

7.0	<p>Hope VI, Mixed Finance Modernization or Development, Demolition and/or Disposition, Conversion of Public Housing, Homeownership Programs, and Project-based Vouchers. Include statements related to these programs as applicable.</p> <p>Intent to Use Project-Based Assistance</p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No: Does the PHA plan to “project-base” any tenant-based Section 8 vouchers in the coming year? If the answer is “no,” go to the next component. If yes, answer the following questions.</p> <p>In order to promote the development of affordable housing in West Hartford, the WHHA intends to use Project-based Housing Choice Vouchers on behalf of itself and other qualified owner/developers to promote preservation of affordable units, expansion of affordable units within mixed income developments and to otherwise maximize the availability in affordable housing in stable locations throughout the Town.</p> <p>The WHHA anticipates over time using the maximum allowable percentage of its program, which is 20% or roughly a 130 vouchers for project-based purposes. At the current time, the geographic targeting would be along the New Britain Avenue, Albany Avenue and Farmington Avenue corridors. These arterials provide access to public transportation and shopping.</p> <p>Given the overall demographic profile of the Town of West Hartford any census tract would meet site and neighborhood standards and represent an opportunity for deconcentration of poverty.</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 style="text-align: center;">See Attachment A for the Annual Statement and Performance and Evaluation Reports</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 style="text-align: center;"><u>There is no Five-Year Action Plan the Pulic Housing Component has been DISPOSED</u></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 style="text-align: center;">For an integrated presentation of needs and strategies to address these needs; See Section 10.0 below.</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><u>Need: Shortage of affordable housing for all eligible populations</u></p> <p>Strategy 1. Maximize the number of affordable units available to the PHA within its current resources by:</p> <ul style="list-style-type: none"> a. Maintain or increase section 8 lease-up rates by establishing payment standards that will enable families to rent throughout the jurisdiction b. Undertake measures to ensure access to affordable housing among families assisted by the PHA, regardless of unit size required c. Maintain or increase section 8 lease-up rates by marketing the program to owners, particularly those outside of areas of minority and poverty concentration d. Participate in the Consolidated Plan development process to ensure coordination with broader community strategies <p>Strategy 2: Increase the number of affordable housing units:</p> <ul style="list-style-type: none"> a. Apply for additional section 8 units should they become available b. Leverage affordable housing resources in the community through the creation of mixed - finance housing c. Pursue housing resources other than public housing or Section 8 tenant-based assistance. d. Implement Project-based Section 8 Voucher Program consistent with revised statutes. <p><u>Other Housing Needs & Strategies:</u></p> <p>The Authority will continue to implement a Project-based Section 8 Program (PBV) track designed to work in tandem with other sources of affordable housing finance.</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 style="text-align: center;">See Attachment D</p> <p>(b) Significant Amendment and Substantial Deviation/Modification. Provide the PHA's definition of "significant amendment" and "substantial deviation/modification"</p> <p>For this fiscal year, the following actions are <u>NOT</u> to be Significant Amendment and Substantial Deviation/Modification. These matters have been discussed with the RAB as part of the process resulting in the baseline Housing Agency Plan for 2011.</p> <ol style="list-style-type: none"> 1. Revisions to the Section 8 Administrative Plan to address program integrity, customer service and to implement policies and procedures to improve management of program utilization levels. 2. Decisions to open a waiting list for a specific period of time. 3. Changes to the HVC Administrative Plan for preferences that are included in Attachment E. <p>See Attachment F for the WHHA's Statement on VAWA. It should be noted that the WHHA is proposing to establish victim of domestic violence preferences for the HCV Program.</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.</p> <p>(g) Challenged Elements</p> <p>(h) Form HUD-50075.1, <i>Capital Fund Program Annual Statement/Performance and Evaluation Report</i> (PHAs receiving CFP grants only)</p> <p>(i) Form HUD-50075.2, <i>Capital Fund Program Five-Year Action Plan</i> (PHAs receiving CFP grants only)</p>
-------------	--

v5
CT039a: ~~V3~~

**RHF Annual Statement/Performance & Evaluation Report
CT 26-R039-501-11**

Part I: Summary		Grant Type and Number		FFY of Grant: 2011	
PHA Name: Town of West Hartford		Capital Fund Program Grant No: Replacement Housing Factor Grant No: CT 26-R039-501-11		FFY of Grant Approval:	
Date of CFFP:					
Type of Grant	<input checked="" type="checkbox"/> Original Annual Statement <input type="checkbox"/> Performance and Evaluation Report for Period Ending: 12/08	<input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Final Performance and Evaluation Report		<input type="checkbox"/> Revised Annual Statement (revision no.)	
Line	Summary by Development Account	Total Estimated Cost	Revised ²	Obligated	Expended
		Original			Total Actual Cost ¹
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) ³				
3	1408 Management Improvements				
4	1410 Administration (may not exceed 10% of line 21)				
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs				
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures				
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment				
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities ⁴				\$120,409

