



- Increase customer satisfaction (Survey results) – **The MMHA routinely scores well on the RASS. In addition, the MMHA now employs a staff member to provide residents with supportive services twenty (20) hours per week. The staff person also assists with improving resident relations, provides educational workshops and opportunities for increased socialization.**
- Renovate or modernize public housing units – **The MMHA continues to renovate 3 – 6 housing units each year. Approximately half of the public housing units have been renovated and this activity is expected to continue until all units have been completed.**
3. Increase assisted housing choices by:
    - A. Conduct outreach efforts to potential voucher landlords – **Outreach efforts have occurred primarily in collaboration with the MCHN through educational opportunities and the creation of the Medina County housing locator website. These efforts are in addition to the MMHA’s efforts to educate Voucher participants regarding poverty de-concentration.**

Goals and Objectives for the Next Five Years

1. Increase the availability of decent, safe and affordable housing.
  - A. Apply for additional rental Vouchers as they become available and based on current County needs.  
Leverage private or other public funds to create additional housing opportunities to include the development of new housing units and the continuation of emergency assistance programs.  
Continue to offer homeownership opportunities for clients.  
Continue to collaborate with other agencies to provide affordable housing units in a cost effective and efficient manner.  
Participate in community efforts to address the issue of foreclosures.
2. Improve the quality of assisted housing.
  - A. Maintain a High Performer Status for public housing management (PHAS score).
  - B. Obtain and maintain High Performer Status for the Housing Choice Voucher Program (SEMAP score).
  - C. Increase customer satisfaction by continuing to provide educational and socialization opportunities.
  - D. Renovate public housing units including the use of stimulus funds for weatherization upgrades.
3. Improve community quality of life.
  - A. Continue to educate Voucher holders regarding the de-concentration of poverty.
  - B. Implement public housing security improvements.
  - C. Continue to provide supportive services to public housing residents.
4. Ensure equal opportunity and affirmatively further fair housing.
  - A. Ongoing education of staff.  
Periodic review of policies and procedures to ensure compliance with all laws and regulations.

6.0	<p><b>PHA Plan Update</b></p> <p>(a) Identify all PHA Plan elements that have been revised by the PHA since its last Annual Plan submission: <b>None</b></p> <p>(b) Identify the specific location(s) where the public may obtain copies of the 5-Year and Annual PHA Plan. For a complete list of PHA Plan elements, see Section 6.0 of the instructions. <b>Main administrative offices of the Medina Metropolitan Housing Authority, 850 Walter Road, Medina Ohio.</b></p>
7.0	<p><b>Hope VI, Mixed Finance Modernization or Development, Demolition and/or Disposition, Conversion of Public Housing, Homeownership Programs, and Project-based Vouchers.</b> <i>Include statements related to these programs as applicable.</i> N/A</p>
8.0	<p><b>Capital Improvements.</b> Please complete Parts 8.1 through 8.3, as applicable.</p>
8.1	<p><b>Capital Fund Program Annual Statement/Performance and Evaluation Report.</b> As part of the PHA 5-Year and Annual Plan, annually complete and submit the <i>Capital Fund Program Annual Statement/Performance and Evaluation Report</i>, form HUD-50075.1, for each current and open CFP grant and CFFP financing.</p>
8.2	<p><b>Capital Fund Program Five-Year Action Plan.</b> As part of the submission of the Annual Plan, PHAs must complete and submit the <i>Capital Fund Program Five-Year Action Plan</i>, form HUD-50075.2, and subsequent annual updates (on a rolling basis, e.g., drop current year, and add latest year for a five year period). Large capital items must be included in the Five-Year Action Plan.</p>
8.3	<p><b>Capital Fund Financing Program (CFFP).</b> Check if the PHA proposes to use any portion of its Capital Fund Program (CFP)/Replacement Housing Factor (RHF) to repay debt incurred to finance capital improvements.</p>
9.0	<p><b>Housing Needs.</b> In addition to information provided in the Consolidated Plan, Community Housing Improvement Strategy (CHIS) meetings and by HUD, the MMHA utilized the results of a county-wide Senior Needs Assessment, information from the MMHA’s waiting lists for various properties and programs, emergency assistance program statistics, the Foreclosure Task Force, and the expertise of the Medina County Housing Network and various service providers to identify the following housing needs.</p> <p><u>Affordability</u> – Medina County severely lacks affordable housing units for low-income, very low-income and extremely low-income households. The need for affordable units includes rental units and home mortgages. Affordability issues are experienced by all consumers including those with low fixed incomes or insufficient employment income. Full-time employment at minimum wage does not provide a sufficient income to afford a unit at the Fair Market Rent when affordability is defined as expending no more than 30% of adjusted monthly income towards housing costs. The foreclosure crisis has impacted Medina County as it has across the nation with neighborhoods in jeopardy due to the number of homes in foreclosure. The County Recorder’s office reports 319 homes in foreclosure the first quarter of 2009. Foreclosures are occurring in all areas of the County and across all income levels. In addition, assistance with funds for home repair was identified as a significant issue through the CHIS process.</p> <p>Due to the length of the waiting list for the Housing Choice Voucher (HCV) Program, the MMHA implemented preferences for Medina County single disabled and/or elderly</p>

households as this population was determined to be the most vulnerable by a meeting of community agencies. While preferences will assist those most vulnerable, due to the fact that the HCV Program is fully utilized and very few vouchers will become available, households with multiple members will wait years to receive a Voucher, if at all.

Due to the length of the waiting lists for rental assistance, and due to the lack of a drop-in homeless shelter, there is a great need for homeless prevention programs in the County. The MMHA has documented a constantly growing need over the past four (4) years for emergency assistance for those facing homelessness due to eviction, utility shut-off and foreclosure. For example, during the first quarter of 2008 there were sixty-one (61) households that applied and were eligible to receive \$49,136.97 in emergency assistance through the State of Ohio Housing Trust Fund and the United Way of Medina County. During the first quarter of 2009, seventy-eight (78) households were eligible for \$55,820.17 in emergency assistance. There is a significant population of households that cannot meet their ongoing housing obligations and rely on emergency assistance programs to maintain their housing.

Medina County does not have any known organizations which serve just a specific race or population. The MMHA questioned social service agencies to determine if any kept client data by race/ethnicity and identified any special housing needs for these populations. While many kept race/ethnicity data none reported special housing needs any different than the needs for the overall County. The Senior Needs Assessment, referenced above, reported that the survey sample data was representative of the older adult population in Medina County in terms of race and ethnicity, age, gender and income (97% White, 2% African-American, 1% Other, less than 1% Hispanic). The Survey reported no results that identified a need separate and specific to a population of a specific race or ethnicity. Data from other entities shows that persons of various race and ethnicities are accessing services in higher percentages than that of the general population showing an awareness of available services and a need for housing located close to those services. Specifically, housing crisis data was reviewed as a way to determine need and the results are as follows:

Medina County General Population:	Accessing Various Emergency Housing Assistance Programs:
97.1% White	87.3% White
0.7% African-American	11.17% African-American
0.1% Native American	
1.1% Hispanic	1.0% Hispanic
0.8% Asian	0.3% Asian
0.0% Pacific Islander	
0.3% Other	

The needs of the specific populations are as follows:  
 78% of White, 70% of African-American and 100% of Hispanic households needed rent assistance  
 19% of White and 30% of African-American households needed utility assistance  
 3% of White and 100% of Asian households needed mortgage assistance

The average amount of assistance needed by African-American household and Hispanic households was the same at \$517.00. The average amount of assistance needed by White households was 16% higher at \$599.00. Overall the data shows that minority households are aware of and access services. Their needs mirror those of the general population as evidenced by agencies and surveys not identifying any specific special needs.

