

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>Housing Authority of the City of Winston-Salem</u> PHA Code: <u>NC012</u> PHA Type: <input 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>10/1/2011</u>					
2.0	Inventory (based on ACC units at time of FY beginning in 1.0 above) Number of PH units: <u>1383</u> Number of HCV units: <u>4410 (including Mainstream, FUP and VASH)</u>					
3.0	Submission Type <input type="checkbox"/> 5-Year and Annual Plan <input checked="" type="checkbox"/> Annual Plan Only <input 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	
					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. N/A					
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: Not Applicable					
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. Not Applicable					

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. PHA Policies Governing Eligibility, Selection, and Admissions – No changes per the attached template on pages 39 - 48 2. Statement of Financial Resources – Financial Resources table has been updated to reflect anticipated planned sources and uses per the attached template on pages 37-38. 3. Rent Determinations – No changes per the attached template on pages 48-52. 4. Operation and Management – Included updated PHA Organizational Chart as Attachment B to the template. Revised “HUD Programs Table” on page 53. No other changes per the attached template on pages 52-53. 5. Grievance Procedures – No Changes per the attached template on pages 53-54. 6. Designated Housing for Elderly and Disabled Families – No Changes per the attached template on pages 61-63. 7. Community Service and Self-Sufficiency – Revised FSS Table on page 68. No other changes per the attached template on pages 67-69. 8. Safety and Crime Prevention – No Changes per the attached template on pages 69-71. 9. Pets – No Changes per the attached template on page 71. See Attachment D. 10. Civil Rights Certification – No changes per the attached template on page 72. Certification has been executed and attached. 11. Fiscal Year Audit – No changes per the attached template on page 72. 12. Asset Management – The Authority plans to carry out is Asset Management per previous years and as indicated on page 72 of the attached template. 13. Violence Against Women Act (VAWA) – Has been updated per Attachment J. <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.</p> <p>The Authority will post the PHA Plan and any updates at each Asset Management Project Office and the Central Office. A copy has been provided to each Resident Council. Copies of the PHA Plan may be obtained at the Central Office of the PHA located at 500 West Fourth Street, Suite 300, Winston-Salem, NC 27101.</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>(a). HOPE VI or Mixed Finance Modernization or Development - Dependent on the Grant description, the Authority may apply for HOPE VI, Housing Choice Neighborhood, Mixed Finance Modernization or Development Grants.</p> <ul style="list-style-type: none"> • The Authority anticipates building up to 50 public housing units at one site utilizing Replacement Housing Factor Funds. The Authority has an approved development plan. • See updates on pages 55-57 on the attached template. <p>(b). Demolition and/or Disposition. - The Authority anticipates the following demolition and/or disposition actions:</p> <ul style="list-style-type: none"> • The Authority anticipates disposing of the 901 Cleveland Avenue Administrative Building. • The Authority anticipates disposing of Stoney Glen Apartments (AMP NC012000022P) • The Authority anticipates disposing of vacant land in four Turnkey III developments. <p>These items are reflected on pages 57-61 of the attached template.</p> <p>(c) Conversion of Public Housing – The Authority is considering seeking a voluntary conversion of Stoney Glenn (NC012000022), Townview Apartment (NC012000021), Crystal Towers (NC012000009) and any other eligible public housing development within its inventory to HCV tenant-based or project-based and/or TRA-like available program. These items are reflected on pages 64 and 65 of the attached template.</p> <p>(d) Homeownership – No homeownership in conjunction with public housing (only Section 8 and HOPE VI) will be administered.</p> <p>(e) Project-Based Vouchers – The Authority anticipates committing up to 240 units of Project-Based Voucher assistance in up to five (5) Developments throughout the Winston-Salem, Forsyth County jurisdiction. The commitments will meet the Authority’s goals for deconcentration and providing affordable, quality housing through Winston-Salem, and Forsyth County. See attachment F</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 Attachment L through Attachment Y</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 Z</p>
8.3	<p>Capital Fund Financing Program (CFFP). <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>See Housing Needs Table per the attached template on page 6.</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 Authority’s strategy for addressing needs in the jurisdiction and on the waiting list is referenced in the attached template on pages 34-37.</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 Authority continues to operate its public housing units in compliance with asset management. During fiscal year 2012, the Authority will build up to an additional 50 units of public housing by utilizing replacement housing funds. The Authority also applies for additional housing choice voucher funding as opportunities exist.</p> <p>Our mantra is that affordable housing stabilizes families. Stabilized families are the building blocks of economically viable and self-sustaining communities. This mantra embraces the creation of traditional family oriented neighborhoods. To achieve this we are diversifying our real estate holdings, investing in community development opportunities, and cultivating partnerships with developers/builders, financial institutions, City agencies, human service providers and more importantly neighborhood associations. This approach moves us away from the traditional housing authority model, and towards a highly responsive organization involved in the full spectrum of City-wide community housing concerns and solutions.</p> <p>(b) Significant Amendment and Substantial Deviation/Modification. Provide the PHA’s definition of “significant amendment” and “substantial deviation/modification”</p> <p>Any substantial deviation from the Missions Statement and/or Goals and Objectives presented in the Five-Year Plan that cause changes in the services provided to the residents or significant changes to the Agency’s financial situation will be documented in subsequent Agency Plans. An exception to this definition will be made for revisions that are adopted to reflect changes in HUD regulatory requirements; such changes will not be considered significant amendments by the Housing Authority.</p> <p>The Housing Authority of the City of Winston-Salem has adopted the HUD standards for reporting significant deviations or amendments according to Notice 99-51.</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> <ul style="list-style-type: none"> (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) (b) Form HUD-50070, <i>Certification for a Drug-Free Workplace</i> (PHAs receiving CFP grants only) (c) Form HUD-50071, <i>Certification of Payments to Influence Federal Transactions</i> (PHAs receiving CFP grants only) (d) Form SF-LLL, <i>Disclosure of Lobbying Activities</i> (PHAs receiving CFP grants only) (e) Form SF-LLL-A, <i>Disclosure of Lobbying Activities Continuation Sheet</i> (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, <i>Capital Fund Program Annual Statement/Performance and Evaluation Report</i> (PHAs receiving CFP grants only) (i) Form HUD-50075.2, <i>Capital Fund Program Five-Year Action Plan</i> (PHAs receiving CFP grants only)
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This information collection is authorized by Section 511 of the Quality Housing and Work Responsibility Act, which added a new section 5A to the U.S. Housing Act of 1937, as amended, which introduced 5-Year and Annual PHA Plans. The 5-Year and Annual PHA plans provide a ready source for interested parties to locate basic PHA policies, rules, and requirements concerning the PHA's operations, programs, and services, and informs HUD, families served by the PHA, and members of the public of the PHA's mission and strategies for serving the needs of low-income and very low-income families. This form is to be used by all PHA types for submission of the 5-Year and Annual Plans to HUD. Public reporting burden for this information collection is estimated to average 12.68 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. HUD may not collect this information, and respondents are not required to complete this form, unless it displays a currently valid OMB Control Number.

