6 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)
#1- Resident Working Veteran
#2- Resident Working- Elderly, Disabled and Victims of Domestic Violence are included in this preference
#3- Resident Veteran
#4- Resident
#5- Non-Resident Working Veteran
#6- Non-Resident Working- Non-Resident Elderly, Disabled and Victims of Domestic Violence are included in this preference
#7- Non-Resident Veteran
#8- Non-Resident

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 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) All new residents are required to attend a New Resident Orientation Session at lease-up. This seminar introduces residents to the Housing Manager and Maintenance Foreman of their development. Members from the Resident Services Department and members of the Tenant's Association are also in attendance to discuss the association and tenant opportunities.

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) credit check

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) The Authority has entered into an agreement with Mass NAHRO to participate in its state wide section 8 centralized waiting list. Any applicant interested in applying for section 8 assistance may apply at any participating PHA.

(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)

#1- Resident Working Veteran
#2- Resident Working- Elderly, Disabled and Victims of Domestic Violence are included in this preference
#3- Resident Veteran
#4- Resident
#5- Non-Resident Working Veteran
#6- Non-Resident Working- Non-Resident Elderly, Disabled and Victims of Domestic Violence are included in this preference
#7- Non-Resident Veteran
#8- Non-Resident

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)
#2/#6 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)

#1- Resident Working Veteran
#2- Resident Working- Elderly, Disabled and Victims of Domestic Violence are included in this preference
#3- Resident Veteran
#4- Resident
#5- Non-Resident Working Veteran
#6- Non-Resident Working- Non-Resident Elderly, Disabled and Victims of Domestic Violence are included in this preference
#7- Non-Resident Veteran
#8- Non-Resident

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) Local community access television, flyers to local non-profit agencies and community service organizations.

4. PHA Rent Determination Policies

[24 CFR Part 903.7 9 (d)]

A. Public Housing

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

(1) Income Based Rent Policies

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

a. Use of discretionary policies: (select one)

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

---or---

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

b. Minimum Rent

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

☐ $0
☒ $1-$25
☐ $26-$50

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

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

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

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

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

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

☐ For the earned income of a previously unemployed household member
☐ For increases in earned income
☐ Fixed amount (other than general rent-setting policy)
If yes, state amount/s and circumstances below:

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

☐ For household heads
☐ For other family members
☐ For transportation expenses
☐ For the non-reimbursed medical expenses of non-disabled or non-elderly families
☐ Other (describe below)

e. Ceiling rents

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

☒ Yes for all developments
☐ Yes but only for some developments
☐ No

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

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

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

☐ Market comparability study

☒ Fair market rents (FMR)
☐ 95th 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) Whenever there is a change in family composition

g. ☐ Yes ☒ No: Does the PHA plan to implement individual savings accounts for residents (ISAs) as an alternative to the required 12 month disallowance of earned income and phasing in of rent increases in the next year?

(2) Flat Rents

1. In setting the market-based flat rents, what sources of information did the PHA use to establish comparability? (select all that apply.)

☐ The section 8 rent reasonableness study of comparable housing
☐ Survey of rents listed in local newspaper
☐ Survey of similar unassisted units in the neighborhood
☒ Other (list/describe below) Flat rents are set at 100% of the FMR

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 below100% 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) rents of unassisted units

(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.)

Program Name	Units or Families Served at Year Beginning	Expected Turnover
Public Housing	704	
Section 8 Vouchers	1180	
Section 8 Certificates	N/A	
Section 8 Mod Rehab	100	
Special Purpose Section 8 Certificates/Vouchers (list individually)	N/A	
Public Housing Drug Elimination Program (PHDEP)	N/A	
Other Federal Programs(list individually)		
ROSS Family/Homeownership		
ROSS Elderly/Disabled		
ROSS PHA FSS		

ROSS HCV FSS		

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)

- Admissions and Continued Occupancy Plan
- Maintenance Handbook
- Emergency Policy
- EIV, fence, holiday decoration, pet, and rent collection policies
- Handbook for the New Resident
- Pest control, including cockroach infestation, is contracted on a two-year basis. The initial treatment of each project shall include a complete clean out. The remaining scheduled treatments will be general applications. All treatments shall include all areas of each building including the crawl spaces, storage areas and living areas, basements and recreation halls. The purpose of the service shall be the control and prevention of infestation by all of the usual household vermin and insects including: mice, rats, roaches, water bugs, beetles, ants, silverfish, crickets, fleas, weevils, cereal bugs and bedbugs within the entire structure of each building. The treatment provided shall be guaranteed for the period between scheduled treatments. Re-infestations that occur during the guarantee period shall be promptly treated at the request of the Authority at no additional cost to the Authority. Family developments, MA005-001 and MA005-003 are treated four times per year.MA005-04,5A,5B and 13 are treated three times per year. Falcetti Towers, MA005-06 is treated two times per year.

(2) Section 8 Management: (list below)

- Section 8 Administration Plan
- Section 8 Housing Choice Voucher Homeownership Plan

6. PHA Grievance Procedures

[24 CFR Part 903.7 9 (f)]

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

A. Public Housing

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

If yes, list additions to federal requirements below:

2. Which PHA office should residents or applicants to public housing contact to initiate the PHA grievance process? (select all that apply)

☒ PHA main administrative office
☒ PHA development management offices
☒ Other (list below) Churchill Homes management office

B. Section 8 Tenant-Based Assistance

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

If yes, list additions to federal requirements below:

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

☒ PHA main administrative office
☐ Other (list below)

7. Capital Improvement Needs

[24 CFR Part 903.7 9 (g)]

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

A. Capital Fund Activities

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

(1) Capital Fund Program Annual Statement

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

Select one:

☒ The Capital Fund Program Annual Statement is provided as an attachment to the PHA Plan at Attachment (state name) ma005a01

-or-

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

(2) Optional 5-Year Action Plan

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

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

b. If yes to question a, select one:

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

-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)

X- The HHA's revised ARRA Capital Fund Formula Stimulus Grant Annual Statements is provided as an attachment to the PHA Plan as Attachment MA005M04

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:
MA005-01, Lyman Terrace

☒ 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:
MA005-01, Lyman Terrace

☒ 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:
MA005-01, Lyman Terrace

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.)

Demolition/Disposition Activity Description
1a. Development name: Lyman Terrace 1b. Development (project) number: MA005-01
2. Activity type: Demolition ☒ Disposition ☒
3. Application status (select one) Approved ☐ Submitted, pending approval ☐ Planned application ☒
4. Date application approved, submitted, or planned for submission: 06/30/2008
5. Number of units affected: 167 6. Coverage of action (select one) ☐ Part of the development ☒ Total development
7. Timeline for activity: a. Actual or projected start date of activity: 10/30/2009 b. Projected end date of activity: 04/30/2010

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.

Designation of Public Housing Activity Description
1a. Development name: Falcetti Towers 1b. Development (project) number: MA005-06
2. Designation type: Occupancy by only the elderly ☒ Occupancy by families with disabilities ☐ Occupancy by only elderly families and families with disabilities ☐
3. Application status (select one) Approved; included in the PHA's Designation Plan ☒ Submitted, pending approval ☐ Planned application ☐
4. Date this designation approved, submitted, or planned for submission: 02/18/2005
5. If approved, will this designation constitute a (select one) ☐ New Designation Plan ☐ Revision of a previously-approved Designation Plan? N/A
6. Number of units affected: 85 7. Coverage of action (select one) ☐ Part of the development ☒ 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.

Conversion of Public Housing Activity Description
1a. Development name: 1b. Development (project) number:
2. What is the status of the required assessment? ☐ Assessment underway ☐ Assessment results submitted to HUD ☐ Assessment results approved by HUD (if marked, proceed to next question) ☐ Other (explain below)
3. ☐ Yes ☐ 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) ☐ Conversion Plan in development ☐ Conversion Plan submitted to HUD on: (DD/MM/YYYY) ☐ Conversion Plan approved by HUD on: (DD/MM/YYYY) ☐ 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.)

Public Housing Homeownership Activity Description (Complete one for each development affected)
1a. Development name: Oakhill Homes 1b. Development (project) number: MA005-021
2. Federal Program authority: ☐ HOPE I ☐ 5(h) ☐ Turnkey III ☒ Section 32 of the USHA of 1937 (effective 10/1/99)
3. Application status: (select one) ☒ Approved; included in the PHA's Homeownership Plan/Program ☐ Submitted, pending approval ☐ Planned application
4. Date Homeownership Plan/Program approved, submitted, or planned for submission: 08/12/2003

5. Number of units affected: 19
6. Coverage of action: (select one)
☒ Part of the development
☐ Total development

B. Section 8 Tenant Based Assistance

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

2. Program Description:

a. Size of Program
☒ Yes ☐ No: Will the PHA limit the number of families participating in the section 8 homeownership option?

If the answer to the question above was yes, which statement best describes the number of participants? (select one)
☒ 25 or fewer participants
☐ 26 - 50 participants
☐ 51 to 100 participants
☐ more than 100 participants

b. PHA-established eligibility criteria
☐ Yes ☒ No: Will the PHA's program have eligibility criteria for participation in its Section 8 Homeownership Option program in addition to HUD criteria?
If yes, list criteria below:

12. PHA Community Service and Self-sufficiency Programs

[24 CFR Part 903.7 9 (l)]

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

A. PHA Coordination with the Welfare (TANF) Agency

1. Cooperative agreements:

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

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

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

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

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)
ROSS HCV FSS	80	All eligible	PHA main office	HCV
ROSS HCV Homeownership		First come	PHA main office	HCV
ROSS PHA FSS	15	All eligible	OHA main office and developments	PHA

(2) Family Self Sufficiency program/s

a. Participation Description

Family Self Sufficiency (FSS) Participation		
Program	Required Number of Participants (start of FY 2005 Estimate)	Actual Number of Participants (As of: DD/MM/YY)
Public Housing	0	15
Section 8	25	80

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

C. Welfare Benefit Reductions

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

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

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

13. PHA Safety and Crime Prevention Measures

[24 CFR Part 903.7 9 (m)]

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

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

1. Describe the need for measures to ensure the safety of public housing residents (select all that apply)

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

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

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

3. Which developments are most affected? (list below)
MA005-01, Lyman Terrace and MA005-03, Toepfert Apartments

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) Active partner in the City's Weed and Seed and Shannon grants. Working with the Holyoke Police department Liaison Officer. Installation of cameras in the hallways at Toepfert Apartments funds to be provided through Project Safe Neighborhood grant and the installation of a camera in the back of Rosary Towers to be provided by the Holyoke Police Department.

2. Which developments are most affected? (list below)
MA005-01, Lyman Terrace and MA005-03, Toepfert Apartments

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)
   MA005-01, Lyman Terrace and MA005-03, Toepfert Apartments

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)]

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) Appointed by Mayor of Holyoke to a five year term

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: Holyoke, Chicopee, Westfield Consortium

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)

- Increase FTHB activities within the City, FTHB workshop series, HCV FTHB program and BAP loans
- Rehabilitation of existing rental housing, Lyman Terrace HOPE VI, Beaudry Boucher
- PHA and HCV FSS activities

☐ Other: (list below)

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

In its 2005-2009 Consolidated Plan the City of Holyoke states five (5) Housing Priorities:

1. Increase availability of housing stock for purchase and occupancy by low and moderate income persons in Holyoke. ***The Holyoke Housing Authority has added to the pool of affordable housing stock for purchase with the construction and sale of 60 homeownership units constructed under its HOPE VI program. Since these homes have deed riders which maintain the units affordability for 20 years these homes will remain affordable should they return to the housing market.***
2. Preserve and improve the existing owner-occupied housing stock in Holyoke by moderate rehabilitation through home improvement programs. ***While the Authority does not offer rehabilitation improvement programs through its HQS inspections of Section 8 subsidized units the Authority assists the City in assuring that subsidized housing stock meet minimum standards. The Leased Housing Department will work with owners who have units out of compliance and provide information to funding sources for rehabilitation.***
3. Facilitate homeownership for low and moderate income persons in Holyoke by providing assistance with downpayment and closing costs. ***The Holyoke Housing Authority, committed to expanding the range and quality of housing choices available to participants in its tenant-based assistance program, public housing program and to all low to moderate income Holyoke residents, has assisted the City in reaching this priority by***

partnering to offer CDBG funded First-Time Homebuyer Education series. To assist these buyers with the expenses associated with downpayment and closing costs the Authority administers the City's HOME funded Borrower's Assistance Program. In addition to offering education opportunities the Authority is able to assist Housing Choice Voucher holders with the purchase of a home through its Section 8 Homeownership program. To further assist these buyers the Authority has created the HOPE VI Buyers Program. This program will allow bridge financing for income eligible first-time homebuyers.

4. Increase availability of elderly assisted living units in Holyoke for low and moderate income persons. ***The Authority will work with the Holyoke Geriatric Association to develop an assisted living facility in the City.***
5. Preserve and improve the rental housing stock by small scale rehabilitation or new construction of rental properties. ***Through its 1996 HOPE VI grant the Authority added 100 units of quality affordable housing to the City's affordable housing inventory. In order to continue being a provider of quality housing options for low and moderate families the Authority will apply for a HOPE VI grant to rehabilitate its oldest Family Housing Development, Lyman Terrace.***

The City has also set as an Anti-Poverty Strategy the need for groundwork to be provided to assist families so that they can lift themselves out of poverty. The Authority's Family Self-Sufficiency program has assisted families, both public housing and HCV participants, in improving their quality of life and to increase their economic situations.

