

# PHA 5-Year and Annual Plan

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

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

1.0	<b>PHA Information</b> PHA Name: <u>Housing Authority of Greene County</u> PHA Code: <u>IL072</u> PHA Type: <input checked="" type="checkbox"/> Small <input checked="" type="checkbox"/> High Performing <input type="checkbox"/> Standard <input type="checkbox"/> HCV (Section 8) PHA Fiscal Year Beginning: (MM/YYYY): <u>01/2010</u>																										
2.0	<b>Inventory</b> (based on ACC units at time of FY beginning in 1.0 above) Number of PH units: <u>202</u> Number of HCV units: _____																										
3.0	<b>Submission Type</b> <input checked="" type="checkbox"/> 5-Year and Annual Plan <input type="checkbox"/> Annual Plan Only <input type="checkbox"/> 5-Year Plan Only																										
4.0	<b>PHA Consortia</b> <input type="checkbox"/> PHA Consortia: (Check box if submitting a joint Plan and complete table below.)																										
	<table border="1"> <thead> <tr> <th rowspan="2">Participating PHAs</th> <th rowspan="2">PHA Code</th> <th rowspan="2">Program(s) Included in the Consortia</th> <th rowspan="2">Programs Not in the Consortia</th> <th colspan="2">No. of Units in Each Program</th> </tr> <tr> <th>PH</th> <th>HCV</th> </tr> </thead> <tbody> <tr> <td>PHA 1:</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>PHA 2:</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>PHA 3:</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>	Participating PHAs	PHA Code	Program(s) Included in the Consortia	Programs Not in the Consortia	No. of Units in Each Program		PH	HCV	PHA 1:						PHA 2:						PHA 3:					
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5.0	<b>5-Year Plan.</b> Complete items 5.1 and 5.2 only at 5-Year Plan update.																										
5.1	<b>Mission.</b> State the PHA's Mission for serving the needs of low-income, very low-income, and extremely low income families in the PHA's jurisdiction for the next five years:  The mission of the Housing Authority of Greene County (HAGC) is to be the area's affordable housing of choice. We provide and maintain safe, quality housing in a cost effective manner. By partnering with others, we offer rental assistance and other related services to our community in a nondiscriminatory manner.																										
5.2	<b>Goals and Objectives.</b> Identify the PHA's quantifiable goals and objectives that will enable the PHA to serve the needs of low-income and very low-income, and extremely low-income families for the next five years. Include a report on the progress the PHA has made in meeting the goals and objectives described in the previous 5-Year Plan. <b>Progress in meeting previous five year goals (FY 2005 to FY 2009):</b>  The Housing Authority of Greene County (HAGC) has been successful in meeting its five year goals of reducing public housing vacancies, obtaining PHAS high performer status, improving customer satisfaction, renovating existing public housing units, and obtaining a public housing FSS Coordinator grant which has helped improve quality of live and promote self-sufficiency.  <b>Goals and objectives for next five years (FY 2010 to FY 2014):</b> <ul style="list-style-type: none"> <li>• Maintain PHAS high performer status.</li> <li>• Upgrade properties to full Section 504 UFAS status.</li> <li>• Correct natural gas line emergency by converting White Hall properties to total electric and/or replacing /repairing existing gas lines.</li> <li>• Prepare a Section 18 application to demolish up to 20 public housing units at IL072-01, Tunison, 10 public housing units at IL072-01, Lincoln Homes, and 13 public housing units at IL072-03, Glen Rowe and to replace the units using a combination of funding arrangements including mixed-income/mixed-finance.</li> <li>• <b>Dispose of the ten public housing dwelling units in Eldred.</b></li> <li>• Develop additional rental and homeownership housing units that are affordable to low-income families using ax credits, bonds, Rural Development, HOME, CDBG, and other funding sources.</li> <li>• Develop and implement homeownership programs.</li> <li>• Develop a 46 unit supportive living facility for the elderly with Medicare waivers so the facility and services will be affordable to low-income elderly families.</li> <li>• Apply for Section 202 funding.</li> <li>• Apply for HUD resident services grants.</li> <li>• Pursue alternative funding sources.</li> </ul>																										
6.0	<b>PHA Plan Update</b> (a) Identify all PHA Plan elements that have been revised by the PHA since its last Annual Plan submission:  Attachment A: PHA Plan Elements il072a04  (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. HAGC's central office at 325 North Carr, White Hall, IL 62092																										

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></p> <p>The Housing Authority of Greene County (HAGC) conducted a physical needs assessment of its properties and determined the cost to comp mod the two level dwelling units in Roodhouse, IL and White Hall, IL will exceed 70% of HUD's most recent published total development costs. HUD does not consider modernization reasonable when renovation costs exceed 57.14% of total development costs; therefore, HAGC plans to demolish these units and request replacement tenant based section 8 housing choice vouchers.</p> <p>HAGC plans to dispose of the ten public housing dwelling units in Eldred, IL and request replacement housing choice vouchers</p> <ul style="list-style-type: none"> <li>• Eldred does not have any services; no grocery store, no gas station, no retail stores, no school, and no social services</li> <li>• The public housing units in Eldred are extremely difficult to rent; persons only move to Eldred until they can transfer to other public housing</li> <li>• Housing is needed in Carrollton, not Eldred</li> </ul> <p>HAGC plans to develop 40 additional tax credit rental units in Carrollton, IL</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. Attachment B: P &amp; E Report for FY 2010, il072b04 Attachment C: P &amp; E Report for FY 2009, il072c04 Attachment D: P &amp; E Report for FY 2008, il072d04 Attachment E: P &amp; E Report for ARRA, il072e04</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>  <input type="checkbox"/> 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>

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

During 2005 the Housing Authority of Greene County (HAGC) contracted with Goodwin and Associates to conduct a comprehensive housing needs assessment of Greene County which determined:

- During 2004 Goodwin and Associates conducted a Housing Needs Assessment of Greene County, Illinois. Based upon the assessment it was determined Greene County has experienced a net loss of population and occupied housing units each decade since 1900 with the exception of the Athensville, Carrollton, Linder and Rubicon Townships. Of the four townships that experienced growth in both population and occupied housing units, Carrollton was the most significant.
- Per the US Census Bureau and the Illinois Department of Commerce and Economic Opportunity, Greene County's population and number of occupied housing units are projected to grow 0.4% each year over the next twenty years after constantly declining each decade since 1900. Most of the expected growth will be in the Carrollton Township therefore Carrollton is the focus of the housing needs assessment.
- Based upon the assessment the current demand for new housing in the Carrollton Township are 17 units per year with 13 new homeownership units and 4 new rental units. At least 8 of the new homeownership units and 2 of the new rental units should be developed each year as affordable housing for low-income families.
- The number of persons with mobility and self-care limitations increased significantly in Greene County between 1990 and 2000 and is projected to grow at the same rate over the next twenty years. Greene County requires beds for 51 persons with mobility or self care limitations per year and of these, Carrollton Township requires 11.
- The number of elderly persons in Greene County and Carrollton Township continues to decline; therefore, additional housing specifically designated for the elderly is not required at this time. The exception to this is the additional handicap accessible units required for persons 65 years of age or older who have a mobility or self-care limitation.

9.0

Per the CHAS Data Book for Greene County, IL:

- Of the 1,382 renter households, 272 have 1 or 2 members, 673 have 2 to 4 members, 117 have 5 or more members and there are 320 of all others; 58.1% of all renters have a cost burden greater than 30% of MFI income and 32.4% have a cost burden greater than 50% of MFI income.
- Of the 5,781 homeowner households, 1,547 have 1 or 2 members, 1,975 have 2 to 4 members, 450 have 5 or more members and there are 427 of all others; 63.2% of all homeowners have a cost burden greater than 30% of MFI income and 40.34% have a cost burden greater than 50% of MFI income.
- Of the 1,326 total households with mobility and self care limitations, 26.4% have a housing problem.

Current public housing waiting list summary:

Bedroom Size	Elderly	Handicap Disable	Family	White	Totals
1BR	20	24	23	67	67
2BR	2	10	17	29	29
3BR	0	2	2	4	4
4BR	0	2	0	2	2
TOTALS	22	38	42	102	102

The Authority maintains ten waiting lists, all ten are open and the Authority has no plans of closing any of the lists due to the limited number of applicants. Applicants may apply to all ten lists at the same time and are moved to the bottom of the list if they refuse an offer of a unit.

Attachment O: Waiting List Analysis il072o02

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

9.1

- Minimize vacant unit turnaround time by contracting the cleaning and painting of vacant units
- Develop additional tax credit units
- Develop and implement a homeownership program
- Develop a 46 unit supportive living facility for the elderly with Medicare waivers so the facility and services will be affordable to low-income elderly families.

10.0	<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. On schedule with plan.</p> <p>(b) Significant Amendment and Substantial Deviation/Modification. Provide the PHA's definition of "significant amendment" and "substantial deviation/modification"</p> <p>The following actions are defined as substantial deviation or significant amendment or modification:</p> <p><b>GOALS</b></p> <ul style="list-style-type: none"> <li>Additions or deletions of Strategic Goals</li> </ul> <p><b>PROGRAMS</b></p> <ul style="list-style-type: none"> <li>Adding new programs not included in the Housing Agency Plan</li> <li>Any change with regard to demolition or disposition, designation of housing, homeownership programs or conversion activities</li> </ul> <p><b>CAPITAL BUDGET</b></p> <ul style="list-style-type: none"> <li>Additions of non-emergency work items in excess of \$25,000 (items not included in the current Annual Statement or Five Year Action Plan) or change in use of replacement reserve funds in excess of \$25,000.</li> </ul> <p><b>POLICIES</b></p> <ul style="list-style-type: none"> <li>Changes to rent or admissions policies or organization of the waiting list</li> </ul> <p>An exception to the above definition will be made for any of the above that are adopted to reflect changes in HUD regulatory requirements since HUD does not consider such changes significant amendments.</p>
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11.0	<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) Attachment</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>The PHA Plan was developed in conjunction with the Resident Advisory Board therefore their input, especially regarding work item priorities, was incorporated as the PHA Plan was developed.</p> <p>(g) Challenged Elements None</p> <p>(h) Form HUD-50075.1, <i>Capital Fund Program Annual Statement/Performance and Evaluation Report</i> (PHAs receiving CFP grants only) Attachment F: il072f04</p> <p>(i) Form HUD-50075.2, <i>Capital Fund Program Five-Year Action Plan</i> (PHAs receiving CFP grants only) Attachment G: il072g04</p>
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	<p><b>Attachments:</b></p> <p>Attachment A: PHA Plan Elements il072a04</p> <p>Attachment B: P &amp; E Report for FY 2010, il072b04</p> <p>Attachment C: P &amp; E Report for FY 2009, il072c04</p> <p>Attachment D: P &amp; E Report for FY 2008, il072d04</p> <p>Attachment E: P &amp; E Report for ARRA, il072e04</p> <p>Attachment F: FY 2011 Annual Plan, il072f04</p> <p>Attachment G: Five Year Plan, il072g04</p> <p>Attachment H: Updated ACOP, il072h04</p> <p>Attachment I: Section 3 Policy, il072i02</p> <p>Attachment J: Section 3 Procurement, il072j04</p> <p>Attachment K: Updated Lease, il072k04</p> <p>Attachment L: Violence Against Women Act Statement il072l02</p> <p>Attachment M: CO Certification il072m04</p> <p>Attachment N: Waiting List Analysis il072n04</p> <p>Attachment O: Deconcentration Analysis, il072o04</p> <p>Attachment P: RAB Comments and Challenged Elements, il072p04</p> <p>Attachment Q: ARRA Procurement Policy Amendment, il072q04</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

## 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.

**6.0 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.

**8.1 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>

**9.0 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.

## Attachment A

### Section 6.0 -- PHA Plan Elements. (24 CFR 903.7)

*Instructions:*

For each Element below that **HAS** changed since the last PHA Plan, using the HUD 50075 instructions, enter the “changed” text in column 3.

For each Element below that **HAS NOT** changed since the last PHA Plan, enter “No Change” in column 3.