Supply – The Senior Needs Assessment identified that the senior population in Medina County will increase disproportionately to the overall County population; experiencing tremendous growth in the next few years. Of the 151,095 Medina County residents 21,818 are age 60 and older. Five percent (5%) of seniors are over the age of 75. Projections show that by the year 2020 there will be 46,400 residents age 60 and over. This is an increase of 113% since 1990. The typical senior receiving services in the County is a female, living alone with limited income. Seniors responding to the survey expressed a desire to remain in their current homes however overwhelmingly expressed concern with not being able to continue to afford their current residence and concerns regarding caring for the homes. Thirty-eight percent (38%) of respondents expressed as a concern outliving their financial resources and many mentioned increasing difficulty meeting their current expenses. Over ten percent (10%) of residents age 60 and over live in poverty. Nearly thirty percent (30%) age 60 and over have at least one (1) disabling condition. It is projected that by year 2020 almost 4,000 individuals age 60 and over will have a severe disability. A significant percentage of residents between the ages of 71 - 74 anticipated the need to move within two (2) years. Subsidized senior housing properties currently have waiting lists. Therefore, the current supply of assisted senior housing will not be sufficient to handle the anticipated need. In addition, senior providers identified at the most recent CHIS meeting a growing need for home repair assistance for those recently widowed or divorced. The Senior Needs Assessment was a comprehensive study which addressed a variety of issues including, but not limited to health, financial well-being, transportation, and socialization. The results of the survey showed that increasing housing alternatives and affordability was the second greatest need in the County for seniors, specifically to “ensure resources are in place to assist older adults in obtaining housing that is affordable and appropriate in size and design to accommodate their changing needs” with “access to transportation links, walkable distance from daily needs like medical services or shopping”.

As the economy has declined the number of households needing emergency assistance has increased steadily. The MMHA received a State of Ohio Housing Trust Fund grant with a start date of January 1, 2009. When written, the funds requested would have been sufficient to fund the program for 24 months. Due to increasing need, it is anticipated that funds will be fully utilized within 13 months.

Quality – Medina County is experiencing the same problems as communities across the country regarding the deterioration of vacant homes as a result of the foreclosure crisis. Participants of the HCV Program do not have difficulty securing units that pass Housing Quality Standards inspections. Medina County does have a large rural area and the Medina County Health Department has expressed some concern with homes in certain areas having problems with septic systems and mold. Few HCV participants live in these areas due to lack of job opportunities and transportation.

Accessibility – The Senior Needs Assessment, the MCHN, and the Medina County Board of MR/DD have all identified as a problem the severe shortage of accessible units for those with disabilities. The need is expected to increase as the population of Medina County ages.

Size of Units – There is a great need for an increase in affordable units for all size units. However, as stated above, entities in the County are planning for significant increases in the number of seniors needing affordable, accessible housing units. Therefore, it is anticipated that one and two bedroom units will be the greatest area of need.

Location - The Village of Lodi has requested that the MMHA focus efforts in their community. In addition, the need for access to transportation, stores and services dictates that housing for seniors and persons with disabilities be located in the cities of Brunswick, Medina and Wadsworth.

**9.1 Strategy for Addressing Housing Needs.** Provide a brief description of the PHA’s strategy for addressing the housing needs of families in the jurisdiction and on the waiting list in the upcoming year. **Note: Small, Section 8 only, and High Performing PHAs complete only for Annual Plan submission with the 5-Year Plan.**

The MMHA currently has a tax credit application pending with the State of Ohio to build senior housing in the City of Brunswick. If the application is not funded, the Authority will explore other options to create additional, affordable senior housing in the community.

The MMHA will continue to collaborate with the Medina County ADAMH Board to provide housing and rental assistance to the SMI population. The Authority has also just contracted with the Medina County Board of MR/DD to create additional affordable housing opportunities for Board eligible persons. In addition, the MMHA recently received State of Ohio Housing Finance Agency loan funds to build five (5) units of affordable, completely accessible housing in the City of Wadsworth.

The MMHA will be working in collaboration with local government on the Neighborhood Stabilization Program. The Authority will purchase and renovate homes in targeted areas to be sold or leased to those meeting specific income guidelines. The homes will be affordable due to the availability of the NSP funds to go towards the project along with the MMHA's cost effective renovations and energy efficiency efforts.

The MMHA will provide homeownership education to HCV, FSS and CHIP & NSP recipients and will collaborate with the CHIP programs to assist low-income households become homeowners.

The MMHA will apply for the continuation of funding for the Shelter Plus Care Program. If need dictates, additional vouchers will be applied for.

The MMHA will explore the possibility for the funding of an emergency homeless shelter. In addition, the Authority will continue to try and secure the necessary resources to operate its homeless prevention programs.

As part of the Authority's ongoing efforts to provide housing to those in need in the most cost effective and efficient manner possible, the MMHA will work to collaborate with the Battered Women's Shelter on the operation of its' facility.

<b>10.0</b>	<p><b>Additional Information.</b> Describe the following, as well as any additional information HUD has requested.</p> <p>(a) Progress in Meeting Mission and Goals. Provide a brief statement of the PHA's progress in meeting the mission and goals described in the 5-Year Plan.</p> <p>Over the past five (5) years the MMHA continued to operate its public housing and HCV program to the highest of standards. Services provided to residents have increased. Additionally, the Authority has expanded programming to include emergency assistance, Shelter Plus Care and homeownership. The Authority has taken a leadership role within the County on housing issues and collaborative efforts have increased. The MMHA has consistently strived to successfully fulfill the mission to create, develop and manage properties and programs that create affordable housing for low-to-moderate income Medina County residents.</p> <p>(b) Significant Amendment and Substantial Deviation/Modification. Provide the PHA's definition of "significant amendment" and "substantial deviation/modification"</p> <p>The MMHA defines a significant amendment as the deletion of or an addition to any of the goals or strategies listed above. A Substantial Deviation/Modification would be a change to an above listed strategy or goal which would impact the population meant to be served or which would significantly change the outcome of the project.</p>
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<b>11.0</b>	<p><b>Required Submission for HUD Field Office Review.</b> In addition to the PHA Plan template (HUD-50075), PHAs must submit the following documents. Items (a) through (g) may be submitted with signature by mail or electronically with scanned signatures, but electronic submission is encouraged. Items (h) through (i) must be attached electronically with the PHA Plan. <b>Note:</b> Faxed copies of these documents will not be accepted by the Field Office.</p> <p>(a) Form HUD-50077, <i>PHA Certifications of Compliance with the PHA Plans and Related Regulations</i> (which includes all certifications relating to Civil Rights)</p> <p>(b) Form HUD-50070, <i>Certification for a Drug-Free Workplace</i> (PHAs receiving CFP grants only)</p> <p>(c) Form HUD-50071, <i>Certification of Payments to Influence Federal Transactions</i> (PHAs receiving CFP grants only)</p> <p>(d) Form SF-LLL, <i>Disclosure of Lobbying Activities</i> (PHAs receiving CFP grants only)</p> <p>(e) Form SF-LLL-A, <i>Disclosure of Lobbying Activities Continuation Sheet</i> (PHAs receiving CFP grants only)</p> <p>(f) Resident Advisory Board (RAB) comments. Comments received from the RAB must be submitted by the PHA as an attachment to the PHA Plan. PHAs must also include a narrative describing their analysis of the recommendations and the decisions made on these recommendations.</p> <p>(g) Challenged Elements</p> <p>(h) Form HUD-50075.1, <i>Capital Fund Program Annual Statement/Performance and Evaluation Report</i> (PHAs receiving CFP grants only)</p> <p>(i) Form HUD-50075.2, <i>Capital Fund Program Five-Year Action Plan</i> (PHAs receiving CFP grants only)</p>
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This information collection is authorized by Section 511 of the Quality Housing and Work Responsibility Act, which added a new section 5A to the U.S. Housing Act of 1937, as amended, which introduced 5-Year and Annual PHA Plans. The 5-Year and Annual PHA plans provide a ready source for interested parties to locate basic PHA policies, rules, and requirements concerning the PHA's operations, programs, and services, and informs HUD, families served by the PHA, and members of the public of the PHA's mission and strategies for serving the needs of low-income and very low-income