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		Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant No: CT 26-R039-501-11 Date of CFFP:		FFY of Grant: 2011 FFY of Grant Approval:	
PHA Name: Town of West Hartford					
Type of Grant <input type="checkbox"/> Original Annual Statement <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 12/08 <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Performance and Evaluation Report for Period Ending: 12/08 <input checked="" type="checkbox"/> Revised Annual Statement (revision no: 3) <input type="checkbox"/> Final Performance and Evaluation Report					
Line	Summary by Development Account	Original	Revised ²	Obligated	Expended
		Total Estimated Cost		Total Actual Cost ¹	
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)	\$120,409			
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	
				9/24/2011	

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.

v5

CT039a1.V3

RHF Annual Statement/Performance & Evaluation Report

CT 26-R039-502-11

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		Grant Type and Number		FFY of Grant: 2011	
PHA Name: Town of West Hartford		Capital Fund Program Grant No: Replacement Housing Factor Grant No: CT 26-R039-502-11		FFY of Grant Approval:	
Type of Grant		Reserve for Disasters/Emergencies		Total Actual Cost ¹	
<input checked="" type="checkbox"/> Original Annual Statement		<input type="checkbox"/> Final Performance and Evaluation Report		Expended	
<input type="checkbox"/> Performance and Evaluation Report for Period Ending: 12/08		Total Estimated Cost		Obligated	
Summary by Development Account		Revised ²		Total Actual Cost ¹	
Line		Original	Revised ²	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) ³				
3	1408 Management Improvements				
4	1410 Administration (may not exceed 10% of line 21)				
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs				
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures				
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment				
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities ⁴		\$10,122		

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		Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant No: CT 26-R039-502-11 Date of CFFP:		FFY of Grant: 2011 FFY of Grant Approval:	
PHA Name: Town of West Hartford					
Type of Grant <input type="checkbox"/> Original Annual Statement <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 12/08 <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Summary by Development Account		<input checked="" type="checkbox"/> Revised Annual Statement (revision no: 3) <input type="checkbox"/> Final Performance and Evaluation Report			
Line		Total Estimated Cost	Revised ²	Obligated	Total Actual Cost ¹
18a	1501 Collateralization or Debt Service paid by the PHA				Expended
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)	\$10,122			
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>9/29/2011</i>	

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.

V5
CT039b.V3

Capital Fund Program – Five-Year Action Plan
CT 26-R039-501-11

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

Part I: Summary

PHA Name/Number		Locality (City/County & State)			Revision No:	
Development Number and Name	Work Statement for Year 1 FFY_2012_	Work Statement for Year 2 FFY_2013_	Work Statement for Year 3 FFY_2014_	Work Statement for Year 4 FFY_2015_	Work Statement for Year 5 FFY_2016_	
B. Physical Improvements Subtotal	Work Statement					
C. Management Improvements						
D. PHA-Wide Non-dwelling Structures and Equipment						
E. Administration						
F. Other						
G. Operations						
H. Demolition						
I. Development		120,409	120,409	120,409	120,409	
J. Capital Fund Financing – Debt Service						
K. Total CFP Funds						
L. Total Non-CFP Funds						
M. Grand Total		120,409	120,409	120,409	120,409	120,409

Attachment C
Public Hearing Documentation

AGENDA
Public Hearing
4:00 P.M.
June 8, 2011
2011-2012 ANNUAL PHA PLAN

- I. Open Public Hearing
- II. Present Annual Plan
- III. Answer Questions
- IV. Close Public Hearing

MINUTES
Public Hearing
4:00 P.M.
June 8, 2011
2011-2012 ANNUAL PHA PLAN

Persons Present: George Howell, Executive Director
Eileen Kozlowski, HCV Manager

- I. The Public Hearing was convened at 4:00 p.m.
- II. The Annual Plan was presented by George Howell
- III. There were no questions presented
- IV. The Public Hearing was closed at 4:15 p.m.



