

WATERTOWN HOUSING AUTHORITY (MA093)

RESUBMITTED FY 2010 AGENCY PLAN

WITH VAWA STATEMENT AS ATTACHMENT 6

JANUARY 28, 2010



8.0	<b>Capital Improvements.</b> Please complete Parts 8.1 through 8.3, as applicable.
8.1	<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.  See Attachments 1, 2, 3, Electronic Files "MA093a01,...a02,...a03"
8.2	<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.  See Attachment 4, Electronic File "MA093a04"
8.3	<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. N/A
9.0	<b>Housing Needs.</b> 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.  Given the lack of census data since the 2000 census, the overall needs have not changed much since the last Five-Year Plan and the current information on the housing needs of the low-income, very low-income, and extremely low-income families, 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 is on file. The difficult economic climate has affected many particularly at the low-income end of the spectrum and the WHA is working with local agencies to mitigate some of the most severe problems such as homelessness.

9.1	<b>Strategy for Addressing Housing Needs.</b> 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.  Some of the WHA's strategies to address its housing needs are as follows:  <ol style="list-style-type: none"> <li>1. Employ effective maintenance and management policies to minimize the number of public housing units off-line;</li> <li>2. Reduce turnover time for vacated public housing units;</li> <li>3. Reduce time to renovate public housing units;</li> <li>4. Maintain or increase section 8 lease-up rates by establishing payment standards that will enable families to rent throughout the jurisdiction;</li> <li>5. Undertake measures to ensure access to affordable housing among families assisted by the PHA, regardless of unit size required;</li> <li>6. Maintain or increase section 8 lease-up rates by marketing the program to owners, particularly those outside of areas of minority and poverty concentration;</li> <li>7. Maintain or increase section 8 lease-up rates by effectively screening Section 8 applicants to increase owner acceptance of program; and</li> <li>8. Participate in the Consolidated Plan development process to ensure coordination with broader community strategies.</li> </ol>
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	<p><b>Additional Information.</b> Describe the following, as well as any additional information HUD has requested.</p> <p>(a) Progress in Meeting Mission and Goals. Provide a brief statement of the PHA's progress in meeting the mission and goals described in the 5-Year Plan.</p> <p>Some highlights of the WHA's progress in meeting its missions and goals are as follows: It has maintained its high performer status in both PHAS (one year it did receive a "89" PHAS score) and SEMAP. It has received a \$3.75 million HUD Category 2 CFRC grant for the public housing transformation and rehabilitation of the 100 Warren St. development. Additionally, during the past 5 years, the WHA has joined the statewide Section 8 waiting list to facilitate equal housing opportunity and has worked diligently with local agencies on homelessness.</p> <p>(b) Significant Amendment and Substantial Deviation/Modification. Provide the PHA's definition of "significant amendment" and "substantial deviation/modification"</p> <p><b>10.0 The Watertown Housing Authority (WHA) considers one or more of the following to be a <i>Substantial Deviation</i> or <i>Significant Amendment/Modification</i> to an already submitted Agency Plan:</b></p> <ol style="list-style-type: none"> <li>1. Discretionary changes in rent determination or waiting list preferences.</li> <li>2. A decision to undertake an Elderly/Disabled Designated Housing Plan (DHP).</li> <li>3. A change in any open Annual Capital Fund Program (CFP) that modifies or changes the work items by greater than 20% of the total grant amount.</li> <li>4. Establishment of new and/or substantively revised policies and procedures that have not previously been submitted as part of the current or previous years' Agency Plans.</li> <li>5. Any other substantive activities undertaken that have a major affect on resident households (e.g., the conversion of public housing units to Section 8 vouchers).</li> </ol> <p>In the case where there is a <i>Substantial Deviation</i> or <i>Significant Amendment/Modification</i> to an already submitted Agency Plan, the WHA will:</p> <ol style="list-style-type: none"> <li>a. Consult with the Resident Advisory Board.</li> <li>b. Review consistency of the change with the Consolidated Plan.</li> <li>c. Allow a 45-day public review period of the amendments, modifications, and deviations.</li> <li>d. After the public review period, conduct an open meeting for Board approval of the amendments, modifications, and deviations.</li> <li>e. Resubmit the Agency Plan to HUD with the amendments, modifications, and deviations.</li> </ol>
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<p><b>11.0</b></p>	<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> <ol style="list-style-type: none"> <li>(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)</li> <li>(b) Form HUD-50070, <i>Certification for a Drug-Free Workplace</i> (PHAs receiving CFP grants only)</li> <li>(c) Form HUD-50071, <i>Certification of Payments to Influence Federal Transactions</i> (PHAs receiving CFP grants only)</li> <li>(d) Form SF-LLL, <i>Disclosure of Lobbying Activities</i> (PHAs receiving CFP grants only)</li> <li>(e) Form SF-LLL-A, <i>Disclosure of Lobbying Activities Continuation Sheet</i> (PHAs receiving CFP grants only)</li> <li>(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.</li> <li>(g) Challenged Elements</li> <li>(h) Form HUD-50075.1, <i>Capital Fund Program Annual Statement/Performance and Evaluation Report</i> (PHAs receiving CFP grants only)</li> <li>(i) Form HUD-50075.2, <i>Capital Fund Program Five-Year Action Plan</i> (PHAs receiving CFP grants only)</li> </ol>
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**ATTACHMENTS**

