PHA 5-Year and Annual Plan	U.S. Department of Housing and Urban Development Office of Public and Indian Housing	OMB No. 2577-0226 Expires 4/30/2011

1.0 **PHA Information**
PHA Name: **South Central MN Multi-County Housing Redevelopment Authority** PHA Code: **MN219**
PHA Type: ☐ Small ☐ High Performing ☐ Standard ☒ HCV (Section 8)
PHA Fiscal Year Beginning: (MM/YYYY): **01/2011**

2.0 **Inventory** (based on ACC units at time of FY beginning in 1.0 above)
Number of PH units: **0** Number of HCV units: **667**

3.0 **Submission Type**
☐ 5-Year and Annual Plan ☒ Annual Plan Only ☐ 5-Year Plan Only

4.0 **PHA Consortia** ☐ 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	
				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:

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.

6.0 **PHA Plan Update**

(a) Identify all PHA Plan elements that have been revised by the PHA since its last Annual Plan submission:

Amendments to the Section 8 Administrative Plan:
See Attached Administrative Plan changes (Attachment B).

(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.

PHA's main administrative office
PHA website

SCMMCHRA has a commitment to assist those who are victims of domestic violence. SCMMCHRA may not discriminate against a VAWA victim by denying admission to the Housing Choice Voucher Program or terminate rental assistance for a participant of the Program just because they are a VAWA victim. The complete VAWA policy is available to the public at the SCMMCHRA office located at 360 Pierce Avenue, Suite 106, North Mankato, MN 56003 during regular business hours.

7.0 **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.*

SCMMCHRA has a Section 8 Homeownership Program with approximately 6 participants. Participants must:
Meet minimum income requirements.
Be a first time homebuyer.
Participate in home buying training and counseling courses before purchase of the home.
Have no history of property destruction or criminal behavior.
Have sufficient income to support home ownership including house payment, utilities, taxes, insurance and upkeep.
Meet employment requirement of one-year continuous full time employment.

Capital Improvements. Please complete Parts 8.1 through 8.3, as applicable.

8.1 **Capital Fund Program Annual Statement/Performance and Evaluation Report.** As part of the PHA 5-Year and Annual Plan, annually complete and submit the *Capital Fund Program Annual Statement/Performance and Evaluation Report*, form HUD-50075.1, for each current and open CFP grant and CFFP financing.

8.2	**Capital Fund Program Five-Year Action Plan.** As part of the submission of the Annual Plan, PHAs must complete and submit the *Capital Fund Program Five-Year Action Plan*, 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.
8.3	**Capital Fund Financing Program (CFFP).** ☐ 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.
9.0	**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. **This section only completed for Annual Plan submission with the 5-Year Plan, per HUD.**
9.1	**Strategy for Addressing Housing Needs**. Provide a brief description of the PHA's strategy for addressing the housing needs of families in the jurisdiction and on the waiting list in the upcoming year. **Note: Small, Section 8 only, and High Performing PHAs complete only for Annual Plan submission with the 5-Year Plan.**
10.0	**Additional Information**. Describe the following, as well as any additional information HUD has requested. (a) Progress in Meeting Mission and Goals: **This section only completed for Annual Plan submission with the 5-Year Plan, per HUD.** (b) Significant Amendment and Substantial Deviation/Modification. Provide the PHA's definition of "significant amendment" and "substantial deviation/modification" **This section only completed for Annual Plan submission with the 5-Year Plan, per HUD.**
11.0	**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. (a) Form HUD-50077, *PHA Certifications of Compliance with the PHA Plans and Related Regulations* (which includes all certifications relating to Civil Rights) (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. 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. (g) Challenged Elements (h) Form HUD-50075.1, *Capital Fund Program Annual Statement/Performance and Evaluation Report* (PHAs receiving CFP grants only) (i) Form HUD-50075.2, *Capital Fund Program Five-Year Action Plan* (PHAs receiving CFP grants only)

ATTACHMENT B

Changes to Administrative Plan are in Bold Print:

THE WAITING LIST

Preferences

The South Central MN Multi-County H.R.A. will select families based on the following preference:

Residency Preference:
At the time of application, the applicant(s) must live, work, be hired to work, **or be enrolled as a full-time student at an institution of higher education** in the South Central MN Multi-County H.R.A. service area.