D. Other Information Required by HUD

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

The Holyoke Housing Authority's definition of a ***Substantial Deviation, Significant Amendment or Modification to the Plan***:

The Holyoke Housing Authority defines a Substantial Deviation from or Significant Amendment or Modification to the HHA's Five year and Annual PHA Plan as discretionary changes in HHA plans or policies that fundamentally change the HHA's mission, goals, objectives, or programs, and which require formal approval of the Board of Commissioners. Any changes in the HHA's plans or policies that are adopted pursuant to changes in HUD appropriations or revisions to HUD's regulatory or program requirements will not be considered significant amendments by the HHA.

Attachments

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

Attachment A- Admissions Policy for Deconcentration-

1.4 Broad Range of Incomes (Income Mixing) and Deconcentration (Family Developments Only)

In accordance with the Congressional mandate in the Quality Housing and Work Responsibility Act of 1998 (QHWRA) and with the approval of the Commonwealth of Massachusetts' Department of Housing and Community Development (DHCD), the HHA has adopted the federally required policies to provide for deconcentration of poverty and to encourage income mixing in all family developments.

HHA offers the plan below to facilitate both deconcentration and income mixing in HHA developments. The goals of the plan are to provide a sufficient mixture of extremely low-income, very-low, and low-income Households at all HHA developments, and to avoid circumstances wherein higher-income or lower-income developments are created with respect to the Authority-wide average income.

1.4.1 Definitions

For the purposes of this ACOP, Lower-Income Households are defined as Households whose annual income does not exceed eighty (80) percent of the Springfield area median income (AMI), with adjustments for smaller and larger Households, as determined by the Secretary of the U.S. Department of Housing and Urban Development. In accordance with 24 CFR 5.603, HUD may establish income ceilings higher or lower than 80% of the median income for the area on the basis of HUD's findings that such variations are necessary because of unusually high or low household incomes. However, with regard to state developments, state income rules of eligibility as defined in 760 CMR 5.00 or any successor regulations will apply. Within this category of Lower-Income Households, the following definitions apply:

1.) Low-Income Household

A Low-Income Household is defined as a Household whose annual income exceeds fifty (50) percent but *does not* exceed eighty (80) percent of the Springfield AMI, with adjustments for smaller and larger Households, as determined by the Secretary of Housing and Urban Development or Massachusetts Department of Housing and Community Development.

2.) Very Low-Income Household

A Very Low-Income Household is defined as a Household whose annual income exceeds thirty (30) percent of the Springfield AMI but *does not* exceed fifty (50) percent of the AMI for the area with adjustments for smaller and larger Households, as determined by the Secretary of Housing and Urban Development or Massachusetts Department of Housing and Community Development.

3.) Extremely Low-Income Household

An Extremely Low-Income Household is defined as a Household whose annual income does not exceed thirty (30) percent of the AMI for the Boston area, with adjustments for smaller and larger Households, as determined by the Secretary of

Housing and Urban Development or Massachusetts Department of Housing and Community Development.

1.4.2 Broad Range of Incomes (Income-Mixing)

It is the goal of the HHA to attain, within a reasonable period of time, a resident population in each development composed of Lower-Income Households with a broad range of incomes. HHA will make an effort to assure that each of its developments will include Households with a broad range of incomes generally representative of the range of Lower-Income Households in the City of Holyoke.

To achieve and maintain the basic objective of housing Households with a broad range of incomes, the HHA will review its waiting list to determine whether there is a representative income mix of Low, Very-Low, and Extremely-Low Income Households. If there is not a representative income mix, HHA will consider strategies to encourage a greater income mix including, but not limited to, conducting targeted outreach efforts and/or establishing income Preferences.

Regardless of any discretionary strategies the HHA may adopt to achieve the goal of income mixing, the HHA will ensure that it meets the following targeting requirements as set forth by federal regulation:

- In federal developments only, at least 40% of new admissions to the HHA's public housing program during each fiscal year will be Extremely–Low Income Households.

- HHA may reduce the required percentage of public housing apartments to which Extremely-Low Income Households must be admitted to the extent that the HHA has credits, in the same fiscal year, for admissions of Extremely-Low Income Households to its Section 8 tenant-based assistance program beyond the number required for that program. However, the HHA may not have more credits than the lesser of the following:

  - ✓ Ten percent of the total number of Households admitted to the Section 8 tenant-based assistance program during the fiscal year; **OR**

  - ✓ The number of the HHA's public housing apartments in developments located in census tracts with a poverty rate of 30 percent or more that are made available and filled by eligible Households who are not Extremely-Low income Households.

  - ✓ During any fiscal year and regardless of the number of credits from Section 8 tenant-based assistance admissions, at least 30 percent of HHA admissions to public housing apartments will be Extremely-Low income Households.

1.4.3 Deconcentration

The admissions policies contained in this ACOP are designed to deconcentrate poverty. This objective will be achieved by bringing higher income Households into lower-income developments and/or lower-income Households into higher-income developments. While information regarding specifics of each development is contained each year in the HHA's Annual Plan, which is submitted to HUD and DHCD, below is an outline of HHA's deconcentration policy.

The HHA will accomplish the deconcentration goal in a uniform and nondiscriminatory manner. While targeting certain levels of income for admission to HHA public housing, HHA will not intentionally concentrate lower-income Households, as defined below, in one public housing development or building within a development.

1.) Deconcentration – Identification Procedures

Annually, the HHA will calculate the average income at all HHA Family developments ("the Authority-wide average income"). The Authority will also calculate the average income of all Households at each Development separately ("the Development average income"). Developments in which the Development average income is *above* 115% of the Authority-wide average income will be considered "higher-income" developments. Likewise, Developments in which the Development average income is *below* 85% of the Authority-wide average income will be considered "lower-income" Developments.

2.) Definitions

- Authority-wide average income: The average income of all Households residing in HHA Family developments. Such an average is used as a base measure from which Developments are either determined to be "higher-income" or "lower-income" for purposes of the HHA's deconcentration policy.

- Development average income: The average income of all Households residing in a single HHA Family Housing development.

- Higher-income Development: A development in which the Development average income is above 115% of the Authority-wide average income.

- Lower-income Development: A development in which the Development average income is below 85% of the Authority-wide average income.

3.) Remedial Action

Based upon the above-mentioned analysis, the HHA will review the need to offer incentives to eligible families that would help accomplish the deconcentration objectives at individual developments.

Should the average income at a development(s) vary more than 15% from the Authority-wide average, the HHA may utilize some or all of the policies and/or incentives listed below:

- Establish an Income Preference in order to reach Applicant Households with lower or higher incomes as appropriate.

- Initiate affirmative marketing strategies to all eligible income groups.
- Provide additional applicant consultation and information.

- Provide additional supportive services and amenities.

- Provide rent incentives authorized by the Quality Housing and Work Responsibility Act of 1998 ("QHWRA").

- Target investment and capital improvements towards a development(s) below 85% of the Authority-wide average income.

1.4.4 Monitoring

As part of the HHA's Annual Plan submission to HUD and as part of an annual report to DHCD, the HHA will annually monitor the income levels of Households residing in HHA housing and on the waiting list to assess its progress in attaining the deconcentration and income mixing goals. The HHA will calculate and compare the average Household incomes at each development with the Authority-wide average, as described above. In addition, the income status of Applicants on the HHA's waiting list will be analyzed to determine the percentage of Applicants with "Low," "Very Low" and "Extremely Low" incomes.

The HHA also will ascertain its progress in meeting the income-targeting goal that requires that 40% of new admissions in Federal development must be Extremely-Low Income Households. If the monitored data indicates any problems, HHA will alter its marketing and deconcentration strategies in accordance with this policy and Federal and State requirements.

Attachment B- List of Resident Advisory Board members-
Maritza Class- Beaudoin Village
Sonia Gonzalez- Lyman Terrace
Maria Rodriguez- Falcetti Towers
Leonides Ramos- Rosary Towers
Maria Cruz- Siebel Apts
Linda Cubi- John J. Zielinski Apartments
Petronila Lopez- Coughlin Apartments

Attachment C- List of Resident Board Member-
Mary Hunter- Falcetti Towers. Ms. Hunter passed away in August 2008. The Authority is awaiting the Mayor's appointment to this position.

Attachment D- Community Service Description of Implementation-

CHAPTER 8: COMMUNITY SERVICE

8.1 General

Community service is the performance of voluntary work or duties that are a public benefit and that serve to improve the quality of life, enhance resident self-sufficiency, or increase resident self-responsibility in the community. Community service is not employment and may not include political activities. [24 CFR 960.601]

In order to be eligible for continued occupancy, each adult family member must either (1) contribute eight hours per month of community service, or (2) participate in an economic self-sufficiency program, or (3) perform eight hours per month of combined activities as described unless exempt from this requirement.

An economic self-sufficiency program is one that is designed to encourage, assist, train or facilitate the economic independence of participants and their families or to provide work for participants such as: programs for job training, work placement, basic skills training, education, English proficiency, financial or household management, apprenticeships and any program necessary to ready a participant to work such as substance abuse or mental health treatment.

Each family member required to perform community service must perform eight hours of community service activities per month during the twelve month period. It is unacceptable, for example, to perform 96 hours of community service in one month and no community service in the remaining eleven months of the year.

8.2 Exemptions [24 CFR 960.601]

An exempt individual is an adult who:

Is 62 years or older; or

Is a blind or disabled individual as defined under 216(I)(1) or 1614 of the Social Security Act (42 U.S.C. 416(I)(1) and who certifies that because of this disability he or she is unable to comply with the community service requirement, or is a primary caretaker for such an individual;

Is engaged in work activities for at least 20 hours per week;

Meets the requirements from having to engage in a work activity under the State program funded under part A of Title IV of the Social Security Act (42 U.S.C. 601 et seq.) or under any other welfare program of the State in which the HHA is located, including a State-administered welfare to work program; or

Is a member of a family receiving assistance, benefits or services under a 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 HHA 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 noncompliance with such a program.

8.3 Notification of the Requirement

The HHA shall provide written notification to each adult family member about the community service requirement and related exemptions. The notification will provide the opportunity for the family member to claim and explain an exempt status. The HHA shall verify each claim for exemption.

The notification will also advise family members that the community service obligation will begin upon the effective date of their first annual reexamination on or after October 1, 2003. For families paying a flat rent, the obligation begins on the date that the annual reexamination would have been effective had an annual reexamination taken place. The notification will also advise that failure to comply with the community service requirement will result in ineligibility for continued occupancy at the time of any subsequent annual reexamination.

8.4 Community Service Volunteer Opportunities

The HHA will coordinate with social service agencies; local schools, the HHA's Resident Services Department and others to compile a list of community service volunteer opportunities. However, it is the resident's responsibility to secure opportunities for community service credit. The HHA is responsible for maintaining the record of documented community service compliance for affected residents and for determining the eligibility of the family for continued occupancy.

8.5 Assuring Resident Compliance [24 CFR 960.607]

If qualifying activities are administered by an organization other than the HHA, the family member must provide signed certification to the HHA by the organization that the family member has performed the community service activities.

If the HHA determines that there is a family member who is required to fulfill community service requirement, but who has violated this family obligation, the HHA shall notify the resident of this determination.

The HHA's notice shall briefly describe the non-compliance and state that the HHA will not renew the lease at the end of the twelve-month lease term unless the resident and any other non-compliant family member enter into a written agreement with the HHA to cure such non-compliance, and in fact cure the non-compliance in accordance with the agreement, or the resident provides written assurance satisfactory to the HHA that the resident or other non-compliant resident no longer resides in the unit. The notice shall also state that the resident may request a grievance hearing on the HHA determination and that the resident may exercise any available judicial remedy to seek timely redress for the HHA's non-renewal of the lease because of the determination of non-compliance.

8.6 Resident Agreement To Comply With Community Service Requirement

If the resident or family member has violated the community service requirement, the HHA may not renew the lease upon expiration of the term unless:

- The resident and any other non-compliant resident enter into a written agreement with the HHA to cure such noncompliance by completing the additional hours of community service or economic self-sufficiency activity needed to make up the total number of hours required over the twelve-month term of the new lease, and

- All other members of the family who are subject to the service requirement are currently complying with the service requirement or are no longer living in the unit.

8.7 Prohibition Against Replacement Of HHA Employees

In implementing the community service requirement, the HHA may not substitute community service or self-sufficiency activities performed by residents for work ordinarily performed by its employees, or replace a job at any location where residents perform activities to satisfy the community service requirement. [24 CFR 960.609]

Attachment E- Information on Pet Policy

CHAPTER 11: PET POLICY

Introduction

The HHA allows for pet ownership in its elderly/handicapped developments with the written pre-approval of the HHA in accordance with this policy. General policy matters related to pets are set forth herein and are supplemented by the HHA pet rules, the HHA pet agreement lease addendum and the HHA's pet owner's absence agreement. Each of the documents related to pets may be obtained at the HHA's management offices.