families. This form is to be used by all PHA types for submission of the 5-Year and Annual Plans to HUD. Public reporting burden for this information collection is estimated to average 12.68 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. HUD may not collect this information, and respondents are not required to complete this form, unless it displays a currently valid OMB Control Number.

**Privacy Act Notice.** The United States Department of Housing and Urban Development is authorized to solicit the information requested in this form by virtue of Title 12, U.S. Code, Section 1701 et seq., and regulations promulgated thereunder at Title 12, Code of Federal Regulations. Responses to the collection of information are required to obtain a benefit or to retain a benefit. The information requested does not lend itself to confidentiality

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## **Instructions form HUD-50075**

**Applicability.** This form is to be used by all Public Housing Agencies (PHAs) with Fiscal Year beginning April 1, 2008 for the submission of their 5-Year and Annual Plan in accordance with 24 CFR Part 903. The previous version may be used only through April 30, 2008.

### **1.0 PHA Information**

Include the full PHA name, PHA code, PHA type, and PHA Fiscal Year Beginning (MM/YYYY).

### **2.0 Inventory**

Under each program, enter the number of Annual Contributions Contract (ACC) Public Housing (PH) and Section 8 units (HCV).

### **3.0 Submission Type**

Indicate whether this submission is for an Annual and Five Year Plan, Annual Plan only, or 5-Year Plan only.

### **4.0 PHA Consortia**

Check box if submitting a Joint PHA Plan and complete the table.

### **5.0 Five-Year Plan**

Identify the PHA's Mission, Goals and/or Objectives (24 CFR 903.6). Complete only at 5-Year update.

**5.1 Mission.** A statement of the mission of the public housing agency for serving the needs of low-income, very low-income, and extremely low-income families in the jurisdiction of the PHA during the years covered under the plan.

**5.2 Goals and Objectives.** Identify quantifiable goals and objectives that will enable the PHA to serve the needs of low income, very low-income, and extremely low-income families.

**6. PHA Plan Update.** In addition to the items captured in the Plan template, PHAs must have the elements listed below readily available to the public. Additionally, a PHA must:

- (a) Identify specifically which plan elements have been revised since the PHA's prior plan submission.
- (b) Identify where the 5-Year and Annual Plan may be obtained by the public. At a minimum, PHAs must post PHA Plans, including updates, at each Asset Management Project (AMP) and main office or central office of the PHA. PHAs are strongly encouraged to post complete PHA Plans on its official website. PHAs are also encouraged to provide each resident council a copy of its 5-Year and Annual Plan.

#### **PHA Plan Elements.** (24 CFR 903.7)

- 1. Eligibility, Selection and Admissions Policies, including Deconcentration and Wait List Procedures.** Describe the PHA's policies that govern resident or tenant eligibility, selection and admission including admission preferences for both public housing and HCV and unit assignment policies for public housing; and procedures for maintaining waiting lists for admission to public housing and address any site-based waiting lists.
- 2. Financial Resources.** A statement of financial resources, including a listing by general categories, of the PHA's anticipated resources, such as PHA Operating, Capital and other anticipated Federal resources available to the PHA, as well as tenant rents and other income available to support public housing or tenant-based assistance. The statement also should include the non-Federal sources of funds supporting each Federal program, and state the planned use for the resources.
- 3. Rent Determination.** A statement of the policies of the PHA governing rents charged for public housing and HCV dwelling units.
- 4. Operation and Management.** A statement of the rules, standards, and policies of the PHA governing maintenance management of housing owned, assisted, or operated by the public housing agency (which shall include measures necessary for the prevention or eradication of pest infestation, including cockroaches), and management of the PHA and programs of the PHA.
- 5. Grievance Procedures.** A description of the grievance and informal hearing and review procedures that the PHA makes available to its residents and applicants.
- 6. Designated Housing for Elderly and Disabled Families.** With respect to public housing projects owned, assisted, or operated by the PHA, describe any projects (or portions thereof), in the upcoming fiscal year, that the PHA has designated or will apply for designation for occupancy by elderly and disabled families. The description shall include the following information: **1)** development name and number; **2)** designation type; **3)** application status; **4)** date the designation was approved, submitted, or planned for submission, and; **5)** the number of units affected.

7. **Community Service and Self-Sufficiency.** A description of: (1) Any programs relating to services and amenities provided or offered to assisted families; (2) Any policies or programs of the PHA for the enhancement of the economic and social self-sufficiency of assisted families, including programs under Section 3 and FSS; (3) How the PHA will comply with the requirements of community service and treatment of income changes resulting from welfare program requirements. (**Note: applies to only public housing**).
8. **Safety and Crime Prevention.** For public housing only, describe the PHA's plan for safety and crime prevention to ensure the safety of the public housing residents. The statement must include: (i) A description of the need for measures to ensure the safety of public housing residents; (ii) A description of any crime prevention activities conducted or to be conducted by the PHA; and (iii) A description of the coordination between the PHA and the appropriate police precincts for carrying out crime prevention measures and activities.
9. **Pets.** A statement describing the PHAs policies and requirements pertaining to the ownership of pets in public housing.
10. **Civil Rights Certification.** A PHA will be considered in compliance with the Civil Rights and AFFH Certification if: it can document that it examines its programs and proposed programs to identify any impediments to fair housing choice within those programs; addresses those impediments in a reasonable fashion in view of the resources available; works with the local jurisdiction to implement any of the jurisdiction's initiatives to affirmatively further fair housing; and assures that the annual plan is consistent with any applicable Consolidated Plan for its jurisdiction.
11. **Fiscal Year Audit.** The results of the most recent fiscal year audit for the PHA.
12. **Asset Management.** A statement of how the agency will carry out its asset management functions with respect to the public housing inventory of the agency, including how the agency will plan for the long-term operating, capital investment, rehabilitation, modernization, disposition, and other needs for such inventory.
13. **Violence Against Women Act (VAWA).** A description of: 1) Any activities, services, or programs provided or offered by an agency, either directly or in partnership with other service providers, to child or adult victims of domestic violence, dating violence, sexual assault, or stalking; 2) Any activities, services, or programs provided or offered by a PHA that helps child and adult victims of domestic violence, dating violence, sexual assault, or stalking, to obtain or maintain housing; and 3) Any activities, services, or programs provided or offered by a public housing agency to prevent domestic violence, dating violence, sexual assault, and stalking, or to enhance victim safety in assisted families.