Privacy Act Notice. The United States Department of Housing and Urban Development is authorized to solicit the information requested in this form by virtue of Title 12, U.S. Code, Section 1701 et seq., and regulations promulgated thereunder at Title 12, Code of Federal Regulations. Responses to the collection of information are required to obtain a benefit or to retain a benefit. The information requested does not lend itself to confidentiality

Instructions form HUD-50075

Applicability. This form is to be used by all Public Housing Agencies (PHAs) with Fiscal Year beginning April 1, 2008 for the submission of their 5-Year and Annual Plan in accordance with 24 CFR Part 903. The previous version may be used only through April 30, 2008.

1.0 PHA Information

Include the full PHA name, PHA code, PHA type, and PHA Fiscal Year Beginning (MM/YYYY).

2.0 Inventory

Under each program, enter the number of Annual Contributions Contract (ACC) Public Housing (PH) and Section 8 units (HCV).

3.0 Submission Type

Indicate whether this submission is for an Annual and Five Year Plan, Annual Plan only, or 5-Year Plan only.

4.0 PHA Consortia

Check box if submitting a Joint PHA Plan and complete the table.

5.0 Five-Year Plan

Identify the PHA's Mission, Goals and/or Objectives (24 CFR 903.6). Complete only at 5-Year update.

5.1 Mission. A statement of the mission of the public housing agency for serving the needs of low-income, very low-income, and extremely low-income families in the jurisdiction of the PHA during the years covered under the plan.

5.2 Goals and Objectives. Identify quantifiable goals and objectives that will enable the PHA to serve the needs of low income, very low-income, and extremely low-income families.

6.0 PHA Plan Update. In addition to the items captured in the Plan template, PHAs must have the elements listed below readily available to the public. Additionally, a PHA must:

- (a) Identify specifically which plan elements have been revised since the PHA's prior plan submission.
- (b) Identify where the 5-Year and Annual Plan may be obtained by the public. At a minimum, PHAs must post PHA Plans, including updates, at each Asset Management Project (AMP) and main office or central office of the PHA. PHAs are strongly encouraged to post complete PHA Plans on its official website. PHAs are also encouraged to provide each resident council a copy of its 5-Year and Annual Plan.

PHA Plan Elements. (24 CFR 903.7)

1. **Eligibility, Selection and Admissions Policies, including Deconcentration and Wait List Procedures.** Describe the PHA's policies that govern resident or tenant eligibility, selection and admission including admission preferences for both public housing and HCV and unit assignment policies for public housing; and procedures for maintaining waiting lists for admission to public housing and address any site-based waiting lists.