This policy does not apply to animals that are used to assist persons with disabilities. These animals are allowed in all public housing facilities with no restrictions other than those imposed on all residents to maintain the unit and associated facilities in a decent, safe and sanitary condition and to refrain from disturbing neighbors.

Pet Definition

Common household pets are limited to the following animal categories and related species:

- Four-legged, warm blooded animals (dogs and cats) kept for pleasure and non-commercial use (e.g. breeding);
- Birds; and
- Fish

Pet Guidelines

The following guidelines apply to pets maintained by HHA residents. [Note: a household may have either one dog or one cat in addition to birds and fish.]

Domestic Dogs (Dogs not permitted in family-aided housing)

a.) Maximum number per household: 1

b.) Minimum age in elderly/handicapped developments: 6 months

c.) Maximum adult weight: 40 pounds

d.) Must be house broken

e.) Must be spayed or neutered

f.) Must have annual rabies and distemper inoculations as required by licensed veterinarian, as well as infectious hepatitis, leptospirosis, para influenza, and parvo inoculations at intervals recommended by licensed veterinarian

g.) Animals deemed to be of a vicious are not permitted for safety reasons

Domestic Cats (Cats not permitted in family-aided housing)

a.) Maximum number per household: 1

b.) Minimum age in elderly/handicapped developments: 6 months

c.) Maximum adult weight: no restrictions

d.) Litter must be changed twice a week

e.) Must be spayed or neutered

f.) Must have annual rabies and distemper inoculations and feline leukemia shots as required by licensed veterinarian

g.) Must have scratching post

Birds

a.) Maximum number per household: 2

b.) Must be maintained inside cage at all times

c.) Cage must be cleaned twice a week

Fish

a) Maximum number of aquariums: 1

b) Maximum aquarium size: 20 gallons

c) Aquarium or fishbowl must be cleaned as needed

Exception: If the HHA approved a family's application for a greater number of pets prior to the implementation of this policy, the family shall be permitted to keep those pets.

Pet Deposit

A pet deposit of $75.00 is required at the time of registering a pet. The deposit is refundable when the pet or the tenant vacates the unit, less any amounts owed due to damage beyond normal wear and tear.

11.5 Financial Obligation of Residents

Any resident who owns or keeps a pet in their dwelling unit will be required to pay for any damages caused by the pet. Also, any pet-related insect infestation in the pet owner's unit will be the financial responsibility of the pet owner and the Holyoke Housing Authority reserves the right to exterminate and charge the resident.

11.6 Nuisance or Threat to Health or Safety

The pet and its living quarters must be maintained in a manner to prevent odors and any other unsanitary conditions in the owner's unit and surrounding areas.

Repeated substantiated complaints by neighbors or Holyoke Housing Authority personnel regarding pets disturbing the peace of neighbors through noise, odor, animal waste, or other nuisance will result in the owner having to remove the pet or move him/herself.

11.7 Designation of Pet areas

Pets must be kept in the owner's apartment or on a leash at all times when outside (no outdoor cages may be constructed). Pets will be allowed only in designated areas on the grounds of the projects. Pet owners must clean up after their pets and are responsible for disposing of pet waste.

11.8 Visiting Pets

Pets that meet the size and type criteria outlined above may visit the projects/buildings where pets are allowed for up to two weeks without Holyoke Housing Authority approval. Tenants who have visiting pets must abide by the conditions of this policy regarding health, sanitation, nuisances, and peaceful enjoyment of others. If visiting pets violate this policy or cause the

tenant to violate the lease, the tenant will be required to remove the visiting pet.

11.9 REMOVAL OF PETS

The Holyoke Housing Authority, or an appropriate community authority, shall require the removal of any pet from a project if the pet's conduct or condition is determined to be a nuisance or threat to the health or safety of other occupants of the project or of other persons in the community where the project is located.

11.10 Pet Committee

The HHA shall establish a Pet Committee at each elderly/handicapped development consisting of the HHA housing manager responsible for the development, a HHA maintenance staff member, and a resident council member designated by the resident council. This committee will address issues that arise due to the presence of pets in the development and to address any disagreements in the application of this pet policy.

11.11 Resident Consultation

The HHA shall provide the text of proposed pet rules to each household and Resident Council and shall notify the household/Resident Councils that they may submit written comments on the proposed rules within the period of time allowed for comment (generally 30 days). The HHA may also announce the date, time and place for a meeting to discuss the proposed rules.

The HHA shall develop the final rules after reviewing the residents' written comments and written summaries of any HHA-resident meetings. The HHA shall provide a written copy of the pet rules and subsequent amendments to the residents and Resident Councils.

Attachment F- Description of Homeownership programs-

Holyoke Housing Authority
Housing Choice Voucher Homeownership Program
Administrative Plan

The intent of the Holyoke Housing Authority ("HHA") Housing Choice Voucher Homeownership Program ("Program") is to provide families of low-income, disabled families and elderly families who are eligible for Section 8 rental assistance the option of utilizing this assistance in purchasing a home.

The implementation of this option will provide eligible voucher holders the ability to expand their housing opportunities beyond the rental market and use their assistance to purchase homes in the communities of their choice.

The Program provides the potential homebuyer with assistance with the repayment of a mortgage loan for a maximum period of 15 years. There is no term limitation in providing assistance for disabled or elderly families that are eligible for and participate in the Program. Participation in the Program is strictly voluntary. All participating families must meet the HUD established requirements for admission and participation in the Housing Choice Voucher Rental Program prior to exercising the homeownership option.

The home ownership option is limited to one percent (1%) of the total Section 8 voucher program administered by HHA in any fiscal year, provided that disabled families shall not be subject to the 1%

limit. If applications exceed such 1% limit, participants in the Family Self Sufficiency ("FSS") program shall receive a priority for participation in the home ownership program.

Eligible applicants for the Section 8 home ownership program must have completed an initial Section 8 lease term and may not owe HHA or any other Housing Authority an outstanding debt. Families who wish to exercise the homeownership option must meet all regulatory and discretionary program requirements as set forth in this document.

ELIGIBILITY REQUIREMENTS FOR PARTICIPATION

The HHA will not provide homeownership assistance to a family unless it determines that the family satisfies all of the following initial requirements at commencement of homeownership assistance for the family:

- The family has been admitted to the Section 8 Housing Choice Voucher Program and has completed an initial Section 8 lease term
- The family has fully repaid any outstanding debt owed to HHA or any other PHA
- The family satisfies any first-time homeowner requirements
- With the exception of the elderly and disabled households, the family satisfies the minimum income requirement
- With the exception of the elderly and disabled households, the family satisfies the employment requirement
- The family has not defaulted on a mortgage securing debt to purchase a home under the homeownership option
- Except for cooperative members who have acquired cooperative shares prior to commencement of homeownership assistance, no family member has a present ownership interest in a residence at the commencement of homeownership assistance for the purchase of a home
- Except for cooperative members who have acquired cooperative shares prior to commencement of homeownership assistance, the family has entered a contract of sale provision as outlined in this document.

Completion of Initial Lease Term

Applicants for and new participants in the Section 8 housing choice voucher program shall be ineligible for participation in the Section 8 home ownership program until completion of an initial Section 8 lease term and the participant's first annual recertification in the Section 8 housing choice voucher program. Nothing in this provision will preclude Section 8 participants that have completed an initial lease term in another jurisdiction from participating in the Section 8 home ownership program.

Participation in FSS Program

Applicants for the home ownership program are not required to participate in HHA's Family Self Sufficiency ("FSS") program in order to participate in the home ownership program. However, in the event the applications for home ownership assistance exceed one percent (1%) of HHA's total voucher program in any fiscal year, FSS participants shall have a preference for participation in the home ownership program. Participants in an Individual Development Account ("IDA") program administered by an agency other than HHA also will receive a preference for home ownership assistance in the event applicants for home ownership assistance exceed the 1% limitation.

Repayment of Any Housing Authority Debts

Participants in the Section 8 housing choice voucher program shall be ineligible for participation in the Section 8 home ownership program in the event any debt or portion of a debt remains owed to HHA or any other Housing Authority. Nothing in this provision will preclude Section 8 participants that have fully repaid such debt(s) from participating in the Section 8 home ownership program.

First-time Homebuyer Requirement

The Program is generally limited to first-time homebuyers and/or a family that owns or is acquiring a home under a HHA approved lease-purchase agreement or through the purchase of shares in a cooperative. (24CFR 982.4)

To qualify as a first-time homebuyer, the family shall not have had an interest in a residence of any family member for at least three years prior to the receipt of homeownership assistance. Additionally, no family member may have a present ownership interest in a second residence while receiving homeownership assistance.

A first-time homebuyer definition includes:

- A single parent or displaced homemaker who, while married, owned a home with his or her spouse or resided in a home owned by his or her spouse.
- A family that has a member who is disabled and the use of the homeownership option is needed as a reasonable accommodation

Employment Requirement

The statutory employment requirement stipulates that one or more adult members of the family that will own the home is currently employed on a full-time basis, not less than an average of 30 hours a week and has been continuously employed during the year before the receipt of the homeownership assistance.

The employment requirement only applies at the time that the family initially receives homeownership assistance and does not apply to an elderly or disabled family. The HHA may in its discretion determine whether an interruption in employment is considered permissible in satisfying the employment requirement. The HHA may consider successive employment opportunities during the one-year period or self-employment.

The employment requirement does not apply to an elderly or disabled family. Additionally, if a family other than an elderly or disabled family includes a person with disabilities, the HHA will grant an exemption for the employment requirement if it determines that the exemption is needed as a reasonable accommodation.

Income Requirement

A family may not participate in the HCVHP unless the family's gross income is at least two times the voucher payment standard or any other amount established by HUD. In addition, the adult family members who will own the home must have gross income that is equal to 2,000 hours of annual full-time work at the prevailing Federal minimum wage.

The minimum income requirement will only be used in determining initial program qualification and not as continuing program requirement. The minimum income requirement will only be used again if the family purchases an additional home with

Section 8 assistance.

The HHA will not provide homeownership assistance to a family, with the exception of an elderly or disabled family, if welfare assistance is being used to satisfy the minimum income requirement. Welfare assistance includes assistance from Temporary Assistance for Needy Families (TANF); Supplemental Security Income (SSI) that is subject to an income eligibility test; food stamps; general assistance; or other welfare assistance specified by HUD. The HHA will only disregard welfare income as it applies in determining the family's eligibility for program participation. Welfare assistance income will continue to be counted in determining eligibility for admission to the HCVP, calculating the amount of the family's total tenant payment and in calculating the amount of monthly homeownership assistance payment for a family assisted under the homeownership option.

Welfare assistance of an elderly or disabled family will be used in determining the minimum income requirement for homeownership assistance. The use of welfare assistance in determining the minimum income requirement does not apply to families that include a disabled member other than the head of the household or spouse.

Prior Mortgage Defaults

If a head of household, spouse, or other adult household member who will execute the contract of sale, mortgage and loan documents has previously defaulted on a mortgage obtained through the Section 8 home ownership program, the family will be ineligible to participate in the home ownership program.

FAMILY PARTICIPATION REQUIREMENTS

Once a family is determined to be eligible to participate in the program, it must comply with the following additional requirements:

- Complete a home ownership counseling program approved by HHA prior to commencement of home ownership assistance;
- Within a specified time, locate the home it proposes to purchase;
- Submit a sales agreement containing specific components to HHA for approval;
- Allow HHA to inspect the proposed home ownership dwelling to assure that the dwelling meets appropriate housing quality standards;
- Obtain an independent inspection covering major building systems;
- Obtain HHA approval of the proposed mortgage (which must comply with generally accepted mortgage underwriting requirements); and
- Enter into a written agreement with HHA to comply with all of its obligations under the Section 8 program.

Housing Counseling Requirement

Once the family has been determined eligible to participate in the Program and prior to the commencement of assistance, the family must attend and satisfactorily complete a pre-assistance homeownership and housing counseling program provided for or approved by the HHA. The topics that are to be included in the homeownership and housing counseling program are:

- Home maintenance
- Budgeting and money management

- Credit counseling and credit repair
- How to negotiate the purchase price of a home
- How to obtain homeownership financing and loan preapprovals
- How to find a home
- Fair Housing information

The HHA may also require additional counseling after the commencement of homeownership assistance. If the HHA offers a post-purchase counseling program, it will have the discretion to determine whether the family is required to participate in this type of counseling.

Eligible Units

The homeownership assistance may only be used for the purchase of a one unit property or single dwelling unit in a cooperative or a condominium; a home in a planned use development; a loft or live/work unit; or a manufactured home to be situated on a privately owned lot or on a leased pad in a mobile home park. Both units of a duplex and multi-family homes are not eligible units under the program. An eligible unit may be one that is either currently under construction or an existing structure.

The HHA will not approve the unit for purchase if the HHA has been informed by HUD or any other source that the seller has been disbarred, suspended or subject to limited denial of participation under 24 CFR Part 24.