Housing Authority #	Housing Authority Name	Fiscal Year Begin Date
IL072	Housing Authority of Greene County	01/2011

	Plan Element	Column #3														
1.	Eligibility, Selection and Admissions Policies, including Deconcentration and Wait List Procedures.	<ul style="list-style-type: none"> <li>• ACOP, added Social Security Number Verification based upon PIH 2010-03, Attachment H: il072h01</li> <li>• Lease updated to include cannabis as a controlled substance, Attachment K: ilo072k01</li> <li>• Lease revised to remove three times late in twelve months and you are out clause</li> <li>• Waiting List Analysis, Attachment O: il072o01</li> <li>• Deconcentration Analysis, Attachment P: il072p01</li> </ul>														
2.	Financial Resources.	<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 70%;">Public Housing Operating Budget</td> <td style="text-align: right;">\$ 1,127,560.00</td> </tr> <tr> <td>FY 2011 CFP</td> <td style="text-align: right;">\$ 268,264.00</td> </tr> <tr> <td>Remaining in CFP:</td> <td></td> </tr> <tr> <td>FY 2008</td> <td style="text-align: right;">\$ 10,468.07</td> </tr> <tr> <td>FY 2009</td> <td style="text-align: right;">\$ 240,046.75</td> </tr> <tr> <td>FY 2010</td> <td style="text-align: right;">\$ 268,264.00</td> </tr> <tr> <td>ARRA</td> <td style="text-align: right;">\$ 290,958.40</td> </tr> </table>	Public Housing Operating Budget	\$ 1,127,560.00	FY 2011 CFP	\$ 268,264.00	Remaining in CFP:		FY 2008	\$ 10,468.07	FY 2009	\$ 240,046.75	FY 2010	\$ 268,264.00	ARRA	\$ 290,958.40
Public Housing Operating Budget	\$ 1,127,560.00															
FY 2011 CFP	\$ 268,264.00															
Remaining in CFP:																
FY 2008	\$ 10,468.07															
FY 2009	\$ 240,046.75															
FY 2010	\$ 268,264.00															
ARRA	\$ 290,958.40															
3.	Rent Determination.	Flat Rents set equal to Fair Market Rents for Greene County based upon May 2010 survey of rental properties in Greene County														
4.	Operation and Management.	No change														
5.	Grievance Procedures.	No change														
6.	Designated Housing for Elderly and Disabled Families.	N/A														
7.	Community Service and Self-Sufficiency.	In compliance, no change														

## Attachment A

### Section 6.0 -- PHA Plan Elements. (24 CFR 903.7)

8.	Safety and Crime Prevention.	No change
9.	Pets.	No change
10.	Civil Rights Certification.	See Attachment L: Civil Rights Certification il072l01
11.	Fiscal Year Audit.	No findings
12.	Asset Management.	No change
13.	Violence Against Women Act (VAWA).	See Attachment M: Violence Against Women Information il072m01

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

ATTACHMENT B

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: Housing Authority of Greene county	Grant Type and Number Capital Fund Program Grant No: IL06-P072-50110 Replacement Housing Factor Grant No: Date of CFFP:	FFY of Grant: 2010 FFY of Grant Approval: 2010
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Line	Type of Grant <input type="checkbox"/> Original Annual Statement <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 12/31/2010	Reserve for Disasters/Emergencies <input type="checkbox"/>	Revised Annual Statement (revision no: ) <input type="checkbox"/> Final Performance and Evaluation Report	Total Estimated Cost		Total Actual Cost <sup>1</sup>	
				Original	Revised <sup>2</sup>	Obligated	Expended
1	Total non-CFF Funds						
2	1406 Operations (may not exceed 20% of line 21) <sup>3</sup>			\$129,405		\$129,405	\$129,405.00
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			\$16,000		\$9,000	\$4,990.92
8	1440 Site Acquisition						
9	1450 Site Improvement						
10	1460 Dwelling Structures			\$122,264		\$122,264	\$85,586.75
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 <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 CFF 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

ATTACHMENT B

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		FFY of Grant: 2010	
PHA Name: Housing Authority of Greene County		Grant Type and Number Capital Fund Program Grant No: IL06-P072-50110 Replacement Housing Factor Grant No: Date of CFFP:	
Type of Grant <input type="checkbox"/> Original Annual Statement <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 12/31/2010		<input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no: ) <input type="checkbox"/> Final Performance and Evaluation Report	
Line	Summary by Development Account	Total Estimated Cost	Total Actual Cost <sup>1</sup>
		Original	Revised <sup>2</sup>
		Obligated	Expended
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)	\$267,669	\$260,669
21	Amount of line 20 Related to LBP Activities		\$219,982.67
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 <i>[Signature]</i>		Date 3-8-11	Signature of Public Housing Director
			Date

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









Annual Statement/Performance and Evaluation Report  
 ATTACHMENT C  
 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> Housing Authority of Greene County		<b>Grant Type and Number</b> Capital Fund Program Grant No: IL06-PO72-50109 Replacement Housing Factor Grant No: Date of CFFP:		<b>FFY of Grant:</b> 2009 <b>FFY of Grant Approval:</b>	
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Line	Type of Grant <input type="checkbox"/> Original Annual Statement <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 12/31/2010	Reserve for Disasters/Emergencies <input type="checkbox"/>	Revised Annual Statement (revision no: 1 ) <input type="checkbox"/> Final Performance and Evaluation Report	Total Estimated Cost		Obligated	Total Actual Cost <sup>1</sup>	
				Original	Revised <sup>2</sup>		Expended	
1	Total non-CFP Funds							
2	1406 Operations (may not exceed 20% of line 21) <sup>3</sup>			\$65,000	\$65,000.00	\$65,000.00	\$65,000.00	
3	1408 Management Improvements			\$2,500	\$2,500.00	0	0	
4	1410 Administration (may not exceed 10% of line 21)			\$26,000	\$26,000.00	0	0	
5	1411 Audit							
6	1415 Liquidated Damages							
7	1430 Fees and Costs							
8	1440 Site Acquisition			\$53,000	\$53,000.00	\$51,252.2	\$51,252.2	
9	1450 Site Improvement							
10	1460 Dwelling Structures			\$1,000	\$1,000.00	0	0	
11	1465.1 Dwelling Equipment—Nonexpendable			\$7,000	\$108,764.00	\$99,853.00	\$99,853.00	
12	1470 Non-dwelling Structures			\$10,000	\$10,000.00	0	0	
13	1475 Non-dwelling Equipment			\$101,764				
14	1485 Demolition			\$2,000	\$2,000.00	0	0	
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

ATTACHMENT C

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

<b>Part I: Summary</b>		FFY of Grant: 2009	
PHA Name: Housing Authority of Greene County	Grant Type and Number Capital Fund Program Grant No: IL06-PO72-50109 Replacement Housing Factor Grant No: Date of CFFP:	FFY of Grant Approval:	

Type of Grant  Original Annual Statement  Reserve for Disasters/Emergencies  Revised Annual Statement (revision no: 1 )  
 Performance and Evaluation Report for Period Ending: 12/31/2010  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				
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)	\$268,264	\$268,264.00	\$216,105.20	\$216,105.20
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 Activities	\$117,764	0	0	0
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		Date	Signature of Public Housing Director		Date
<i>[Signature]</i>		3-8-11	<i>[Signature]</i>		

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

Part II: Supporting Pages		PHA Name: Housing Authority of Greene County		Grant Type and Number Capital Fund Program Grant No: IL06-PO72-50109 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		
IL072000001	Operations:	1406		Original \$65,000	Revised <sup>1</sup> \$65,000.00	Funds Obligated <sup>2</sup> \$65,000.00	Funds Expended <sup>2</sup> \$65,000.000	Complete
IL072000001	Computer software upgrade/training	1408		\$2,500	\$2,500.00	0	0	Planning
IL072000001	Administration	1410		\$26,000	\$26,000.00	0	0	Planning
IL072000001	A/E	1430		\$16,000	\$10,000.00	\$8,252.20	\$8,252.20	Planning
IL072000001	Technical Assistance	1430		\$20,000	\$26,000.00	\$26,000.00	\$26,000.00	Complete
IL072000001	MOD consulting Fees	1430		\$17,000	\$17,000.00	\$17,000.00	\$17,000.00	Complete
	1430 Subtotal	1430		\$53,000	\$53,000.00	\$51,252.20	\$51,252.20	
IL072000001	Sidewalk replacement	1450		\$1,000	\$1,000.00	0	0	Planning
IL072000001	HA-Wide renovations	1460		\$7,000	\$7,000.00	0	0	Planning
IL072000001	Convert Gas to Electrical Modifications	1460		0	\$101,764.00	\$99,853.00	\$99,853.00	On-going
IL072000001	Replace appliances	1465.1		\$10,000	\$10,000.00	0	0	Planning

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

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







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

ATTACHMENT D

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: Housing Authority of Greene County	Grant Type and Number Capital Fund Program Grant No: IL06-PO72-50108 Replacement Housing Factor Grant No: Date of CFFP:	FFY of Grant: 2008 FFY of Grant Approval:
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Line	Type of Grant <input type="checkbox"/> Original Annual Statement <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 12/31/2010	Reserve for Disasters/Emergencies <input type="checkbox"/>	Revised Annual Statement (revision no:3 ) <input checked="" type="checkbox"/> Final Performance and Evaluation Report		Total Actual Cost <sup>1</sup>
			Original (Rev 2)	Revised <sup>2</sup> (Rev 3)	
1	Total non-CFFP Funds				
2	1406 Operations (may not exceed 20% of line 21) <sup>3</sup>		\$101,532	\$117,258.58	\$117,258.58
3	1408 Management Improvements		\$15,821	\$5,043.10	\$5,043.10
4	1410 Administration (may not exceed 10% of line 21)		\$10,000	\$8,970.97	\$8,970.97
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs		\$136,468	\$135,261.35	\$135,261.35
8	1440 Site Acquisition				
9	1450 Site Improvement		\$2,713	0	
10	1460 Dwelling Structures				
11	1465.1 Dwelling Equipment—Nonependable				
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 <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 CFFP Grants for operations.  
<sup>4</sup> RHF funds shall be included here.

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

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

<b>Part I: Summary</b>		FFY of Grant: 2008	
PHA Name: Housing Authority of Greene County	Grant Type and Number Capital Fund Program Grant No: IL06-FO72-50108 Replacement Housing Factor Grant No: Date of CFFP:	FFY of Grant Approval:	

Line	Type of Grant	Performance and Evaluation Report for Period Ending: 12/31/2010	Total Estimated Cost		Total Actual Cost <sup>1</sup>	Expended
			Original	Revised <sup>2</sup>		
18a	1501 Collateralization or Debt Service paid by the PHA					
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment					
19	1502 Contingency (may not exceed 8% of line 20)					
20	Amount of Annual Grant: (sum of lines 2 - 19)		\$266,534	\$266,534	\$266,534	
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		Date	Signature of Public Housing Director		Date	
<i>[Signature]</i>		3-8-11	<i>[Signature]</i>			

<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

Part II: Supporting Pages

PHA Name: Housing Authority of Greene County		Grant Type and Number Capital Fund Program Grant No: IL06-PO72-50108 CFPP (Yes/ No): Replacement Housing Factor Grant No:		Federal FFY of Grant: 2008				
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost Original	Revised <sup>1</sup>	Total Actual Cost Funds Obligated <sup>2</sup>	Funds Expended <sup>2</sup>	Status of Work
IL072000001	Operations:	1406		(Rev 2) \$101,532	(Rev 3) \$117,258.58	\$117,258.58	\$117,258.58	Complete
IL072000001	Computer software upgrade/training	1408		\$10,821	\$4,095	\$4,095	\$4,095	Complete
IL072000001	Staff training and certification	1408		\$5,000	\$948.10	\$948.10	\$948.10	Complete
	1408 Subtotal	1408		\$15,821	\$5,043.10	\$5,043.10	\$5,043.10	
IL072000001	Administration	1410		\$10,000	\$8,970.97	\$8,970.97	\$8,970.97	Complete
IL072000001	A/E	1430		\$69,468	\$67,793.35	\$67,793.35	\$67,793.35	Complete
IL072000001	Technical Assistance	1430		\$35,442.72	\$35,910.72	\$35,910.72	\$35,910.72	Complete
IL072000001	MOD consulting Fees	1430		\$31,557.28	\$31,557.28	\$31,557.28	\$31,557.28	Complete
	1430 Subtotal	1430		\$136,468	\$136,468	\$35,652.84	\$35,652.84	
IL072000001	Sidewalk replacement	1450		\$2,713	0			
	TOTAL ANNUAL CFP			\$266,534	\$266,534	\$266,534	\$256,065.93	

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

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







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

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

Part I: Summary

PHA Name: Housing Authority of Greene County	Grant Type and Number Capital Fund Program Grant No. CFRG-IL06S07250109 Replacement Housing Factor Grant No: Date of CFFP:	FFY of Grant: 2009 FFY of Grant Approval:
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Line	Type of Grant <input type="checkbox"/> Original Annual Statement <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 12/31/2010	Reserve for Disasters/Emergencies <input type="checkbox"/> Reserve for Disasters/Emergencies <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 12/31/2010	Total Estimated Cost		Total Actual Cost <sup>1</sup>
			Original	Revised <sup>2</sup>	
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)				
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs				
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	\$287,379.00	\$337,379	\$337,379	\$46,420.60
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Non-dwelling Structures	\$50,000.00	0		
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.

ATTACHMENT E

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

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

<b>Part I: Summary</b>		FFY of Grant: 2009	
PHA Name: Housing Authority of Greene	Grant Type and Number Capital Fund Program Grant No: CFRG-IL06SO7250109 Replacement Housing Factor Grant No: Date of CFFP:	FFY of Grant Approval:	

<input type="checkbox"/> Original Annual Statement <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 12/31/2010		<input type="checkbox"/> Reserve for Disasters/Emergencies <input checked="" type="checkbox"/> Revised Annual Statement (revision no: 1 ) <input type="checkbox"/> Final Performance and Evaluation Report	
Line	Summary by Development Account	Total Estimated Cost	Total Actual Cost <sup>1</sup>
18a	1501 Collateralization or Debt Service paid by the PHA	Original	Obligated
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment	Revised <sup>2</sup>	Expended
19	1502 Contingency (may not exceed 8% of line 20)		
20	Amount of Annual Grant: (sum of lines 2 - 19)	\$337,379.00	\$337,379.00
21	Amount of line 20 Related to LBP Activities	\$337,379.00	\$337,379.00
22	Amount of line 20 Related to Section 504 Activities		
23	Amount of line 20 Related to Security - Soft Costs		
24	Amount of line 20 Related to Security - Hard Costs		
25	Amount of line 20 Related to Energy Conservation Measures		
Signature of Executive Director: <i>[Signature]</i>		Date: 3-8-11	Signature of Public Housing Director
			Date

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











Part I: Summary		Grant Type and Number		FFY of Grant: 2011	
PHA Name: Housing Authority of Greene county		Capital Fund Program Grant No: IL06-P072-50111		FFY of Grant Approval: 2011	
		Replacement Housing Factor Grant No:			
		Date of CFFP:			
Type of Grant <input checked="" type="checkbox"/> Original Annual Statement and Evaluation Report for Period Ending: <input type="checkbox"/> Performance and Evaluation Report for Disasters/Emergencies <input type="checkbox"/> Reserve for Disasters/Emergencies					
Summary by Development Account		Total Estimated Cost		Total Actual Cost <sup>1</sup>	
Line		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>	\$129,405			
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	\$16,000			
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	\$122,264			
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 <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

<b>Part I: Summary</b>		FFY of Grant: 2011	
PHA Name: Housing Authority of Greene County	Grant Type and Number Capital Fund Program Grant No: IL06-P072-50111 Replacement Housing Factor Grant No: Date of CFFP:	FFY of Grant Approval: 2011	
<input checked="" type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Performance and Evaluation Report for Period Ending:		<input type="checkbox"/> Revised Annual Statement (revision no: ) <input type="checkbox"/> Final Performance and Evaluation Report	
Line	Summary by Development Account	Total Estimated Cost	Total Actual Cost <sup>1</sup>
		Original	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)	\$267,669	
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		Signature of Public Housing Director	Date
<i>Ronald A. [Signature]</i>			8-70-10