#### 7.0 Hope VI, Mixed Finance Modernization or Development, Demolition and/or Disposition, Conversion of Public Housing, Homeownership Programs, and Project-based Vouchers

- (a) **Hope VI or Mixed Finance Modernization or Development.** 1) A description of any housing (including project number (if known) and unit count) for which the PHA will apply for HOPE VI or Mixed Finance Modernization or Development; and 2) A timetable for the submission of applications or proposals. The application and approval process for Hope VI, Mixed Finance Modernization or Development, is a separate process. See guidance on HUD's website at: <http://www.hud.gov/offices/pih/programs/ph/hope6/index.cfm>
- (b) **Demolition and/or Disposition.** With respect to public housing projects owned by the PHA and subject to ACCs under the Act: (1) A description of any housing (including project number and unit numbers [or addresses]), and the number of affected units along with their sizes and accessibility features) for which the PHA will apply or is currently pending for demolition or disposition; and (2) A timetable for the demolition or disposition. The application and approval process for demolition and/or disposition is a separate process. See guidance on HUD's website at: [http://www.hud.gov/offices/pih/centers/sac/demo\\_dispo/index.cfm](http://www.hud.gov/offices/pih/centers/sac/demo_dispo/index.cfm)  
**Note:** This statement must be submitted to the extent that approved and/or pending demolition and/or disposition has changed.
- (c) **Conversion of Public Housing.** With respect to public housing owned by a PHA: 1) A description of any building or buildings (including project number and unit count) that the PHA is required to convert to tenant-based assistance or that the public housing agency plans to voluntarily convert; 2) An analysis of the projects or buildings required to be converted; and 3) A statement of the amount of assistance received under this chapter to be used for rental assistance or other housing assistance in connection with such conversion. See guidance on HUD's website at: <http://www.hud.gov/offices/pih/centers/sac/conversion.cfm>
- (d) **Homeownership.** A description of any homeownership (including project number and unit count) administered by the agency or for which the PHA has applied or will apply for approval.
- (e) **Project-based Vouchers.** If the PHA wishes to use the project-based voucher program, a statement of the projected number of project-based units and general locations and how project basing would be consistent with its PHA Plan.

**8.0 Capital Improvements.** This section provides information on a PHA's Capital Fund Program. With respect to public housing projects owned, assisted, or operated by the public housing agency, a plan describing the capital improvements necessary to ensure long-term physical and social viability of the projects must be completed along with the required forms. Items identified in 8.1 through 8.3, must be signed where directed and transmitted electronically along with the PHA's Annual Plan submission.

**1 Capital Fund Program Annual Statement/Performance and Evaluation Report.** PHAs must complete the *Capital Fund Program Annual Statement/Performance and Evaluation Report* (form HUD-50075.1), for each Capital Fund Program (CFP) to be undertaken with the current year's CFP funds or with CFFP proceeds. Additionally, the form shall be used for the following purposes:

- (a) To submit the initial budget for a new grant or CFFP;
- (b) To report on the Performance and Evaluation Report progress on any open grants previously funded or CFFP; and

- (c) To record a budget revision on a previously approved open grant or CFFP, e.g., additions or deletions of work items, modification of budgeted amounts that have been undertaken since the submission of the last Annual Plan. The Capital Fund Program Annual Statement/Performance and Evaluation Report must be submitted annually.

Additionally, PHAs shall complete the Performance and Evaluation Report section (see footnote 2) of the *Capital Fund Program Annual Statement/Performance and Evaluation* (form HUD-50075.1), at the following times:

1. At the end of the program year; until the program is completed or all funds are expended;
2. When revisions to the Annual Statement are made, which do not require prior HUD approval, (e.g., expenditures for emergency work, revisions resulting from the PHAs application of fungibility); and
3. Upon completion or termination of the activities funded in a specific capital fund program year.

## 8.2 Capital Fund Program Five-Year Action Plan

PHAs must submit the *Capital Fund Program Five-Year Action Plan* (form HUD-50075.2) for the entire PHA portfolio for the first year of participation in the CFP and annual update thereafter to eliminate the previous year and to add a new fifth year (rolling basis) so that the form always covers the present five-year period beginning with the current year.

**8.3 Capital Fund Financing Program (CFFP).** Separate, written HUD approval is required if the PHA proposes to pledge any portion of its CFP/RHF funds to repay debt incurred to finance capital improvements. The PHA must identify in its Annual and 5-year capital plans the amount of the annual payments required to service the debt. The PHA must also submit an annual statement detailing the use of the CFFP proceeds. See guidance on HUD's website at: <http://www.hud.gov/offices/pih/programs/ph/capfund/cffp.cfm>

**9. Housing Needs.** Provide a statement of the housing needs of families residing in the jurisdiction served by the PHA and the means by which the PHA intends, to the maximum extent practicable, to address those needs. (**Note:** Standard and Troubled PHAs complete annually; Small and High Performers complete only for Annual Plan submitted with the 5-Year Plan).

**9.1 Strategy for Addressing Housing Needs.** Provide a description of the PHA's strategy for addressing the housing needs of families in the jurisdiction and on the waiting list in the upcoming year. (**Note:** Standard and Troubled PHAs complete annually; Small and High Performers complete only for Annual Plan submitted with the 5-Year Plan).

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

- (a) **Progress in Meeting Mission and Goals.** PHAs must include (i) a statement of the PHAs progress in meeting the mission and goals described in the 5-Year Plan; (ii) the basic criteria the PHA will use for determining a significant amendment from its 5-year Plan; and a significant amendment or modification to its 5-Year Plan and Annual Plan. (**Note: Standard and Troubled PHAs complete annually; Small and High Performers complete only for Annual Plan submitted with the 5-Year Plan.**)
- (b) **Significant Amendment and Substantial Deviation/Modification.** PHA must provide the definition of "significant amendment" and "substantial deviation/modification". (**Note: Standard and Troubled PHAs complete annually; Small and High Performers complete only for Annual Plan submitted with the 5-Year Plan.**)
- (c) PHAs must include or reference any applicable memorandum of agreement with HUD or any plan to improve performance. (**Note: Standard and Troubled PHAs complete annually.**)

**11.0 Required Submission for HUD Field Office Review.** In order to be a complete package, PHAs must submit items (a) through (g), with signature by mail or electronically with scanned signatures. Items (h) and (i) shall be submitted electronically as an attachment to the PHA Plan.