Locating A Home

Upon approval for the Section 8 home ownership program, a family shall have one hundred eighty (180) days to locate a home to purchase. A home shall be considered located if the family submits a proposed sales agreement with the requisite components to HHA. For good cause, HHA may extend a Section 8 family's time to locate the home for additional thirty (30) day increments. During a Section 8 participant's search for a home to purchase, their Section 8 rental assistance shall continue pursuant to the Administrative Plan. If a Section 8 participant family is unable to locate a home within the time approved by HHA, their Section 8 rental assistance through the Section 8 housing choice voucher program shall continue.

Purchasing a Home

Once a home is located and a sales agreement approved by HHA is signed by the family, the family shall have up to three (3) months, or such other time as is approved by HHA's Executive Director or set forth in the HHA-approved sales agreement, to purchase the home.

Failure to Complete Purchase

If a Section 8 participant is unable to purchase the home within the maximum time permitted by HHA, HHA shall continue the family's participation in the Section 8 housing choice voucher program. Unless the reason that the family was unable to purchase was due to no fault of their own, the family may not re-apply for the Section 8 home ownership program until they have completed an additional year of participation in the Section 8 housing choice voucher program following the initial determination of their eligibility for the home ownership option.

Lease-Purchase

Families may enter into lease-purchase agreements while receiving Section 8 rental assistance unless the home under the Lease Purchase provision is a federally subsidized rental unit operated by the Authority.

All requirements of the housing choice voucher program apply to lease-purchase agreements, except that families are permitted to pay an extra amount out-of-pocket to the owner for purchase related expenses--a "home ownership premium." Any "home ownership premium," defined as an increment of value attributable to the value of the lease-purchase right or agreement, is excluded from HHA's rent reasonableness determination and subsidy calculation, and must be absorbed by the family. When a lease-purchase participant family is ready to exercise their option, they must notify the Home Ownership Counselor at HHA and apply for the home ownership option. If determined eligible for home ownership assistance, the family may be admitted to the home ownership program and must meet all the requirements of these policies.

Contract of Sale

Prior to execution of the offer to purchase or sales agreement, the financing terms must be provided by the family to HHA for approval. The HHA will not commence with assistance under the homeownership option until the family enters into an HHA approved contract for sale with the seller and provides the HHA with a signed copy of the sales contract.

The contract of sale that is entered into between the seller and the family must include:

- The price and other terms of the sale by the seller to the purchaser
- That the purchaser has the right to arrange a pre-purchase inspection of the dwelling unit by an independent inspector selected by the purchaser
- That the purchaser is not obligated to purchase the unit unless the inspection is satisfactory to the purchaser
- The purchaser is not obligated to pay for any necessary repairs
- A certification from the seller that the seller has not been debarred, suspended or
- subject to a limited denial of participation under 24 CFR part 24.

Home Inspections

In accordance with 24 CFR 982.631, the HHA will require that the unit pass both a Housing Quality Standards ("HQS") inspection that will be conducted by the HHA or its designee and an independent professional home inspector selected and paid for by the family.

The HHA will not require that the family use an independent inspector selected by the HHA nor will the inspector be an employee, contractor or any other person under its control. The independent inspector must be qualified to report on property conditions including major building systems and components including:

- Foundation and structure
- Housing interior and exterior
- Roofing
- Plumbing
- Electrical
- Heating systems

The independent inspector must provide a copy of the inspection report to both the family and the HHA. The HHA will not commence with homeownership assistance for the family until the HHA has reviewed the inspection report of the independent inspector and shall have the discretion to disapprove the unit for assistance under the homeownership option because of information contained in the inspection report even if the unit complies with HQS and would be eligible for assistance under the HHA's tenant-based voucher program.

Financing

All families that are selected to participate in the Program are required to secure their own financing. Voucher HAP funds may not be used to assist with financing costs such as down payment and closing costs. The proposed financing terms must be submitted to and approved by the HHA. The HHA shall determine the affordability of the proposed financing and may disapprove of the proposed financing or refinancing if it determines that the debt is unaffordable to the participating family.

The HHA will take into account family expenses such as childcare, unreimbursed medical expenses, homeownership expenses, and other family expenses as determined by the HHA when determining affordability.

Certain types of financing, including but not limited to, balloon payment mortgages, unless convertible to a variable rate mortgage, are prohibited and will not be approved by HHA. Seller-financing mortgages shall be considered by HHA on a case by case basis. If the purchase of the home is financed with FHA mortgage insurance, the financing is
subject to FHA mortgage insurance requirements. If a mortgage is not FHA-insured, HHA will require the lender to comply with generally accepted mortgage underwriting standards consistent with those of HUD/ FHA, Ginnie Mae, Fannie Mae, Freddie Mac, Massachusetts Housing Finance Agency (MHFA), USDA Rural Housing Services, the Federal Home Loan Bank, or other private lending institution.

The HHA may review lender qualifications and the terms of the loan before it authorizes the commencement of homeownership assistance. The HHA is not under any obligation to provide assistance if it determines that the lender or the loan terms do not comply with program requirements.

Down Payment and Closing Costs

The HHA will require that participants of the Program provide a 3% down payment towards the purchase of the home. One per cent of the down payment must come directly from the participant; the other 2% may come from other sources available to the participant.

The participant will also be responsible for the payment of the closing costs or settlement costs that are customarily incurred upon the sale of a property. Closing costs include title insurance fees, escrow fees, attorney costs and other necessary fees associated with the purchase of a home.

Compliance With Family Obligations

A family must agree, in writing, to comply with all family obligations under the Section 8 program and HHA's home ownership policies. These obligations include:

- Attending ongoing home ownership counseling, if required by HHA;
- Complying with the mortgage terms;
- Not selling or transferring the home to anyone other than a member of the assisted family who resides in the home while receiving home ownership assistance;
- Not refinancing or adding debt secured by the home without prior approval by HHA;
- Not obtaining a present ownership interest in another residence while receiving home ownership assistance; and

- Supplying all required information to HHA, including but not limited to annual verification of household income, notice of change in home ownership expenses, notice of move-out, and notice of mortgage default.

HHA's Home Ownership Family Obligation policies are set forth in Appendix A hereto.

HOMEOWNERSHIP ASSISTANCE PAYMENT

The amount of the monthly assistance payment will be based on three factors: the voucher payment standard for which the family is eligible; the monthly home ownership expense; and the family's household income. HHA will pay the lower of either the payment standard minus the total family contribution ("TFC") or the family's monthly home ownership expenses minus the TFC. The Section 8 family will pay the difference.

Amount of Assistance

The HHA shall pay a monthly homeownership assistance payment on behalf of the family, while the family resides in the home, which is equal to the lower of:

- The payment standard minus the total family contribution or
- The family's monthly homeownership expenses minus the total family contribution

The HHA will use the same payment standard schedule, payment standard amounts and subsidy standards for the homeownership option as for the rental voucher program.

The payment standard for the family is the lower of:

- The payment standard for the family unit size or
- The payment standard for the size of the home

The payment standard for subsequent years will be based on the higher of:

- The payment standard in effect at commencement of the home ownership assistance; or
- The payment standard in effect at the most recent regular reexamination of the family's income and size.

The initial payment standard shall not be adjusted even if there is a subsequent decrease in family size. HHA will request HUD approval of a higher payment standard, up to 120% of the published Fair Market Rent limit, where warranted as a reasonable accommodation for a family that includes a person with disabilities.

If the home is located in an exception payment standard area, the HHA will use the appropriate payment standard for the exception payment standard area.

Determination of Homeownership Expenses

The HHA has adopted the following homeownership expenses for the homeowner. These expenses are:

- Principal and interest on initial mortgage debt
- Principal and interest on the refinancing of the mortgage debt
- Mortgage insurance premiums required to finance the purchase or refinancing of the home

- HHA allowance for utilities
- Real estate taxes
- Public assessments on the home
- Home insurance costs
- Allowance for maintenance expenses $50.00
- Allowance for costs of major repairs and replacements $100.00
- Principal and interest of debt incurred to finance major repairs or HC accessibility

If the home is a cooperative or condominium, homeownership expenses may include cooperative or condominium operating charges or maintenance fees assessed by the condominium or cooperative homeownership association.

Determining the Total Family Contribution

The TFC is that portion of the home ownership expense that the family must pay. It is generally 30% percent of the family's adjusted income, plus any gap between the payment standard and the actual housing cost. All family income (including public assistance), will be counted to determine the family's adjusted monthly income for purposes of determining the amount of assistance.

Payment to Family or Lender

At its discretion, the HHA will pay homeownership payments either directly to the first mortgage lender or to the family. If the HHA opts to pay the lender directly and the assistance payment exceeds the amount due the lender, the HHA will pay any excess directly to the family.

Term of Assistance

The maximum term of homeownership assistance shall be for 15 years if the term of the mortgage is 20 years or more. If the term of the financing is less than 20 years, the maximum term of assistance shall be 10 years.

The maximum term for assistance does not apply to elderly or disabled program participants. The exception to the term limitations for elderly participants only applies if the family qualified as an elderly family at the commencement of the homeownership assistance. In the case of a disabled family, the exception applies if at any time during the receipt of homeownership assistance the family qualifies as a disabled family.

If the family initially qualified as an elderly or disabled family at the commencement of the homeownership assistance and during the course of the homeownership assistance ceases to qualify as an exception family, the maximum term of assistance becomes applicable from the date that homeownership assistance originally commenced.

Portability of Homeownership Assistance

A family may qualify to move and purchase a home outside of the HHA's jurisdiction with continued homeownership assistance if the receiving PHA is administering a voucher homeownership program and is accepting new homeownership families.

The family must attend the briefing and counseling sessions required by the receiving PHA. The receiving PHA will determine whether the financing for and the physical condition of the unit are acceptable.

Continued Assistance Requirements – Family Obligations

The HHA will provide homeownership assistance only while the family is residing in the home. If the family moves out of the home, the HHA will not continue with homeownership assistance after the month that the family moves out. The family may not convey or transfer the home to any entity or person other than a member of the assisted family while receiving homeownership assistance.

The family must comply with any post purchase counseling requirements in effect at the time of the commencement of homeownership assistance. Additionally, the family must comply with the terms of any mortgage securing debt incurred to purchase or refinance the home.

The family must supply the HHA any information that it deems necessary in the administration of the homeownership program.

Denial or Termination of Homeownership Assistance

The HHA will terminate homeownership assistance and shall deny voucher rental assistance if the participating household is found to be in violations of the provisions set forth in 24 CFR 982.552 (Grounds for denial or termination of assistance) and in 24 CFR 982.553 (Crime by family members). The HHA may also deny or terminate assistance for violation of participate obligations as described I9n 24 CFR 982.551 (Obligations of the participant).

TERMINATION OF SECTION 8 HOME OWNERSHIP ASSISTANCE

Grounds for Termination of Home Ownership Assistance

A family's home ownership assistance may be terminated if the family fails to comply with its obligations under the Section 8 program, HHA home ownership policies, or if the family defaults on the mortgage.

If required, the family must attend and complete ongoing home ownership and housing counseling classes.

The family must comply with the terms of any mortgage incurred to purchase and/or refinance the home. The family must provide HHA with written notice of any sale or transfer of any interest in the home; any plan to move out of the home prior to the move; the family's household income and home ownership expenses on an annual basis; any notice of mortgage default received by the family; and any other notices which may be required pursuant to HHA home ownership policies.

Except as otherwise provided in this Section, the family may not convey or transfer the home to any entity or person other than a member of the assisted family while receiving home ownership assistance.

Occupancy of Home

Home ownership assistance will only be provided while the family resides in the home. If the family moves out of the home, HHA will not continue home ownership assistance commencing with the month after the family moves out. Neither the family nor the lender is obligated to reimburse the HHA for home ownership assistance paid for the month the family moves out.

Changes in Income Eligibility

A family's home ownership assistance may be changed in the month following annual recertification of the household income, but participation in the Section 8 Home Ownership program shall continue until such time as the assistance payment amounts to $0 for a period of six (6) consecutive months.

Procedure for Termination of Home Ownership Assistance

A participant in the Section 8 Home Ownership program shall be entitled to the same termination notice and informal hearing procedures as set forth in the Administrative Plan of the HHA for the Section 8 Housing Choice Voucher Program.

Continued Participation in the Section 8 Housing Choice Voucher Program

The HHA will terminate voucher homeownership assistance for any member of the family receiving homeownership assistance that is dispossessed from the home pursuant to a judgment or order of foreclosure on any mortgage.

If the family defaults on an FHA-insured mortgage, the HHA may permit the family to move with continued Section 8 housing choice rental assistance if the family demonstrates that it has:

- Conveyed title to the home to HUD or its designee, as required by HUD; and
- Moved from the home within the period established or approved by HUD.

If the family defaults on a mortgage that is not FHA-insured, HHA may permit the family to move with continued Section 8 housing choice voucher rental assistance if the family demonstrates that it has:

- Conveyed title to the home to the lender, to HHA or to its designee, as may be permitted or required by the lender; and
- Moved from the home within the period established or approved by the lender and/or HHA.

Administrative Fee

The HHA shall be paid the administrative fee described in 24 CFR 982.152 (b) for each month that homeownership assistance is paid by the HHA on behalf of the participant family.