To determine preference, South Central MN Multi-County H.R.A. requires documentation from the applicant(s). Some examples of preference documentation include: a driver's license, ID card or copy of a lease showing a permanent address within the residency preference area, current pay stubs for employment in the residency preference area **or a registration form for school attendance in the residency preference area.**

Grounds for Denial

Any applicant, in whose family, a member has engaged in or threatened abusive, violent **or threatening** behavior toward South Central MN Multi-County H.R.A. personnel;

***Abusive or violent behavior* includes verbal as well as physical abuse or violence. Use of racial epithets, or other language, written or oral, that is customarily used to intimidate may be considered abusive or violent behavior. *Threatening* refers to oral or written threats or physical gestures that communicate intent to abuse or commit violence.**

BRIEFING PROCESS

When the South Central MN Multi-County H.R.A. selects a family from the waiting list, the family will be briefed on how the program works. In order to receive a voucher, this briefing is required. **If the family fails to participate in the briefing they will have a second opportunity to attend. If they fail to attend the second briefing, they will be denied admission to the program and will have to reapply for assistance.**

If an applicant with a disability requires auxiliary aids to gain full benefit from the briefing, the Housing Authority will furnish such aids where doing so would not result in a fundamental alteration of the nature of the program or in an undue financial or administrative burden. In determining the most suitable auxiliary aid, the Housing Authority will give primary consideration to the requests of the applicant. Families unable to participate in a briefing due to a disability may request a reasonable accommodation such as having the briefing presented at an alternate location.

The H.R.A. staff will conduct an interview with each client. It is at this point in time that the family's waiting list preference will be reverified. If the family no longer qualifies to be at the top of the list, the family's name will be returned to the appropriate spot on the waiting list. ~~**The South Central MN Multi-County H.R.A. must notify the family in writing of this determination, and give the family the opportunity for an informal review.**~~

At the briefing, the family **will** be required to provide photo identification, **copies of birth certificates, and social security cards** for all household members, as well as any proof of assets, income and medical expenses that they have.

The briefing will cover at least the following subjects:

- A description of how the program works;
- Family and owner responsibilities;
- Types of eligible housing;
- Where the family may rent a unit, including inside and outside the Housing Authority's jurisdiction;
- For families qualified to lease a unit outside the Housing Authority's jurisdiction under portability, an explanation of how portability works, **including a list of portability contact persons for neighboring PHA's with names, addresses, and telephone numbers**;
- **For families living in high-poverty census tracts, an explanation of the advantages of moving to areas outside of high-poverty concentrations;**

- **An explanation that the family's share of rent may not exceed 40% of the family's monthly adjusted income;**

- **An explanation that the family is required to report all changes to their application during the time between the briefing and when admission to the program occurs.**

Briefing Packet

During the briefing, the Housing Authority will give the family a packet covering at least the following subjects:

- The term of the voucher and the Housing Authority's policy on extensions and suspensions of the term. The packet will include information on how to request an extension;

- How the Housing Authority determines the housing assistance payment and total tenant payment for the family;

- Information on the payment standards, exception payment standard rent areas, and the utility allowance schedules;

- How the Housing Authority determines the maximum rent for an assisted unit;

- Where the family may lease a unit. For families qualified to lease outside the Housing Authority's jurisdiction, the packet includes an explanation of how portability works;

- The HUD-required tenancy addendum that provides the language that must be included in any assisted lease, and a sample contract;

- A statement of the Housing Authority's policy on providing information to prospective owners. ~~**This policy requires applicants to sign disclosure statements allowing the Housing Authority to provide prospective owners with the family's current and prior addresses and the names and addresses of the landlords for those addresses. Upon request, the Housing Authority will also supply any factual information or third party verification relating to the applicant's history as a tenant or their ability to comply with material standard lease terms or any history of drug trafficking, drug-related criminal activity or any violent criminal activity**~~;