- 1: MA093A01 = FY 2010 \$70,979 ANNUAL CFP FOR REGULAR FORMULA GRANT, HUD-50075.1
- 2: MA093A02 = FY 2009 \$83,572 CFP STIMULUS FORMULA GRANT, HUD-50075.1
- 3: MA093A03 = FY 2009 \$3,750,000 CFRC CATEGORY 2 GRANT, HUD-50075.1
- 4: MA093A04 = FY 2010-2014 FIVE-YEAR CFP, HUD-50075.2
5. MA093A05 = WHA RESPONSE TO RAB/PUBLIC HEARING COMMENTS

ATTACHMENT 1: MA093A01

FY 2010 \$70,979 ANNUAL CFP FOR REGULAR FORMULA GRANT, HUD-50075.1

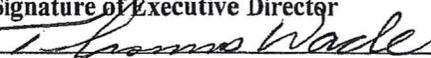
**Part I: Summary**

<b>PHA Name: Watertown, MA</b>	<b>Grant Type and Number</b> Capital Fund Program Grant No: MA06P09350110 (Regular CFP Formula Grant) Replacement Housing Factor Grant No: Date of CFFP:	<b>FFY of Grant: 2010</b> <b>FFY of Grant Approval: 2010</b>
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**Type of Grant**  
 **Original Annual Statement**       **Reserve for Disasters/Emergencies**  
 **Performance and Evaluation Report for Period Ending:**       **Revised Annual Statement (revision no: )**  
 **Final Performance and Evaluation Report**

Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost <sup>1</sup>	
		Original	Revised <sup>2</sup>	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) <sup>3</sup>	\$70,979			
3	1408 Management Improvements				
4	1410 Administration (may not exceed 10% of line 21)				
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs				
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures				
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment				
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities <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.

Part I: Summary						
PHA Name: Watertown, MA		Grant Type and Number Capital Fund Program Grant No: MA06P09350110 (Regular CFP Formula Grant ) Replacement Housing Factor Grant No: Date of CFFP:			FFY of Grant:2010 FFY of Grant Approval: 2010	
Type of Grant						
<input checked="" type="checkbox"/> Original Annual Statement		<input type="checkbox"/> Reserve for Disasters/Emergencies		<input type="checkbox"/> Revised Annual Statement (revision no: )		
<input type="checkbox"/> Performance and Evaluation Report for Period Ending:				<input type="checkbox"/> Final Performance and Evaluation Report		
Line	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)	\$70,979				
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		
		11/03/2009				

<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 2: MA093A02  
FY 2009 \$83,572 CFP STIMULUS FORMULA GRANT, HUD-50075.1

**Part I: Summary**

PHA Name: Watertown, MA	<b>Grant Type and Number</b> Capital Fund Program Grant No: MA06S09350109 (Stimulus CFP Formula Grant) Replacement Housing Factor Grant No: Date of CFFP:	FFY of Grant: 2009 FFY of Grant Approval: 2009
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**Type of Grant**

