

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
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1.0	PHA Information PHA Name: <u>Iron Mountain Housing Commission</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>01/01/2010</u> PHA Code: <u>MI013</u>												
2.0	Inventory (based on ACC units at time of FY beginning in 1.0 above) Number of PH units: <u>102</u> Number of HCV units: <u>0</u>												
3.0	Submission Type <input type="checkbox"/> 5-Year and Annual Plan <input type="checkbox"/> Annual Plan Only <input checked="" type="checkbox"/> 5-Year Plan Only												
4.0	PHA Consortia <input type="checkbox"/> PHA Consortia: (Check box if submitting a joint Plan and complete table below.)												
	Participating PHAs	PHA Code	Program(s) Included in the Consortia	Programs Not in the Consortia	No. of Units in Each Program <table border="1"> <tr> <th>PH</th> <th>HCV</th> </tr> <tr> <td>PHA 1:</td> <td></td> </tr> <tr> <td>PHA 2:</td> <td></td> </tr> <tr> <td>PHA 3:</td> <td></td> </tr> </table>	PH	HCV	PHA 1:		PHA 2:		PHA 3:	
PH	HCV												
PHA 1:													
PHA 2:													
PHA 3:													
5.0	5-Year Plan. Complete items 5.1 and 5.2 only at 5-Year Plan update.												
5.1	Mission. State the PHA's Mission for serving the needs of low-income, very low-income, and extremely low income families in the PHA's jurisdiction for the next five years: The mission of the Iron Mountain Housing Commission is to promote adequate, affordable housing and a suitable living environment for the families we serve without discrimination,												
5.2	Goals and Objectives. 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. Goals & Objectives: Improve the quality of assisted housing for our tenants by renovation and modernization of our public housing units, Provide an improved living environment by maintaining our current housing stock and neighborhoods, and ensuring equal opportunity in housing for all Americans. The Iron Mountain Housing Commission is continuing in meeting our goals by constant modernization in our housing property. In the last 5 years we have winterized our 20 family units with new doors, windows, insulation and siding. In our high rise buildings we have replaced all our old appliances with energy efficient appliances, installed new carpeting, kitchen cabinets, sinks, energy efficient shower heads and faucets, improved lighting and currently are enhancing our parking at Washington Court. The Iron Mountain Housing Commission is diligently focusing on maintaining a wait list with eligible applicants for move in. Attachment – HUD Form 50066 VAWA (mi013g03)– also, attachment (mi013h03) statement on policies and procedures.												