2. **Financial Resources.** A statement of financial resources, including a listing by general categories, of the PHA's anticipated resources, such as PHA Operating, Capital and other anticipated Federal resources available to the PHA, as well as tenant rents and other income available to support public housing or tenant-based assistance. The statement also should include the non-Federal sources of funds supporting each Federal program, and state the planned use for the resources.
3. **Rent Determination.** A statement of the policies of the PHA governing rents charged for public housing and HCV dwelling units.
4. **Operation and Management.** A statement of the rules, standards, and policies of the PHA governing maintenance management of housing owned, assisted, or operated by the public housing agency (which shall include measures necessary for the prevention or eradication of pest infestation, including cockroaches), and management of the PHA and programs of the PHA.
5. **Grievance Procedures.** A description of the grievance and informal hearing and review procedures that the PHA makes available to its residents and applicants.
6. **Designated Housing for Elderly and Disabled Families.** With respect to public housing projects owned, assisted, or operated by the PHA, describe any projects (or portions thereof), in the upcoming fiscal year, that the PHA has designated or will apply for designation for occupancy by elderly and disabled families. The description shall include the following information: **1)** development name and number; **2)** designation type; **3)** application status; **4)** date the designation was approved, submitted, or planned for submission, and; **5)** the number of units affected.
7. **Community Service and Self-Sufficiency.** A description of: **(1)** Any programs relating to services and amenities provided or offered to assisted families; **(2)** Any policies or programs of the PHA for the enhancement of the economic and social self-sufficiency of assisted families, including programs under Section 3 and FSS; **(3)** How the PHA will comply with the requirements of community service and treatment of income changes resulting from welfare program requirements. **(Note: applies to only public housing).**
8. **Safety and Crime Prevention.** For public housing only, describe the PHA's plan for safety and crime prevention to ensure the safety of the public housing residents. The statement must include: (i) A description of the need for measures to ensure the safety of public housing residents; (ii) A description of any crime prevention activities conducted or to be conducted by the PHA; and (iii) A description of the coordination between the PHA and the appropriate police precincts for carrying out crime prevention measures and activities.

9. **Pets.** A statement describing the PHAs policies and requirements pertaining to the ownership of pets in public housing.
10. **Civil Rights Certification.** A PHA will be considered in compliance with the Civil Rights and AFFH Certification if: it can document that it examines its programs and proposed programs to identify any impediments to fair housing choice within those programs; addresses those impediments in a reasonable fashion in view of the resources available; works with the local jurisdiction to implement any of the jurisdiction's initiatives to affirmatively further fair housing; and assures that the annual plan is consistent with any applicable Consolidated Plan for its jurisdiction.
11. **Fiscal Year Audit.** The results of the most recent fiscal year audit for the PHA.
12. **Asset Management.** A statement of how the agency will carry out its asset management functions with respect to the public housing inventory of the agency, including how the agency will plan for the long-term operating, capital investment, rehabilitation, modernization, disposition, and other needs for such inventory.
13. **Violence Against Women Act (VAWA).** A description of: 1) Any activities, services, or programs provided or offered by an agency, either directly or in partnership with other service providers, to child or adult victims of domestic violence, dating violence, sexual assault, or stalking; 2) Any activities, services, or programs provided or offered by a PHA that helps child and adult victims of domestic violence, dating violence, sexual assault, or stalking, to obtain or maintain housing; and 3) Any activities, services, or programs provided or offered by a public housing agency to prevent domestic violence, dating violence, sexual assault, and stalking, or to enhance victim safety in assisted families.

7.0 Hope VI, Mixed Finance Modernization or Development, Demolition and/or Disposition, Conversion of Public Housing, Homeownership Programs, and Project-based Vouchers

- (a) **Hope VI or Mixed Finance Modernization or Development.** 1) A description of any housing (including project number (if known) and unit count) for which the PHA will apply for HOPE VI or Mixed Finance Modernization or Development; and 2) A timetable for the submission of applications or proposals. The application and approval process for Hope VI, Mixed Finance Modernization or Development, is a separate process. See guidance on HUD's website at: <http://www.hud.gov/offices/pih/programs/ph/hope6/index.cfm>
- (b) **Demolition and/or Disposition.** With respect to public housing projects owned by the PHA and subject to ACCs under the Act: (1) A description of any housing (including project number and unit numbers [or addresses]), and the number of affected units along with their sizes and accessibility features) for which the PHA will apply or is currently pending for demolition or disposition; and (2) A timetable for the demolition or disposition. The application and approval process for demolition and/or disposition is a separate process. See guidance on HUD's website at: http://www.hud.gov/offices/pih/centers/sac/demo_dispo/index.cfm
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.

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

PHA Plans

5 Year Plan for Fiscal Years 2010-2014

Annual Plan for Fiscal Year 2011 (10/1/11-9/30/12)

**NOTE: THIS PHA PLANS TEMPLATE (HUD 50075) IS TO BE COMPLETED IN
ACCORDANCE WITH INSTRUCTIONS LOCATED IN APPLICABLE PIH NOTICES**

PHA Plan Agency Identification

PHA Name: Housing Authority of the City of Winston-Salem

PHA Number: NC012

PHA Fiscal Year Beginning: (mm/yyyy) 10/2011

PHA Programs Administered:

Public Housing and Section 8
 Section 8 Only
 Public Housing Only
 Number of PH ACC units: 1351 Number of S8 units: Number of public housing units:
 Number of S8 units: 4510

PHA Consortia: (check box if submitting a joint PHA Plan and complete table)