- Original Annual Statement     
  Reserve for Disasters/Emergencies     
  Revised Annual Statement **(Revision No:1)**  
 Performance and Evaluation Report for Period Ending:     
  Final Performance and Evaluation Report

Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost <sup>1</sup>	
		Original	Revised <sup>2</sup>	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) <sup>3</sup>				
3	1408 Management Improvements				
4	1410 Administration (may not exceed 10% of line 21)				
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	\$0	\$83,572		
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	\$83,572	\$0		
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.

<b>Part I: Summary</b>						
PHA Name: Watertown, MA		Grant Type and Number Capital Fund Program Grant No: MA06S09350109 (Stimulus CFP Formula Grant ) Replacement Housing Factor Grant No: Date of CFFP:			FFY of Grant:2009 FFY of Grant Approval: 2009	
Type of Grant <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input checked="" type="checkbox"/> Revised Annual Statement ( <b>Revision No:1</b> ) <input type="checkbox"/> Performance and Evaluation Report for Period Ending: <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)	\$83,572	\$83,572			
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 <i>Thomas Wade</i>			Date 11/03/2009		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.

<b>Part II: Supporting Pages</b>								
PHA Name: Watertown, MA		Grant Type and Number MA06S09350109 (Stimulus CFP Formula Grant) Capital Fund Program Grant No: CFFP (Yes/No): No Replacement Housing Factor Grant No:			Federal FFY of Grant: 2009			
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised <sup>1</sup>	Funds Obligated <sup>2</sup>	Funds Expended <sup>2</sup>	
MA 93-1	Rehab/Construction	1460	LS	\$83,572	\$0			
MA 93-1	A&E Fees for Rehab/Construction	1430	LS	\$0	\$83,572			

<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.



ATTACHMENT 3: MA093A03  
FY 2009 \$3,750,000 CFRC CATEGORY 2 GRANT, HUD-50075.1

<b>Part I: Summary</b>		
PHA Name: Watertown, MA	Grant Type and Number Capital Fund Program Grant No: CFRC MA09300000109T (CFRC Category 2 Grant) Replacement Housing Factor Grant No: Date of CFFP:	FFY of Grant: 2009 FFY of Grant Approval: 2009

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

Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost <sup>1</sup>	
		Original	Revised <sup>2</sup>	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) <sup>3</sup>				
3	1408 Management Improvements				
4	1410 Administration (may not exceed 10% of line 21)	\$20,000 WHA \$20,000 Consultant			
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	\$165,000 A&E \$83,200 Clerk			
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	\$3,357,800			
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	\$104,000			
17	1499 Development Activities <sup>4</sup>				

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

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

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

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

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

U.S. Department of Housing and Urban Development

Office of Public and Indian Housing  
 OMB No. 2577-0226  
 Expires 4/30/2011

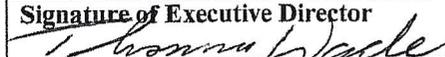
<b>Part I: Summary</b>	
PHA Name: Watertown, MA	Grant Type and Number Capital Fund Program Grant No: CFRC MA09300000109T (CFRC Category 2 Grant) Replacement Housing Factor Grant No: Date of CFFP:
FFY of Grant: 2009 FFY of Grant Approval: 2009	

Type of Grant

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

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

Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost <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)	\$3,750,000			
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 11/03/2009	Signature of Public Housing Director	Date
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<sup>1</sup> To be completed for the Performance and Evaluation Report.  
<sup>2</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.  
<sup>3</sup> PHAs with under 250 units in management may use 100% of CFP Grants for operations.  
<sup>4</sup> RHF funds shall be included here.