- (a) Form HUD-50077, *PHA Certifications of Compliance with the PHA Plans and Related Regulations*
- (b) Form HUD-50070, *Certification for a Drug-Free Workplace (PHAs receiving CFP grants only)*
- (c) Form HUD-50071, *Certification of Payments to Influence Federal Transactions (PHAs receiving CFP grants only)*
- (d) Form SF-LLL, *Disclosure of Lobbying Activities (PHAs receiving CFP grants only)*
- (e) Form SF-LLL-A, *Disclosure of Lobbying Activities Continuation Sheet (PHAs receiving CFP grants only)*
- (f) Resident Advisory Board (RAB) comments.
- (g) Challenged Elements. Include any element(s) of the PHA Plan that is challenged.
- (h) Form HUD-50075.1, *Capital Fund Program Annual Statement/Performance and Evaluation Report (Must be attached electronically for PHAs receiving CFP grants only)*. See instructions in 8.1.
- (i) Form HUD-50075.2, *Capital Fund Program Five-Year Action Plan (Must be attached electronically for PHAs receiving CFP grants only)*. See instructions in 8.2.

**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  5-Year and/or  Annual PHA Plan for the PHA fiscal year beginning 1 July 2009, 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/TMS 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.

Medina Metropolitan Housing Authority

OH-027

PHA Name

PHA Number/HA Code

X \_\_\_\_\_ 5-Year PHA Plan for Fiscal Years 20<sup>10</sup> - 20<sup>14</sup>

X \_\_\_\_\_ Annual PHA Plan for Fiscal Years 20<sup>10</sup> - 20<sup>11</sup>

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
Carol Lawler	Chairperson, Board of Commissioners
Signature	Date
<i>Carol Lawler</i>	April 12, 2009

# Certification for a Drug-Free Workplace

U.S. Department of Housing and Urban Development

Applicant Name

Medina Metropolitan Housing Authority

Program/Activity Receiving Federal Grant Funding

Public Housing Capital Fund Program

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.)

North View Manor  
860 Walter Road  
Medina, Ohio 44256

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

James A. Sipos

Executive Director

Signature

Date

X

4/13/2009

# Certification of Payments to Influence Federal Transactions

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

Applicant Name

Medina Metropolitan Housing Authority

Program/Activity Receiving Federal Grant Funding

Public Housing Capital Fund Program

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

James A. Sipos

Executive Director

Signature

Date (mm/dd/yyyy)

4/13/2009

Previous edition is obsolete

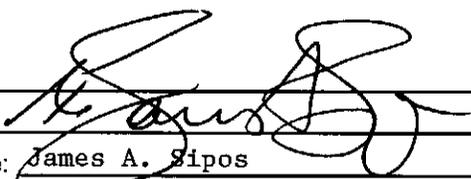
## DISCLOSURE OF LOBBYING ACTIVITIES

Complete this form to disclose lobbying activities pursuant to 31 U.S.C. 1352

Approved by OMB

0348-0046

(See reverse for public burden disclosure.)

<b>1. Type of Federal Action:</b> <input checked="" type="checkbox"/> a. contract <input type="checkbox"/> b. grant <input type="checkbox"/> c. cooperative agreement <input type="checkbox"/> d. loan <input type="checkbox"/> e. loan guarantee <input type="checkbox"/> f. loan insurance	<b>2. Status of Federal Action:</b> <input type="checkbox"/> a. bid/offer/application <input type="checkbox"/> b. initial award <input type="checkbox"/> c. post-award	<b>3. Report Type:</b> <input type="checkbox"/> a. initial filing <input type="checkbox"/> b. material change <b>For Material Change Only:</b> year _____ quarter _____ date of last report _____
<b>4. Name and Address of Reporting Entity:</b> <input checked="" type="checkbox"/> Prime <input type="checkbox"/> Subawardee Tier _____, if known: Medina Metropolitan Housing Authority 850 Walter Road Medina, Ohio 44256  Congressional District, if known: Ohio 16th	<b>5. If Reporting Entity in No. 4 is a Subawardee, Enter Name and Address of Prime:</b>   Congressional District, if known:	
<b>6. Federal Department/Agency:</b>  Department of Housing and Urban Development	<b>7. Federal Program Name/Description:</b>  Public Housing Capital Fund Program CFDA Number, if applicable: <u>14.872</u>	
<b>8. Federal Action Number, if known:</b>	<b>9. Award Amount, if known:</b> \$	
<b>10. a. Name and Address of Lobbying Registrant</b> (if individual, last name, first name, MI):	<b>b. Individuals Performing Services</b> (including address if different from No. 10a) (last name, first name, MI):	
<b>11.</b> Information requested through this form is authorized by title 31 U.S.C. section 1352. This disclosure of lobbying activities is a material representation of fact upon which reliance was placed by the tier above when this transaction was made or entered into. This disclosure is required pursuant to 31 U.S.C. 1352. This information will be available for public inspection. Any person who fails to file the required disclosure shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.	Signature:  Print Name: <u>James A. Sipos</u> Title: <u>Executive Director</u> Telephone No.: <u>330-725-7531</u> Date: <u>4/13/2009</u>	
<b>Federal Use Only:</b>		Authorized for Local Reproduction Standard Form LLL (Rev. 7-97)

## INSTRUCTIONS FOR COMPLETION OF SF-LLL, DISCLOSURE OF LOBBYING ACTIVITIES

This disclosure form shall be completed by the reporting entity, whether subawardee or prime Federal recipient, at the initiation or receipt of a covered Federal action, or a material change to a previous filing, pursuant to title 31 U.S.C. section 1352. The filing of a form is required for each payment or agreement to make payment to any lobbying entity for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with a covered Federal action. Complete all items that apply for both the initial filing and material change report. Refer to the implementing guidance published by the Office of Management and Budget for additional information.

1. Identify the type of covered Federal action for which lobbying activity is and/or has been secured to influence the outcome of a covered Federal action.
2. Identify the status of the covered Federal action.
3. Identify the appropriate classification of this report. If this is a followup report caused by a material change to the information previously reported, enter the year and quarter in which the change occurred. Enter the date of the last previously submitted report by this reporting entity for this covered Federal action.
4. Enter the full name, address, city, State and zip code of the reporting entity. Include Congressional District, if known. Check the appropriate classification of the reporting entity that designates if it is, or expects to be, a prime or subaward recipient. Identify the tier of the subawardee, e.g., the first subawardee of the prime is the 1st tier. Subawards include but are not limited to subcontracts, subgrants and contract awards under grants.
5. If the organization filing the report in item 4 checks "Subawardee," then enter the full name, address, city, State and zip code of the prime Federal recipient. Include Congressional District, if known.
6. Enter the name of the Federal agency making the award or loan commitment. Include at least one organizational level below agency name, if known. For example, Department of Transportation, United States Coast Guard.
7. Enter the Federal program name or description for the covered Federal action (item 1). If known, enter the full Catalog of Federal Domestic Assistance (CFDA) number for grants, cooperative agreements, loans, and loan commitments.
8. Enter the most appropriate Federal identifying number available for the Federal action identified in item 1 (e.g., Request for Proposal (RFP) number; Invitation for Bid (IFB) number; grant announcement number; the contract, grant, or loan award number; the application/proposal control number assigned by the Federal agency). Include prefixes, e.g., "RFP-DE-90-001."
9. For a covered Federal action where there has been an award or loan commitment by the Federal agency, enter the Federal amount of the award/loan commitment for the prime entity identified in item 4 or 5.
10. (a) Enter the full name, address, city, State and zip code of the lobbying registrant under the Lobbying Disclosure Act of 1995 engaged by the reporting entity identified in item 4 to influence the covered Federal action.  
  