Participating PHAs	PHA Code	Program(s) Included in the Consortium	Programs Not in the Consortium	# of Units Each Program
Participating PHA 1:				
Participating PHA 2:				
Participating PHA 3:				

Public Access to Information

Information regarding any activities outlined in this plan can be obtained by contacting: (select all that apply)

- Main administrative office of the PHA
- PHA development management offices
- PHA local offices

Display Locations For PHA Plans and Supporting Documents

The PHA Plans (including attachments) are available for public inspection at: (select all that apply)

- Main administrative office of the PHA
- PHA development management offices
- PHA local offices
- Main administrative office of the local government
- Main administrative office of the County government
- Main administrative office of the State government
- Public library
- PHA website
- Other (list below)

PHA Plan Supporting Documents are available for inspection at: (select all that apply)

- Main business office of the PHA
- PHA development management offices
- Other (list below)

5-YEAR PLAN
PHA FISCAL YEARS 2010 - 2014
[24 CFR Part 903.5]

A. 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. (select one of the choices below)

The mission of the PHA is the same as that of the Department of Housing and Urban Development: To promote adequate and affordable housing, economic opportunity and a suitable living environment free from discrimination.

The PHA's mission is: (state mission here)

To create and maintain sustainable communities through partnerships to benefit the residents of Winston-Salem.

B. Goals

The goals and objectives listed below are derived from HUD's strategic Goals and Objectives and those emphasized in recent legislation. PHAs may select any of these goals and objectives as their own, or identify other goals and/or objectives. Whether selecting the HUD-suggested objectives or their own, **PHAS ARE STRONGLY ENCOURAGED TO IDENTIFY QUANTIFIABLE MEASURES OF SUCCESS IN REACHING THEIR OBJECTIVES OVER THE COURSE OF THE 5 YEARS.** (Quantifiable measures would include targets such as: numbers of families served or PHAS scores achieved.) PHAs should identify these measures in the spaces to the right of or below the stated objectives.

HUD Strategic Goal: Increase the availability of decent, safe, and affordable housing.

PHA Goal: Expand the supply of assisted housing

Objectives:

Apply for additional rental vouchers:

Reduce public housing vacancies:

Leverage private or other public funds to create additional housing opportunities:

Acquire or build units or developments

Other (list below)

PHA Goal: Improve the quality of assisted housing

Objectives:

Improve public housing management: (PHAS score) N/A

Improve voucher management: (SEMAP score) 97

Increase customer satisfaction:

Concentrate on efforts to improve specific management functions: (list; e.g., public housing finance; voucher unit inspections)

Renovate or modernize public housing units:

- Demolish or dispose of obsolete public housing:
- Provide replacement public housing:
- Provide replacement vouchers:
- Other: (list below)

- PHA Goal: Increase assisted housing choices

Objectives:

- Provide voucher mobility counseling:
- Conduct outreach efforts to potential voucher landlords
- Increase voucher payment standards
- Implement voucher homeownership program:
- Implement public housing or other homeownership programs:
- Implement public housing site-based waiting lists:
- Convert public housing to vouchers:
- Other: (list below)

HUD Strategic Goal: Improve community quality of life and economic vitality

- PHA Goal: Provide an improved living environment

Objectives:

- Implement measures to deconcentrate poverty by bringing higher income public housing households into lower income developments:
- Implement measures to promote income mixing in public housing by assuring access for lower income families into higher income developments:
- Implement public housing security improvements:
- Designate developments or buildings for particular resident groups (elderly, persons with disabilities)
- Other: (list below)

HUD Strategic Goal: Promote self-sufficiency and asset development of families and individuals

- PHA Goal: Promote self-sufficiency and asset development of assisted households

Objectives:

- Increase the number and percentage of employed persons in assisted families:
- Provide or attract supportive services to improve assistance recipients' employability:
- Provide or attract supportive services to increase independence for the elderly or families with disabilities.

Other: (list below)

HUD Strategic Goal: Ensure Equal Opportunity in Housing for all Americans

- PHA Goal: Ensure equal opportunity and affirmatively further fair housing
Objectives:
- Undertake affirmative measures to ensure access to assisted housing regardless of race, color, religion national origin, sex, familial status, and disability:
 - Undertake affirmative measures to provide a suitable living environment for families living in assisted housing, regardless of race, color, religion national origin, sex, familial status, and disability:
 - Undertake affirmative measures to ensure accessible housing to persons with all varieties of disabilities regardless of unit size required:
 - Other: (list below)

Other PHA Goals and Objectives: (list below)

Annual PHA Plan
PHA Fiscal Year 2011
[24 CFR Part 903.7]

i. Annual Plan Type:

Select which type of Annual Plan the PHA will submit.

Standard Plan

Troubled Agency Plan

ii. Executive Summary of the Annual PHA Plan

[24 CFR Part 903.7 9 (r)]

Provide a brief overview of the information in the Annual Plan, including highlights of major initiatives and discretionary policies the PHA has included in the Annual Plan.