- The Housing Authority's subsidy standards, including when the Housing Authority will consider granting exceptions to the standards;

- The HUD brochure on how to select a unit ("A Good Place to Live");

- The HUD-required lead-based paint brochure;

- An abbreviated Inspection Checklist and Housing Quality Standards (HQS) Deficiencies;

- Information on Federal, State, and local equal opportunity laws; the brochure "Fair Housing: It's Your Right;" and a copy of the housing discrimination complaint form;

- A list of landlords or other parties known to the South Central MN Multi-County H.R.A. who may be willing to lease a unit to the family or help the family find a unit, **especially outside areas of poverty or minority concentration;**

- **Maps showing areas with housing opportunities outside areas of poverty or minority concentration, both within the jurisdiction of South Central MN Multi-County H.R.A. and its neighboring jurisdiction;**

- **Information about the characteristics of these areas including job opportunities, schools, transportation and other services;**

- If the family includes a person with disabilities, the family may request a current list of accessible units known to the South Central MN Multi-County H.R.A. that may be available;

- The family's obligations under the program;

- The grounds upon which the Housing Authority may terminate assistance because of the family's action or inaction;

- South Central MN Multi-County H.R.A. informal hearing procedures, including when the Housing Authority is required to provide the opportunity for an informal hearing, and information on how to request a hearing; and

- Program options and eligibility regarding the Family Self-Sufficiency (FSS) Program and the Section 8 Homeownership Program.

ISSUANCE OF VOUCHER

The Housing Authority may grant one or more extensions of the term. The maximum term of a voucher will be 120 days from the initial date of issuance. To obtain an extension, the family must make a verbal or written request prior to the expiration date. A statement of the efforts the family has made to find a unit must accompany the request. If the family documents their efforts and additional time can reasonably be expected to result in success, the Housing Authority **may** grant 30 days initially and 30 additional days after that, if necessary.

OBLIGATIONS OF THE PARTICIPANT

Absence from the Unit

Authorized absences may include, but are not limited to:

- Prolonged hospitalization or rehabilitation
- Absences beyond the control of the family (i.e., death in the family, other family member illness)
- A child is removed from the household and the family presents evidence that there is reasonable expectation that the child will return within six months
- The head, spouse or co-head is in the military and is away for active duty or training.
- An adult child of the family, age 18 to 23, attending school full-time away from home who will be home during school recesses and the family declares the student's income. In this case, the student must also live in student housing, which is considered to be a "temporary' living arrangement and is not considered the student's primary place of residence.
- ~~**Other absences that are deemed necessary by the South Central MN Multi-County H.R.A.**~~

LEASING A UNIT

Owner Recruitment and Retention

Recruitment

PHAs are responsible for ensuring that very low income families have access to all types and ranges of affordable housing in the PHA's jurisdiction, particularly housing outside areas of poverty or minority concentration. A critical element in fulfilling this responsibility is for the PHA to ensure that a sufficient number of owners, representing all types and ranges of affordable housing in the PHA's jurisdiction, are willing to participate in the HCV program.

To accomplish this objective, PHAs must identify and recruit new owners to participate in the program. The PHA will ensure that owners are familiar with the program and its advantages by distributing printed material about the program along with developing working relationships with owners and real estate brokers associations.

Retention

In addition to recruiting owners to participate in the HCV program, the PHA must also provide the kind of customer service that will encourage participating owners to remain active in the program. All PHA activities that may affect an owner's ability to lease a unit will be processed as rapidly as possible, in order to minimize vacancy losses for owners. The PHA will provide owners with a handbook that explains the program, including HUD and PHA policies and procedures, in easy-to-understand language. The PHA will give special attention to helping new owners succeed through activities such as: providing the owner with a designated PHA contact person and coordinating inspection and leasing activities between the PHA, the owner, and the family. Additional services may be undertaken on an as-needed basis, and as resources permit.