HHA Discretionary Housing Choice Voucher Homeownership Option Provisions

- Eligible applicants must have successfully completed an initial Section 8 lease prior to participation.
- The HHA will limit the number of families requesting the homeownership option. In any year, the number of participating families will not exceed 1% of the total Section 8 Voucher program administered by the HHA.
- Successful graduates and current participants of the HHA Family Self Sufficiency program will be given preference over non FSS program participants
- The HHA reserves the right to determine a "permissible interruption" in satisfying the mandatory employment requirement.
- Participating families will be required to successfully complete any post purchase program that the HHA determines is necessary. If a family fails to fulfill its obligation in attending a post-purchase program, the HHA reserves the right to discontinue homeownership assistance.
- The initial search period for participating in the Program will be for 180 days and will commence upon the successful completion of the mandatory first-time homebuyer program.
- If the family is unable to find a home after the initial 180 days search period has lapsed, the HHA may extend a Section 8 families time to locate the home for an additional thirty (30) day increments.
- Participation in the homeownership program shall continue until such time as the assistance payment amounts to $0 for a period of 6 consecutive months.

- If the family defaults on the mortgage, the HHA may provide rental assistance to the family if it determines that the default was through no fault of the participating family.

APPENDIX A: SECTION 8 HOME OWNERSHIP OBLIGATIONS

This form is to be signed by the home buyer(s) in the presence of the Holyoke Housing Authority's (HHA) Home Ownership Program Coordinator. The Coordinator will explain any and all clauses which you, the home buyer(s), may not understand.

The following paragraphs describe your responsibilities under the Section 8 Home Ownership Program. If you or members of your household do not meet these responsibilities, through your actions or your failure to act, you may be terminated from the Section 8 Home Ownership Program.

1. **Family Obligations:** You must comply with all Family Obligations of the Section 8 Housing Choice Voucher Program, excepting only the prohibition against owning or having an interest in the unit. ***Family Obligations §§ 982.551(c),(d),(e),(f),(g) and (j) do not apply to the Section 8 Homeownership Program.***

2. **Housing Counseling:** All participating family members (i.e. those signing the purchase offer and loan documents) must satisfactorily complete a HHA provided or approved counseling program prior to commencement of home ownership assistance. HHA may require any or all participating family members to attend additional housing counseling classes as a condition of continued assistance.

3. **Purchase Contract:** You must include contract conditions in any Offer to Purchase that give HHA a reasonable time (a) to inspect the home for compliance with HUD's Housing Quality Standards; (b) to review and approve a professional home inspection report obtained by you from a HHA approved inspector; and (c) approve the terms of your proposed financing. Advise your Realtor of these requirements.

4. **Mortgage Obligations:** You must comply with the terms of any mortgage incurred in the purchase of the property and must notify HHA's Home Ownership Program Counselor within five (5) days of receipt of any late payment or default notice.

5. **Occupancy:** You must occupy the unit as your principal residence. You may not transfer, sell, or assign any interest in the property without HHA's prior written consent. You may not rent or lease any part of the premises without HHA's prior written consent. You must notify HHA in writing at least 30 days prior to moving out of the house for a period of 30 days or longer or prior to any sale, transfer, assignment, lease or other form of alienation of the assisted property.

6. **Maintenance:** You must maintain the property in a decent, safe and sanitary manner. You must allow HHA to inspect the property within one-week of a demand by HHA to conduct an inspection. You must correct any notice of deficiency issued by HHA within the time limit specified in the notice. If you fail to adequately maintain the property, HHA may divert the maintenance and replacement reserves portions of the Home Ownership Assistance Payment to an escrow account to be used to pay for reasonable and necessary maintenance expenses.

7. **Annual Re-examination:** You must annually provide HHA with current information regarding family income and composition in a format required by HHA.

8. **Refinancing:** You must notify HHA in writing of any proposal to refinance the original purchase mortgage or of any proposal to encumber the property with secondary financing and obtain HHA's written approval of such financing prior to executing any loan documents.

form **HUD 50075** (03/2006)

9. **Default:** In the event of a default on your mortgage obligation, you must cooperate with HHA and the lender to minimize any loss to the lender in order to maintain your eligibility to continue as a participant in the Section 8 Housing Choice Voucher Program.

By signing below, I attest that I have read and understood my obligations as a participant in the Section 8 Home Ownership Program and I agree to abide by these responsibilities. I understand that the HHA may terminate my home ownership assistance if I violate any of these obligations, but that I may request an informal review of any proposed notice of termination prior to it becoming effective.

_____ _____
Participant Date

_____ _____
Participant Date

_____ _____
HHA Date

Homeownership Education Workshop Series

To prepare City residents for homeownership the Authority is pleased to be able to provide, through the Community Development Block Grant program, first-time homebuyer educational workshop courses to low-moderate income households who are purchasing their first homes in the City of Holyoke.

The purpose of the Holyoke Housing Authority's homebuyer counseling program is to educate and counsel prospective homebuyers to make informed, voluntary decisions regarding the homebuying process. The series covers such topics as: finding the right mortgage product, working with a Realtor, fair housing, home inspection, budgeting and if purchasing a home is the right option.

The three part educational series offered by the Authority has earned the Massachusetts Homeownership Collaborative "Collaborative Seal of Approval". The Massachusetts Homeownership Collaborative , a collaboration of non-profit homebuyer counseling agencies, lenders, real estate professionals, government officials and other key players in the homeownership industry in Massachusetts, was formed to recognize Massachusetts homebuyer counseling agencies that meet or exceed a minimum standard in providing effective pre-purchase, group homebuyer counseling and education to low and moderate income, first-time homebuyers.

Borrower's Assistance Program

The Borrower's Assistance Program (BAP) is a program administered by the Holyoke Housing Authority with HOME funds from the City of Holyoke. Under this program, income eligible first-time homebuyers can borrow up to $4,999 for downpayment and/or closing cost expenses. The loan is at 0% and if the borrower remains in the home for more than five years the loan is forgiven.

To be eligible for assistance the borrower must:

form **HUD 50075** (03/2006)

- Be income eligible-not make more than 80% of the area median income. Be a first-time homebuyer-have not owned a home within the past three years
- Be purchasing a single or two-family home in the city of Holyoke
- Have completed an approved first-time homebuyer education workshop series
- Be in need of BAP assistance in order to purchase a home

The home that is being purchased must:

- Meet a housing quality standards inspection
- Must be free of lead based paint
- Must be purchased at or below the maximum home program sales price

BAP funds may be used for the following expenses as long as these costs are not to be forgiven or to be paid for by the lender, seller or any other government program:

- Downpayment
- Recording fees
- Bank application
- Appraisal
- Loan origination fee
- Loan discount fee
- Buyer's attorney fees
- Plot plan and/or survey costs
- Credit report fee

Municipal Lien Certificate

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 FFY of Grant Approval: (MM/YYYY)

☐ Original Annual Statement

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

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)

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)
Total estimated cost over next 5 years		

Optional Public Housing Asset Management Table

See Technical Guidance for instructions on the use of this table, including information to be provided.

Public Housing Asset Management								
Development Identification		**Activity Description**						
Name, Number, and Location	Number and Type of units	Capital Fund Program Parts II and III *Component 7a*	Development Activities *Component 7b*	Demolition / disposition *Component 8*	Designated housing *Component 9*	Conversion *Component 10*	Home-ownership *Component 11a*	Other (describe) *Component 17*

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 I: Summary

PHA Name: Holyoke Housing Authority	**Grant Type and Number** Capital Fund Program Grant No: MA06P005501-06 Replacement Housing Factor Grant No: Date of CFFP:	**FFY of Grant: 2006** **FFY of Grant Approval:**

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

Line	**Summary by Development Account**	**Total Estimated Cost**		**Total Actual Cost [1]**	
		Original	**Revised[2]**	**Obligated**	**Expended**
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) [3]	191,026		191,026	191,026
3	1408 Management Improvements				
4	1410 Administration (may not exceed 10% of line 21)	95,513		95,513	95,513
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	170,000		170,000	170,000
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	526,809		526,809	526,809
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment				
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities [4]				

[1] To be completed for the Performance and Evaluation Report.
[2] To be completed for the Performance and Evaluation Report or a Revised Annual Statement.
[3] PHAs with under 250 units in management may use 100% of CFP Grants for operations.
[4] 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 I: Summary

PHA Name: Holyoke Housing Authority	**Grant Type and Number** Capital Fund Program Grant No: MA06P005501-06 Replacement Housing Factor Grant No: Date of CFFP:	**FFY of Grant:2006** **FFY of Grant Approval:**

Type of Grant

☐ **Original Annual Statement** ☐ **Reserve for Disasters/Emergencies** ☐ **Revised Annual Statement (revision no:)**

☐ **Performance and Evaluation Report for Period Ending:** ☒ **Final Performance and Evaluation Report**

Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost [1]	
		Original	Revised [2]	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)	983,348		983,348	983,348
21	Amount of line 20 Related to LBP Activities				
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 Rosalie M. Deane	**Date**	**Signature of Public Housing Director**	**Date**
November 2, 2009			

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

form **HUD-50075.1** (4/2008)

Part II: Supporting Pages

PHA Name: Holyoke Housing Authority	**Grant Type and Number** Capital Fund Program Grant No: MA06P005501-06 CFFP (Yes/ No): No Replacement Housing Factor Grant No:	**Federal FFY of Grant: 2006**

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 [1]	Funds Obligated[2]	Funds Expended[2]	
HHA-Wide	Administrative Salaries&Benefits							
	Modernization Coordinator	1410		57,408	57,408			
	Modernization Accounting	1410		28,600	28,600			
	Assistant Executive Director	1410		9,505	9,505			
HHA-Wide	A&E Fees & Costs, Advertising	1430		170,000	170,000			
Lyman Terrace	Replace Windows	1460						
Falcetti Tower	Front Entrance Security	1460	1	10,000	10,000			
Beaudry	Complete Interior modernization	1460	35	510,809	510,809			
HHA Wide	Unit Turnaround	1460	3	6,000	6,000			
HHA Wide	Operations	1406		191,026	191,026			

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

Part III: Implementation Schedule for Capital Fund Financing Program

PHA Name: Holyoke Housing Authority					**Federal FFY of Grant: 2006**
Development Number Name/PHA-Wide Activities	All Fund Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Reasons for Revised Target Dates [1]
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	
HHA Wide	7/18/2008		7/18/2010		

[1] Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of 1937, as amended.

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 I: Summary

PHA Name: Holyoke Housing Authority	**Grant Type and Number** Capital Fund Program Grant No: Replacement Housing Factor Grant No: MA06R005502-06 Date of CFFP:	**FFY of Grant: 2006** **FFY of Grant Approval:**

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

Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost [1]	
		Original	Revised[2]	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) [3]				
3	1408 Management Improvements				
4	1410 Administration (may not exceed 10% of line 21)				
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs				
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures				
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment				
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities [4]	195,584		195,584	195,584

[1] To be completed for the Performance and Evaluation Report.
[2] To be completed for the Performance and Evaluation Report or a Revised Annual Statement.
[3] PHAs with under 250 units in management may use 100% of CFP Grants for operations.
[4] 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 I: Summary

PHA Name: Holyoke Housing Authority	**Grant Type and Number** Capital Fund Program Grant No: Replacement Housing Factor Grant No: MA06R005502-06 Date of CFFP:	**FFY of Grant:2006** **FFY of Grant Approval:**

Type of Grant

☐ **Original Annual Statement** ☐ **Reserve for Disasters/Emergencies** ☐ **Revised Annual Statement (revision no:)**

☐ **Performance and Evaluation Report for Period Ending:** ☒ **Final Performance and Evaluation Report**

Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost [1]	
		Original	Revised [2]	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)	195,584		195,584	195,584
21	Amount of line 20 Related to LBP Activities				
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 Rosalie M. Deane	**Date**	**Signature of Public Housing Director**	**Date**
November 2, 2009			

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

form **HUD-50075.1** (4/2008)

Part II: Supporting Pages

PHA Name: Holyoke Housing Authority	**Grant Type and Number** Capital Fund Program Grant No: CFFP (Yes/ No): No Replacement Housing Factor Grant No: MA06R005502-06	**Federal FFY of Grant: 2006**

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 [1]	Funds Obligated[2]	Funds Expended[2]	
HHA-Wide	Development Activities	1499		195,584		195,584	195,584	

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

Part III: Implementation Schedule for Capital Fund Financing Program

PHA Name: HolyokeHousing Authority					**Federal FFY of Grant: 2006**
Development Number Name/PHA-Wide Activities	All Fund Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Reasons for Revised Target Dates [1]
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	
HHA Wide	7/18/2008		7/18/2010		

[1] Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of 1937, as amended.