PHA Annual Plan Executive Summary
Fiscal Year October 1, 2011 – September 30, 2012

The Housing Authority of Winston-Salem has made significant changes. Our core business of creating and expanding viable housing options for residents of Winston-Salem has required us to broaden and increase our internal capacity and capabilities. We've placed greater importance on process improvements, customer services, and professionalizing our operation which will aide us in meeting the City's housing challenges of tomorrow.

Our mantra is *affordable housing stabilizes families*. Stabilized families are the building blocks of economically viable and self-sustaining communities. This mantra embraces the creation of traditional family oriented neighborhoods. To achieve this we are diversifying our real estate holdings, investing in community development opportunities, and cultivating partnerships with developers/builders, financial institutions, City agencies, human service providers and more importantly neighborhood associations. This approach moves us away from the traditional housing authority model, and towards a highly responsive organization involved in the full spectrum of City-wide community housing concerns and solutions.

iii. Annual Plan Table of Contents

[24 CFR Part 903.7 9 (r)]

Provide a table of contents for the Annual Plan, including attachments, and a list of supporting documents available for public inspection.

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Attachments

Indicate which attachments are provided by selecting all that apply. Provide the attachment's name (A, B, etc.) in the space to the left of the name of the attachment. Note: If the attachment is provided as a **SEPARATE** file submission from the PHA Plans file, provide the file name in parentheses in the space to the right of the title.

Required Attachments:

- Admissions Policy for Deconcentration
- Capital Fund Program Annual Statement
- Most recent board-approved operating budget (Required Attachment for PHAs that are troubled or at risk of being designated troubled ONLY)
- List of Resident Advisory Board Members
- List of Resident Board Member
- Community Service Description of Implementation
- Information on Pet Policy
- Section 8 Homeownership Capacity Statement, if applicable
- Description of Homeownership Programs, if applicable

Optional Attachments:

- PHA Management Organizational Chart
- Capital Fund Program 5 Year Action Plan
- Public Housing Drug Elimination Program (PHDEP) Plan
- Comments of Resident Advisory Board or Boards (must be attached if not included in PHA Plan text)
- Other (List below, providing each attachment name)

Supporting Documents Available for Review

Indicate which documents are available for public review by placing a mark in the “Applicable & On Display” column in the appropriate rows. All listed documents must be on display if applicable to the program activities conducted by the PHA.

List of Supporting Documents Available for Review		
Applicable & On Display	Supporting Document	Applicable Plan Component
X	PHA Plan Certifications of Compliance with the PHA Plans and Related Regulations	5 Year and Annual Plans
X	State/Local Government Certification of Consistency with the Consolidated Plan	5 Year and Annual Plans
X	Fair Housing Documentation: Records reflecting that the PHA has examined its programs or proposed programs, identified any impediments to fair housing choice in those programs, addressed or is addressing those impediments in a reasonable fashion in view of the resources available, and worked or is working with local jurisdictions to implement any of the jurisdictions’ initiatives to affirmatively further fair housing that require the PHA’s involvement.	5 Year and Annual Plans
X	Consolidated Plan for the jurisdiction/s in which the PHA is located (which includes the Analysis of Impediments to Fair Housing Choice (AI)) and any additional backup data to support statement of housing needs in the jurisdiction	Annual Plan: Housing Needs
X	Most recent board-approved operating budget for the public housing program	Annual Plan: Financial Resources;
X	Public Housing Admissions and (Continued) Occupancy Policy (A&O), which includes the Tenant Selection and Assignment Plan [TSAP]	Annual Plan: Eligibility, Selection, and Admissions Policies
X	Section 8 Administrative Plan	Annual Plan: Eligibility, Selection, and Admissions Policies
X	Public Housing Deconcentration and Income Mixing Documentation: 1. PHA board certifications of compliance with deconcentration requirements (section 16(a) of the US Housing Act of 1937, as implemented in the 2/18/99 <i>Quality Housing and Work Responsibility Act Initial Guidance; Notice</i> and any further HUD guidance) and 2. Documentation of the required deconcentration and	Annual Plan: Eligibility, Selection, and Admissions Policies