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

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

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

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

Part II: Supporting Pages		Federal FFY of Grant: 2011						
PHA Name: Housing Authority of Greene county		Grant Type and Number Capital Fund Program Grant No: IL06-P072-50111 CFFP (Yes/No): Replacement Housing Factor Grant No:						
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised <sup>1</sup>	Funds Obligated <sup>2</sup>	Funds Expended <sup>2</sup>	
IL072000001	1406 Operations General operations 1406 Subtotal	1406 1406		\$129,405 \$129,405				
IL072000001	1430 Fees and Costs A & E Fees 1430 Subtotal	1430 1430		\$16,000 \$16,000				
IL072000001	1460 Dwelling Structures Correct Gas Line Emergency 1460 Subtotal	1460 1460		\$122,264 \$122,264				
	TOTAL			\$267,669				

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

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







<b>Part I: Summary</b>						
PHA Name/Number Housing Authority of Greene County IL072		Locality (City/County & State) White Hall, Greene County, IL			<input type="checkbox"/> Original 5-Year Plan <input checked="" type="checkbox"/> Revision No: 1	
A.	Development Number and Name	Work Statement for Year 1 FFY 2010	Work Statement for Year 2 FFY ____2011____	Work Statement for Year 3 FFY ____2012____	Work Statement for Year 4 FFY ____2013____	Work Statement for Year 5 FFY ____2014____
B.	Physical Improvements Subtotal	Annual Statement	\$122,264	\$120,268	\$120,268	\$120,268
C.	Management Improvements					
D.	PHA-Wide Non-dwelling Structures and Equipment			\$2,000	\$2,000	\$2,000
E.	Administration					
F.	Other (Fees and Costs)		\$16,000	\$16,000	\$16,000	\$16,000
G.	Operations		\$122,264	\$129,405	\$129,405	\$129,405
H.	Demolition					
I.	Development					
J.	Capital Fund Financing – Debt Service					
K.	Total CFP Funds		\$267,669	\$267,669	\$267,669	\$267,669
L.	Total Non-CFP Funds					
M.	Grand Total		\$267,669	\$267,669	\$267,669	\$267,669



<b>Part II: Supporting Pages – Physical Needs Work Statement(s)</b>						
Work Statement for Year 1 FFY <u>2010</u>	Work Statement for Year <u>2011</u> FFY <u>2011</u>			Work Statement for Year: <u>2012</u> FFY <u>2012</u>		
	Development Number/Name General Description of Major Work Categories	Quantity	Estimated Cost	Development Number/Name General Description of Major Work Categories	Quantity	Estimated Cost
See Annual Statement	HA-Wide, Operations, 1406		\$129,405	HA-Wide, Operations, 1406		\$129,405
	HA-Wide, A & E, 1430		\$16,000	HA-Wide, A & E Fees, 1430		\$16,000
	IL072000001, Correct gas line emergency, 1460		\$122,264	IL072000001, Sidewalk replacement, 1450		\$1,000
				IL072000001, Section 504 public areas, 1470		\$119,264
				HA-Wide, Computers and copiers, 1475		\$1,000
				HA-Wide, Furniture, fixtures, appliances, 1475		\$1,000
		Subtotal of Estimated Cost		\$267,669	Subtotal of Estimated Cost	



<b>Part III: Supporting Pages – Management Needs Work Statement(s)</b>				
Work Statement for Year 1 FFY 2010	Work Statement for Year 2011 FFY 2011		Work Statement for Year: 2012 FFY 2012	
	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 2010	Work Statement for Year 2013 FFY 2013		Work Statement for Year: 2014 FFY 2014	
	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

ATTACHMENT H

HOUSING AUTHORITY OF GREENE COUNTY

CHANGES TO ADMMISSION AND CONTINUED OCCUPANCY POLICY  
(ACOP)

*The following sections were modified to include cannabis as a drug related activity that provides grounds for denial of an application or for the eviction of a resident*

**8.4 GROUNDS FOR DENIAL**

The Housing Authority of Greene County is not required or obligated to assist applicants who:

- K. Were evicted from assisted housing within five years of the projected date of admission because of drug-related criminal activity involving the illegal manufacture, sale, distribution, or possession with the intent to manufacture, sell, distribute cannabis or a controlled substance as defined in Section 102 of the Controlled Substances Act, 21 U.S.C. 802;
- L. Are illegally using cannabis or a controlled substance or are abusing alcohol in a way that may interfere with the health, safety, or right to peaceful enjoyment of the premises by other residents.

**GLOSSARY**

**Drug-Related Criminal Activity:** Drug trafficking or the illegal use, or possession for personal use, of cannabis or a controlled substance as defined in Section 102 of the Controlled Substances Act (21 U.S.C. 802).

*The following Section is added to the Housing Authority's ACOP:*

**12.4 VERIFICATION OF SOCIAL SECURITY NUMBERS**

A. **Purpose:**

This Section explains the procedures HAGC is required to use for verifying Social Security numbers (SSN), Social Security benefits of applicants, participants and household members at the time of application for public housing and during mandatory reexamination of household income.

## ATTACHMENT H

### B. **SSN Disclosure:**

In accordance with 24 CFR 5.216, applicants and tenants (including each member of the household) are required to disclose his/her assigned SSN, with the exception of the following individuals:

- a. Those individuals who do not contend to have eligible immigration status (individuals who may be unlawfully present in the United States). These individuals in most instances would not be eligible for a SSN.
  1. A family that consists of a single household member (including a pregnant individual) who does not have eligible immigration status is ***not eligible for housing assistance and cannot be housed.***
  2. A family that consists of two or more household members **and at least one** household member that has eligible immigration status, is classified as a mixed family, and **is eligible** for prorated assistance in accordance with 24 CFR 5.520. HAGC may **not** deny assistance to mixed families due to nondisclosure of an SSN by an individual who does not contend to have eligible immigration status.
- b. Existing program participants as of January 31, 2010, who have previously disclosed their SSN and HUD has determined the SSN to be valid. HAGC will confirm HUD's validation of the participant's SSN by viewing the household's ***Summary Report*** or the ***Identity Verification Report*** in the EIV system.
- c. Existing program participants as of January 31, 2010, who are 62 years of age or older, and had not previously disclosed a valid SSN. This exemption continues even if the individual moves to a new assisted unit.

### C. **SSN Documentation:**

HAGC must request the applicant and participant (including each member of the household), who are not exempt, to provide documentation of each disclosed SSN. Acceptable evidence of the SSN consists of:

- a. An original SSN card issued by SSA (Social Security Administration);
- b. An original SSA-issued document, which contains the name and SSN of the individual; or
- c. An original document issued by a federal, state, or local government agency, which contains the name and SSN of the individual

## ATTACHMENT H

All applicants and participants, including each member of the household (with the exception of those individuals noted above in section B.) are required to disclose his/her assigned SSN.

The SSA issues three types of Social Security cards depending on an individual's citizen or noncitizen status and whether or not a noncitizen is authorized by the Department of Homeland Security (DHS) to work in the United States. They include:

- a. The first type of card shows the individual's name and SSN only. This is the card most people have and reflects the fact that the holder can work in the U.S. without restriction. SSA issues this card to:
  - U.S. citizens; or
  - Noncitizens lawfully admitted to the United States for permanent residence and noncitizens with DHS permission to work permanently in the United States (i.e. refugees and asylees).
- b. The second type of card bears, in addition to the individual's name and SSN, the legend: "**NOT VALID FOR EMPLOYMENT**". SSA issues this card to lawful noncitizens who do not have DHS permission to work, but are required by law to provide a SSN to obtain general assistance benefits that they already have qualified for.
- c. The third type of card bears, in addition to the individual's name and SSN, the legend "**VALID FOR WORK ONLY WITH DHS AUTHORIZATION**". SSA issues this card to people with DHS permission to work temporarily in the United States.

SSA verifies all noncitizens' documents with DHS before a SSN card is issued to a noncitizen.

### D. **Rejection of Documentation:**

HAGC may reject documentation of the SSN provided by the applicant or participant for only the following reasons:

- The document is not an original document; or
- The original document has been altered, mutilated, or not legible; or
- The document appears to be a forged document (i.e. does not appear to be authentic).

HAGC will explain to the applicant or participant, the reason(s) the document is not acceptable and request the individual to obtain acceptable documentation of the SSN and submit it to HAGC within a specified time frame.

### E. **Verification of the SSN:**

## ATTACHMENT H

HAGC shall verify each disclosed SSN by:

- a. Obtaining SSN documentation (See Section C. above) from applicants and participants, including each member of the household;
- b. Making a copy of the original documentation submitted, returning it to the individual, and retaining the copy in the file folder; and
- c. Recording the SSN on line 3n of the form HUD-50058, and transmitting the form HUD-50058 to HUD within a timely manner. HAGC will transmit the form HUD-50058 within 30 calendar days of completing the form, to enable HUD to initiate its computer matching efforts. *Note: not applicable to applicants.*

HUD, via its computer matching program with the SSA, will validate the SSN (along with the individual's name and date of birth) against the SSA's database. EIV will report the status of the identity verification process as **Verified**, **Failed**, **Not Verified**, or **Deceased** on the household *Summary Report*. Below is a summary of the action HAGC will take for each identity verification status.

- a. Verified. If the information matches the SSA database, the individual's identity verification status will be **Verified**. No action is required by HAGC.
- b. Failed. If the information does not match the SSA database, the identity verification status will be **Failed**.
- c. Not Verified. If an individual's identity verification status is **Not Verified**, this means that HUD has not yet sent the tenant's personal identifiers to SSA for validation. No action is required by HAGC.
- d. Deceased. If an individual's identity verification status is **Deceased**, this means that SSA's records indicate the person is deceased. HAGC shall confirm the death with the family's head of household or listed emergency contact person. If the individual is deceased and the only household member (single member household), HAGC shall complete an End of Participation (EOP) action on form HUD-50058, and discontinue assistance and/or tenancy. If there are remaining household members, update the family composition accordingly, complete an Interim Reexamination action on form HUD-50058, and take any other action in accordance with HUD guidance and HAGC-established policies.

HAGC will retain the EIV *Summary Report* or *Income Report* in each family file as confirmation of compliance with the SSN disclosure, documentation and verification requirements.

## ATTACHMENT H

HAGC is permitted to maintain EIV reports in the tenant file for the duration of tenancy, and no longer than three years from the end of participation date. This minimizes the risk of exposing the individual's SSN.

### F. **Individuals without an assigned SSN:**

It is not uncommon for certain individuals to not have a SSA-assigned SSN. Below is a listing of such individuals, which is not all-inclusive:

- a. Newborn children (these individuals will be issued a SSN upon SSA confirmation of birth)
- b. Noncitizens lawfully present in the U.S. (these individuals will be issued a SSN upon SSA confirmation of the individual's DHS documentation or confirmation that the individual is required by law to provide a Social Security number to receive general assistance benefits that they already have qualified for)
- c. Noncitizens unlawfully present in the U.S. (these individuals cannot be assigned a SSN)

Citizens and lawfully present noncitizens, who state that they have not been assigned a SSN by the SSA, should make such declaration in writing and under penalties of perjury to HAGC. HAGC will maintain the declaration in the tenant file.

HAGC will use the Alternate ID (ALTD ID) generator within the Public and Indian Housing information Center (PIC) to generate a unique identifier for those individuals who do not have or unable to disclose a SSN.

Once an individual discloses a SSN, HAGC shall delete the ALT ID, enter the SSN on line 3n of the form HUD-50058, and transmit the form HUD-50058 to HUD within 30 calendar days of receipt of the SSN.

**Note:** An individual who has never been issued a SSN card or has lost their SSN card, may complete Form SS-5 – *Application for a Social Security Card* to request an original or replacement SSN card, or change information on his/her SSA record. The form is available online at [www.socialsecurity.gov](http://www.socialsecurity.gov), or can be obtained at the local SSA office.

### G. **Addition of a New Household Member:**

When a tenant requests to add a new household member, who is at least six year of age or under the age of six and has an assigned SSN, to the family, the tenant must disclose the assigned SSN and provide HAGC with the required documentation at the time of such request, or at the time of processing the interim or annual reexamination of family income and/or composition. If the family is unable to provide the required documentation of the SSN, HAGC may not add the new household member until the family provides such documentation.

## ATTACHMENT H

When a tenant requests to add a new household member, who is under the age of six and does not have an assigned SSN, the tenant must disclose the assigned SSN and provide HAGC with the required documentation within 90 calendar days of the child being added to the household.

If the family is unable to disclose and provide evidence of the SSN within 90 calendar days, HAGC is required to grant the family an additional 90-day period to comply with the SSN disclosure and documentation requirement, if HAGC determines the family was unable to comply with the requirements due to circumstances that could not have reasonably been foreseen and were outside the control of the family.

Examples include but are not limited to: delayed processing of SSN application by SSA, natural disaster, fire, death in family, etc.

The child is to be included as part of the assisted household and entitled to all the benefits of being a household member during the allotted time for the family to comply with the SSN disclosure and documentation requirements. HAGC shall generate an ALT ID. Upon expiration of the provided time period, if the family has not complied with the SSN disclosure and documentation requirements, HAGC must terminate the family's tenancy or assistance, or both of the entire family.

### H. **Penalties for Failure to Disclose and/or Provide Documentation of the SSN:**

In accordance with 24 CFR 5.218, the following penalties apply for noncompliance with the SSN disclosure and documentation requirements:

- a. **Applicants.** HAGC must deny the eligibility of an assistance applicant if s/he (including each member of the household required to disclose his/her SSN) does not disclose a SSN and/or provide documentation of such SSN. However, if the family is otherwise eligible to participate in the program, the family may maintain his/her position on the waiting list for ninety (90) days. If all household members have not disclosed their SSN at the time a unit becomes available, HAGC must offer the available unit to the next eligible applicant family on the waiting list.
- b. **Tenants.** HAGC must terminate the tenancy of Public Housing participants (the entire household) if s/he (including each member of the household required to disclose his/her SSN) does not disclose his/her SSN and provide the required documentation.