MOVES WITHIN HRA SERVICE AREA WITH CONTINUED ASSISTANCE

Procedures Regarding Family Moves

Families are required to give proper written notice of their intent to terminate the lease. In accordance with HUD regulations, no notice requirement may exceed 60 days. ~~**During the initial term, families may not end the lease unless they and the owner mutually agree to end the lease.**~~ If the family moves from the unit before the initial term of the lease ends without the owner's and the South Central MN Multi-County H.R.A.'s approval, it will be considered a serious lease violation and subject the family to termination from the program.

SPECIAL HOUSING PROGRAMS

Estimate of Participating Families

The South Central MN Multi-County H.R.A. will serve a minimum of **47** families through the Housing Choice Voucher Family Self-Sufficiency program. This number reflects ~~**both**~~ voluntary ~~**and mandatory**~~ slots~~**, 33 and 13 respectively**~~. The South Central MN Multi-County H.R.A. will implement a maximum of **70** slots. If there are more interested families than program space available, participants will be placed on a waiting list and chosen on a first come, first served basis. ~~**As of April 30, 2004 there are 90 active FSS program participants.**~~

Requirement to Seek and Maintain Employment

The head of the FSS family is required to seek and maintain suitable employment during the contract term. There is no minimum period a family needs to be employed to meet this requirement. The head of household must be employed ~~**full-time (32 or more hours per week)**~~ by the end of the contract term in order to meet the contract requirements. Only the FSS Head of Household is required to obtain employment as a condition of completing the contract goals.

Suitable Employment

In order for the participant to successfully complete the FSS contract and receive proceeds from their escrow account, the participant must be suitably employed. Suitable employment is:

- **Employment with an established, legitimate business (the participant is receiving a regular paycheck from which taxes and other required deductions are withheld) OR**
- **Self-employment – which is verifiable through signed federal income tax returns.**
- **Contracted or commission employment will be considered if it is verifiable and is being declared for tax purposes.**
- **Informal employment which does not meet the criteria listed above will not be considered. (Employment where income is not declared for tax purposes).**
- **Employment must be considered a lawful activity.**

Escrow Accounts

The housing authority will submit a bi-annual account statement to each FSS family **at their semi-annual review**. The report will include all activity to the account, including deposits, interim withdrawals and interest. Where applicable, the statement will also include any deductions made from the account for amounts due to the housing authority.

The housing authority may disburse a portion of the funds from the family's escrow account during the contract period for contract-related expenses. Interim disbursement is contingent on the following:

- **The family has completed the previous year's semi-annual reviews.**
- The family has fulfilled certain interim contract goals.
- Funds will be used to help meet a goal or activity stated in the Individual Training and Services Plan.
- When applicable, the family provides the housing authority with proper verifications of expense.

Section 8 Portability

~~**A family participating in FSS must lease a unit in the South Central MN Multi-County HRA service region for at least 12 months after the effective date of the FSS contract. After that period, the family may move to another jurisdiction under Section 8 portability rules. If a family is subject to termination in the FSS program because of failure to meet a Contract obligation, a portability move may not be used to avoid the consequences (i.e., loss of escrow funds).**~~

INSPECTION POLICIES

Emergency Fail Items

The following items are to be considered examples of emergency fail items that need to be corrected within 24 hours:

- ❑ No hot or cold water
- ❑ No electricity
- ❑ Inability to maintain adequate heat
- ❑ Major plumbing leak
- ❑ Natural gas leak
- ❑ Broken lock(s) on first floor doors or windows
- ❑ Broken windows or glass that unduly allow weather elements into the unit or cause a safety hazard.
- ❑ Electrical outlet smoking or sparking
- ❑ Exposed electrical wires that could result in shock or fire
- ❑ Unusable toilet when only one toilet is present in the unit
- ❑ Security risks such as broken doors or windows that would allow intrusion
- ❑ Other conditions which pose an immediate threat to health or safety
- ❑ **Missing at least one battery-operated or hard-wired smoke detector, in proper operating condition, on each level of the dwelling unit, including basements but excepting crawl spaces and unfinished attics.**

Exceptions to the HQS Acceptability Criteria

The South Central MN Multi-County H.R.A. will utilize the acceptability criteria as outlined above with applicable State and local codes. Additionally, the South Central MN Multi-County H.R.A. has received HUD approval to require the following additional criteria:

- In each room, all openable exterior windows must contain a screen.
- **Mold will be addressed as a health and safety issue.**
- Under extenuating circumstances, the South Central MN Multi-County H.R.A. will allow extensions on inspection deadlines. Extenuating circumstances include: severe weather or severe health issues which would prohibit the inspector of the South Central MN Multi-County H.R.A. from performing an inspection in a timely manner.