6.0	<p>PHA Plan Update</p> <p>(a) Identify all PHA Plan elements that have been revised by the PHA since its last Annual Plan submission:</p> <ol style="list-style-type: none"> 1. Eligibility, Selection and Admissions Policies, including Deconcentration and Wait List Procedures: No Change 2. Financial Resources: The only addition to Financial resources has been the ARRA 2009 Grant. We anticipate no non federal funding. 3. Rent Determination: No change 4. Operations and Management: Pet Policy – Changed to include a per month charge for pets. In accordance with Notice PIH 2009-12(HA) the Housing Commission has revised its Procurement Policy solely for the purposes of the American Recovery and Reinvestment Act of 2009 5. Grievance Procedures: no change 6. Designated Housing for Elderly and Disabled Families: no change 7. Community Service and Self-Sufficiency: Addition to ACOP for the Community Service requirement of eight(8) hours per month. 8. Safety and Crime Prevention: Washington Court and Hulst Manor are monitored by security cameras and have a 24-hour lockout controlled by telephone admittance. The City Police Department regularly monitors the family housing. We also encourage all tenants to report violations and acts that are unlawful and the Iron Mountain Housing Commission aggressively investigates any complaints or concerns. 9. Pets: change in Pet Policy and ACOP regarding a per month charge for pets. 10. Civil Rights Certification: No change The Iron Mountain Housing Commission has never encountered any civil rights complaints and complies with title VI of the Civil Rights Act of 1964, the Fair Housing Act, section 504 of the rehabilitation Act of 1973, and title II of the Americans with Disabilities Act of 1990 11. Fiscal Year Audit: The Iron Mountain Housing Commission has completed its 2008 Fiscal year audit and there were no findings or comments. 12. Asset Management: The Iron Mountain Housing Commission has complied with the Stop Loss requirements. We were not approved for year 1 due to a mailing issue that has still not been resolved. The IMHC closely monitors our budgets, utility consumption levels, and vacancy rates. We are operating within reasonable costs in accordance with project accounting. We maintain supporting systems to monitor all project level performance and incorporate this information into its decision making process. 13: Violence Against Women Act (VAWA): We have adopted the VAWA policy as prescribed by HUD and closely works with various local agencies to immediately house victims of domestic violence, dating violence, sexual assault, or stalking. <p>(b) Identify the specific location(s) where the public may obtain copies of the 5-Year and Annual PHA Plan. For a complete list of PHA Plan elements, see Section 6.0 of the instructions. The 5 year and annual plan are available for public inspection. Copies may be obtained at the central office of the Iron Mountain Housing Commission, 401 East “D” Street, Iron Mountain, MI 49801 The IMHC also works closely with their Resident Advisory Boards and they are provided with copies as well.</p>
7.0	<p>Hope VI, Mixed Finance Modernization or Development, Demolition and/or Disposition, Conversion of Public Housing, Homeownership Programs, and Project-based Vouchers. <i>Include statements related to these programs as applicable.</i></p> <p>Line item 7.0 a – f are non applicable to the Iron Mountain Housing Commission</p>
8.0	<p>Capital Improvements. Please complete Parts 8.1 through 8.3, as applicable.</p>
8.1	<p>Capital Fund Program Annual Statement/Performance and Evaluation Report. As part of the PHA 5-Year and Annual Plan, annually complete and submit the <i>Capital Fund Program Annual Statement/Performance and Evaluation Report</i>, form HUD-50075.1, for each current and open CFP grant and CFFP financing.</p> <p>See Attachments: Mi013a03 – 2007 CFP Mi013b03 – 2008 CFP Mi013c03 – 2009 ARRA/CFP Mi013d03 – 2009 CFP Mi013e03 – 2010 Annual Statement</p>
8.2	<p>Capital Fund Program Five-Year Action Plan. 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> <p>See Attachment Mi013f03 – 2010 5 year plan</p>
8.3	<p>Capital Fund Financing Program (CFFP).</p> <p><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>
9.0	<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.</p> <p>The Iron Mountain Housing Commission needs for the low income, very low income and extremely low income have increased due to economic times that we are currently in. The unemployment rate is high and has affected many families. We have had mill closures and other mid sized business close. Without our public housing many families would be homeless. The private rental stock in our area is extremely high priced and private landlords are now starting to lose their inventory. The private housing that is available in most instances are in need of repair and are extremely costly in regards to utilities due to poor insulation and non efficient energy heating and cooling. We face on a daily basis the need for affordable family housing. We receive a minimum of 3 applications per week for family units. (2 Bedrooms and up) Our vacancy rates have remained extremely low in the past year and a half due to the increased needs. Our lease up time is also lower than usual due to the wait list that we maintain.</p>