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 I: Summary

PHA Name: Holyoke Housing Authority	**Grant Type and Number** Capital Fund Program Grant No: MA06P005501-07 Replacement Housing Factor Grant No: Date of CFFP:	**FFY of Grant: 2007** **FFY of Grant Approval:**

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

Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost [1]	
		Original	Revised[2]	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) [3]				
3	1408 Management Improvements				
4	1410 Administration (may not exceed 10% of line 21)	95,513		95,513	95,513
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	34,871		34,871	34,871
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	873,455		873,455	873,455
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment				
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities [4]				

[1] To be completed for the Performance and Evaluation Report.
[2] To be completed for the Performance and Evaluation Report or a Revised Annual Statement.
[3] PHAs with under 250 units in management may use 100% of CFP Grants for operations.
[4] 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 I: Summary

PHA Name: Holyoke Housing Authority	**Grant Type and Number** Capital Fund Program Grant No: MA06P005501-07 Replacement Housing Factor Grant No: Date of CFFP:	**FFY of Grant:2007** **FFY of Grant Approval:**

Type of Grant

☐ **Original Annual Statement** ☐ **Reserve for Disasters/Emergencies** ☐ **Revised Annual Statement (revision no:)**

☐ **Performance and Evaluation Report for Period Ending:** ☒ **Final Performance and Evaluation Report**

Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost [1]	
		Original	Revised [2]	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)	1,003,839		1,003,839	1,003,839
21	Amount of line 20 Related to LBP Activities				
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 Rosalie M. Deane	**Date**	**Signature of Public Housing Director**	**Date**
November 2, 2009			

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

form **HUD-50075.1** (4/2008)

Part II: Supporting Pages

PHA Name: Holyoke Housing Authority	**Grant Type and Number** Capital Fund Program Grant No: MA06P005501-07 CFFP (Yes/ No): No Replacement Housing Factor Grant No:	**Federal FFY of Grant: 2007**

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 [1]	Funds Obligated[2]	Funds Expended[2]	
HHA-Wide	Administrative Salaries&Benefits							
	Modernization Coordinator	1410		57,408	57,408			
	Modernization Accounting	1410		28,600	28,600			
	Assistant Executive Director	1410		9,505	9,505			
HHA-Wide	A&E Fees & Costs, Advertising	1430		34,871	34,871			
Lyman Terrace	Replace Windows	1460						
Falcetti Tower	Front Entrance Security	1460						
Beaudry	Complete Interior modernization	1460	35	873,455	873,455			
HHA Wide	Unit Turnaround	1460						
HHA Wide	Operations	1406						

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

Part III: Implementation Schedule for Capital Fund Financing Program

PHA Name: HolyokeHousing Authority					**Federal FFY of Grant: 2007**
Development Number Name/PHA-Wide Activities	All Fund Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Reasons for Revised Target Dates [1]
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	
HHA Wide	6/30/2009		6/30/2011		

[1] Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of 1937, as amended.

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 I: Summary

PHA Name: Holyoke Housing Authority	**Grant Type and Number** Capital Fund Program Grant No: Replacement Housing Factor Grant No: MA06R005502-07 Date of CFFP:	**FFY of Grant: 2007** **FFY of Grant Approval:**

Type of Grant
☐ **Original Annual Statement** ☐ **Reserve for Disasters/Emergencies** ☐ **Revised Annual Statement (revision no:)**
☒ **Performance and Evaluation Report for Period Ending: November 2009** ☐ **Final Performance and Evaluation Report**

Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost [1]	
		Original	Revised[2]	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) [3]				
3	1408 Management Improvements				
4	1410 Administration (may not exceed 10% of line 21)				
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs				
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures				
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment				
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities [4]	256,291		256,291	26,299.75

[1] To be completed for the Performance and Evaluation Report.
[2] To be completed for the Performance and Evaluation Report or a Revised Annual Statement.
[3] PHAs with under 250 units in management may use 100% of CFP Grants for operations.
[4] 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 I: Summary

PHA Name: Holyoke Housing Authority	**Grant Type and Number** Capital Fund Program Grant No: Replacement Housing Factor Grant No: MA06R005502-07 Date of CFFP:	**FFY of Grant:2007** **FFY of Grant Approval:**

Type of Grant

☐ **Original Annual Statement** ☐ **Reserve for Disasters/Emergencies** ☐ **Revised Annual Statement (revision no:)**

☒ **Performance and Evaluation Report for Period Ending: November 2009** ☐ **Final Performance and Evaluation Report**

Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost [1]	
		Original	Revised [2]	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)	256,291		256,291	26,299.75
21	Amount of line 20 Related to LBP Activities				
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 Rosalie M. Deane	**Date**	**Signature of Public Housing Director**	**Date**
November 2, 2009			

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

form **HUD-50075.1** (4/2008)

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

Part II: Supporting Pages

PHA Name: Holyoke Housing Authority	**Grant Type and Number** Capital Fund Program Grant No: CFFP (Yes/ No): No Replacement Housing Factor Grant No: MA06R005502-07	**Federal FFY of Grant: 2007**

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 [1]	Funds Obligated[2]	Funds Expended[2]	
HHA-Wide		1499		256,291		256,291	26,299.75	

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

Part III: Implementation Schedule for Capital Fund Financing Program

PHA Name: HolyokeHousing Authority

Federal FFY of Grant: 2007

Development Number Name/PHA-Wide Activities	All Fund Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Reasons for Revised Target Dates [1]
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	
HHA Wide	6/30/2009		6/30/2011		

[1] Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of 1937, as amended.

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 I: Summary

PHA Name: Holyoke Housing Authority	**Grant Type and Number** Capital Fund Program Grant No: MA06P005501-08 Replacement Housing Factor Grant No: Date of CFFP:	**FFY of Grant: 2008** **FFY of Grant Approval:**

Type of Grant
☐ **Original Annual Statement** ☐ **Reserve for Disasters/Emergencies** ☐ **Revised Annual Statement (revision no:)**
☒ **Performance and Evaluation Report for Period Ending: November 2009** ☐ **Final Performance and Evaluation Report**

Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost [1]	
		Original	Revised[2]	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) [3]	199,082		199,082	199,082
3	1408 Management Improvements				
4	1410 Administration (may not exceed 10% of line 21)	99,541		99,541	99,541
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	137,500		137,500	96,586.83
8	1440 Site Acquisition				
9	1450 Site Improvement	40,000			
10	1460 Dwelling Structures	519,287		293,877	244,064.96
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment				
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities [4]				

[1] To be completed for the Performance and Evaluation Report.
[2] To be completed for the Performance and Evaluation Report or a Revised Annual Statement.
[3] PHAs with under 250 units in management may use 100% of CFP Grants for operations.
[4] 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 I: Summary

PHA Name: Holyoke Housing Authority	**Grant Type and Number** Capital Fund Program Grant No: MA06P005501-08 Replacement Housing Factor Grant No: Date of CFFP:	**FFY of Grant:2008** **FFY of Grant Approval:**

Type of Grant

☐ **Original Annual Statement** ☐ **Reserve for Disasters/Emergencies** ☐ **Revised Annual Statement (revision no:)**

☒ **Performance and Evaluation Report for Period Ending: November 2009** ☐ **Final Performance and Evaluation Report**

Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost [1]	
		Original	Revised [2]	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)	995,410		730,000	639,274.79
21	Amount of line 20 Related to LBP Activities				
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 Rosalie M. Deane	**Date**	**Signature of Public Housing Director**	**Date**
November 2, 2009			

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

form **HUD-50075.1** (4/2008)

Part II: Supporting Pages

PHA Name: Holyoke Housing Authority	**Grant Type and Number** Capital Fund Program Grant No: MA06P005501-08 CFFP (Yes/ No): 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		Total Actual Cost		Status of Work
				Original	Revised [1]	Funds Obligated[2]	Funds Expended[2]	
HHA Wide	Operations	1406		199,082	199,082	199,082	199,082	
HHA Wide	Administrative Salaries & Benefits							
	Facilities Manager	1410		57,408	57,408	57,408	57,408	
	Modernization Accounting	1410		28,600	28,600	28,600	28,600	
	Assistant Executive Director	1410		13,533	13,533	13,533	13,533	
HHA Wide	A&E Fees and Costs, Advertising	1430		137,500	137,500	137,500	96,586.83	
Lyman terrace	Bathroom upgrades	1460						
Lyman terrace	Site Improvements	1450						
Falcetti	Parking Lot upgrades	1450	1	40,000	1320.04			
Beaudry Apts	Comprehensive modernization	1460	34	200,000	238,679.96	238,679.96	238,679.96	
Coughlin/Zeilinski/Beaudry	Elevator repair/upgrades	1460	3	80,000	80,000			

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

Part II: Supporting Pages

PHA Name: Holyoke Housing Authority	**Grant Type and Number** Capital Fund Program Grant No: MA06P005501-08 CFFP (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		Total Actual Cost		Status of Work
				Original	Revised [1]	Funds Obligated[2]	Funds Expended[2]	
Zielinski Apartments	Flashing	1460	1	10,000	10,000			
Coughlin/Zielinski	Plumbing Upgrades	1460	2	10,000	10,000			
Falcetti	Flooring Upgrades	1460	1	20,000	20,000			
Toepfert	Hallway Upgrades	1460	7	199,287	199,287	55,197.04	5,385	
HHA Wide	Development Activity	1499						

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

Part III: Implementation Schedule for Capital Fund Financing Program

PHA Name: HolyokeHousing Authority

Federal FFY of Grant: 2008

Development Number Name/PHA-Wide Activities	All Fund Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Reasons for Revised Target Dates [1]
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	
HHA Wide	6/30/2010		6/30/2012		

[1] Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of 1937, as amended.

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 I: Summary

PHA Name: Holyoke Housing Authority	**Grant Type and Number** Capital Fund Program Grant No: Replacement Housing Factor Grant No: MA06R005502-08 Date of CFFP:	**FFY of Grant: 2008** **FFY of Grant Approval:**

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

Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost [1]	
		Original	Revised[2]	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) [3]				
3	1408 Management Improvements				
4	1410 Administration (may not exceed 10% of line 21)				
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs				
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures				
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment				
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities [4]	158,480		158,480	

[1] To be completed for the Performance and Evaluation Report.
[2] To be completed for the Performance and Evaluation Report or a Revised Annual Statement.
[3] PHAs with under 250 units in management may use 100% of CFP Grants for operations.
[4] 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 I: Summary

PHA Name: Holyoke Housing Authority	**Grant Type and Number** Capital Fund Program Grant No: Replacement Housing Factor Grant No: MA06R005502-08 Date of CFFP:	**FFY of Grant:2008** **FFY of Grant Approval:**

Type of Grant

☒ **Original Annual Statement** ☐ **Reserve for Disasters/Emergencies** ☐ **Revised Annual Statement (revision no:)**

☐ **Performance and Evaluation Report for Period Ending:** ☐ **Final Performance and Evaluation Report**

Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost [1]	
		Original	Revised [2]	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)	158,480		158,480	
21	Amount of line 20 Related to LBP Activities				
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 Rosalie M. Deane	**Date**	**Signature of Public Housing Director**	**Date**
november 2, 2009			

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

Part II: Supporting Pages

PHA Name: Holyoke Housing Authority	**Grant Type and Number** Capital Fund Program Grant No: CFFP (Yes/ No): No Replacement Housing Factor Grant No: MA06R005502-08	**Federal FFY of Grant: 2008**

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 [1]	Funds Obligated[2]	Funds Expended[2]	
HHA Wide	Development Activity	1499		158,480		158,480		

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

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Office of Public and Indian Housing
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Expires 4/30/2011

Part III: Implementation Schedule for Capital Fund Financing Program

PHA Name: HolyokeHousing Authority					**Federal FFY of Grant: 2008**
Development Number Name/PHA-Wide Activities	All Fund Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Reasons for Revised Target Dates [1]
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	
HHA Wide	6/30/2009		6/30/2011		

[1] Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of 1937, as amended.

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 I: Summary

PHA Name: Holyoke Housing Authority	**Grant Type and Number** Capital Fund Program Grant No: MA06P005501-09 Replacement Housing Factor Grant No: Date of CFFP:	**FFY of Grant: 2009** **FFY of Grant Approval:**

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

Line	**Summary by Development Account**	**Total Estimated Cost**		**Total Actual Cost** [1]	
		Original	**Revised**[2]	**Obligated**	**Expended**
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) [3]	207,171			
3	1408 Management Improvements				
4	1410 Administration (may not exceed 10% of line 21)	103,586			
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	108,000			
8	1440 Site Acquisition				
9	1450 Site Improvement	10,000			
10	1460 Dwelling Structures	607,098			
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment				
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities [4]				

[1] To be completed for the Performance and Evaluation Report.
[2] To be completed for the Performance and Evaluation Report or a Revised Annual Statement.
[3] PHAs with under 250 units in management may use 100% of CFP Grants for operations.
[4] 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 I: Summary

PHA Name: Holyoke Housing Authority	**Grant Type and Number** Capital Fund Program Grant No: MA06P005501-09 Replacement Housing Factor Grant No: Date of CFFP:	**FFY of Grant:2009** **FFY of Grant Approval:**

Type of Grant

☒ **Original Annual Statement** ☐ **Reserve for Disasters/Emergencies** ☐ **Revised Annual Statement (revision no:)**

☐ **Performance and Evaluation Report for Period Ending:** ☐ **Final Performance and Evaluation Report**

Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost [1]	
		Original	Revised [2]	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)	1,035,855			
21	Amount of line 20 Related to LBP Activities				
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 Rosalie M. Deane	**Date**	**Signature of Public Housing Director**	**Date**
November 2, 2009			

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

form **HUD-50075.1** (4/2008)

Part II: Supporting Pages

PHA Name: Holyoke Housing Authority	**Grant Type and Number** Capital Fund Program Grant No: MA06P005501-09 CFFP (Yes/ No): Replacement Housing Factor Grant No:	**Federal FFY of Grant: 2009**

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 [1]	Funds Obligated[2]	Funds Expended[2]	
HHA-Wide	Administrative Salaries&Benefits							
	Modernization Accounting	1410		28,600				
	Assistant Executive Director	1410		28,468				
	Facilities Manager	1410		46,518				
HHA-Wide	A&E Fees & Costs, Advertising	1430		108,000				
Falcetti/Rosary	Parking Lot Improvements	1450	2	10,000				
Coughlin/Zielinski/Beaudry	Elevator Repairs/Upgrades	1460	3	100,000				
Coughlin/Zielinski	Wasteline Upgrades	1460	2	31,098				
Falcetti	Flooring Upgrades	1460	1	50,000				
Toepfert	Hallway Upgrades	1460	12	200,000				
Rosary	Roof Repairs	1460	1	120,000				

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

Part II: Supporting Pages

PHA Name: Holyoke Housing Authority	**Grant Type and Number** Capital Fund Program Grant No: MA06P005501-09 CFFP (Yes/ No): Replacement Housing Factor Grant No:	**Federal FFY of Grant: 2009**

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 [1]	Funds Obligated[2]	Funds Expended[2]	
Toepfert	Heating upgrades	1460	13	100,000				
HHA Wide	Site Improvements	1450		6,000				
HHA Wide	Operations	1406		207,171				

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

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

Part III: Implementation Schedule for Capital Fund Financing Program

PHA Name: HolyokeHousing Authority

Federal FFY of Grant: 2009

Development Number Name/PHA-Wide Activities	All Fund Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Reasons for Revised Target Dates [1]
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	
HHA Wide	6/30/2010		6/30/2012		

[1] Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of 1937, as amended.