SECTION 8 HOMEOWNERSHIP PROGRAM

Employment and Income Requirement.

Except in the case of elderly and disabled families, one or more adults in the family who will own the home must be employed on a full-time basis and have been continuously employed on a full-time basis for at least one year before commencement of homeownership assistance.

Eligible households must demonstrate a monthly gross income sufficient to meet homeownership and other family expenses. Except in the case of disabled families, the qualified annual income of the adult family members who will own the home must not be less than the Federal minimum hourly wage multiplied by 2,000 hours, ~~**currently $13,100**~~. For disabled families, the qualified annual income of the adult family members who will own the home must not be less than the monthly Federal Supplemental Security Income (SSI) benefit for an individual living alone multiplied by 12, currently **$8,088 (674 x 12).**

FINANCIAL MANAGEMENT

Charges Against Section 8 Administrative Fees

Expenditures from the administrative fee reserve will be made in accordance with all applicable Federal requirements.

GLOSSARY

Co-Head: An individual in the household who is equally held responsible for the lease and is equally accountable for the family with the Head of Household. A family may have a co-head or spouse but not both. A co-head never qualifies as a dependent.

ATTACHMENT C

Resident Advisory Board Comments and Recommendations

All participants of the Section 8 Program were mailed a postcard notifying them of their opportunity to review the Plan and become members of the Resident Advisory Council. The PHA received the following comments on the PHA Plan from one participant:

Regarding the Somali applicants and participants of the Housing Choice Voucher Program:

> "The HRA should recruit people to tell families that they should go into houses, so large Somali families don't have to split into two apartments."
>
> "I encourage you to hire a Somali interpreter on your staff. I personally am ready for that."
>
> "Somalis want to settle in this country. Encourage them to pursue homeownership as an option."
>
> "This HRA and staff have a good name. That's why so many Somalis come to your office. Somalis communicate quickly. I plan to stay with you until I leave the country."

Analysis and Consideration of the Recommendations Made:

South Central MN Multi-County HRA (SCMMCHRA) provides listings of property owners and other resources with property owner information (i.e. newspapers) to prospective tenants when they attend the Section 8 Briefing. In addition, various local social service organizations work to assist large families to locate appropriate housing. Splitting a large family into two apartments is considered a last resort and is used when no other larger housing is available in the rental market. If SCMMCHRA staff is aware of large housing in their service area, they provide that information to the family or the social service agency that is assisting them in their housing search. SCMMCHRA will continue with the current methods of providing available housing information to their clients, including information that they may be aware of based on communication with area property owners.

The SCMMCHRA does provide interpretive services of people that speak languages other than English to assist non-English speaking families. From September 1, 2009 to September 1, 2010, 18 African non-citizens applied for a Housing Choice Voucher. As of 9/1/2010, 37 African non-citizen households are being assisted on the program. Interpretive services are provided at all Briefings. Less than the normal amount of families are invited so that the meeting is at a slower pace and there is more time for personal interaction. In addition, interpretive services are available upon request for all scheduled appointments. SCMMCHRA will continue to provide interpretive services at the Briefings and any other time that these services are requested for scheduled appointments. Currently, it is not financially feasible to hire a staff person employed by the SCMMCHRA to serve in the interpreter capacity. However, SCMMCHRA will continue to use these services that are already provided by numerous local companies.

Homeownership information is provided at the Briefing as well as each year at the annual reexamination to every household. SCMMCHRA will continue the current practices that are in place to promote the Homeownership program.

SCMMCHRA staff does their best to advocate on behalf of all of their clients, including their non-English speaking clients.

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 off ice 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.