9.1	<p>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.</p> <p>The Iron Mountain Housing Commission will continue to maintain affordable, safe housing for our community. We will continue to work closely with the local agencies that assist our client base. We will continue to lobby HUD for additional funding to maintain the housing stock that we currently have.</p>
10.0	<p>Additional Information. 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>The Iron Mountain Housing Commission has made every attempt to attain progress in meeting the mission and goals described in the 5-year plan and we will continue to make every possible attempt to meet the mission and goals as described in the plan as funding becomes available.</p> <p>(b) Significant Amendment and Substantial Deviation/Modification. Provide the PHA’s definition of “significant amendment” and “substantial deviation/modification”</p> <p>The Iron Mountain Housing Commission in submitting the 5-Year and Annual Plan does hereby state that since the submittal of the last 5-Year Plan and Annual Plan, that no Significant Amendments and Substantial Deviation/Modification has been made. For purposes of this submittal the Iron Mountain Housing Commission’s definition of “significant amendment” and “substantial deviation/modification” as an action on the part of the PHA Governing Board that would have a major impact on the lives of the residents of the Iron Mountain Housing Commission.</p>
11.0	<p>Required Submission for HUD Field Office Review. In addition to the PHA Plan template (HUD-50075), PHAs must submit the following documents. Items (a) through (g) may be submitted with signature by mail or electronically with scanned signatures, but electronic submission is encouraged. Items (h) through (i) must be attached electronically with the PHA Plan. Note: Faxed copies of these documents will not be accepted by the Field Office.</p> <p>(a) Form HUD-50077, <i>PHA Certifications of Compliance with the PHA Plans and Related Regulations</i> (which includes all certifications relating to Civil Rights)</p> <p>(b) Form HUD-50070, <i>Certification for a Drug-Free Workplace</i> (PHAs receiving CFP grants only)</p> <p>(c) Form HUD-50071, <i>Certification of Payments to Influence Federal Transactions</i> (PHAs receiving CFP grants only)</p> <p>(d) Form SF-LLL, <i>Disclosure of Lobbying Activities</i> (PHAs receiving CFP grants only)</p> <p>(e) Form SF-LLL-A, <i>Disclosure of Lobbying Activities Continuation Sheet</i> (PHAs receiving CFP grants only)</p> <p>(f) Resident Advisory Board (RAB) comments. Comments received from the RAB must be submitted by the PHA as an attachment to the PHA Plan. PHAs must also include a narrative describing their analysis of the recommendations and the decisions made on these recommendations. NO COMMENTS WERE RECEIVED FROM THE RESIDENT ADVISORY BOARD</p> <p>(g) Challenged Elements NO ELEMENTS OF THE PLAN WERE CHALLENGED.</p> <p>(h) Form HUD-50075.1, <i>Capital Fund Program Annual Statement/Performance and Evaluation Report</i> (PHAs receiving CFP grants only)</p> <p>(i) Form HUD-50075.2, <i>Capital Fund Program Five-Year Action Plan</i> (PHAs receiving CFP grants only)</p> <p>REQUIRED FORMS SUBMITTED TO FIELD OFFICE BY UNITED STATES POSTAL SERVICE (USPS), POSTMARKED 10.13.2009</p>

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
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.

Annual Statement of 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

M10132007

Part I: Summary
 PHA Name: Iron Mountain Housing
 Commission

Grant Type and Number
 Capital Fund Program Grant No: M133P01350107
 Replacement Housing Factor Grant No:
 Date of CFFP:

FFY of Grant: 2007
 FFY of Grant Approval: 2007

Type of Grant
 Original Annual Statement
 Performance and Evaluation Report for Period Ending: 09/30/2009
 Reserve for Disasters/Emergencies

Revised Annual Statement (revision no:2)
 Final Performance and Evaluation Report

Line	Summary by Development Account	Original	Total Estimated Cost		Obligated	Total Actual Cost ¹	
			Revised ²	Final Performance and Evaluation Report		Expended	
1	Total non-CFP Funds						
2	1406 Operations (may not exceed 20% of line 21) ³						
3	1408 Management Improvements						
4	1410 Administration (may not exceed 10% of line 21)						
5	1411 Audit						
6	1415 Liquidated Damages						
7	1430 Fees and Costs						
8	1440 Site Acquisition		12760.00		12760.00		11654.18
9	1450 Site Improvement						
10	1460 Dwelling Structures		102099.00		102099.00		74699.78
11	1465.1 Dwelling Equipment—Nonexpendable						
12	1470 Non-dwelling Structures						
13	1475 Non-dwelling Equipment		4506.00		4506.00		0.00
14	1485 Demolition						
15	1492 Moving to Work Demonstration						
16	1495.1 Relocation Costs						
17	1499 Development Activities ⁴						

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

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

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

Part I: Summary		FFY of Grant: 2007	
PHA Name: Iron Mountain Housing Commission	Grant Type and Number Capital Fund Program Grant No: M133901350107 Replacement Housing Factor Grant No: Date of CFFP:	FFY of Grant Approval: 2007	

Type of Grant
 Original Annual Statement
 Reserve for Disasters/Emergencies
 Revised Annual Statement (revision no:)
 Performance and Evaluation Report for Period Ending: 09/30/2009
 Final Performance and Evaluation Report

Line	Summary by Development Account	Original	Total Estimated Cost	Revised ²	Obligated	Total Actual Cost ¹	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)	119365.00				86683.96	
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>SPK Ballard Shaete</i>		Date 10.08.2009		Signature of Public Housing Director		Date	

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

Annual Statement of 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

M1013b.02

FFY of Grant: 2008
 FFY of Grant Approval: 2008

Part I: Summary
 PHA Name: Iron Mountain Housing
 Commission

Grant Type and Number
 Capital Fund Program Grant No: M133P01350108
 Replacement Housing Factor Grant No:
 Date of CFFP:

Type of Grant
 Original Annual Statement
 Performance and Evaluation Report for Period Ending: 09/30/2009