List of Supporting Documents Available for Review		
Applicable & On Display	Supporting Document	Applicable Plan Component
	income mixing analysis	
X	Public housing rent determination policies, including the methodology for setting public housing flat rents <input checked="" type="checkbox"/> check here if included in the public housing A & O Policy	Annual Plan: Rent Determination
X	Schedule of flat rents offered at each public housing development <input type="checkbox"/> check here if included in the public housing A & O Policy	Annual Plan: Rent Determination
X	Section 8 rent determination (payment standard) policies <input checked="" type="checkbox"/> check here if included in Section 8 Administrative Plan	Annual Plan: Rent Determination
X	Public housing management and maintenance policy documents, including policies for the prevention or eradication of pest infestation (including cockroach infestation)	Annual Plan: Operations and Maintenance
X	Public housing grievance procedures <input type="checkbox"/> check here if included in the public housing A & O Policy	Annual Plan: Grievance Procedures
X	Section 8 informal review and hearing procedures <input checked="" type="checkbox"/> check here if included in Section 8 Administrative Plan	Annual Plan: Grievance Procedures
X	The HUD-approved Capital Fund/Comprehensive Grant Program Annual Statement (HUD 52837) for the active grant year	Annual Plan: Capital Needs
	Most recent CIAP Budget/Progress Report (HUD 52825) for any active CIAP grant	Annual Plan: Capital Needs
	Most recent, approved 5 Year Action Plan for the Capital Fund/Comprehensive Grant Program, if not included as an attachment (provided at PHA option)	Annual Plan: Capital Needs
	Approved HOPE VI applications or, if more recent, approved or submitted HOPE VI Revitalization Plans or any other approved proposal for development of public housing	Annual Plan: Capital Needs
	Approved or submitted applications for demolition and/or disposition of public housing	Annual Plan: Demolition and Disposition
X	Approved or submitted applications for designation of public housing (Designated Housing Plans)	Annual Plan: Designation of Public Housing
	Approved or submitted assessments of reasonable revitalization of public housing and approved or submitted conversion plans prepared pursuant to section 202 of the 1996 HUD Appropriations Act	Annual Plan: Conversion of Public Housing
X	Approved or submitted public housing homeownership programs/plans	Annual Plan: Homeownership
X	Policies governing any Section 8 Homeownership program <input checked="" type="checkbox"/> check here if included in the Section 8 Administrative Plan	Annual Plan: Homeownership
X	Any cooperative agreement between the PHA and the TANF agency	Annual Plan: Community Service & Self-Sufficiency

List of Supporting Documents Available for Review		
Applicable & On Display	Supporting Document	Applicable Plan Component
X	FSS Action Plan/s for public housing and/or Section 8	Annual Plan: Community Service & Self-Sufficiency
	Most recent self-sufficiency (ED/SS, TOP or ROSS or other resident services grant) grant program reports	Annual Plan: Community Service & Self-Sufficiency
	The most recent Public Housing Drug Elimination Program (PHEDEP) semi-annual performance report for any open grant and most recently submitted PHDEP application (PHDEP Plan)	Annual Plan: Safety and Crime Prevention
X	The most recent fiscal year audit of the PHA conducted under section 5(h)(2) of the U.S. Housing Act of 1937 (42 U.S.C. 1437c(h)), the results of that audit and the PHA's response to any findings	Annual Plan: Annual Audit
	Troubled PHAs: MOA/Recovery Plan	Troubled PHAs
	Other supporting documents (optional) (list individually; use as many lines as necessary)	(specify as needed)
	Results of the latest Public Housing Assessment System (PHAS) Assessment	

1. Statement of Housing Needs

[24 CFR Part 903.7 9 (a)]

A. Housing Needs of Families in the Jurisdiction/s Served by the PHA

Based upon the information contained in the Consolidated Plan/s applicable to the jurisdiction, and/or other data available to the PHA, provide a statement of the housing needs in the jurisdiction by completing the following table. In the "Overall" Needs column, provide the estimated number of renter families that have housing needs. For the remaining characteristics, rate the impact of that factor on the housing needs for each family type, from 1 to 5, with 1 being "no impact" and 5 being "severe impact." Use N/A to indicate that no information is available upon which the PHA can make this assessment.

Housing Needs of Families in the Jurisdiction by Family Type							
Family Type	Overall	Afford-ability	Supply	Quality	Access-ibility	Size	Loca-tion
Income <= 30% of AMI	7,799	5	4	3	n/a	3	3
Income >30% but <=50% of AMI	4,409	3	3	3	n/a	3	3
Income >50% but <80% of AMI	3,418	3	2	3	n/a	2	3
Elderly	2,629	3	1	2	3	1	3
Families with Disabilities	2,538	3	5	2	3	3	2
Race/Ethnicity							
Race/Ethnicity							
Race/Ethnicity							
Race/Ethnicity							

What sources of information did the PHA use to conduct this analysis? (Check all that apply; all materials must be made available for public inspection.)

- Consolidated Plan of the Jurisdiction/s **Winston-Salem Forsyth County**
Indicate year: **2009-2013**
- U.S. Census data: the Comprehensive Housing Affordability Strategy ("CHAS") dataset
- American Housing Survey data
Indicate year:
- Other housing market study
Indicate year:
- Other sources: (list and indicate year of information)

B. Housing Needs of Families on the Public Housing and Section 8 Tenant- Based Assistance Waiting Lists

State the housing needs of the families on the PHA's waiting list/s. **Complete one table for each type of PHA-wide waiting list administered by the PHA.** PHAs may provide separate tables for site-based or sub-jurisdictional public housing waiting lists at their option.