George Howell, Executive Director



Date

PUBLIC NOTICE

The West Hartford Housing Authority has updated its Agency Plan in compliance with the Quality Housing and Work Responsibility Act of 1998. It is available for review at the office of the West Hartford Housing Authority located at 80 Shield Street in West Hartford, CT. The Authority's office hours are 8:00 a.m. to 4:00 p.m., Monday, Tuesday, Thursday and Friday. In addition, a Public Hearing will be held on June 8, 2011 at 4:00 p.m. at the Authority's office.

Attachment D

Statement of Progress Meeting 5-Year Plan, Mission & Goals

Statement of Progress Meeting 5-Year Plan Mission & Goals

During the past year the Housing Authority of the Town of West Hartford continued to make progress in its targeted programs and activities.

Accomplishments

- The Authority successfully closed on the disposition of Alfred E Plant
- The Authority successfully close financing for the renovation of 95 existing units and construction of 42 new units at Alfred E Plant
- The Authority has received and successfully awarded replacement housing HCVs for all tenants of the existing Alfred E Plant units
- The Authority is successfully proceeding with the renovation and construction activities at Alfred E Plant and expect completion within 12 months
- The Authority is carefully monitoring its annual Replacement Housing Factor fund
- The Authority received and successfully expended the ARRA funds

Attachment E
Revised WHHA HCV Preference Structure

Proposed Revised WHHA HVC Preference Structure

P 00 10 points	Any family terminated from the WHHA's HCV program due to insufficient Program funding.
P 01 9 points	A household who participates in any Authority or affiliate-owned housing program and resides in a unit undergoing redevelopment pursuant to a Board of Commissioner approved Revitalization Plan AND is not otherwise eligible for a Special Admission. For households that qualify for this preference, the specific Relocation Plan controls the sequence of offers as offers must support the overall redevelopment program.
P 02 8 points	Public Safety: households for which a court or law enforcement agency has determined that a need for relocation is required as a matter of public safety. This category includes victims of hate crimes and households that are a part of a Witness Protection Program or a similar program,
P 03 7 points	Households who reside in an affordable housing development within West Hartford and have been notified of a rent increase of at least 20% that will result in a rent burden in excess of 40% of their AGI.
P 04 6 points	Victim of Domestic Violence who resides in an Authority or affiliate owned property.
P 05 5 points	Current single person households under 62 who reside in any Authority or affiliate owned or managed housing and would benefit from a non-affiliated service enriched supportive housing program
P 06 4 points	Victim of Domestic Violence who has been a resident of West Hartford for at least six months
P 07 3 points	Displacement due to a dwelling unit located in the Town of West Hartford that does not provide adequate accessibility pursuant to UFAS standards and the owner is not legally obligated to make modifications for reasons including no funding or structural infeasibility.

A local "living in West Hartford" preference will continue to apply to all Standard Applicants.

Attachment F

Statement on Compliance with the Requirements of the Violence Against Women Act (VAWA)

Statement on Compliance with the Requirements of the Violence against Women Act

The Housing Authority of the Town of West Hartford (WHHA) has completed a review of its major policies and administrative systems for both its Public Housing and its Section 8 Programs against the requirements of the Violence Against Women and Department of Justice Reauthorization Act of 2005 (Pub. L. 109-162) and the recently issued Final Rule on the Violence Against Women's Act, as amended.

One of the key aspects of the review was to identify program requirements that might result in impediments for VAWA households in terms of their program participation.

This review confirmed that the WHHA already has administrative systems that allow for applicants and program participants to identify mitigating circumstances for both the public housing and Section 8 Program. Language has been developed to clarify that among the types of mitigating information documentation of the applicant or program participant being a victim of domestic violence, dating violence, or stalking, provided that such person is otherwise qualified.

This expansion of the notion of mitigating information covers applicant screening, lease compliance and in the case of the Section 8 Program actions that might otherwise result in program termination. In situations in which the abuser is currently part of the household, the WHHA is considering policy changes that would facilitate bifurcation of assistance and may establish such a policy in the future. The WHHA is also considering a change to its Section 8 Program to give both a priority to a WHHA public housing resident who is qualified under VAWA definitions and at risk in their current unit as well as a general preference for victims of domestic abuse as defined under VAWA.

The PHA has adopted reasonable procedures for verification of status under VAWA using form HUD 50066 , by police report or court record, or by other certifying documentation provided by an employee, agent, or volunteer of a victim service provider, an attorney, or a medical professional, from whom the victim has sought assistance

Program participants have been notified of rights under VAWA.

WHHA has not implemented any special supportive service programs for victims of domestic violence nor entered into any Memorandum of Agreement with local service providers. Information on referrals to local service providers that work with domestic abuse victims has been made available to staff.