Revised Annual Statement (revision no:2)
 Final Performance and Evaluation Report

Line	Summary by Development Account	Original	Total Estimated Cost		Obligated	Total Actual Cost ¹
			Revised ²	Final Performance and Evaluation Report		
1	Total non-CFP Funds					Expended
2	1406 Operations (may not exceed 20% of line 21) ³	0.00	5591.28		5591.28	0.00
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					
8	1440 Site Acquisition		15000.00	8309.91	8309.91	7884.91
9	1450 Site Improvement					
10	1460 Dwelling Structures					
11	1465.1 Dwelling Equipment—Nonexpendable		110985.00	112083.81	112083.81	105545.31
12	1470 Non-dwelling Structures					
13	1475 Non-dwelling Equipment					
14	1485 Demolition					
15	1492 Moving to Work Demonstration					
16	1495.1 Relocation Costs					
17	1499 Development Activities ⁴					

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

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

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

Part I: Summary		FFY of Grant: 2008	
PHA Name: Iron Mountain Housing Commission	Grant Type and Number Capital Fund Program Grant No: MI33P01350108 Replacement Housing Factor Grant No: Date of CFFP:	FFY of Grant Approval: 2008	

Line	Type of Grant	Performance and Evaluation Report for Period Ending: 09/30/2009	Total Estimated Cost		Total Actual Cost ¹	
			Original	Revised ²	Obligated	Expended
18a	1501 Collateralization or Debt Service paid by the PHA					
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment					
19	1502 Contingency (may not exceed 8% of line 20)					
20	Amount of Annual Grant: (sum of lines 2 - 19)		125985	125985		113430.22
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]* Date 10.08.2009

Signature of Public Housing Director

Date

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

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

M1013C02
 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: Iron Mountain Housing Commission	Grant Type and Number Capital Fund Program Grant No: M133S01350109 Replacement Housing Factor Grant No: Date of CFFP:	FFY of Grant: 2009 FFY of Grant Approval: 2009
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Line	Type of Grant <input checked="" type="checkbox"/> Original Annual Statement <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 09/30/2009	Reserve for Disasters/Emergencies <input type="checkbox"/>	Revised Annual Statement (revision no:) <input type="checkbox"/> Final Performance and Evaluation Report		Total Actual Cost ¹	
			Original	Total Estimated Cost Revised ²	Obligated	Expended
1	Total non-CFP Funds					
2	1406 Operations (may not exceed 20% of line 21) ³					
3	1408 Management Improvements					
4	1410 Administration (may not exceed 10% of line 21)					
5	1411 Audit					
6	1415 Liquidated Damages					
7	1430 Fees and Costs					
8	1440 Site Acquisition		14472.00			
9	1450 Site Improvement		145000.00			
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 ⁴					

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² To be completed for the Performance and Evaluation Report or a Revised Annual Statement.
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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		FFY of Grant: 2009	
PHA Name: Iron Mountain Housing Commission	Grant Type and Number Capital Fund Program Grant No: M133S01350108 Replacement Housing Factor Grant No: Date of CFFP:	FFY of Grant: 2009 FFY of Grant Approval: 2009	

Line	Type of Grant	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹
			Original	Revised ²	
18a	<input checked="" type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies	1501 Collateralization or Debt Service paid by the PHA			Expended
18ba	<input type="checkbox"/> Revised Annual Statement (revision no:) <input type="checkbox"/> Final Performance and Evaluation Report	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)	159472.00		
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 *SPR Beard Shaste* Date 10.08.2009

Signature of Public Housing Director

Date

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Annual Statement of 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

M1013 dOR

FFY of Grant: 2009
 FFY of Grant Approval: 2009

Part I: Summary
 PHA Name: Iron Mountain Housing Commission
 Grant Type and Number: Capital Fund Program Grant No: MI33P01350109
 Replacement Housing Factor Grant No:
 Date of CFFP:

Line	Type of Grant <input type="checkbox"/> Original Annual Statement <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 09/30/2009	Reserve for Disasters/Emergencies <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	Original	Total Estimated Cost		Obligated	Total Actual Cost ¹
				Revised ²	Final Performance and Evaluation Report		
1	Total non-CFP Funds						
2	1406 Operations (may not exceed 20% of line 21) ³						
3	1408 Management Improvements						
4	1410 Administration (may not exceed 10% of line 21)						
5	1411 Audit						
6	1415 Liquidated Damages						
7	1430 Fees and Costs						
8	1440 Site Acquisition		12000.00	12000.00			
9	1450 Site Improvement						
10	1460 Dwelling Structures		113579.00	113579.00			
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 ⁴						