Housing Needs of Families on the Waiting List			
Waiting list type: (select one)			
<input checked="" type="checkbox"/> Section 8 tenant-based assistance			
<input type="checkbox"/> Public Housing			
<input type="checkbox"/> Combined Section 8 and Public Housing			
<input type="checkbox"/> Public Housing Site-Based or sub-jurisdictional waiting list (optional)			
If used, identify which development/subjurisdiction:			
	# of families	% of total families	Annual Turnover
Waiting list total	5086		09%
Extremely low income <=30% AMI	4285	84%	
Very low income (>30% but <=50% AMI)	701	14%	
Low income (>50% but <80% AMI)	100	2%	
Families with children	3064	60%	
Elderly families	228	4%	
Families with Disabilities	675	13%	
White	316	6%	
Black	4733	93%	
Am. Indian/Alaskan	23	<1%	
Asian	8	<1%	
Pacific Islander	6	<1%	
Characteristics by Bedroom Size (Public Housing Only)			
1BR			
2 BR			
3 BR			

Housing Needs of Families on the Waiting List

4 BR			
5 BR			
5+ BR			
<p>Is the waiting list closed (select one)? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes</p> <p>If yes:</p> <p style="padding-left: 40px;">How long has it been closed (# of months)? Opened for one week April 5-9, 2010</p> <p style="padding-left: 40px;">Does the PHA expect to reopen the list in the PHA Plan year? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p> <p style="padding-left: 40px;">Does the PHA permit specific categories of families onto the waiting list, even if generally closed? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes PBV, Mainstream, Preferences, VASH and FUP when available</p>			

Housing Needs of Families on the Waiting List

Waiting list type: (select one)

- Section 8 tenant-based assistance
 Public Housing
 Combined Section 8 and Public Housing
 Public Housing Site-Based or sub-jurisdictional waiting list (optional)

If used, identify which development/subjurisdiction: **Cleveland Avenue**

	# of families	% of total families	Annual Turnover
Waiting list total	121		40%
Extremely low income <=30% AMI	113	93.4%	
Very low income (>30% but <=50% AMI)	8	5.8%	
Low income (>50% but <80% AMI)	0	0%	
Families with children	48	39.7%	
Elderly families	0	0%	
Families with Disabilities	7	5.8%	
White	3	2.5%	
Black	113	93.3%	
Am. Indian/Alaskan	1	0.8%	
Asian	0	0%	
other	4	3.3%	
Characteristics by Bedroom Size (Public Housing Only)			
1BR	57	47%	
2 BR	53	43.8%	
3 BR	9	7.5%	
4 BR	2	1.7%	
5 BR			
5+ BR			

Housing Needs of Families on the Waiting List

Is the waiting list closed (select one)? No Yes

If yes:

How long has it been closed (# of months)?

Does the PHA expect to reopen the list in the PHA Plan year? No Yes

Does the PHA permit specific categories of families onto the waiting list, even if generally closed? No

Housing Needs of Families on the Waiting List

Waiting list type: (select one)

- Section 8 tenant-based assistance
 Public Housing
 Combined Section 8 and Public Housing
 Public Housing Site-Based or sub-jurisdictional waiting list (optional)

If used, identify which development/subjurisdiction: **Townview**

	# of families	% of total families	Annual Turnover
Waiting list total	148		16%
Extremely low income <=30% AMI	131	88.5%	
Very low income (>30% but <=50% AMI)	8	5.4%	
Low income (>50% but <80% AMI)	1	0.7%	
Families with children	125	84.5%	
Elderly families	0	0%	
Families with Disabilities	14	9.5%	
White	4	2.7%	
Black	133	95.3%	
Am Indian/Alaskan	0	0.00%	
Asian	0		
Other	11	7.4	
Characteristics by Bedroom Size (Public Housing Only)			
1BR			
2 BR	95	64.2%	
3 BR	53	35.8%	
4 BR			
5 BR			
5+ BR			

Housing Needs of Families on the Waiting List

Is the waiting list closed (select one)? No Yes

If yes:

How long has it been closed (# of months)?

Does the PHA expect to reopen the list in the PHA Plan year? No Yes

Does the PHA permit specific categories of families onto the waiting list, even if generally closed? No

Housing Needs of Families on the Waiting List

Waiting list type: (select one)

- Section 8 tenant-based assistance
 Public Housing
 Combined Section 8 and Public Housing
 Public Housing Site-Based or sub-jurisdictional waiting list (optional)

If used, identify which development/subjurisdiction: **Piedmont Park**

	# of families	% of total families	Annual Turnover
Waiting list total	182		30%
Extremely low income <=30% AMI	177	97.2%	
Very low income (>30% but <=50% AMI)	4	2.2%	
Low income (>50% but <80% AMI)	1	0.5%	
Families with children	121	66.5%	
Elderly families	0	0	
Families with Disabilities	15	8.2%	
White	6	3.3%	
Black	163	89.6%	
Am. Indian/Alaskan	1	0.5%	
Asian	0		
Pacific Islander	0		
Other	12	6.6%	
Characteristics by Bedroom Size (Public Housing Only)			
1BR	56	30.7%	
2 BR	117	64.2%	
3 BR	6	3.3%	
4 BR	3	1.7%	
5 BR			
5+ BR			

Housing Needs of Families on the Waiting List

Is the waiting list closed (select one)? No Yes

If yes:

How long has it been closed (# of months)?