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 I: Summary

PHA Name: Holyoke Housing Authority	**Grant Type and Number** Capital Fund Program Grant No: Replacement Housing Factor Grant No: MA06R005502-09 Date of CFFP:	**FFY of Grant: 2009** **FFY of Grant Approval:**

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

Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost [1]	
		Original	Revised[2]	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) [3]				
3	1408 Management Improvements				
4	1410 Administration (may not exceed 10% of line 21)				
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs				
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures				
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment				
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities [4]	139,441			

[1] To be completed for the Performance and Evaluation Report.
[2] To be completed for the Performance and Evaluation Report or a Revised Annual Statement.
[3] PHAs with under 250 units in management may use 100% of CFP Grants for operations.
[4] 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 I: Summary

PHA Name: Holyoke Housing Authority	**Grant Type and Number** Capital Fund Program Grant No: Replacement Housing Factor Grant No: MA06R005502-09 Date of CFFP:	**FFY of Grant:2009** **FFY of Grant Approval:**

Type of Grant

☒ **Original Annual Statement** ☐ **Reserve for Disasters/Emergencies** ☐ **Revised Annual Statement (revision no:)**

☐ **Performance and Evaluation Report for Period Ending:** ☐ **Final Performance and Evaluation Report**

Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost [1]	
		Original	Revised [2]	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)	139,441			
21	Amount of line 20 Related to LBP Activities				
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 Rosalie M. Deane	**Date**	**Signature of Public Housing Director**	**Date**
November 2, 2009			

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

form **HUD-50075.1** (4/2008)

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

PHA Name: Holyoke Housing Authority	**Grant Type and Number** Capital Fund Program Grant No: CFFP (Yes/ No): Replacement Housing Factor Grant No: MA06R005502-09	**Federal FFY of Grant: 2009**

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 [1]	Funds Obligated[2]	Funds Expended[2]	
HHA-Wide	Development Activities	1499		139,441				

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

Part III: Implementation Schedule for Capital Fund Financing Program

PHA Name: HolyokeHousing Authority

Federal FFY of Grant: 2009

Development Number Name/PHA-Wide Activities	All Fund Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Reasons for Revised Target Dates [1]
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	
HHA Wide	6/30/2010		6/30/2012		

[1] Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of 1937, as amended.

Certification by State or Local Official of PHA Plans Consistency with the Consolidated Plan	**U.S. Department of Housing and Urban Development** Office of Public and Indian Housing **Expires 4/30/2011**

Certification by State or Local Official of PHA Plans Consistency with the Consolidated Plan

I, Michael J. Sullivan the Mayor, City of Holyoke certify that the Five Year and Annual PHA Plan of the Holyoke Housing Authority is consistent with the Consolidated Plan of Holyoke, Chicopee, Westfield Consortium prepared pursuant to 24 CFR Part 91.

10/1/2009

Signed / Dated by Appropriate State or Local Official

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

Civil Rights Certification

Annual Certification and Board Resolution

Acting on behalf of the Board of Commissioners of the Public Housing Agency (PHA) listed below, as its Chairman or other authorized PHA official if there is no Board of Commissioner, I approve the submission of the Plan for the PHA of which this document is a part and make the following certification and agreement with the Department of Housing and Urban Development (HUD) in connection with the submission of the Plan and implementation thereof:

The PHA certifies that it will carry out the public housing program of the agency in conformity with title VI of the Civil Rights Act of 1964, the Fair Housing Act, section 504 of the Rehabilitation Act of 1973, and title II of the Americans with Disabilities Act of 1990, and will affirmatively further fair housing.

Holyoke Housing Authority	MA005
PHA Name	PHA Number/HA Code

I hereby certify that all the information stated herein, as well as any information provided in the accompaniment herewith, is true and accurate. Warning: HUD will prosecute false claims and statements. Conviction may result in criminal and/or civil penalties. (18 U.S.C. 1001, 1010, 1012; 31 U.S.C. 3729, 3802)	
Name of Authorized Official Aaron W. Wilson	Title Chairman
Signature Aaron W. Wilson	Date 10-1-09

PHA Certifications of Compliance with PHA Plans and Related Regulations	U.S. Department of Housing and Urban Development Office of Public and Indian Housing Expires 4/30/2011

PHA Certifications of Compliance with the PHA Plans and Related Regulations: Board Resolution to Accompany the PHA 5-*Year and Annual* PHA Plan

Acting on behalf of the Board of Commissioners of the Public Housing Agency (PHA) listed below, as its Chairman or other authorized PHA official if there is no Board of Commissioners, I approve the submission of the X *5-Year and/or* X *Annual PHA Plan for the PHA fiscal year beginning* 2010 *, hereinafter referred to as " the Plan", of which this document is a part and make the following certifications and agreements with the Department of Housing and Urban Development (HUD) in connection with the submission of the Plan and implementation thereof:*

1. The Plan is consistent with the applicable comprehensive housing affordability strategy (or any plan incorporating such strategy) for the jurisdiction in which the PHA is located.
2. The Plan contains a certification by the appropriate State or local officials that the Plan is consistent with the applicable Consolidated Plan, which includes a certification that requires the preparation of an Analysis of Impediments to Fair Housing Choice, for the PHA's jurisdiction and a description of the manner in which the PHA Plan is consistent with the applicable Consolidated Plan.
3. The PHA certifies that there has been no change, significant or otherwise, to the Capital Fund Program (and Capital Fund Program/Replacement Housing Factor) Annual Statement(s), since submission of its last approved Annual Plan. The Capital Fund Program Annual Statement/Annual Statement/Performance and Evaluation Report must be submitted annually even if there is no change.
4. The PHA has established a Resident Advisory Board or Boards, the membership of which represents the residents assisted by the PHA, consulted with this Board or Boards in developing the Plan, and considered the recommendations of the Board or Boards (24 CFR 903.13). The PHA has included in the Plan submission a copy of the recommendations made by the Resident Advisory Board or Boards and a description of the manner in which the Plan addresses these recommendations.
5. The PHA made the proposed Plan and all information relevant to the public hearing available for public inspection at least 45 days before the hearing, published a notice that a hearing would be held and conducted a hearing to discuss the Plan and invited public comment.
6. The PHA certifies that it will carry out the Plan in conformity with Title VI of the Civil Rights Act of 1964, the Fair Housing Act, section 504 of the Rehabilitation Act of 1973, and title II of the Americans with Disabilities Act of 1990.
7. The PHA will affirmatively further fair housing by examining their programs or proposed programs, identify any impediments to fair housing choice within those programs, address those impediments in a reasonable fashion in view of the resources available and work with local jurisdictions to implement any of the jurisdiction's initiatives to affirmatively further fair housing that require the PHA's involvement and maintain records reflecting these analyses and actions.
8. For PHA Plan that includes a policy for site based waiting lists:
   - The PHA regularly submits required data to HUD's 50058 PIC/IMS Module in an accurate, complete and timely manner (as specified in PIH Notice 2006-24);
   - The system of site-based waiting lists provides for full disclosure to each applicant in the selection of the development in which to reside, including basic information about available sites; and an estimate of the period of time the applicant would likely have to wait to be admitted to units of different sizes and types at each site;
   - Adoption of site-based waiting list would not violate any court order or settlement agreement or be inconsistent with a pending complaint brought by HUD;
   - The PHA shall take reasonable measures to assure that such waiting list is consistent with affirmatively furthering fair housing;
   - The PHA provides for review of its site-based waiting list policy to determine if it is consistent with civil rights laws and certifications, as specified in 24 CFR part 903.7(c)(1).
9. The PHA will comply with the prohibitions against discrimination on the basis of age pursuant to the Age Discrimination Act of 1975.
10. The PHA will comply with the Architectural Barriers Act of 1968 and 24 CFR Part 41, Policies and Procedures for the Enforcement of Standards and Requirements for Accessibility by the Physically Handicapped.
11. The PHA will comply with the requirements of section 3 of the Housing and Urban Development Act of 1968, Employment Opportunities for Low-or Very-Low Income Persons, and with its implementing regulation at 24 CFR Part 135.

12. The PHA will comply with acquisition and relocation requirements of the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970 and implementing regulations at 49 CFR Part 24 as applicable.
13. The PHA will take appropriate affirmative action to award contracts to minority and women's business enterprises under 24 CFR 5.105(a).
14. The PHA will provide the responsible entity or HUD any documentation that the responsible entity or HUD needs to carry out its review under the National Environmental Policy Act and other related authorities in accordance with 24 CFR Part 58 or Part 50, respectively.
15. With respect to public housing the PHA will comply with Davis-Bacon or HUD determined wage rate requirements under Section 12 of the United States Housing Act of 1937 and the Contract Work Hours and Safety Standards Act.
16. The PHA will keep records in accordance with 24 CFR 85.20 and facilitate an effective audit to determine compliance with program requirements.
17. The PHA will comply with the Lead-Based Paint Poisoning Prevention Act, the Residential Lead-Based Paint Hazard Reduction Act of 1992, and 24 CFR Part 35.
18. The PHA will comply with the policies, guidelines, and requirements of OMB Circular No. A-87 (Cost Principles for State, Local and Indian Tribal Governments), 2 CFR Part 225, and 24 CFR Part 85 (Administrative Requirements for Grants and Cooperative Agreements to State, Local and Federally Recognized Indian Tribal Governments).
19. The PHA will undertake only activities and programs covered by the Plan in a manner consistent with its Plan and will utilize covered grant funds only for activities that are approvable under the regulations and included in its Plan.
20. All attachments to the Plan have been and will continue to be available at all times and all locations that the PHA Plan is available for public inspection. All required supporting documents have been made available for public inspection along with the Plan and additional requirements at the primary business office of the PHA and at all other times and locations identified by the PHA in its PHA Plan and will continue to be made available at least at the primary business office of the PHA.
21. The PHA provides assurance as part of this certification that:
    (i) The Resident Advisory Board had an opportunity to review and comment on the changes to the policies and programs before implementation by the PHA;
    (ii) The changes were duly approved by the PHA Board of Directors (or similar governing body); and
    (iii) The revised policies and programs are available for review and inspection, at the principal office of the PHA during normal business hours.
22. The PHA certifies that it is in compliance with all applicable Federal statutory and regulatory requirements.

Holyoke Housing Authority	MA-005
PHA Name	PHA Number/HA Code

X 5-Year PHA Plan for Fiscal Years 2010 - 2015

X Annual PHA Plan for Fiscal Years 2010 - 20____

I hereby certify that all the information stated herein, as well as any information provided in the accompaniment herewith, is true and accurate. **Warning:** HUD will prosecute false claims and statements. Conviction may result in criminal and/or civil penalties. (18 U.S.C. 1001, 1010, 1012; 31 U.S.C. 3729, 3802)

Name of Authorized Official	Title
Aaron W. Wilson	Chairman Board of Commisioners
Signature: Aaron W. Wilson	Date: 10-1-09

OMB Approval No. 2577-0157 (Exp. 3/31/2010)

Certification of Payments to Influence Federal Transactions

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

Applicant Name

Holyoke Housing Authority

Program/Activity Receiving Federal Grant Funding

FY 2010 PHA Plan

The undersigned certifies, to the best of his or her knowledge and belief, that:

(1) No Federal appropriated funds have been paid or will be paid, by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of an agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the awarding of any Federal contract, the making of any Federal grant, the making of any Federal loan, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any Federal contract, grant, loan, or cooperative agreement.