¹ To be completed for the Performance and Evaluation Report.
² To be completed for the Performance and Evaluation Report or a Revised Annual Statement.
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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: Iron Mountain Housing Commission	Grant Type and Number Capital Fund Program Grant No.: MI33P01350109 Replacement Housing Factor Grant No: Date of CFFP:	FFY of Grant: 2009 FFY of Grant Approval: 2009
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<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 09/30/2009 <input checked="" type="checkbox"/> Revised Annual Statement (revision no: 2) <input type="checkbox"/> Final Performance and Evaluation Report	
Type of Grant	
Line	Summary by Development Account
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)
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>[Signature]</i> Date 10.08.2009 Signature of Public Housing Director Date	

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

Annual Statement of 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 Housing and Indian Development
 OMB No. 2577-0226
 Expires 4/30/2011

MI013e01

Part I: Summary

PHA Name: Iron Mountain Housing Commission	Grant Type and Number Capital Fund Program Grant No: MI33P01350110 Replacement Housing Factor Grant No: Date of CFPP:	FFY of Grant: 2010 FFY of Grant Approval: 2010
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Line	Type of Grant <input checked="" type="checkbox"/> Original Annual Statement <input type="checkbox"/> Performance and Evaluation Report for Period Ending: 09/30/2009	Reserve for Disasters/Emergencies <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Performance and Evaluation Report for Period Ending: 09/30/2009	Revised Annual Statement (revision no:1) <input type="checkbox"/> Revised Annual Statement (revision no:1) <input type="checkbox"/> Final Performance and Evaluation Report	Total Estimated Cost		Total Actual Cost ¹	
				Original	Revised ²	Obligated	Expended
1	Total non-CFP Funds						
2	1406 Operations (may not exceed 20% of line 21) ³						
3	1408 Management Improvements						
4	1410 Administration (may not exceed 10% of line 21)						
5	1411 Audit						
6	1415 Liquidated Damages						
7	1430 Fees and Costs			12000.00			
8	1440 Site Acquisition						
9	1450 Site Improvement			113579.00			
10	1460 Dwelling Structures						
11	1465.1 Dwelling Equipment—Nonexpendable						
12	1470 Non-dwelling Structures						
13	1475 Non-dwelling Equipment						
14	1485 Demolition						
15	1492 Moving to Work Demonstration						
16	1495.1 Relocation Costs						
17	1499 Development Activities ⁴						

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

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

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

Part I: Summary		FFY of Grant: 2009	
PHA Name: Iron Mountain Housing Commission	Grant Type and Number Capital Fund Program Grant No: M133P01350109 Replacement Housing Factor Grant No: Date of CFFP:	FFY of Grant Approval: 2009	

Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
		Original	Revised ²	Obligated	Expended
18a	1501 Collateralization or Debt Service paid by the PHA				
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment				
19	1502 Contingency (may not exceed 8% of line 20)				
20	Amount of Annual Grant:: (sum of lines 2 - 19)	125579.00			
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: *R. Raeburn* Date: 10.08.2009 Signature of Public Housing Director: _____ Date: _____

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Capital () d Program—Five-Year Action Plan

MI013F01

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

Part I: Summary

PHA Name/Number – Iron Mountain Housing Commission – MI013		Iron Mountain, MI				
		<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	200,000.00	192,500.00	192,500.00	175,000.00
C.	Management Improvements					
D.	PHA-Wide Non-dwelling Structures and Equipment					
E.	Administration					
F.	Other					
G.	Operations					
H.	Demolition					
I.	Development					
J.	Capital Fund Financing – Debt Service					
K.	Total CFP Funds		200,000.00	192,500.00	192,500.00	175,000.00
L.	Total Non-CFP Funds					
M.	Grand Total		200,000.00	192,500.00	192,500.00	175,000.00

MT013902

CERTIFICATION OF DOMESTIC VIOLENCE, DATING VIOLENCE, OR STALKING

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

OMB Approval No. 2577-0249

Exp. (11/30/2010)

Public reporting burden for this collection of information is estimated to average 1 hour per response. This includes the time for collecting, reviewing, and reporting the data. Information provided is to be used by PHAs and Section 8 owners or managers to request a tenant to certify that the individual is a victim of domestic violence, dating violence or stalking. The information is subject to the confidentiality requirements of the HUD Reform Legislation. This agency may not collect this information, and you are not required to complete this form unless it displays a currently valid OMB control number.