(b) Enter the full names of the individual(s) performing services, and include full address if different from 10 (a). Enter Last Name, First Name, and Middle Initial (MI).
11. The certifying official shall sign and date the form, print his/her name, title, and telephone number.

According to the Paperwork Reduction Act, as amended, no persons are required to respond to a collection of information unless it displays a valid OMB Control Number. The valid OMB control number for this information collection is OMB No. 0348-0046. Public reporting burden for this collection of information is estimated to average 10 minutes per response, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding the burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the Office of Management and Budget, Paperwork Reduction Project (0348-0046), Washington, DC 20503.

**DISCLOSURE OF LOBBYING ACTIVITIES  
CONTINUATION SHEET**

Approved by OMB  
0348-0046

Reporting Entity: Medina Metropolitan Housing Authority Page 1 of 1

Not Applicable

## **Resident Advisory Board Meeting**

**February 24, 2009**

### **Capital Fund Dollars**

As stated in the meeting, the Medina Metropolitan Housing Authority (MMHA) does not know the actual amount of funds that will be received however the following items were discussed as uses for the funds (and they are prioritized according to our discussion):

Item: Continue to rehabilitate/renovate units by obligating funds to do additional units.

Comments: Residents expressed that they like the renovated units and supported continuing this work. Residents asked why only vacant units are being renovated. Current residents expressed wanting their units to be renovated.

Analysis of Recommendation: Due to the length of time needed to renovate a unit, around 30 days, the MMHA has targeted vacant units. The length of time needed to renovate a unit was explained to the residents along with the idea of allowing a current resident to move to a renovated unit. Some residents stated that they would need assistance moving and also that they did not have the funds to move.

Decision: The MMHA is looking into the possibility of offering current residents the *option* of transferring to a renovated unit if their current unit has not been completed. The MMHA would establish a waiting list and comply with the occupancy policy regarding transfer of units.

Item: Repair of the parking lot.

Comments: Residents supported repair of the parking lot stating that even small cracks or uneven pavement can be a problem for those with mobility impairment.

Analysis of Recommendation: The MMHA agrees that the parking lot would benefit from major repair work. Issues to be considered are cost and the parking situation for residents while the work is being completed (many have mobility disabilities).

Decision: The MMHA will move forward with repairing the parking lot in stages so that sufficient, close, accessible parking is maintained at all times for residents.

### **Stimulus Funds**

Item: Use of stimulus funds for projects involving energy efficiency.

Comments: Many residents stated that the balcony doors and windows are very drafty. The majority agreed they should be replaced.

Analysis of Recommendation: The MMHA agrees that replacement of balcony doors and windows should be the priority for the stimulus funds. The MMHA secured estimates. Stimulus funds will not be sufficient to complete the entire building however a combination of stimulus funds and reserve funds will allow for completion of the project.

Decision: The MMHA will make this the priority for use of the stimulus funds.

### **Resident Funds**

Item: Recommended use of resident funds.

Comments: All comments regarding continuation of the Nutrition Program offered by Ohio State University Extension, the garden project and resident events were all positive. Resident stated that they like and benefit from these programs.

Comments: While overall the comments about the Farmer's Market Program offered through the HANDS program were positive a concern was brought up by a member that not everyone in the building is eligible for the vouchers. Currently, the vouchers are limited to seniors therefore non-senior residents cannot participate in the program.

Analysis of Recommendations: Comment #1 – The Nutrition Program, the garden project and resident events have been in place for years and are well attended. They offer health, wellness and financial benefits to the residents. Throughout the year there has been no indication from residents that they wish these programs to end. There were no recommendations for new programs.

Decision: Continue these programs.

Analysis of Recommendation: Comment #2 – At the time this program was established the ratio of elderly to non-elderly residents at the property was weighted much more toward the elderly. The ratio has changed and now there are significantly more non-elderly residents. The elderly residents stated they support this program and benefit from it.

Decision: After much thought and discussion, the MMHA proposes to decrease the number of vouchers through the HANDS Foundation and redirect some funds to provide vouchers to those not eligible through the HANDS Foundation. As always, the success of this program is dependent of farmer participation. The dollar amount per person cannot be determined at this time because it will depend on how many residents' wish to participate. Seniors would still apply for vouchers through the HANDS Foundation.

Item: Cat Carriers

Comments: Residents asked if funds could be used to purchase a couple cat carriers to be

used to catch the numerous strays that keep showing up on the property and then contracting with a humane organization to take the cats.

Analysis of Recommendation: Strays have been growing in number recently, aided by some residents feeding the cats and building little shelters. Obviously, some residents are encouraging the strays while others want them removed.

Decision: The MMHA has already taken steps to remove the shelter and has lettered residents regarding the issue. The MMHA has captured and found homes for the last few cats. The MMHA will continue to monitor the situation and handle accordingly.

### **Additional Topics Discussed**

Comment: There is cracking in some of the overhangs.

Analysis of Recommendation/Decision: Maintenance was already aware and repairs are being completed as weather allows.

Comment: Residents with dogs or in wheelchairs sometimes come around the corners quickly and this may cause a problem for residents that do not know they are coming.

Analysis of Recommendation: The majority of residents at the meeting did not feel that mirrors were necessary in front of the elevators but thought they could be useful in the halls where residents may not see a dog or other residents turning the corner. Maintenance states that it is possible to install mirrors.

Decision: Mirrors to be installed to see if they are helpful.

Item: Security concerns:

Comment: Non-entry and exit doors being propped open. The majority agreed that this is a problem.

Analysis of Recommendation: Management has tried addressing this issue with residents but it continues to be an issue. Resident consensus was that security cameras should be installed so that management can see who is propping the doors. Some residents were concerned that alarms would disturb other residents.

Decision: Management agrees that security cameras should be installed. Management is still considering additional steps including designating the doors as emergency exits only and installing the alarm accordingly. Use of the doors for non-emergency purposes would be a rule violation.

Comment: Security cameras in the halls. Some residents feel that cameras are needed because of reports of things like door knobs being turned at night and residents allowing

unaccompanied visitors in the building. Some residents were very opposed to the idea and felt it was an invasion of privacy.

Analysis of Recommendation: While there are reports of incidents like door knobs being handled, no units have been broken into. Cameras would be useful to management with lease enforcement issues however no serious incident has occurred at this time. Cameras are already installed on the entrances and exits and are being installed on the non-entry and exit doors.

Decision: While some residents were okay with the idea of cameras in the halls there was also strong opposition. The MMHA will not install cameras in the halls at this time but will continue to monitor all incident reports and may re-evaluate this idea in the future.

Comment: Addition of deadlocks to the doors.