However, if the family is otherwise eligible for continued assistance or tenancy in the program, HAGC, at its discretion, may defer the family's termination and provide the family an opportunity to comply with the requirement within a period **not to exceed** 90 calendar days from the date HAGC determined the family noncompliant with the SSN disclosure and documentation requirement, if HAGC determines:

## ATTACHMENT H

1. The failure to meet the SSN disclosure and documentation requirements was due to circumstances that could not have been foreseen and were outside the control of the family; and
2. There is a reasonable likelihood that the family will be able to disclose the SSN and provide such documentation of the SSN by the deadline.

If the family is unable to comply with the requirements by the specified deadline, the PHA must terminate the tenancy or assistance, or both of the entire family.

### **I. Third Party Verification Requirement:**

HAGC is required to comply with admission and occupancy requirements for Public Housing under 24 CFR §960.259(c)(1) and Section 8 under 24 CFR §982.516(a)(2), which requires the Authority to obtain and document in the family/tenant file third party verification of the following factors, or document in the file why third party verification was not available: (1) reported family annual income; (2) the value of assets; (3) expenses related to deductions from annual income; and (4) other factors that affect the determination of adjusted income or income-based rent.

It is HUD's position that a SSA benefit verification letter (dated within the last 60 days of HAGC's request date for information or within the HAGC-tenant interview date) provided by the family or an EIV *Income Report* which displays the current social security benefit amount is third party verification. No additional verification is required by HAGC.

### **J. Third Party Verification of SS/SSI Benefits of Applicants and Household Members:**

EIV does not contain SS and SSI benefit information of applicants for HUD's rental assistance programs. HAGC will ask applicants to provide a copy of their SS and/or SSI benefit letter, dated within the last 60 calendar days, for each household member that receives SS and/or SSI benefits. If applicants do not have this information HAGC will help the applicant request a benefit verification letter from SSA's website, [social security online](http://socialsecurityonline), at [www.socialsecurity.gov](http://www.socialsecurity.gov) or have the applicant to request a *proof of income letter* from SSA's toll-free number (800-772-1213).

HAGC will obtain the original SSA benefit letter from the individual, make a photocopy of the document for the file and return the original document to the individual. HAGC will use the listed gross benefit amount to calculate annual income from social security benefits.

### **K. Third party verification of SS/SSI benefits of participants and household members:**

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SS/SSI benefit information for participants and household members, who have validated personal identifiers (the individual's identity verification status in EIV is *verified*, is available from HUD's online EIV system, which can be accessed by authorized HAGC staff at: [https://hudapps.hud.gov/hud\\_systems](https://hudapps.hud.gov/hud_systems).

- HAGC is required to use EIV to verify SS/SSI benefits of current participants and household members.
- HAGC will print the EIV income report and confirm with the tenant that the current listed benefit amount is correct. If the tenant agrees with the current EIV-reported amount, HAGC will use the gross benefit amount to calculate annual income from social security benefits.
- If the tenant disputes the EIV-reported benefit amount, HAGC will request the tenant to provide a current (dated within the last 60 calendar days) SSA benefit letter. If the tenant is unable to provide the requested document, HAGC will help the applicant request a benefit verification letter from SSA's website or have the applicant to request a *proof of income letter* from SSA's toll-free number (800-772-1213).
- If benefit information is not available in the EIV system, HAGC will follow the instructions under *third party verification of SS/SSI benefits of applicants and household members* (section 10).
- Photocopies of social security checks or bank statements are not acceptable forms of verification for SS/SSI benefits because the dollar amount listed may not be the gross benefit amount.

### K. Treatment of SSA Overpayment Deductions from Social Security Benefits

**SSA Overpayment Deductions.** An overpayment occurs when SSA pays an individual more than s/he should have been paid. If this happens, SSA will notify the individual and his/her designated representative payee, if applicable. Recovery of an overpayment is made by withholding the monthly Social Security check until the overpayment is paid in full (individuals receiving SS benefits), unless the individual requests a lesser withholding amount and SSA approves the request. Full withholding would start 30 days after SSA notification of the overpayment. SSA begins deducting money (for overpayment recovery) from SSI payments at least 60 days after SSA notification of the overpayment. Generally, SSA will withhold 10 percent of the maximum federal SSI benefit rate each month. However, an individual may request that less be taken from their benefit, or an individual may ask to pay back the overpayment at a rate greater than 10 percent.

Regardless of the amount withheld to repay SSA the overpayment amount, or the length of the anticipated withholding period, HAGC will use the reduced benefit amount after deducting only the amount of the overpayment withholding from the

## ATTACHMENT H

gross benefit amount. HAGC will be cognizant of the SSA-determined overpayment amount and length of time the reduced payment will occur, to ensure the family's accurate rent contribution for the duration of reduced income; however circumstances may arise affecting the end date of the withholding period, causing it to go on longer than anticipated.

### L. **How to Ensure Availability of Social Security Benefit Information in the EIV System:**

The availability of SS and SSI benefit information in the EIV system depends on HAGC's data quality and timely submission of form HUD-50058 to the PIC. HAGC will ensure that data entered in section 3 of the form HUD-50058 (i.e. household members' name, date of birth and social security number) is complete and accurate. If a family's form HUD-50058 is not successfully submitted to PIC, income information will not be available in EIV.

In accordance with 24 CFR 5.233(a)(2)(ii), HAGC is required to use EIV to reduce administrative and subsidy payment errors. As such, HAGC is required to use EIV's *Identity Verification Report* on a monthly basis to improve the availability of income information in EIV. This report contains two reports (*Failed SSA Screening Report and Failed EIV Pre-screening Report*), which can help HAGC improve the availability of income information and assist the PHA in identifying tenant personal identifiers that require correction. Following is a summary of how these reports can be beneficial to HAGC.

- **Failed SSA Screening Report:** informs HAGC of any tenant whose identity can not be confirmed by the SSA due to incorrect personal identifiers (date of birth, surname, and/or SSN) recorded in section 3 of the form HUD-50058. HAGC staff will review this report on a monthly basis, obtain appropriate documentation from the tenant, update section 3 of the form HUD-50058, accordingly, and transmit a revised form HUD-50058 into PIC.
- **Failed EIV Pre-screening Report:** informs HAGC of any tenant who has failed HUD's EIV pre-screening process due to incorrect personal identifiers (date of birth, surname, and/or SSN) or invalid form HUD-50058 transmitted (e.g. effective date of action is more than 15 months ago). HAGC staff will review this report on a monthly basis, obtain appropriate documentation from the tenant, update section 3 of the form HUD-50058, accordingly, and transmit a revised form HUD-50058 into PIC. For invalid form HUD-50058s, staff should review the error description and take appropriate action to correct the error and transmit a revised form HUD-50058 into PIC.

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HOUSING AUTHORITY OF GREENE COUNTY

SECTION 3 PLAN

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# ATTACHMENT I

## HOUSING AUTHORITY OF GREENE COUNTY

### SECTION 3 PLAN

#### 1.0 POLICY STATEMENT

It is the policy of the Housing Authority of Greene County (HAGC) to comply with the requirements of section 3 of the Housing and Urban Development Act of 1968 (12 U.S.C. 1701u) and to follow the standards and procedures established in 24 CFR Part 135 to ensure that the objectives of section 3 are met.

#### 2.0 SECTION 3 PURPOSE

The purpose of section 3 of the Housing and Urban Development Act of 1968 (12 U.S.C. 1701u) (section 3) is to ensure that employment and other economic opportunities generated by certain HUD financial assistance shall, to the greatest extent feasible, and consistent with existing Federal, State and local laws and regulations, be directed to low- and very low-income persons, particularly those who are recipients of government assistance for housing, and to business concerns which provide economic opportunities to low- and very low-income persons.

The purpose of 24 CFR Part 135 is to establish the standards and procedures to be followed to ensure that the objectives of section 3 are met.

#### 3.0 APPLICABILITY

Section 3 applies to training, employment, contracting and other economic opportunities arising from the expenditure of the following public housing assistance:

- Development assistance provided pursuant to section 5 of the U.S. Housing Act of 1937 (1937 Act)
- Operating assistance provided pursuant to section 9 of the 1937 Act
- Modernization assistance provided pursuant to section 14 of the 1937 Act.

#### 4.0 NUMERICAL GOALS

HAGC and covered contractors may demonstrate compliance with the requirements of section 3 by meeting the numerical goals set forth below. The goals apply to all section 3 covered assistance awarded to HAGC in any Federal Fiscal Year (FY).

##### 1. Employment

- Committing to employ section 3 residents for 30 percent of the aggregate number of new hires for one year period; and,

## ATTACHMENT I

### 2. Contracts

- Committing to award to section 3 business concerns at least ten percent (10%) of the total dollar amount of all section 3 covered contracts for building trades work for maintenance, repair, modernization or development of public housing, or for building trades work arising in connection with housing rehabilitation, housing construction and other public construction; and
- Committing to award to section 3 business concerns at least three percent (3%) of the total dollar amount of all other section 3 covered contracts.

Contractors may comply by one or more of the following options:

1. Employ section 3 residents for 30 percent of the aggregate number of new hires for one year period; and,
2. Subcontract or joint venture at least 10% of the total contract value with a section 3 business or resident owned business; or,
3. Contractor incurs the cost of providing skilled training for residents (10% of the total contract value for building trades, 3% for all other covered contracts); or,
4. Contractor makes a contribution to HAGC's Section 3 Resident Education/Training Fund to provide assistance to residents to obtain training (10% of the total contract value for building trades, 3% for all other covered contracts).

### **5.0 CONTRACTORS**

For section 3 covered contracts, contractors must indicate in their bid and/or proposal by which option(s) they will comply. Contractors who fail to comply will default to making a contribution to HAGC's Education/Training Fund before final contract payment is made by HAGC.

Contractors for building trades work for maintenance, repair, modernization or development of public housing, or for building trades work arising in connection with housing rehabilitation, housing construction and other public construction must breakout their bids costs by labor hours and dollar amount by trade. For construction contracts, the labor component will be that portion of the contract dedicated to labor as indicated on the Schedule of Values prior to Overhead and Profit.

### **6.0 SECTION 3 RESIDENT EDUCATION/TRAINING FUND**

HAGC is committed to providing education and training to residents and eligible participants to become gainfully employed. An escrow account titled Section 3 Resident Education/Training Fund is established to receive funds contributed by contractors that choose (or default to) this option to meet their Section 3 obligations. These funds will be kept separate from other HAGC funds and used exclusively for the training and education of Section 3 Residents.

- Contractors, subcontractors and HAGC may contribute to this account.

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- HAGC's Section 3 Coordinator is responsible for the account; all account activity is closely monitored by the Executive Director; and the account is audited annually by HAGC's independent auditor.
- Checks on the account are handled in the same manner as checks written on the general fund; two signatures are required and only persons approved by HAGC's Board of Commissioner may sign the checks.
- Eligible educational and training activities for which Section 3 Resident Education/Training Funds may be used include, but are not limited to: contract(s) with training provider(s), school tuition and fees, training materials and books, training classes, instructors and trainers, transportation to and from training, baby sitting costs while parent(s) attends training, and other costs recommended by the Section 3 Coordinator and approved by the Executive Director.
- HAGC may contract with the Illinois WorkNet Center, University of Illinois Extension Service, local schools, or other such agency to provide education and training to Section 3 Residents.
- HAGC's Maintenance Department may employ Section 3 Residents as temporary casual labor and provide them basic maintenance skills training in cleaning and painting vacant units, grass mowing and grounds care. HAGC would then have the option of contracting with the trained residents to help prepare vacant units and maintain Housing Authority grounds.

### **7.0 SECTION 3 RESPONSIBILITIES**

HAGC has the responsibility to comply with section 3 in its own operations, and ensure compliance in the operations of its contractors and subcontractors. This responsibility includes but may not be necessarily limited to:

- Implementing procedures designed to notify section 3 residents about training and employment opportunities generated by section 3 covered assistance and section 3 business concerns about contracting opportunities generated by section 3 covered assistance;
- Notifying potential contractors for section 3 covered projects of the requirements of this part, and incorporating the section 3 clause set forth in Sec. 135.38 in all solicitations and contracts.
- Facilitating the training and employment of section 3 residents and the award of contracts to section 3 business concerns by undertaking activities to reach the numerical goals set forth above (30% new hires, 10% building trades work and 3% other contracts)
- Refraining from entering into any contract with any contractor where the recipient has notice or knowledge that the contractor has been found in violation of the regulations in 24 CFR part 135.
- Documenting actions taken to comply with the requirements of this part, the results of

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actions taken and impediments, if any.

### 8.0 SECTION 3 RESIDENT PREFERENCES

#### 8.1 Preference for Section 3 Residents

**Category 1 Residents:** Residents of the housing development or developments for which the section 3 covered assistance is expended.

**Category 2 Residents:** Residents of other housing developments managed by HAGC that is expending the section 3 covered housing assistance.

**Category 3 Residents:** Participants in HUD Youthbuild programs being carried out in Greene County.

**Category 4 Residents:** Other section 3 residents.

#### 8.2 Eligibility for Preference.

A section 3 resident seeking the preference in training and employment shall certify, or submit suitable evidence to HAGC that the person is a section 3 resident.

#### 8.3 Eligibility for employment

This Section 3 Policy does not require the employment of a section 3 resident who does not meet the qualifications of the position to be filled.

### 9.0 PREFERENCE FOR SECTION 3 BUSINESS CONCERNS

#### 9.1 Preference for section 3 business concerns

Efforts shall be directed to award contracts to section 3 business concerns in the following order of priority:

**Category 1 Businesses:** Business concerns that are 51 percent or more owned by residents of the housing development or developments for which the section 3 covered assistance is expended, or whose full-time, permanent workforce includes 30 percent of these persons as employees.