(2) If any funds other than Federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of an agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this Federal contract, grant, loan, or cooperative agreement, the undersigned shall complete and submit Standard Form-LLL, Disclosure Form to Report Lobbying, in accordance with its instructions.

(3) The undersigned shall require that the language of this certification be included in the award documents for all subawards at all tiers (including subcontracts, subgrants, and contracts under grants, loans, and cooperative agreements) and that all subrecipients shall certify and disclose accordingly.

This certification is a material representation of fact upon which reliance was placed when this transaction was made or entered into. Submission of this certification is a prerequisite for making or entering into this transaction imposed by Section 1352, Title 31, U.S. Code. Any person who fails to file the required certification shall be subject to a civil penalty of not less than $10,000 and not more than $100,000 for each such failure.

I hereby certify that all the information stated herein, as well as any information provided in the accompaniment herewith, is true and accurate.

Warning: HUD will prosecute false claims and statements. Conviction may result in criminal and/or civil penalties. (18 U.S.C. 1001, 1010, 1012; 31 U.S.C. 3729, 3802)

Name of Authorized Official	Title
Rosalie M. Deane	Executive Director
Signature: Rosalie M Deane	Date (mm/dd/yyyy): 10/01/2009

Previous edition is obsolete

Certification for a Drug-Free Workplace

U.S. Department of Housing and Urban Development

Applicant Name

Holyoke Housing Authority

Program/Activity Receiving Federal Grant Funding

FY 2010 PHA Plan

Acting on behalf of the above named Applicant as its Authorized Official, I make the following certifications and agreements to the Department of Housing and Urban Development (HUD) regarding the sites listed below:

I certify that the above named Applicant will or will continue to provide a drug-free workplace by:

a. Publishing a statement notifying employees that the unlawful manufacture, distribution, dispensing, possession, or use of a controlled substance is prohibited in the Applicant's workplace and specifying the actions that will be taken against employees for violation of such prohibition.

b. Establishing an on-going drug-free awareness program to inform employees ---

(1) The dangers of drug abuse in the workplace;

(2) The Applicant's policy of maintaining a drug-free workplace;

(3) Any available drug counseling, rehabilitation, and employee assistance programs; and

(4) The penalties that may be imposed upon employees for drug abuse violations occurring in the workplace.

c. Making it a requirement that each employee to be engaged in the performance of the grant be given a copy of the statement required by paragraph a.;

d. Notifying the employee in the statement required by paragraph a. that, as a condition of employment under the grant, the employee will ---

(1) Abide by the terms of the statement; and

(2) Notify the employer in writing of his or her conviction for a violation of a criminal drug statute occurring in the workplace no later than five calendar days after such conviction;

e. Notifying the agency in writing, within ten calendar days after receiving notice under subparagraph d.(2) from an employee or otherwise receiving actual notice of such conviction. Employers of convicted employees must provide notice, including position title, to every grant officer or other designee on whose grant activity the convicted employee was working, unless the Federalagency has designated a central point for the receipt of such notices. Notice shall include the identification number(s) of each affected grant;

f. Taking one of the following actions, within 30 calendar days of receiving notice under subparagraph d.(2), with respect to any employee who is so convicted ---

(1) Taking appropriate personnel action against such an employee, up to and including termination, consistent with the requirements of the Rehabilitation Act of 1973, as amended; or

(2) Requiring such employee to participate satisfactorily in a drug abuse assistance or rehabilitation program approved for such purposes by a Federal, State, or local health, law enforcement, or other appropriate agency;

g. Making a good faith effort to continue to maintain a drug-free workplace through implementation of paragraphs a. thru f.

2. Sites for Work Performance. The Applicant shall list (on separate pages) the site(s) for the performance of work done in connection with the HUD funding of the program/activity shown above: Place of Performance shall include the street address, city, county, State, and zip code. Identify each sheet with the Applicant name and address and the program/activity receiving grant funding.)

Check here ☐ if there are workplaces on file that are not identified on the attached sheets.

I hereby certify that all the information stated herein, as well as any information provided in the accompaniment herewith, is true and accurate.
Warning: HUD will prosecute false claims and statements. Conviction may result in criminal and/or civil penalties.
(18 U.S.C. 1001, 1010, 1012; 31 U.S.C. 3729, 3802)

Name of Authorized Official	Title
Rosalie M. Deane	Executive Director
Signature X Rosalie M Deane	Date 10/01/2009

form **HUD-50070** (3/98)
ref. Handbooks 7417.1, 7475.13, 7485.1 & .3

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 I: Summary

PHA Name: Holyoke Housing Authority	**Grant Type and Number** Capital Fund Program Grant No: MA06S005501-09 Replacement Housing Factor Grant No: Date of CFFP:	**FFY of Grant: 2009** **FFY of Grant Approval:**

Type of Grant
☐ **Original Annual Statement** ☐ **Reserve for Disasters/Emergencies** ☒ **Revised Annual Statement (revision no:2)**
☐ **Performance and Evaluation Report for Period Ending:** ☐ **Final Performance and Evaluation Report**

Line	**Summary by Development Account**	**Total Estimated Cost**		**Total Actual Cost [1]**	
		Original	**Revised[2]**	**Obligated**	**Expended**
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) [3]				
3	1408 Management Improvements				
4	1410 Administration (may not exceed 10% of line 21)	$146,059			
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	$108,000			
8	1440 Site Acquisition				
9	1450 Site Improvement	$25,987			
10	1460 Dwelling Structures	$722,550			
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment				
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities [4]	$458,000			

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

form **HUD-50075.1** (4/2008)

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 I: Summary

PHA Name: Holyoke Housing Authority	**Grant Type and Number** Capital Fund Program Grant No: MA06S005501-09 Replacement Housing Factor Grant No: Date of CFFP:	**FFY of Grant:2009** **FFY of Grant Approval:**

Type of Grant

☐ **Original Annual Statement** ☐ **Reserve for Disasters/Emergencies** ☒ **Revised Annual Statement (revision no: 2)**

☐ **Performance and Evaluation Report for Period Ending:** ☐ **Final Performance and Evaluation Report**

Line	**Summary by Development Account**	**Total Estimated Cost**		**Total Actual Cost [1]**	
		Original	**Revised [2]**	**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)	1,460,596			
21	Amount of line 20 Related to LBP Activities				
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 Rosalie M. Deane	**Date**	**Signature of Public Housing Director**	**Date**
November 4, 2009			

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

form **HUD-50075.1** (4/2008)

Part II: Supporting Pages

PHA Name: Holyoke Housing Authority	**Grant Type and Number** Capital Fund Program Grant No: MA06S005501-09 CFFP (Yes/ No): No Replacement Housing Factor Grant No:	**Federal FFY of Grant: 2009**

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 [1]	Funds Obligated[2]	Funds Expended[2]	
HHA-Wide	Administrative Salaries&Benefits							
	Modernization Accounting	1410		28,600	28,600			
	Assistant Executive Director	1410		70,941	70,941			
	Facilities Manager	1410		46,518	46,518			
HHA-Wide	A&E Fees & Costs, Advertising	1430		108,000	108,000			
Falcetti/Rosary	Parking Lot Improvements	1450	2	20,000	0			
Coughlin/Zielinski/Beaudry	Elevator Repairs/Upgrades	1460	3	100,000	100,000			
Coughlin/Zielinski	Wasteline Upgrades	1460	2	50,000	0			
Falcetti	Flooring Upgrades	1460	1	50,000	0			
Toepfert	Hallway Upgrades	1460	12	760,537	528,537			
Rosary	Roof Repairs	1460	1	120,000	120,000			

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

Part II: Supporting Pages

PHA Name: Holyoke Housing Authority	**Grant Type and Number** Capital Fund Program Grant No: MA06S005501-09 CFFP (Yes/ No): Replacement Housing Factor Grant No:	**Federal FFY of Grant: 2009**

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 [1]	Funds Obligated[2]	Funds Expended[2]	
Toepfert	Heating upgrades	1460	13	100,000	0			
HHA Wide	Site Improvements	1450		6,000	0			
AMP 1	Federalization: of 229 units of state aided public housing which currently pass UPCS. 217 units at Beaudion Village and 12 units of scattered site family housing. These units meet ADA threshold requirements.	1499	2	0	458,000			

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

Part III: Implementation Schedule for Capital Fund Financing Program					
PHA Name: HolyokeHousing Authority					**Federal FFY of Grant: 2009**
Development Number Name/PHA-Wide Activities	All Fund Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Reasons for Revised Target Dates [1]
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	
HHA Wide	6/30/2010		6/30/2012		

[1] Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of 1937, as amended.

Part III: Implementation Schedule for Capital Fund Financing Program					
PHA Name:					**Federal FFY of Grant:**
Development Number Name/PHA-Wide Activities	All Fund Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Reasons for Revised Target Dates [1]
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	

[1] Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of 1937, as amended.

Part I: Summary

PHA Name/Number Holyoke Housing Authority MA 005			Locality (City/County & State) Holyoke, MA		☐**Original 5-Year Plan** ☒**Revision No: 1**	
A.	Development Number and Name MA05-01 Lyman Terrace MA 05 02 Rosary Towers	Work Statement for Year 1 FFY 2008	Work Statement for Year 2 FFY2009	Work Statement for Year 3 FFY 2010	Work Statement for Year 4 FFY 2011	Work Statement for Year 5 FFY 2012
B.	Physical Improvements Subtotal	Annual Statement	101,402.50	624, 098.50	625,098.50	625,098.50
C.	Management Improvements					
D.	PHA-Wide Non-dwelling Structures and Equipment					
E.	Administration		103,585.50	103,585.50	103,585.50	103,585.50
F.	Other		150,000.00	100,000.00	100,000.00	100,000.00
G.	Operations		207,171.00	207,171.00	207,171.00	207,171.00
H.	Demolition					
I.	Development		473,696.00	1,000		
J.	Capital Fund Financing – Debt Service					
K.	Total CFP Funds		1,035,855.00	1,035,855.00	1,035,855.00	1,035,855.00
L.	Total Non-CFP Funds					
M.	Grand Total					

Part I: Summary (Continuation)

PHA Name/Number			Locality (City/county & State)		☐**Original 5-Year Plan** ☐**Revision No:**	
A.	Development Number and Name	Work Statement for Year 1 FFY _____	Work Statement for Year 2 FFY _____	Work Statement for Year 3 FFY _____	Work Statement for Year 4 FFY _____	Work Statement for Year 5 FFY _____
		Annual Statement				

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

Work Statement for Year 1 FFY _____	Work Statement for Year 2009 FFY _____			Work Statement for Year: 2010 FFY _____		
	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	MA002 Toepfert Heating	3	1,000.00	MA 002 Parking Lot Upgrades	2	85,000.00
Annual						
Statement	MA 002 Toepfert Hallways	12	96,402.50	MA001 MA002 Brick repointing	4	200,000.00
	MA002 Rosary roof replacement	1	1,000.00	MA 001 Sitework	8	65,000.00
				MA 002 toepfert Heating	2	74,000.00
	MA002, MA 001 elevator upgrade	3	1,000.00			
				MA 002 Beaudry Community Room Upgrade	1	200,098.50
	MA 001 sewer line upgrades	2	1,000.00			
	MA 002, MA 001 Site work	8	1,000.00			
	MA001 Federalization	229	473,696	MA001 Federalization	229	1,000
	Subtotal of Estimated Cost		$575,098.50	Subtotal of Estimated Cost		$625,098.50

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

Work Statement for Year 1 FFY _____	Work Statement for Year 2011 FFY _____			Work Statement for Year: 2012 FFY _____		
	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	MA 002 Toepfert window replacement	93	250,000.00	MA002 Toepfert Window Replacement	93	325,000.00
Annual						
Statement	MA 002 Toepfert Flooring repair	93	100,000.00	MA 002 Toepfert Flooring repair	92	100,000.00
	MA 001 MA 002 Brick repointing	4	50,000.00	MA 001 MA 002 Brick repointing	4	50,000.00
	MA 002 Beaudry Roof Replacement	1	110,000.00	MA 001 Zielinski roof replacement	1	130,000.00
	MA 001 MA 002 Site work	8	5,098.50	MA 001 MA 002 Site work	8	20,098.50
	MA 001 Zielinski Community Room Upgrade	1	110,000.00			
	Subtotal of Estimated Cost		$625,098.50	Subtotal of Estimated Cost		$625,098.50

Part III: Supporting Pages – Management Needs Work Statement(s)

Work Statement for Year 1 FFY _____	Work Statement for Year 2012 FFY _____		Work Statement for Year: 2013 FFY _____	
	Development Number/Name General Description of Major Work Categories	Estimated Cost	Development Number/Name General Description of Major Work Categories	Estimated Cost
See				
Annual				
Statement				
	Subtotal of Estimated Cost	$	Subtotal of Estimated Cost	$

Part III: Supporting Pages – Management Needs Work Statement(s)

Work Statement for Year 1 FFY _____	Work Statement for Year _____ FFY _____		Work Statement for Year: _____ FFY _____	
	Development Number/Name General Description of Major Work Categories	Estimated Cost	Development Number/Name General Description of Major Work Categories	Estimated Cost
See				
Annual				
Statement				
	Subtotal of Estimated Cost	$	Subtotal of Estimated Cost	$