Analysis of Recommendation: A few residents made this request stating that the current lock system “can be opened with a credit card”. The MMHA had two different people, one having extensive knowledge of locks, try and open a lock with a credit card or a tool. The locks could not be manipulated or opened. The doors are very heavy. The MMHA researched the cost of installing deadbolts to resident doors. There are two potential types of locks that could work on the doors; one requires replacing the current handle and lock system and the other requires the installation of a deadlock in addition to the current system. This option requires drilling into concrete at each unit. Either option requires commercial locks. The cost for either option is approximately \$18,000.00.

Decision: After much discussion, management has determined that there is no indication or a history of units being broken into at the property therefore spending such a large sum is not justified at this time.

Item: Vent Cleaning

Comment: Residents inquired whether the vent system, especially in the bathroom, could be cleaned by the MMHA.

Analysis of Recommendation: The ceiling fan vent in the bathroom has venting that runs horizontally to a main vent and the main vent runs vertically to the roof. The roof vent and motor are covered to prevent dirt from entering the system.

A company would need to be contracted with to clean the vertical vent. MMHA staff would need to clean each unit’s horizontal vents.

Decision: The MMHA is looking at a way to schedule the work to be completed as efficiently and cost effectively as possible.

Item: Tile installation in the elevators.

Comments: A few residents commented that they would prefer tile in the elevators because the carpet is hard to keep clean (wheelchairs and feet bring in dirt from outside).  
Analysis of Recommendation: Carpet was installed when residents recommended carpet instead of tile. This issue seems to be personal preference.

Decision: The MMHA will amend the schedule for cleaning the carpets as a solution to the problem of dirt.

There were no other recommendations or comments.

## Resident Advisory Board Meeting

June 24, 2009

Explained the reason for the meeting was to discuss changes needed to the 5-Year and Annual Plan submission and to receive their feedback.

Item #1: Incorrect PHA Fiscal Year Beginning

Comments: No Comments

Item #2: Need to identify households of various races and ethnic groups in the statement of housing needs. It was explained that the MMHA had not been able to locate any advocacy groups within the County for these specific population groups however social service agencies were approached and shared their race and ethnicity data. A review of this data, along with analysis of emergency assistance data was used to answer this question.

Comments: The Resident Advisory Board expressed the following from their experiences:

- They felt that the County is not segregated geographically.
- They felt that everyone in the County, regardless of race/ethnicity struggle with and benefit from that same things.
- Transportation was identified as the most vital need. Many stated they choose the location they live in based on its access to transportation.
- Being able to attend social gatherings was important (again location is key).
- Residents reported that access to the hospitals and parks are a big benefit and important.
- They also felt that all persons would benefit from a better definition of what constitutes “elderly” since it can vary from program to program.
- Finally, a lack of doctors willing to accept Medicare/Medicaid is becoming a problem. They feel there needs to be less paperwork and an expansion of services that are covered for doctors to be willing to participate in the program. A lack of doctors would create another reason that location of housing would be important.

To summarize, all the comments that the Resident Advisory Board provided mean that location of housing for all populations is of great importance in Medina County.

<b>Part I: Summary</b>	
<b>PHA Name: Medina Metropolitan Housing Authority</b>	<b>Grant Type and Number</b> Capital Fund Program Grant No: OH12P027501-06 Replacement Housing Factor Grant No: Date of CFFP:
<b>FFY of Grant: 2006</b> <b>FFY of Grant Approval: 2006</b>	

**Type of Grant**  
 Original Annual Statement       Reserve for Disasters/Emergencies       Revised Annual Statement (revision no:      )  
 Performance and Evaluation Report for Period Ending: 11/30/2008       Final Performance and Evaluation Report

Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost <sup>1</sup>	
		Original	Revised <sup>2</sup>	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) <sup>3</sup>				
3	1408 Management Improvements				
4	1410 Administration (may not exceed 10% of line 21)	\$ 8,374.00	\$ 8,374.00	\$ 8,374.00	\$ 8,374.00
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs				
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	\$68,234.00	\$75,319.00	\$75,319.00	\$74,688.28
11	1465.1 Dwelling Equipment—Nonexpendable	\$ 1,383.00	\$ 1,383.00	\$ 1,383.00	\$ 1,383.00
12	1470 Non-dwelling Structures	\$ 5,751.00	\$ 5,751.00	\$ 5,751.00	\$ 0.00
13	1475 Non-dwelling Equipment				
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities <sup>4</sup>				

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

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

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

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

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

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

<b>Part I: Summary</b>					
<b>PHA Name:</b> Medina Metropolitan Housing Authority	<b>Grant Type and Number</b> Capital Fund Program Grant No: OH12P027501-06 Replacement Housing Factor Grant No: Date of CFFP:	<b>FFY of Grant:2006</b> <b>FFY of Grant Approval: 2006</b>			
<b>Type of Grant</b>					
<input type="checkbox"/> Original Annual Statement		<input type="checkbox"/> Reserve for Disasters/Emergencies		<input type="checkbox"/> Revised Annual Statement (revision no: )	
<input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 11/30/2008			<input type="checkbox"/> Final Performance and Evaluation Report		
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost <sup>1</sup>	
		Original	Revised <sup>2</sup>	Obligated	Expended
18a	1501 Collateralization or Debt Service paid by the PHA	0.00	0.00	0.00	0.00
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment	0.00	0.00	0.00	0.00
19	1502 Contingency (may not exceed 8% of line 20)	0.00	0.00	0.00	0.00
20	Amount of Annual Grant:: (sum of lines 2 - 19)	0.00	0.00	0.00	0.00
21	Amount of line 20 Related to LBP Activities	0.00	0.00	0.00	0.00
22	Amount of line 20 Related to Section 504 Activities	0.00	0.00	0.00	0.00
23	Amount of line 20 Related to Security - Soft Costs	0.00	0.00	0.00	0.00
24	Amount of line 20 Related to Security - Hard Costs	0.00	0.00	0.00	0.00
25	Amount of line 20 Related to Energy Conservation Measures	0.00	0.00	0.00	0.00
<b>Signature of Executive Director</b>		<b>Date 04/16/09</b>		<b>Signature of Public Housing Director</b>	
				<b>Date 4/16/09</b>	

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

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

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

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









<b>Part I: Summary</b>	
<b>PHA Name: Medina Metropolitan Housing Authority</b>	<b>Grant Type and Number</b> Capital Fund Program Grant No: OH12P027501-07 Replacement Housing Factor Grant No: Date of CFFP:
<b>FFY of Grant: 2007</b> <b>FFY of Grant Approval: 2007</b>	

**Type of Grant**  
 Original Annual Statement       Reserve for Disasters/Emergencies       Revised Annual Statement (revision no:      )  
 Performance and Evaluation Report for Period Ending: 11/30/2008       Final Performance and Evaluation Report

Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost <sup>1</sup>	
		Original	Revised <sup>2</sup>	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) <sup>3</sup>				
3	1408 Management Improvements				
4	1410 Administration (may not exceed 10% of line 21)	\$ 8,825.00	\$ 8,825.00	\$ 8,825.00	\$ 8,825.00
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs				
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	\$68,176.00	\$68,298.61	\$ 0.00	\$ 0.00
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment	\$11,250.00	\$11,127.39	\$11,127.39	\$11,127.39
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities <sup>4</sup>				