**Category 2 Businesses:** Business concerns that are 51 percent or more owned by residents of other housing developments or developments managed by HAGC that is expending the section 3 covered assistance, or whose full-time, permanent workforce includes 30 percent of these persons as employees

**Category 3 Businesses:** HUD Youthbuild programs being carried out in Greene County

**Category 4 Businesses:** Business concerns that are 51 percent or more owned by section 3 residents, or whose permanent, full-time workforce includes no less than 30 percent section 3 residents, or that subcontract in excess of 25 percent of the total amount of subcontracts to Category 1 and Category 2 business concerns.

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### 9.2 Eligibility for preference

A business concern seeking to qualify for a section 3 contracting preference shall certify or submit evidence to HAGC that the business concern is a section 3 business concern as defined above.

### 9.3 Ability to complete contract

A section 3 business concern seeking a contract or a subcontract shall submit evidence to HAGC, contractor, or subcontractor (as applicable), sufficient to demonstrate to the satisfaction of the party awarding the contract that the business concern is responsible and has the ability to perform successfully under the terms and conditions of the proposed contract.

## 10.0 SECTION 3 CLAUSE

*All section 3 covered contracts shall include the following clause (referred to as the section 3 clause):*

A. The work to be performed under this contract is subject to the requirements of section 3 of the Housing and Urban Development Act of 1968, as amended, 12 U.S.C. 1701u (section 3). The purpose of section 3 is to ensure that employment and other economic opportunities generated by HUD assistance or HUD-assisted projects covered by section 3, shall, to the greatest extent feasible, be directed to low- and very low-income persons, particularly persons who are recipients of HUD assistance for housing.

B. The parties to this contract agree to comply with HUD's regulations in 24 CFR part 135, which implement section 3. As evidenced by their execution of this contract, the parties to this contract certify that they are under no contractual or other impediment that would prevent them from complying with the part 135 regulations.

C. The contractor agrees to send to each labor organization or representative of workers with which the contractor has a collective bargaining agreement or other understanding, if any, a notice advising the labor organization or workers' representative of the contractor's commitments under this section 3 clause, and will post copies of the notice in conspicuous places at the work site where both employees and applicants for training and employment positions can see the notice. The notice shall describe the section 3 preference, shall set forth minimum number and job titles subject to hire, availability of apprenticeship and training positions, the qualifications for each; and the name and location of the person(s) taking applications for each of the positions; and the anticipated date the work shall begin.

D. The contractor agrees to include this section 3 clause in every subcontract subject to compliance with regulations in 24 CFR part 135, and agrees to take appropriate action, as provided in an applicable provision of the subcontract or in this section 3 clause, upon a finding that the subcontractor is in violation of the regulations in 24 CFR part 135. The contractor will not subcontract with any subcontractor where the contractor has notice or knowledge that the subcontractor has been found in violation of the regulations in 24 CFR part 135.

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E. The contractor will certify that any vacant employment positions, including training positions, that are filled (1) after the contractor is selected but before the contract is executed, and (2) with persons other than those to whom the regulations of 24 CFR part 135 require employment opportunities to be directed, were not filled to circumvent the contractor's obligations under 24 CFR part 135.

F. Noncompliance with HUD's regulations in 24 CFR part 135 may result in sanctions, termination of this contract for default, and debarment or suspension from future HUD assisted contracts.

G. With respect to work performed in connection with section 3 covered Indian housing assistance, section 7(b) of the Indian Self-Determination and Education Assistance Act (25 U.S.C. 450e) also applies to the work to be performed under this contract. Section 7(b) requires that to the greatest extent feasible (i) preference and opportunities for training and employment shall be given to Indians, and (ii) preference in the award of contracts and subcontracts shall be given to Indian organizations and Indian-owned Economic Enterprises. Parties to this contract that are subject to the provisions of section 3 and section 7(b) agree to comply with section 3 to the maximum extent feasible, but not in derogation of compliance with section 7(b).

### **11.0 CERTIFICATIONS**

#### 11.1 Section 3 Program Participant Certification

A section 3 resident seeking the preference in training and employment shall complete the Section 3 Resident Certification form (see Attachment A of this document), or submit evidence to HAGC's Section 3 Coordinator, the recipient contractor or subcontractor that the person is a section 3 resident, as defined in 24 CFR Part 135.5. An example of evidence of eligibility for the preference is evidence of receipt of public assistance, or evidence of participation in a public assistance program.

#### 11.2 Section 3 Program Participant Certification Procedure

Any business seeking Section 3 preference in the awarding of contracts or purchase agreements with HAGC shall complete the Certification for Business Concerns Seeking Section 3 Preference in Contracting and Demonstration of Capability form, (see Attachment B of this document). The business seeking Section 3 preference must provide adequate documentation as evidence of eligibility for preference under the Section 3 Program to be accepted by HAGC as a Section 3 Business Concern.

Certifications for Section 3 preference for business concerns must be submitted to HAGC's Section 3 Coordinator in sufficient time prior to the submission of bids to allow time for review and approval. The Section 3 Coordinator shall prepare a letter of confirming certification upon approval that should be submitted along with the bid. Certifications over six (6) months old are subject to further review by HAGC.

#### 11.3 Forms

Forms may be obtained from HAGC's Section 3 Coordinator.

### **12.0 PROCUREMENT**

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### 12.1 Section 3 Business Procurement Preference

HAGC has adopted procurement procedures that provide for preference for Section 3 Business Concerns (see Appendix C of this document).

### 12.2 Resident Owned Business Procurement Policy

HAGC has adopted an Alternative Procurement Process Policy for Resident Owned Businesses (see Appendix D of this document).

## 13.0 REPORTING

Each recipient who receives directly from HUD financial assistance that is subject to the requirements of section 3 shall submit to HUD an annual report in such form and with such information as HUD may request, for the purpose of determining the effectiveness of section 3 (form HUD-60002). Where the program providing the section 3 covered assistance requires submission of an annual performance report, the section 3 report will be submitted with that annual performance report. If the program providing the section 3 covered assistance does not require an annual performance report, the section 3 report is to be submitted by January 10 of each year or within 10 days of project completion, whichever is earlier. All reports submitted to HUD in accordance with the requirements of this part will be made available to the public.

## 14.0 COMPLAINTS

In an effort to resolve complaints through an internal process, HAGC encourages submittal of such complaints to its Section 3 Coordinator as follows:

- Complaints of non-compliance should be filed in writing and must contain the name of the complainant and brief description of the alleged violation.
- Complaints must be filed within thirty (30) calendar days after the complainant becomes aware of the alleged violation.
- An investigation will be conducted if the complaint is found to be valid. The Section 3 Coordinator will conduct an informal, but thorough investigation affording all interested parties the opportunity to submit testimony and/or evidence pertinent to the complaint.
- The Section 3 Coordinator will provide written documentation detailing the findings of the investigation. HAGC will review the findings for accuracy and completeness before it is released to complainants. The findings will be made available no later than thirty (30) days after the filing of complaint.

If complainants wish to have their concerns considered outside of HAGC, a complaint may be filed with:

Assistant Secretary for Fair Housing and Equal Opportunity  
United States Department of Housing and Urban Development  
451 Seventh Street, SW  
Washington, DC 20410

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The complaint must be received not later than 180 days from the date of the action or omission upon which the complaint is based, unless the time for filing is extended by the Assistant Secretary for good cause shown.

### 15.0 DEFINITIONS

**Applicant** – Any entity which makes an application for Section 3 covered assistance, and includes, but is not limited to, any State, unit of local government, public housing agency or other public body, public or private nonprofit organization, private agency or institution, mortgagor, developer, limited dividend sponsor, builder, property manager, community housing development organization, resident management corporation, resident council, or cooperative association.

**Assistant** – the Assistant Secretary for Fair Housing and Equal Opportunity.

**Business Concern** – a business entity formed in accordance with State law, and which is licensed under State, county or municipal law to engage in the type of business activity for which it was formed.

**Contractor** - any entity which contracts to perform work generated the expenditure of Section 3 covered assistance, or for work in connection with a Section 3 covered project.

**Employment Opportunities Generated by Section 3 Covered Assistance** – all employment opportunities generated by the expenditure of Section 3 covered public assistance (i.e., operating assistance, development assistance and modernization assistance, (as described in Section 135.3 (a) (1)). With respect to Section 3 covered housing and community development assistance, this term means all employment opportunities arising in connection with Section 3 covered projects (as described in Section 135.3 (a) (2)), including management and administrative jobs. Management and administrative jobs include architectural, engineering or related professional services required to prepare plans, drawings, specifications, or work write-ups; and jobs directly related to administrative support of these activities, e.g., construction manager, relocation specialist, payroll clerk, etc.

**Housing Authority** (HA) – Public Housing Agency.

**Housing Development** – low-income housing owned, developed, or operated by public housing agencies in accordance with HUD's public housing program regulations codified in 24 CFR Chapter IX.

**HUD Youthbuild Programs** – programs that receive assistance under subtitle D of Title IV of the National Affordable Housing Act, as amended by the Housing and Community Development Act of 1992 (42 U.S.C. 12899), and provide disadvantaged youth with opportunities for employment, education, leadership development, and training in the construction or rehabilitation of housing for homeless individuals and members of low- and very low-income families.

**JTPA** – The Job Training Partnership Act (29 U.S.C. 1579 (a)).

**Low-income person** – families (including single persons) whose incomes do not exceed 80 per centum of the median income for the area, as determined by the Secretary, with adjustments for smaller and larger families, except that the Secretary may establish income ceilings higher or lower than 80 per centum of the median for the area on the basis of the Secretary's findings that such

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variations are necessary because of prevailing levels of construction costs or unusually high or low-income families.

**Metropolitan Area** – a metropolitan statistical area (MSA), as established by the Office of Management and Budget.

**HAGC** – Housing Authority of Greene County

**New Hires** – full-time employees for permanent, temporary or seasonal employment opportunities.

**Recipient** – any entity which receives Section 3 covered assistance, directly from HUD or from another recipient and includes, but is not limited to, any State unit of local government, PHA, or other public body, public or private nonprofit organization, private agency or institution, mortgagor, developer, limited dividend sponsor, builder, property manager, community housing development organization, resident management corporation, resident council, or cooperative association. Recipient also includes any successor, assignee or transferee of any such entity, but does not include any ultimate beneficiary under the HUD program to which Section 3 applies and does not include contractors.

**Section 3** – Section 3 of the Housing and Urban Development Act of 1968, as amended (12 U.S.C. 1701u).

**Section 3 Business Concern** – a business concern,

- 1) That is 51 percent or more owned by Section 3 resident; or
- 2) Whose permanent, full-time employees include persons, at least 30 percent of whom are currently Section 3 residents, or within three years of the date of first employment with the business concern were Section 3 residents; or
- 3) That provides evidence of a commitment to subcontract in excess of 25 percent of the dollar award of all subcontractors to be awarded to business concerns that meet the qualifications set forth in paragraphs 1 or 2 above.

**Section 3 Covered Assistance** –

- 1) public housing development assistance provided pursuant to Section 5 of the 1937 Act;
- 2) public housing operating assistance provided pursuant to Section 9 of the 1937 Act;
- 3) public housing modernization assistance provided pursuant to Section 14 of the 1937 Act;
- 4) assistance provided under any HUD housing or community development program that is expended for work arising in connection with housing rehabilitation, construction, or other public construction project (which includes other buildings or improvements, regardless of ownership).

**Section 3 Clause** – the contract provisions set forth in Section 135.38.

**Section 3 Covered Contracts** – a contract or subcontract (including a professional service contract) awarded by a recipient or contractor for work generated by the expenditure of Section 3 covered assistance, or for work arising in connection with a Section 3 covered project. Section 3 covered contracts do not include contracts awarded under HUD's procurement program, which are governed by the Federal Acquisition Regulation (FAR). Section 3

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covered contracts also do not include contracts for the purchase of supplies and materials. However, whenever a contract for materials includes the installation of the materials, the contract constitutes a Section 3 covered contract.

**Section 3 Covered Project** - the construction, reconstruction, conversion or rehabilitation of housing (including reduction and abatement of lead-based paint hazards), other public construction which includes buildings or improvements (regardless of ownership) assisted with housing or community development assistance.

**Section 3 Resident** – a public housing resident or an individual who resides in the metropolitan area or nonmetropolitan county in which the Section 3 covered assistance is expended and who is considered to be a low-to very low-income person.

**Subcontractor** – any entity (other than a person who is an employee of the contractor) which has a contract with a contractor to undertake a portion of the contractor's obligation for the performance of work generated by the expenditure of Section 3 covered assistance, or arising in connection with a Section 3 covered project.

**Very low-income person** – families (including single persons) whose income do not exceed 50 per centum of the median family income for the area, as determined by the Secretary with adjustments for smaller and larger families, except that the Secretary may establish income ceilings higher or lower than 50 per centum of the median for the area on the basis of the Secretary's findings that such variations are necessary because of unusually high or low family incomes.

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**ATTACHMENT A: SECTION 3 RESIDENT CERTIFICATION FORM**

**HOUSING AUTHORITY OF GREENE COUNTY**

**SECTION 3 RESIDENT CERTIFICATION FORM**

**Eligibility for Preference**

The definition of a Section 3 Resident is presented on the back of this page. A Section 3 resident seeking the preference in training and employment provided by this part shall certify, or submit evidence to the recipient contractor or subcontractor, if requested, that the person is a Section 3 resident, as defined in Section 135.5. (An example of evidence of eligibility for the preference is evidence of receipt of public assistance, or evidence of participation in a public assistance program.)

*Certification for Section 3 Resident Seeking Preference in Training and Employment*

I, \_\_\_\_\_, do hereby certify that I am a Section 3 Resident per the following marked category:

- Category 1 Residents:** Residents of the housing development or developments for which the Section 3 covered assistance is expended.
- Category 2 Residents:** Residents of other housing developments managed by the Housing Authority of Greene County
- Category 3 Residents:** Participants in HUD Youthbuild programs being carried out in Greene County.
- Category 4 Residents:** Other Section 3 residents.

My permanent address is: \_\_\_\_\_

I have attached the following documentation as evidence of my status:

- Copy of lease
- Copy of receipt of public assistance
- Copy of Evidence of participation in a public assistance program
- Other evidence

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

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**DEFINITION OF A SECTION 3 RESIDENT**

All Housing Authority of Greene County residents qualify as Section 3 residents.