Purpose of Form: The Violence Against Women and Justice Department Reauthorization Act of 2005 protects qualified tenants and family members of tenants who are victims of domestic violence, dating violence, or stalking from being evicted or terminated from housing assistance based on acts of such violence against them.

Use of Form: A family member must complete and submit this certification, or the information that may be provided in lieu of the certification, within 14 business days of receiving the written request for this certification by the PHA, owner or manager. The certification or alternate documentation must be returned to the person and address specified in the written request for the certification. If the family member has not provided the requested certification or the information that may be provided in lieu of the certification by the 14th business day or any extension of the date provided by the PHA, manager and owner, none of the protections afforded to victims of domestic violence, dating violence or stalking (collectively "domestic violence") under the Section 8 or public housing programs apply.

Note that a family member may provide, in lieu of this certification (or in addition to it):

(1) A Federal, State, tribal, territorial, or local police or court record; or

(2) 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 abuse, in which the professional attest under penalty of perjury (28 U.S.C. 1746) to the professional's belief that the incident or incidents in question are bona fide incidents of abuse, and the victim of domestic violence, dating violence, or stalking has signed or attested to the documentation.

TO BE COMPLETED BY THE VICTIM OF DOMESTIC VIOLENCE:

Date Written Request Received By Family Member: _____

Name of the Victim of Domestic Violence: _____

Name(s) of other family members listed on the lease _____

Name of the abuser: _____

Relationship to Victim: _____

Date the incident of domestic violence occurred: _____

Time: _____

Location of Incident: _____

Name of victim: _____

Description of Incident:

[INSERT TEXT LINES HERE]

I hereby certify that the information that I have provided is true and correct and I believe that, based on the information I have provided, that I am a victim of domestic violence, dating violence or stalking and that the incident(s) in question are bona fide incidents of such actual or threatened abuse. I acknowledge that submission of false information relating to program eligibility is a basis for termination of assistance or eviction.

Signature _____ Executed on (Date) _____

All information provided to a PHA, owner or manager relating to the incident(s) of domestic violence, including the fact that an individual is a victim of domestic violence shall be retained in confidence by an owner and shall neither be entered into any shared database nor provided to any related entity, except to the extent that such disclosure is (i) requested or consented to by the individual in writing; (ii) required for use in an eviction proceeding or termination of assistance; or (iii) otherwise required by applicable law.

J. K. Almond Sharts, PHM
Evo. Director
Don mtn, N.Sng. Comm.

Attachment MI013h03

**Iron Mountain Housing Commission statement on policies and
procedures for VAWA**

The Iron Mountain Housing Commission works closely with the Caring House and Northpointe Behavior Center; both domestic violence centers for men, women and children to house any persons that qualify for housing in a timely manner. We also refer victims of domestic abuse to these local agencies for counseling and assistance. As a part of our lease and ACOP we address the VAWA policy and provide HUD Form 50066 Certification of Domestic Violence, Dating Violence, or Stalking to our residents. We also handout the attached brochure. (attachment mi013i03)

CERTIFICATION OF VICTIM STATUS

VAWA gives housing commissions and owners the discretion to provide benefits to an individual based solely on the person's statement or other corroborating evidence. However, the Act also permits housing agencies and owners to request that victims attest to their status by signing the HUD-50066 form or other certification form. The form must meet the following:

1. It requires the individual signing it to certify that she is the victim of "bona fide" incidents of actual or threatened domestic violence, dating violence, or stalking, as defined and described in VAWA, and
2. It must include the name of the perpetrator; and
3. The person declaring victim status must complete and provide the Housing Agency or owner with the certification within 14 business days unless the agency or owner agrees to extend the deadline.

VAWA provides the victim the alternative of providing the housing agency or owner one of the following types of documentation:

1. A local police or court record.
2. Documentation signed by 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. The signer must attest under penalty of perjury (a) that the abuse the victim suffered is a bona fide incidence of domestic violence, dating violence, or stalking and (b) that the victim has signed or approved the documentation.

Failure on the part of the victim to provide certification within the allotted time voids the protections provided by VAWA.