<b>Part II: Supporting Pages</b>								
PHA Name: Watertown, MA			<b>Grant Type and Number</b> Capital Fund Program Grant No: CFRC MA09300000109T (CFRC Category 2 Grant) CFFP (Yes/ No): No Replacement Housing Factor Grant No:			<b>Federal FFY of Grant: 2009</b>		
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>	
MA 93-1	WHA Admin	1410	LS	\$20,000				
MA 93-1	Consultant Assistance with ARRA Reporting and Project Admin	1410	LS	\$20,000				
MA 93-1	A&E Fees	1430	Contract Fee	\$165,000				
MA 93-1	Clerk of the Works	1430	Estimated Fee	\$83,200				
MA 93-1	Rehab/Public Housing Transformation Construction Costs	1460	Bid Estimate	\$3,357,800				
MA 93-1	Relocation Costs	1495.1	Estimated Costs	\$104,000				

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

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



ATTACHMENT 4: MA093A04  
FY 2010-2014 FIVE-YEAR CFP, HUD-50075.2

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

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

<b>Part I: Summary</b>						
PHA Name/Number Watertown/MA93			Locality (City/County & State) MA		<input checked="" type="checkbox"/> Original 5-Year Plan	<input type="checkbox"/> Revision No:
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				
C.	Management Improvements					
D.	PHA-Wide Non-dwelling Structures and Equipment					
E.	Administration					
F.	Other					
G.	Operations		\$70,979	\$70,979	\$70,979	\$70,979
H.	Demolition					
I.	Development					
J.	Capital Fund Financing – Debt Service					
K.	Total CFP Funds					
L.	Total Non-CFP Funds					
M.	Grand Total		\$70,979	\$70,979	\$70,979	\$70,979







<b>Part III: Supporting Pages – Management Needs Work Statement(s)</b>				
Work Statement for Year 1 FFY	Work Statement for Year _____ FFY		Work Statement for Year: _____ FFY	
	Development Number/Name General Description of Major Work Categories	Estimated Cost	Development Number/Name General Description of Major Work Categories	Estimated Cost
See Annual Statement	Not Applicable			
	Subtotal of Estimated Cost	\$	Subtotal of Estimated Cost	\$

ATTACHMENT 5: MA093A05  
WHA RESPONSE TO RAB/PUBLIC HEARING COMMENTS

## WHA RESPONSE TO RAB/PUBLIC HEARING COMMENTS

During the RAB and Public Hearing processes for the FY 2010 Annual and Five-Year Agency Plan there were many positive comments, mostly concerning the \$3.75 million ARRA award under Competitive Stimulus Grants, Category 2: Public Housing Transformation.

**However, there was one request by a tenant to consider the following:**

***Exclude any income paid for Child Support from rent calculation in both the Public Housing and Section 8 Programs where the payer of the support has joint legal custody of the children.***

### **WHA RESPONSE**

The WHA is in the process of researching this request. Absent any prohibition by HUD or other untenable effects of implementing this recommendation, the WHA intends to adopt this "income exclusion" effective with the approval of the FY 2010 Agency Plan.

**The WHA will consider adopting the state's public housing program language regarding this exclusion, which reads as follows:**

**Child support, separate support, and/or alimony paid under court order or court approved agreement by a household member for the support of a minor child, spouse, or ex-spouse, not residing with the household, provided that the total amount deducted for this deduction and other the deductions for this household member shall not exceed his or her gross income.**

ATTACHMENT 6: MA093A06  
VAWA STATEMENT

## Violence Against Women Act (VAWA) Statement

In describing its activities, services, or programs related to the Violence Against Women Act (VAWA), the Watertown Housing Authority (WHA) will do the following:

- (1) The WHA will send a NOTICE to all Public Housing Residents, Section 8 Voucher Holders, and Section 8 Landlords, informing them of the VAWA and its provisions. Additionally, the Resident and Voucher Holder Notice will inform them of their rights under the VAWA to avoid eviction and any other punitive action when activities covered under the Act have occurred.
- (2) The WHA will establish of a list of service providers, which are available to provide services to “victims” as covered and defined by VAWA. The WHA will provide this list to any resident requesting information and/or service.
- (3) The WHA will provide some limited in-house counseling and referral services related to VAWA by a licensed Social Worker on staff.
- (4) The WHA will prominently display posters and flyers related to VAWA in WHA offices. Pamphlets and other written materials relating to VAWA and domestic violence (such as those produced by the Watertown Police Department) will be made available to anyone interested.