Additionally, individuals residing in Greene County who meet the income limits set forth below can also qualify for Section 3 Resident status.

A picture identification card and proof of current residency is required.

**Eligibility Guideline**

<b>Number in Household</b>	<b>Very Low Income</b>	<b>Low Income</b>
1 individual		
2 individuals		
3 individuals		
4 individuals		
5 individuals		
6 individuals		
7 individuals		
8 individuals		

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**ATTACHMENT B: SECTION 3 BUSINESS CERTIFICATION FORM**

**CERTIFICATION FOR BUSINESS CONCERNS SEEKING SECTION 3 PREFERENCE IN CONTRACTING AND DEMONSTRATION OF CAPABILITY**

Name of Business \_\_\_\_\_

Address of Business \_\_\_\_\_

Type of Business:       Corporation               Partnership  
                                  Sole Proprietorship       Joint Venture

Attached is the following documentation as evidence of status:

**For Business claiming status as a Section 3 resident-owned enterprise:**

- Copy of resident lease
- Copy of receipt of public assistance
- Copy of evidence of participation in a public assistance program
- Other evidence

**For business entity as applicable:**

- Copy of Articles of Incorporation
- Certificate of Good Standing
- Assumed Business Name Certificate
- Partnership Agreement
- List of owners/stockholders and % ownership of each
- Corporation Annual Report
- Organization chart with names and titles and brief function statement
- Latest Board minutes appointing officers
- Additional documentation

**For business claiming Section 3 status by subcontracting 25 percent of the dollar awarded to qualified Section 3 business:**

- List of subcontracted Section 3 business(es) and subcontract amount

**For business claiming Section 3 status, claiming at least 30 percent of their workforce are currently Section 3 residents or were Section 3 eligible residents within 3 years of date of first employment with the business:**

- List of all current full-time employees
- List of employees claiming Section 3 status
- PHA/IHA Residential lease less than 3 years from day of employment
- Other evidence of Section 3 status less than 3 years from date of employment

Evidence of ability to perform successfully under the terms and conditions of the proposed contract:

- Current financial statement
- Statement of ability to comply with public policy
- List of owned equipment
- List of all contracts for the past two years

\_\_\_\_\_  
Authorizing Name and Signature

(Corporate Seal)

Attested by: \_\_\_\_\_

**ATTACHMENT C: SECTION 3 BUSINESS PROCUREMENT PREFERENCE**

**PROCUREMENT PROCEDURES THAT PROVIDE FOR PREFERENCE FOR SECTION 3 BUSINESS CONCERNS**

This Housing Authority of Greene County document provides specific procedures that may be followed by recipients and contractors (collectively, referred to as the "contracting party") for implementing the section 3 contracting preference for each of the competitive procurement methods authorized in 24 CFR 85.36(d).

**1.0 Small Purchase Procedures**

For section 3 covered contracts aggregating no more than \$100,000, small purchase procedures may be utilized. Under small purchase procedures, HAGC shall obtain a reasonable number of quotes (preferably three); however, for purchases of less than \$2,000, also known as Micro Purchases, only one quote is required provided the quote is considered reasonable.

**1.1 Solicitation**

Quotations may be solicited by telephone, letter or other informal procedure provided that the manner of solicitation provides for participation by a reasonable number of competitive sources. At the time of solicitation, the parties shall be informed of:

- the section 3 covered contract to be awarded with sufficient specificity;
- the time within which quotations must be submitted; and
- the information that must be submitted with each quotation.

If the method described in the above paragraph is utilized, there shall be an attempt to obtain quotations from a minimum of three qualified sources in order to promote competition. Fewer than three quotations are acceptable when the contracting party has attempted, but has been unable, to obtain a sufficient number of competitive quotations. In unusual circumstances, the contracting party may accept the sole quotation received in response to a solicitation provided the price is reasonable. In all cases, the contracting party shall document the circumstances when it has been unable to obtain at least three quotations.

**1.2 Award**

Where the section 3 covered contract is to be awarded based upon the lowest price, the contract shall be awarded to the qualified section 3 business concern with the lowest responsive quotation, if it is reasonable and no more than 10 percent higher than the quotation of the lowest responsive quotation from any qualified source. If no responsive quotation by a qualified section 3 business concern is within 10 percent of the lowest responsive quotation from any qualified source, the award shall be made to the source with the lowest quotation.

Where the section 3 covered contract is to be awarded based on factors other than price, a request for quotations shall be issued by developing the particulars of the solicitation, including a

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rating system for the assignment of points to evaluate the merits of each quotation. The solicitation shall identify all factors to be considered, including price or cost. The rating system shall provide for a range of 15 to 25 percent of the total number of available rating points to be set aside for the provision of preference for section 3 business concerns. The contract shall be awarded to the responsible firm whose quotation is the most advantageous, considering price and all other factors specified in the rating system.

**2.0 Procurement by sealed bids (Invitations for Bids)**

Sealed bidding shall be used for all contracts that exceed the small purchase threshold. Preference in the award of section 3 covered contracts that are awarded under a sealed bid (IFB) process may be provided as follows:

Bids shall be solicited from all businesses (section 3 business concerns, and non-section 3 business concerns). An award shall be made to the qualified section 3 business concern with the highest priority ranking and with the lowest responsive bid if that bid....

- (A) is within the maximum total contract price established in the contracting party's budget for the specific project for which bids are being taken, and
- (B) is not more than "X" higher than the total bid price of the lowest responsive bid from any responsible bidder. "X" is determined as follows:

-----  
 -----

x=lesser of:

When the lowest responsive bid is less than \$100,000. 10% of that bid or \$9,000.

When the lowest responsive bid is:  
At least \$100,000, but less than \$200,000. 9% of that bid, or \$16,000.

At least \$200,000, but less than \$300,000. 8% of that bid, or \$21,000.

At least \$300,000, but less than \$400,000. 7% of that bid, or \$24,000.

At least \$400,000, but less than \$500,000. 6% of that bid, or \$25,000.

At least \$500,000, but less than \$1 million. 5% of that bid, or \$40,000.

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At least \$1 million, but less than \$2 million.	4% of that bid, or \$60,000.
At least \$2 million, but less than \$4 million.	3% of that bid, or \$80,000.
At least \$4 million, but less than \$7 million.	2% of that bid, or \$105,000.
\$7 million or more responsive bid, with no dollar limit.	1\1/2\% of the lowest

---

If no responsive bid by a section 3 business concern meets the requirements of this section, the contract shall be awarded to a responsible bidder with the lowest responsive bid.

**3.0 Procurement under the competitive proposals method of procurement (Request for Proposals (RFP)).**

For contracts and subcontracts awarded under the competitive proposals method of procurement (24 CFR 85.36(d)(3)), a Request for Proposals (RFP) shall identify all evaluation factors (and their relative importance) to be used to rate proposals.

One of the evaluation factors shall address both the preference for section 3 business concerns and the acceptability of the strategy for meeting the greatest extent feasible requirement (section 3 strategy), as disclosed in proposals submitted by all business concerns (section 3 and non-section 3 business concerns). This factor shall provide for a range of 15 to 25 percent of the total number of available points to be set aside for the evaluation of these two components.

The component of this evaluation factor designed to address the preference for section 3 business concerns shall establish a preference for these business concerns in the order of priority ranking as described in 24 CFR 135.36.

With respect to the second component (the acceptability of the section 3 strategy), the RFP shall require the disclosure of the contractor's section 3 strategy to comply with the section 3 training and employment preference, or contracting preference, or both, if applicable. A determination of the contractor's responsibility will include the submission of an acceptable section 3 strategy. The contract award shall be made to the responsible firm (either section 3 or non-section 3 business concern) whose proposal is determined most advantageous, considering price and all other factors specified in the RFP.

**ATTACHMENT D: RESIDENT OWNED BUSINESS PROCUREMENT POLICY**

**ALTERNATIVE PROCUREMENT PROCESS POLICY  
FOR  
RESIDENT OWNED BUSINESS**

**1.0 Authority for policy**

Alternative Procurement Process for Resident Owned Business is defined in 24CFR Part 963 – Public Housing – Contracting with Resident Owned Businesses

**2.0 Eligibility**

To be eligible, a resident owned business must meet the following requirements and must submit evidence of fact to the Housing Authority of Greene County.

- Legally formed business as evidenced by Secretary of State certificate or city/county business license
- Resident Owned business as evidenced by disclosure of all business owners, officers and investors. The business shall submit such evidence as required by the Authority that the owners, officers and investors identified as public housing residents currently reside in public housing within Greene County. The business must be 51% or more owned by a Housing Authority of Greene County public housing resident to qualify.
- Capable of Handling the Contract. The business shall submit sufficient evidence, to the satisfaction of the Authority, that the business has the ability to successfully fulfill the contract requirements in a timely manner.
- Total Contract Amounts under the Alternative Procurement Process Policy. The business shall submit a certification as to the total number of contracts and total dollar amounts awarded and received under the Alternative Procurement Process.

**3.0 Limitations on Alternative Procurement Contract Awards**

A resident owned business is not eligible to participate in the Alternative Procurement Process if the business has received under this process one or more contracts with a total combined dollar value of \$1,000,000.

**4.0 Procurement Limited to Resident Owned Business**

The Housing Authority of Greene County’s Board of Commissioners must approve what, if any, services or contracts will be subject to procurement under the Alternative Procurement Process for Resident Owned Business. Typical services and contracts may include, but are not limited to: vacancy prep, routine cleaning, painting, mowing, snow removal, etc.

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### **5.0 Independent Cost Estimate**

An award shall not be made to a resident owned business if the contract amount exceeds the independent cost estimate required by 24CFR 85.36 (f) and the price normally paid by the Authority for comparable services.

### **6.0 Procurement Process**

With the exception of limiting the procurement to resident owned businesses, the Housing Authority of Greene County shall follow all other Housing Authority procurement policies, procedures and requirements when contracting with a resident owned business. Resident owned businesses qualify as Section 3 business concerns and are covered by the Housing Authority's procurement procedures that provide for preference for section 3 business concerns.

### **7.0 Record Keeping**

In addition to the record keeping requirements imposed by 24CFR 85.36 (i), the Authority shall also maintain the following records:

- Direct mailings to residents advertising for price quotes, proposals, bids, etc
- Resident owned business responses
- Response evaluations
- Basis for contract award
- Independent cost estimate
- Proof of eligibility
- Resident Owned Business Certificate of contract awards under Alternative Procurement Process
- Contract award document

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### **ATTACHMENT E: SECTION 3 CONSTRUCTION BID DOCUMENTS**

The following documents shall be included in the bidding documents for all HAGC sealed bid construction projects.

1. The Section 3 Clause – Article 10.0 of the HAGC Section 3 Plan (24 CFR part 135.38)
2. Article 4.0 – Numerical Goals, of the HAGC Section 3 Plan
3. Article 5.0 – Contractors, of the HAGC Section 3 Plan
4. Article 2.0 of the Procurement Procedures that Provide Preference for Section 3 Business Concerns – Attachment C of the HAGC Section 3 Plan
5. Attachment F: Section 3 Utilization Plan – (including Schedule A and the Schedule A Labor Survey Table)
6. A modified Bid Form that provides a space for the Bidder to identify which Option(s) they will be using to meet their Section 3 obligations and the value of labor of the contract.

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**ATTACHMENT F: SECTION 3 UTILIZATION PLAN**

*Business Opportunities and Employment Training of the Housing Authority of Greene County Public Housing Residents and Low and Very Low Income Neighborhood Residents*

Name of Prime Contractor: \_\_\_\_\_

Address: \_\_\_\_\_

Title of Project: \_\_\_\_\_

Project #: \_\_\_\_\_

**Please check the Option(s) that describe your contracting efforts:**

- Option 1: Our firm is a Section 3 Business
- Option 2: Subcontract with Section 3 Business(es) \_\_\_\_\_%
- Option 3: Hire Section 3 residents/participants \_\_\_\_\_%
- Option 4: I have a training program in place and am willing to train \_\_\_\_\_ residents \_\_\_\_\_%
- Option 5: Contribute to the HAGC training/educational fund for resident training \_\_\_\_\_%

You may comply by choosing one or all options. Remember your compliance must be equal to 100%, or any remaining percentages will be deducted from payouts and placed in the HAGC` Resident Training/Educational Fund.

In the event I am awarded the contract, I have the option to submit my check in the compliance amount at the start of contract date, or allow HAGC to deduct prorated payments from my draw requests. (Compliance amount is based upon the labor dollars of the contract award.)

**Fill in the blanks/boxes for the Option(s) to be used to meet the Section 3 Obligations for this project.**

**Option #1**

**Indicate the type of Section 3 Business your firms is certified for:**

Attach copy of HAGC Certification and a copy of Schedule A with Article I completed.

- Category 1: 51% or more owned by residents of the housing development for which work is performed, or full-time, permanent workforce includes 30% resident employees.
- Category 2: 51% or more owned by residents of the Authority's housing development(s) other than where work is performed, or full-time, permanent workforce includes 30% resident employees.
- Category 3: HUD Youthbuild program being carried out in Greene County.
- Category 4: Business concern that is 51% owned by a Section 3 resident(s), or whose permanent, full-time workforce includes no less that 30% Section 3 residents, or that subcontracts in excess of 25% of the total amount of subcontracts to Section 3 business concerns on this project.

ATTACHMENT I

**Option #2**

The Contractor has identified \_\_\_\_\_ Section 3 resident owned business(es), or \_\_\_\_\_ business(es) which employ 30% or more Section 3 residents to comply with \_\_\_\_\_% of its Section 3 obligations covered under Contract#\_\_\_\_\_. Attach a copy of Schedule A with Article II completed.