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

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

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

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

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

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

<b>Part I: Summary</b>					
<b>PHA Name:</b> Medina Metropolitan Housing Authority	<b>Grant Type and Number</b> Capital Fund Program Grant No: OH12P027501-07 Replacement Housing Factor Grant No: Date of CFFP:	<b>FFY of Grant:2007</b> <b>FFY of Grant Approval: 2007</b>			
<b>Type of Grant</b>					
<input type="checkbox"/> Original Annual Statement		<input type="checkbox"/> Reserve for Disasters/Emergencies		<input type="checkbox"/> Revised Annual Statement (revision no: )	
<input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 11/30/2008			<input type="checkbox"/> Final Performance and Evaluation Report		
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost <sup>1</sup>	
		Original	Revised <sup>2</sup>	Obligated	Expended
18a	1501 Collateralization or Debt Service paid by the PHA	0.00	0.00	0.00	0.00
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment	0.00	0.00	0.00	0.00
19	1502 Contingency (may not exceed 8% of line 20)	0.00	0.00	0.00	0.00
20	Amount of Annual Grant:: (sum of lines 2 - 19)	0.00	0.00	0.00	0.00
21	Amount of line 20 Related to LBP Activities	0.00	0.00	0.00	0.00
22	Amount of line 20 Related to Section 504 Activities	0.00	0.00	0.00	0.00
23	Amount of line 20 Related to Security - Soft Costs	0.00	0.00	0.00	0.00
24	Amount of line 20 Related to Security - Hard Costs	0.00	0.00	0.00	0.00
25	Amount of line 20 Related to Energy Conservation Measures	0.00	0.00	0.00	0.00
<b>Signature of Executive Director</b>		<b>Date 04/16/09</b>		<b>Signature of Public Housing Director</b>	
				<b>Date 4/16/09</b>	

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

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

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









<b>Part I: Summary</b>	
<b>PHA Name: Medina Metropolitan Housing Authority</b>	<b>Grant Type and Number</b> Capital Fund Program Grant No: OH12P027501-08 Replacement Housing Factor Grant No: Date of CFFP:
<b>FFY of Grant: 2008</b> <b>FFY of Grant Approval: 2008</b>	

**Type of Grant**  
 Original Annual Statement       Reserve for Disasters/Emergencies       Revised Annual Statement (revision no:      )  
 Performance and Evaluation Report for Period Ending: 11/30/2008       Final Performance and Evaluation Report

Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost <sup>1</sup>	
		Original	Revised <sup>2</sup>	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) <sup>3</sup>				
3	1408 Management Improvements				
4	1410 Administration (may not exceed 10% of line 21)	\$ 9,315.00	\$ 9,315.00	\$ 9,315.00	\$ 9,315.00
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs				
8	1440 Site Acquisition				
9	1450 Site Improvement	\$12,000.00	\$12,000.00	\$ 0.00	\$ 0.00
10	1460 Dwelling Structures	\$48,000.00	\$48,000.00	\$ 0.00	\$ 0.00
11	1465.1 Dwelling Equipment—Nonexpendable	\$ 8,000.00	\$ 8,000.00	\$ 8,000.00	\$ 0.00
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment	\$15,830.00	\$15,830.00	\$15,412.39	\$15,412.39
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities <sup>4</sup>				

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

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

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

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

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

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

<b>Part I: Summary</b>					
<b>PHA Name:</b> Medina Metropolitan Housing Authority	<b>Grant Type and Number</b> Capital Fund Program Grant No: OH12P027501-08 Replacement Housing Factor Grant No: Date of CFFP:	<b>FFY of Grant:2008</b> <b>FFY of Grant Approval: 2008</b>			
<b>Type of Grant</b>					
<input type="checkbox"/> Original Annual Statement		<input type="checkbox"/> Reserve for Disasters/Emergencies		<input type="checkbox"/> Revised Annual Statement (revision no: )	
<input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 11/30/2008			<input type="checkbox"/> Final Performance and Evaluation Report		
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost <sup>1</sup>	
		Original	Revised <sup>2</sup>	Obligated	Expended
18a	1501 Collateralization or Debt Service paid by the PHA	0.00	0.00	0.00	0.00
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment	0.00	0.00	0.00	0.00
19	1502 Contingency (may not exceed 8% of line 20)	0.00	0.00	0.00	0.00
20	Amount of Annual Grant:: (sum of lines 2 - 19)	0.00	0.00	0.00	0.00
21	Amount of line 20 Related to LBP Activities	0.00	0.00	0.00	0.00
22	Amount of line 20 Related to Section 504 Activities	0.00	0.00	0.00	0.00
23	Amount of line 20 Related to Security - Soft Costs	0.00	0.00	0.00	0.00
24	Amount of line 20 Related to Security - Hard Costs	0.00	0.00	0.00	0.00
25	Amount of line 20 Related to Energy Conservation Measures	\$12,000.00	\$12,000.00	0.00	0.00
<b>Signature of Executive Director</b>		<b>Date 04/16/09</b>		<b>Signature of Public Housing Director</b>	
				<b>Date 4/16/09</b>	

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

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

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

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

<b>Part I: Summary</b>						
PHA Name/Number Medina Metropolitan Housing Authority/OH027		Locality (City/County & State) Medina/Medina, Ohio			<input checked="" type="checkbox"/> Original 5-Year Plan <input type="checkbox"/> Revision No:	
A.	Development Number and Name	Work Statement for Year 1 FFY _2009__	Work Statement for Year 2 FFY ____2010____	Work Statement for Year 3 FFY ____2011____	Work Statement for Year 4 FFY ____2012____	Work Statement for Year 5 FFY ____2013____
	OH12P027					
B.	Physical Improvements Subtotal	Annual Statement	\$74,425.00	\$79,425.00	\$79,425.00	\$40,000.00
C.	Management Improvements					
D.	PHA-Wide Non-dwelling Structures and Equipment		\$ 5,000.00			\$39,425.00
E.	Administration		\$8,825.00	\$8,825.00	\$8,825.00	\$8,825.00
F.	Other					
G.	Operations					
H.	Demolition					
I.	Development					
J.	Capital Fund Financing – Debt Service					
K.	Total CFP Funds					
L.	Total Non-CFP Funds					
M.	Grand Total		\$88,250.00	\$88,250.00	\$88,250.00	\$88,250.00







<b>Part III: Supporting Pages – Management Needs Work Statement(s)</b>				
Work Statement for Year 1 FFY <u>2009</u>	Work Statement for Year <u>2</u> FFY <u>2010</u>		Work Statement for Year: <u>3</u> FFY <u>2011</u>	
	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	

<b>Part III: Supporting Pages – Management Needs Work Statement(s)</b>				
Work Statement for Year 1 FFY _____	Work Statement for Year ____4_____ FFY ____2012____		Work Statement for Year: __5_____ FFY ____2013____	
	Development Number/Name General Description of Major Work Categories	Estimated Cost	Development Number/Name General Description of Major Work Categories	Estimated Cost
See	OH-027-1/North View Manor		OH-027-1/North View Manor	
Annual Statement				
	Subtotal of Estimated Cost		Subtotal of Estimated Cost	