If you believe you have been a victim of domestic violence, date violence or stalking and it is affecting your housing assistance, contact your housing agency or property owner and request what you need to do to certify your status.

CONFIDENTIALITY

Any information or documentation provided to a housing agency or owner by a victim of domestic violence, dating violence or stalking must be kept confidential. No information or documentation may be (a) entered into any shared databases or (b) disclosed to "any related entity" except under the following conditions:

1. The victim requests or consents to the disclosure in writing.
2. The disclosure is required for use in an eviction proceeding.
3. The disclosure is otherwise required by applicable law.

For more information in the Iron Mountain area, contact the Iron Mountain Housing Commission at (906) 774-2685

Attachment mIO13103

**Violence Against Women
in Federally Funded
Assisted Rental Housing**



**Learn about your Rights
as a Victim of Domestic
Violence**

DEFINITIONS

VAWA – Violence Against Women Act

Domestic Violence – *The term domestic violence includes felony or misdemeanor crimes of violence committed by a current or former spouse of the victim, by a person with whom the victim shares a child in common, by a person who is cohabiting with or has cohabited with the victim as a spouse, by a person similarly situated to a spouse of the victim under the domestic or family violence laws of the jurisdiction receiving grant monies, or by any other person against an adult or youth victim who is protected from that person's acts under the domestic or family violence laws of the jurisdiction.*

Dating Violence – *means violence committed by a person (A) who is or has been in a social relationship of a romantic or intimate nature with the victim and (B) where the existence of such a relationship shall be determined based on a consideration of the following factors: (i) the length of the relationship; (ii) the type of relationship; (iii) the frequency of interaction between the persons involved in the relationship.*

Stalking – *means (A) to follow, pursue, or repeatedly commit acts with the intent to kill, injure, harass, or intimidate another person, and (B) in the course of, or as a result of, such following, pursuit, surveillance or repeatedly committed acts, to place a person in reasonable fear of the death of, or serious bodily injury to, or to cause substantial emotional harm to that person; a member of the immediate family of that person; or the spouse or intimate partner of that person.*

WHAT PROTECTIONS ARE PROVIDED BY VAWA?

There are two areas of protection for those persons seeking or receiving assistance under the Public Housing or Voucher program.

1. Denial of Assistance – the law provides that you cannot be denied assistance because you are a victim of domestic violence, dating violence or stalking if you are otherwise qualified to receive such assistance.
2. Termination of Tenancy or Assistance – the law further protects those who are currently receiving housing assistance from losing the assistance solely on the basis of their status as a victim of domestic violence, dating violence or stalking.

In summary, VAWA prevents agencies and owners from considering actual or threatened domestic violence, dating violence, or stalking as a cause for terminating the tenancy, occupancy, or program assistance of the victim. Such violence or stalking may not be considered (1) as a serious or repeated violation of the lease by the victim, (2) as other good cause for terminating the tenancy or occupancy rights of the victim, or (3) as criminal activity justifying the termination of the tenancy, occupancy rights, or program assistance of the victim.

What about the Perpetrator?

If the perpetrator is a member of the victim's household, the agency administering the voucher or public housing programs has the authority to require the individual to leave the household as a condition of providing continued assistance to the remaining members of the family. Additionally, if state law allows, the housing agency has the authority to bifurcate (split) a lease into two parts to deal with a family member who engages in

criminal acts of physical violence against family members or others. Bifurcation would allow the housing agency or owner to take eviction or termination action against a perpetrator of physical violence without penalizing the victim.

What are the Limitations of VAWA?

Housing agencies and owners retain the authority to terminate the tenancy, occupancy, or program assistance of a victim under either of the following conditions:

1. The termination is for a lease violation premised on something other than an act of domestic violence, dating violence, or stalking against the victim and the housing agency or owner is holding the victim to a standard no more severe than the standard to which other tenants are held.
2. The housing agency or owner can demonstrate an "actual and imminent threat to other tenants or those employed at or providing service to the property" if the tenancy, occupancy, or program assistance of the victim is not terminated.

For additional information on

VAWA contact

- National Domestic Violence Hotline
at
1-800-799-7233
1-800-787-3224 (TTY)
or their web-site at www.ndvh.org
- HUD Housing Discrimination Hotline
1-800-669-9777

For complete text of VAWA, see Public Law 109-162 (Specifically refer to Title VI, Section 606 & 607)