**Option #3**

The Contractor hereby agrees to comply with all the provisions of Section 3 as set forth in 24 CFR 135.1 et seq. and the Section 3 Plan for the Housing Authority of Greene County (HAGC). The Contractor hereby submits Schedule A of the Section 3 Opportunities Plan to identify employment opportunities for the \_\_\_\_\_ public housing residents and low and very low-income area residents, during the term of the contract between the Contractor and HAGC. The Contractor affirms that the jobs identified shall be for meaningful employment that may or may not be related to the scope of services covered under Contract #\_\_\_\_\_. The Contractor has committed to employ the following in order to comply with \_\_\_\_\_% of its Section 3 obligations. Attach a copy of Schedule A with Article I completed.

**Option #4**

The Contractor hereby acknowledges that it has a training program in place and will train \_\_\_\_\_ residents in order to comply with \_\_\_\_\_% of its Section 3 obligations. Attached to this document should be a written description on company letterhead of the training program and an explanation of the method used to determine the value of this training.

**Option #5**

The Contractor hereby agrees to contribute \$\_\_\_\_\_to the HAGC Training/Educational Fund to comply with \_\_\_\_\_% of its Section 3 obligations.

***The failure of the contractor to comply with the above-approved plan shall be a material breach of the contract.***

Contractor's Signature:

\_\_\_\_\_

Title:\_\_\_\_\_

Date:\_\_\_\_\_

ATTACHMENT I

**Schedule A – Section 3 Utilization Plan**

Name of Prime Contractor:

\_\_\_\_\_

Address:

\_\_\_\_\_

\_\_\_\_\_

Title of Project:

\_\_\_\_\_

Project #:

\_\_\_\_\_

The Contractor hereby agrees to comply with all the provisions of Section 3 as set forth in 24 CFR 135.38 implementing Section 3 requirements. The contractor hereby submits this Schedule A as a component of its Section 3 Opportunities Plan.

**Article I** (To be completed if using Option #1, #2 or #3)

The Contractor shall provide a status report identifying its progress in meeting the Section 3 goals established in this Section A on a quarterly basis throughout the contract period. The quarterly status report shall be submitted no later than 10 days after the end of each calendar quarter of the contract (e.g., April 10 for calendar quarter January 1 to March 31). The status report shall be in at least the same level of detail as the approved Schedule A. For any goal not met, the report shall identify any other economic opportunities, which the contractor has provided, or intend to provide to HAGC and neighborhood residents.

The failure of the Contractor to comply with the approved plan shall be a material breach of the contract.

Each Bidder/Proposer for a construction or labor related contract must complete this Schedule A and submit all relevant information required herein. A prime contractor may satisfy the HAGC Resident Hiring Requirements through its' subcontractors. Please complete the Labor Survey Table as follows:

- 1) indicate each category of employment for all phases of this contract;
- 2) the number of positions which will be needed in each category;
- 3) Total hours for each category expected throughout the project;
- 4) how many of those positions are currently filled:
  - (a) the number of persons currently on the payroll;
  - (b) the number filled by HAGC residents;
  
- 5) Indicate your goal for the number of positions you intend to fill with:
  - (a) HAGC residents
  - (b) Low and Very low income area residents.

ATTACHMENT I

NOTE: The minimum of trainees is that which can reasonably be utilized in each occupation, and no less than the number established by the U.S. Secretary of Labor for construction and non-construction labor related occupations. The contractor shall fill all vacant positions with low-income persons (earning less than 80% of the median income in Greene County and these positions shall not be filled immediately prior to undertaking work in order to circumvent regulations as set forth at 24 C.F.R. Part 135 et seq; as amended.

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Contractor Signature

---

Title

---

Date



**HOUSING AUTHORITY OF GREENE COUNTY**

**PROCUREMENT PROCEDURES THAT PROVIDE FOR PREFERENCE FOR  
SECTION 3 BUSINESS CONCERNS**

This Housing Authority of Greene County document provides specific procedures that may be followed by recipients and contractors (collectively, referred to as the "contracting party") for implementing the section 3 contracting preference for each of the competitive procurement methods authorized in 24 CFR 85.36(d).

**1.0 Small Purchase Procedures**

For section 3 covered contracts aggregating no more than \$100,000, small purchase procedures may be utilized. Under small purchase procedures, HAGC shall obtain a reasonable number of quotes (preferably three); however, for purchases of less than \$2,000, also known as Micro Purchases, only one quote is required provided the quote is considered reasonable.

**1.1 Solicitation**

Quotations may be solicited by telephone, letter or other informal procedure provided that the manner of solicitation provides for participation by a reasonable number of competitive sources. At the time of solicitation, the parties shall be informed of:

- the section 3 covered contract to be awarded with sufficient specificity;
- the time within which quotations must be submitted; and
- the information that must be submitted with each quotation.

If the method described in the above paragraph is utilized, there shall be an attempt to obtain quotations from a minimum of three qualified sources in order to promote competition. Fewer than three quotations are acceptable when the contracting party has attempted, but has been unable, to obtain a sufficient number of competitive quotations. In unusual circumstances, the contracting party may accept the sole quotation received in response to a solicitation provided the price is reasonable. In all cases, the contracting party shall document the circumstances when it has been unable to obtain at least three quotations.

**1.2 Award**

Where the section 3 covered contract is to be awarded based upon the lowest price, the contract shall be awarded to the qualified section 3 business concern with the lowest responsive quotation, if it is reasonable and no more than 10 percent higher than the quotation of the lowest responsive quotation from any qualified source. If no responsive quotation by a qualified section 3 business concern is within 10 percent of the lowest

ATTACHMENT J

responsive quotation from any qualified source, the award shall be made to the source with the lowest quotation.

Where the section 3 covered contract is to be awarded based on factors other than price, a request for quotations shall be issued by developing the particulars of the solicitation, including a rating system for the assignment of points to evaluate the merits of each quotation. The solicitation shall identify all factors to be considered, including price or cost. The rating system shall provide for a range of 15 to 25 percent of the total number of available rating points to be set aside for the provision of preference for section 3 business concerns. The contract shall be awarded to the responsible firm whose quotation is the most advantageous, considering price and all other factors specified in the rating system.

**2.0 Procurement by sealed bids (Invitations for Bids)**

Sealed bidding shall be used for all contracts that exceed the small purchase threshold. Preference in the award of section 3 covered contracts that are awarded under a sealed bid (IFB) process may be provided as follows:

Bids shall be solicited from all businesses (section 3 business concerns, and non-section 3 business concerns). An award shall be made to the qualified section 3 business concern with the highest priority ranking and with the lowest responsive bid if that bid....

(A) is within the maximum total contract price established in the contracting party's budget for the specific project for which bids are being taken, and

(B) is not more than "X" higher than the total bid price of the lowest

-----  
responsive bid from any responsible bidder. "X" is determined as follows:

x=lesser of:  
-----

When the lowest responsive bid is less than \$100,000. 10% of that bid or \$9,000.

When the lowest responsive bid is:  
At least \$100,000, but less than \$200,000. 9% of that bid, or \$16,000.

At least \$200,000, but less than \$300,000. 8% of that bid, or \$21,000.

ATTACHMENT J

At least \$300,000, but less than \$400,000.	7% of that bid, or \$24,000.
At least \$400,000, but less than \$500,000.	6% of that bid, or \$25,000.
At least \$500,000, but less than \$1 million.	5% of that bid, or \$40,000.
At least \$1 million, but less than \$2 million.	4% of that bid, or \$60,000.
At least \$2 million, but less than \$4 million.	3% of that bid, or \$80,000.
At least \$4 million, but less than \$7 million.	2% of that bid, or \$105,000.
\$7 million or more responsive bid, with no dollar limit.	1 1/2% of the lowest

---

If no responsive bid by a section 3 business concern meets the requirements of this section, the contract shall be awarded to a responsible bidder with the lowest responsive bid.

**3.0 Procurement under the competitive proposals method of procurement (Request for Proposals (RFP)).**

For contracts and subcontracts awarded under the competitive proposals method of procurement (24 CFR 85.36(d)(3)), a Request for Proposals (RFP) shall identify all evaluation factors (and their relative importance) to be used to rate proposals.

One of the evaluation factors shall address both the preference for section 3 business concerns and the acceptability of the strategy for meeting the greatest extent feasible requirement (section 3 strategy), as disclosed in proposals submitted by all business concerns (section 3 and non-section 3 business concerns). This factor shall provide for a range of 15 to 25 percent of the total number of available points to be set aside for the evaluation of these two components.

The component of this evaluation factor designed to address the preference for section 3 business concerns shall establish a preference for these business concerns in the order of priority ranking as described in 24 CFR 135.36.

## ATTACHMENT J

With respect to the second component (the acceptability of the section 3 strategy), the RFP shall require the disclosure of the contractor's section 3 strategy to comply with the section 3 training and employment preference, or contracting preference, or both, if applicable. A determination of the contractor's responsibility will include the submission of an acceptable section 3 strategy. The contract award shall be made to the responsible firm (either section 3 or non-section 3 business concern) whose proposal is determined most advantageous, considering price and all other factors specified in the RFP.

**HOUSING AUTHORITY OF GREENE COUNTY**  
**CHANGES TO LEASE**

*The following Section was removed from Section 4 Payments and Charges Due Under the Lease, B. Late Fee:*

“If the Tenant is delinquent three (3) times, in any twelve (12) month period, Tenant shall be determined to be in repeated violation of the terms of this Lease. In such an event, HAGC will consider the repeated violation to be a breach of a condition of this Lease and the Tenant will be given fourteen (14) days to vacate the Dwelling Unit.”

*The following Section was modified to include cannabis since cannabis is not considered a controlled substance in Illinois:*

**8. TENANT OBLIGATIONS**

**L.** The Tenant, any member of the household, a guest, or another person under their control shall not engage in:

- (a) Any criminal activity that threatens the health, safety, or right to peaceful enjoyment of HAGC's public housing premises by other Tenants or employees of HAGC; or
- (b) Any drug-related criminal activity on or off such premises. Any criminal activity in violation of the preceding sentence shall be cause for termination of this Lease and eviction from the Dwelling Unit.

For purposes of this Lease, the term "drug-related criminal activity" means the illegal manufacture, sale, distribution, use or possession with intent to manufacture, sell, distribute, or use, of a controlled substance (as defined in section 102 of the Controlled Substances Act (21 U.S.C. section 802)) **and cannabis;**

ATTACHMENT K

*The following Section was modified to use the same language as HAGC's Grievance Procedure:*

**14. GRIEVANCE PROCEDURE**

All disputes concerning the obligations of the Tenant or HAGC under this Lease, other than any criminal activity that threatens the health, safety, or right to peaceful enjoyment of the premises of other residents or employees of HAGC, or any drug-related criminal activity on or near such premises, shall be resolved in accordance with the HAGC Grievance Procedure which is in effect at the time such grievance or appeal arises, and a copy of which is posted in the HAGC central management office and is incorporated in this Lease by reference.

<b>Violence Against Women Act Required Statement PHA 5-year and Annual Plan</b>	<b>For FY: Amended FY 2010</b>
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**ATTACHMENT L**

**5-year Plan Requirements**

Identify the PHA’s goals, objectives, policies, or programs that will enable the housing authority to serve the needs of child and adult victims of domestic violence, dating violence, sexual assault, or stalking as required by the Violence Against Women Act of 2005. Include a report on the progress the PHA has made in meeting the goals and objectives described in the previous 5-Year Plan.

The following section was added to the Housing Authority of Greene County’s Admission and Continued Occupancy by Board Resolution on January 9, 2007.

**8.6 PROTECTION OF VICTIMS OF DOMESTIC VIOLENCE**

Incidents of domestic violence, dating violence, or stalking shall not be good cause for denying victims access to or termination from the Public Housing Program or for terminating a lease held by a victim of such violence.

Within fourteen days upon request by the Authority, victims of domestic violence, dating violence, or stalking must certify via a HUD approved certification form their status as victims and that the incident in question was a bona fide incident of domestic violence, dating violence, or stalking by presenting appropriate documentation to the Authority. The fourteen day timetable may be extended by the Authority.

Victims of domestic violence, dating violence, or stalking may satisfy the certification requirements by:

- Providing documentation signed by an employee, agent, or volunteer of a victim service provider, an attorney, or a medical professional, from whom the victim has sought assistance in addressing domestic violence, dating violence, or stalking or the effects of the abuse, in which the professional attests under penalty of perjury (28 U.S.C. 1746) to the professional’s belief that the incidents in question are bona fide incidents of abuse, and the victim has signed or attested to the documentation; or,
- Producing a Federal, State, tribal, territorial, or local police or court record.

At its discretion the Authority may provide benefits to a victim of domestic violence, dating violence, or stalking based solely on the victim’s statement or other corroborating evidence.

Nothing prevents a victim who has committed a crime or violated a lease from being evicted.

**Annual Plan Requirements**

**Section I: Services:**

Activities, services, or programs provided or offered, either directly or in partnership with other service providers, to child and adult victims of domestic violence, dating violence, sexual assault or stalking including, but not limited to the following:

	Yes	No
1. The PHA coordinates with local community organizations, listed below: <ul style="list-style-type: none"> <li>• Oasis Women’s Center</li> <li>• Sexual Assault Services Center</li> <li>• Land of Lincoln Legal Assistance Foundation</li> <li>• Tri-County Counseling</li> <li>• Greene County Health Department</li> <li>• Illinois Department of Human Services</li> </ul>	X	
2. The PHA has developed a referral system for victims of domestic violence, dating violence, sexual assault, or stalking. <ul style="list-style-type: none"> <li>• Referrals are handled through the Authority’s FSS Coordinator</li> </ul>	X	
3. The PHA provides social services and/or case management to victims. Explain below: <ul style="list-style-type: none"> <li>• The Authority’s FSS Coordinator provides case management and coordinates social services</li> </ul>	X	
4. The PHA provides training to its staff on VAWA’s housing provisions and/or the dynamics of domestic violence, dating violence, sexual assault or stalking. Include dates and topics of trainings: <ul style="list-style-type: none"> <li>• June 18, 2009 VAWA All-Staff Training</li> </ul>	X	
5. Please list any other activities, services or programs offered (referrals for court and legal services, job training, on-site programs, etc.): <ul style="list-style-type: none"> <li>• The Authority’s FSS Coordinator is the Authority’s contact person for all related VAWA questions, problems and situations</li> <li>• The FSS Coordinator provides case management and referral services and coordinates victim’s needs with local social services agencies</li> </ul>	X	

<ul style="list-style-type: none"> <li>The FSS Coordinator also conducts VAWA in-service training to other Authority employees as instructed by the Executive Director</li> </ul>		
<b>Section II: Obtaining and Maintaining Housing</b> Activities, services or programs provided or offered that help child or adult victims of domestic violence, dating violence, sexual assault, or stalking to obtain or maintain housing, including, but not limited to, the following:		
1. The PHA provides transitional housing programs for victims of domestic violence, dating violence, sexual assault, or stalking. <ul style="list-style-type: none"> <li>The Authority does not provide transitional housing; however, the Authority’s FSS Coordinator works closely with Oasis Women’s Center and Sexual Assault Services Center to provide this service.</li> </ul>		X
2. The PHA has established a preference category for victims of domestic violence, dating violence, sexual assault, or stalking. Explain below:		X
3. The PHA has developed an emergency transfer policy for victims of domestic violence, dating violence, sexual assault or stalking living in public housing.	X	
4. The PHA has developed a policy for the bifurcation of leases and/or rental assistance in public and Section 8 housing.	X	
5. The PHA has developed a policy for porting vouchers before the end of a lease term for victims of domestic violence, dating violence, sexual assault, or stalking. N/A	N/A	
6. If the PHA requires certification, the PHA has established a written procedure for verification of status as a victim of domestic violence, dating violence, sexual assault, or stalking in public and Section 8 housing.	N/A	
7. Please list any other activities, services or programs offered: (e.g. separate wait lists for victims or set aside programs).		
<b>Section III: Prevention and Safety Enhancement</b> Activities, services or programs provided or offered to prevent domestic violence, dating violence, sexual assault, and stalking, or to enhance victim safety in assisted families, including but not limited to:		
1. The PHA maintains all information related to an individual’s status as a victim of domestic violence, dating violence, sexual assault, or stalking as confidential, and will only disclose this information as required by law. Explain measures taken to ensure confidentiality.	X	
2. If the PHA has its own police or security officers, the PHA has policies that allow the PHA to enforce protection orders.	N/A	
3. The PHA has information on domestic violence, dating violence, sexual assault, or stalking available to tenants and coordinates with local service providers to prepare prevention programs for tenants.	X	
4. The PHA has notified all public housing tenants, Section 8 tenants, and Section 8 landlords of VAWA’s housing protections. Explain how notice is provided. <ul style="list-style-type: none"> <li>Residents receive information at Lease signing and sign an acknowledgement</li> <li>Information is routinely included in the Resident Newsletter</li> </ul>	X	
5. Please list any other activities, services or programs offered: (e.g. increased security measures, lock changes, cameras, etc.) <ul style="list-style-type: none"> <li>Lock changes</li> <li>Coordination with local Police</li> <li>Personal follow-up by the FSS Coordinator</li> </ul>	X	



Housing Authority of Greene County  
325 N. Carr Street

P.O. Box 336

White Hall, IL 62092

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May 18, 2010

Mr. Steven Meiss

Director of Public Housing

Housing and Urban Development Chicago Office, Region V

77 West Jackson Blvd

Chicago, IL 60604

RE: CARBON MONOXIDE CERTIFICATION

Dear Mr. Meiss:

The Housing Authority of Greene County (HAGC) hereby certifies it installed approved smoke and carbon monoxide detectors with alarms in all public housing dwelling units before January 1, 2007 and has properly maintained the units since installation. HAGC provides applicants and residents with information about the Illinois Carbon Monoxide Alarm Detector Act. At move-in HAGC provides detailed information about the detection and alarm unit installed in the dwelling unit.

If you have any questions please give me a call.

Sincerely,



Randell Hutchens  
Executive Director

**HOUSING AUTHORITY OF GREENE COUNTY**

**FY 2011 Housing Agency Plan Waiting List Analysis**

Development	White					Elderly					Family					Disabled				
	2009		2010		% Diff	2009		2010		% Diff	2009		2010		% Diff	2009		2010		% Diff
	#	%	#	%		#	%	#	%		#	%	#	%		#	%	#	%	
IL72-1 Carr Street	33	100.00%	27	100.00%	0.0%	4	12.12%	4	14.81%	-2.7%	27	81.82%	14	51.85%	29.97%	2	6.06%	9	33.33%	-27.27%
IL72-1 Tunison Ave	14	100.00%	9	100.00%	0.0%	0	0.00%	0	0.00%	0.0%	13	92.86%	6	66.67%	26.19%	1	7.14%	3	33.33%	-26.19%
IL72-2 Greenfield	5	100.00%	4	100.00%	0.0%	2	40.00%	0	0.00%	40.0%	3	60.00%	3	75.00%	-15.00%	0	0.00%	1	25.00%	-25.00%
IL72-3 Glen Rowe	20	100.00%	15	100.00%	0.0%	3	15.00%	1	6.67%	8.3%	16	80.00%	10	66.67%	13.33%	1	5.00%	4	26.67%	-21.67%
IL72-4 Park Dr	4	100.00%	13	100.00%	0.0%	2	50.00%	5	38.46%	11.5%	1	25.00%	3	23.08%	1.92%	1	25.00%	5	38.46%	-13.46%
IL72-4 Prather	3	100.00%	3	100.00%	0.0%	3	100.00%	1	33.33%	66.7%	0	0.00%	1	33.33%	-33.33%	0	0.00%	1	33.33%	-33.33%
IL72-4 Lincoln	10	100.00%	16	100.00%	0.0%	6	60.00%	6	37.50%	22.5%	1	10.00%	1	6.25%	3.75%	3	30.00%	9	56.25%	-26.25%
IL72-5 Kane	2	100.00%	0	100.00%	0.0%	2	100.00%	0	0.00%	0.0%	0	0.00%	0	0.00%	0.00%	0	0.00%	0	0.00%	0.00%
IL72-6 Eldred	3	100.00%	4	100.00%	0.0%	2	66.67%	1	25.00%	41.7%	1	33.33%	2	50.00%	-16.67%	0	0.00%	1	25.00%	-25.00%
IL72-7 9 <sup>th</sup> & Maple	2	100.00%	11	100.00%	0.0%	1	50.00%	4	36.36%	13.6%	0	0.00%	2	18.18%	-18.18%	1	50.00%	5	45.45%	4.55%

## Attachment O

### HOUSING AUTHORITY OF GREENE COUNTY IL072

**(6) Deconcentration and Income Mixing**

- a.  Yes  No: Does the PHA have any general occupancy (family) public housing developments covered by the deconcentration rule? If no, this section is complete. If yes, continue to the next question.
- b.  Yes  No: Do any of these covered developments have average incomes above or below 85% to 115% of the average incomes of all such developments? If no, this section is complete.

If yes, list these developments as follows:

Deconcentration Policy for Covered Developments			
Development Name:	Number of Units	Explanation (if any) [see step 4 at §903.2(c)(1)(iv)]	Deconcentration policy (if no explanation) [see step 5 at §903.2(c)(1)(v)]
Elred	10	Below 85%	Waiting list skipping
9th & Maple	20	Above 115%	Waiting list skipping

**Analysis:**

Property Number	Property	Total Income	# Occupied Units	Average Income	Below 85%	Above 115%
IL 72-1A	325 N. Carr Street, White Hall, IL 62092	\$385,811	40	\$9,645		
L72-4A	Lincoln Drive, White Hall, IL 62092	\$221,062	20	\$11,053		
IL72-1B	135 Tunison Avenue, White Hall, IL 62092	\$211,993	20	\$10,600		
IL72-3	302 Glen Rowe Court, Roodhouse, IL 62082	\$281,332	32	\$8,792		
IL 72-4B	Prather Drive, Roodhouse, IL 62082	\$115,069	10	\$11,507		
IL72-2	130 Prairie Street, Greenfield, IL 62044	\$171,298	18	\$9,517		
IL72-7	615 9th Street, Carrollton, IL 62016	\$236,330	20	\$11,817		<b>X</b>
IL72-4C	Park Drive, Carrollton, IL 62016	\$226,017	20	\$11,301		
IL72-5	111 West Street, Kane, IL 62054	\$96,072	10	\$9,607		
IL72-6	Elm Street, Eldred, IL 62027	\$82,302	10	\$8,230	<b>X</b>	
	Authority Wide	\$2,027,286	200	\$10,136		
	85% of Authority Wide Average			\$8,616		
	115% of Authority Wide Average			\$11,657		

ATTACHMENT P

HOUSING AUTHORITY OF GREENE COUNTY

RESIDENT ADVISORY BOARD COMMENTS AND CHALLENGED ELEMENTS

AMENDED FY 2010 AGENCY PLAN

RESIDENT ADVISORY BOARD COMMENTS

The PHA Plan was developed in conjunction with the Resident Advisory Board therefore their input, especially regarding work item priorities, was incorporated as the PHA Plan was developed.

CHALLENGED ELEMENTS

None

## ATTACHMENT Q

### HOUSING AUTHORITY OF GREENE COUNTY

#### BUY AMERICAN AMENDMENT TO PROCURMENT POLICY

October 13, 2009

This amendment to the Housing Authority of Greene County's (HAGC) Procurement Policy incorporates the Buy American requirement imposed by section 1605 of Title XVI of the American Recovery and Reinvestment Act of 2009 (Pub. L. 111-5) (the Recovery Act) for the Public Housing Capital Fund Recovery Formula and Competition (CFRFC) Grant Programs within the Office of Public and Indian Housing (PIH).

The Recovery Act imposes a Buy American requirement on Recovery Act funding. Specifically, section 1605 (the "Buy American requirement") of the Recovery Act states that none of the funds appropriated or otherwise made available by this Act may be used for a project for the construction, alteration, maintenance, or repair of a public building or public work unless all of the iron, steel, and manufactured goods used in the project are produced in the United States except for specific limited circumstances.

Where the Buy American requirement applies, HAGC shall implement the Buy American requirement by placing a provision requiring compliance with the Buy American requirement in all applicable contracts using Public Housing CFRFC grant assistance, unless HUD approved exceptions apply. Buy American contract language and a certification that HAGC shall require from a contractor or bidder is attached.

## ATTACHMENT Q

### HOUSING AUTHORITY OF GREENE COUNTY

#### BUY AMERICAN CONTRACT LANGUAGE

The Contractor acknowledges to and for the benefit of the Housing Authority of Greene County (HAGC) and HUD that it understands the goods and services under this Agreement are being funded with monies made available by the American Reinvestment and Recovery Act of 2009 (Recovery Act) (or are being made available for a project being funded with monies made available by the Recovery Act) and section 1605 of such law contains provisions commonly known as "Buy American." The Buy American requirement prohibits the use of Recovery Act funds on any project for the construction, alteration, maintenance, or repair of a public building or work unless all of the iron, steel, and manufactured goods used in the project are produced in the United States ("Buy American Requirement") including iron, steel, and manufactured goods provided by the Contractor pursuant to this Agreement. The Contractor hereby represents and warrants to and for the benefit of HAGC and HUD that (a) the Contractor has reviewed and understands the Buy American Requirement, (b) all of the iron, steel, and manufactured goods used in the project will be and/or have been produced in the United States in a manner that complies with the Buy American Requirement, unless an exception of the requirement is approved, and (c) the Contractor will provide any further verified information, certification or assurance of compliance with this paragraph, or information necessary to support an exception of the Buy American Requirement, as may be requested by HAGC or HUD. Notwithstanding any other provision of this Agreement, any failure to comply with this paragraph by the Contractor shall permit HAGC to recover as damages against the Contractor any loss, expense or cost (including without limitation attorney's fees) incurred by HAGC resulting from any such failure (including without limitation any impairment or loss of funding, whether in whole or in part from HUD). Neither this paragraph (nor any provision of this Agreement necessary to give this paragraph force or effect) shall be amended or waived without the prior written consent of HUD.

ATTACHMENT Q

**HOUSING AUTHORITY OF GREENE COUNTY  
CONTRACTOR OR BIDDER CERTIFICATION**

**Identification of American- made Iron, Steel, and Manufactured Goods:** Consistent with the terms of the Housing Authority of Greene County's (HAGC) bid solicitation and the provisions of Section 1605 of the Recovery Act, the Bidder certifies that this bid reflects the Bidder's best, good faith effort to identify the bid solicitation where such American-made components are available on the schedule and consistent with the deadlines prescribed in or required by the bid solicitation.

**Verification of U.S. Production:** The Bidder certifies that all components contained in the bid solicitation that are American- made have been so identified, and if this bid is accepted, the Bidder agrees that it will provide reasonable, sufficient, and timely verification to HAGC of the U.S. production of each component so identified.

**Documentation Regarding Non-American- made Iron, Steel, or Manufactured Goods:** The Bidder certifies that for any component or components that are not American-made and are so identified in this bid, the Bidder has included in or attached to this bid one or both of the following, as applicable:

1. Identification of and citation to a national (categorical) exception published by HUD (or another Federal agency) in the Federal Register that is applicable to such component or components, and an analysis that supports its applicability to the component or components;
2. Verifiable documentation sufficient HAGC, as required in the bid solicitation or otherwise, that the Bidder has sought to secure American-made components but has determined that such components are not available on schedule and consistent with the deadlines prescribed in the bid solicitation, with assurance adequate from the Bidder under applicable conditions stated in the bid solicitation or otherwise.

**Information and Detailed Justification Regarding Non-American-made Iron, Steel, or Manufactured Goods:** The Bidder certifies that for any such component or components that are not so available, the Bidder has also provided in or attached to this bid information, including but not limited to the verifiable documentation and a full description of the bidder's efforts to secure any such American-made component or components, that the Bidder believes are sufficient to provide and as far as possible constitute the detailed justification required for an exception under section 1605 with respect to such component or components. The Bidder further agrees that, if this bid accepted, it will assist HAGC in amending, supplementing or further supporting such information as required by HAGC to request and, as applicable, implement the terms of an exception with respect to any such component or components.

BIDDER/CONTRACTOR: \_\_\_\_\_

NAME; \_\_\_\_\_ TITLE: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_