Does the PHA expect to reopen the list in the PHA Plan year? No Yes

Does the PHA permit specific categories of families onto the waiting list, even if generally closed? No

Housing Needs of Families on the Waiting List

Waiting list type: (select one)

- Section 8 tenant-based assistance
 Public Housing
 Combined Section 8 and Public Housing
 Public Housing Site-Based or sub-jurisdictional waiting list (optional)

If used, identify which development/subjurisdiction: **Stoney Glen**

	# of families	% of total families	Annual Turnover
Waiting list total	140		24%
Extremely low income <=30% AMI	130	92.9%	
Very low income (>30% but <=50% AMI)	10	7.1%	
Low income (>50% but <80% AMI)	0	0	
Families with children	111	79.3%	
Elderly families	0	0	
Families with Disabilities	5	3.6%	
White	9	6.5	
Black	126	90.0%	
Am. Indian/Alaskan	0		
Asian	0		
Pacific Islander	0		
Other	5	3.6%	
Characteristics by Bedroom Size (Public Housing Only)			
1BR			
2 BR	140	100%	
3 BR			
4 BR			
5 BR			
5+ BR			

Housing Needs of Families on the Waiting List

Is the waiting list closed (select one)? No Yes

If yes:

How long has it been closed (# of months)?

Does the PHA expect to reopen the list in the PHA Plan year? No Yes

Does the PHA permit specific categories of families onto the waiting list, even if generally closed? No

Housing Needs of Families on the Waiting List

Waiting list type: (select one)

- Section 8 tenant-based assistance
 Public Housing
 Combined Section 8 and Public Housing
 Public Housing Site-Based or sub-jurisdictional waiting list (optional)

If used, identify which development/subjurisdiction: **Sunrise**

	# of families	% of total families	Annual Turnover
Waiting list total	274		29%
Extremely low income <=30% AMI	254	92.7%	
Very low income (>30% but <=50% AMI)	19	6.9%	
Low income (>50% but <80% AMI)	1	0.4%	
Families with children	13	4.7%	
Elderly families	0	0%	
Families with Disabilities	49	17.9%	
White	23	8.4%	
Black	237	86.5%	
Am. Indian/Alaskan	6	2.2%	
Asian	0		
Pacific Islander	0		
Other	8	2.9%	
Characteristics by Bedroom Size (Public Housing Only)			
1BR	274	100%	
2 BR			
3 BR			
4 BR			
5 BR			
5+ BR			

Housing Needs of Families on the Waiting List

Is the waiting list closed (select one)? No Yes

If yes:

How long has it been closed (# of months)?

Does the PHA expect to reopen the list in the PHA Plan year? No Yes

Does the PHA permit specific categories of families onto the waiting list, even if generally closed? No

Housing Needs of Families on the Waiting List

Waiting list type: (select one)

- Section 8 tenant-based assistance
 Public Housing
 Combined Section 8 and Public Housing
 Public Housing Site-Based or sub-jurisdictional waiting list (optional)
 If used, identify which development/subjurisdiction: **Crystal Towers**

	# of families	% of total families	Annual Turnover
Waiting list total	43		38%
Extremely low income <=30% AMI	41	95.3%	
Very low income (>30% but <=50% AMI)	2	4.7%	
Low income (>50% but <80% AMI)	0	0	
Families with children	1	2.3%	
Elderly families	0	0%	
Families with Disabilities	25	58.1%	
White	13	30.3%	
Black	27	62.8%	
Am. Indian/Alaskan	0		
Asian	0		
Pacific Islander	0		
Other	3	7.0%	
Characteristics by Bedroom Size (Public Housing Only)			
1BR	43	100%	
2 BR			
3 BR			
4 BR			
5 BR			
5+ BR			

Housing Needs of Families on the Waiting List

Is the waiting list closed (select one)? No Yes

If yes:

How long has it been closed (# of months)?

Does the PHA expect to reopen the list in the PHA Plan year? No Yes

Does the PHA permit specific categories of families onto the waiting list, even if generally closed? No

Housing Needs of Families on the Waiting List

Waiting list type: (select one)

- Section 8 tenant-based assistance
 Public Housing
 Combined Section 8 and Public Housing
 Public Housing Site-Based or sub-jurisdictional waiting list (optional)

If used, identify which development/subjurisdiction: **Healy Towers**

	# of families	% of total families	Annual Turnover
Waiting list total	4		17%
Extremely low income <=30% AMI	2	50%	
Very low income (>30% but <=50% AMI)	1	25%	
Low income (>50% but <80% AMI)	1	25%	
Families with children	0	0	
Elderly families	0	0%	
Families with Disabilities	3	75%	
White	3	75%	
Black	1	25%	
Am. Indian/Alaskan	0		
Asian	0		
Pacific Islander	0		
Characteristics by Bedroom Size (Public Housing Only)			
1BR	4	100%	
2 BR			
3 BR			
4 BR			
5 BR			
5+ BR			

Housing Needs of Families on the Waiting List

Is the waiting list closed (select one)? No Yes

If yes:

How long has it been closed (# of months)?

Does the PHA expect to reopen the list in the PHA Plan year? No Yes

Does the PHA permit specific categories of families onto the waiting list, even if generally closed? No

Housing Needs of Families on the Waiting List

Waiting list type: (select one)

- Section 8 tenant-based assistance
 Public Housing
 Combined Section 8 and Public Housing
 Public Housing Site-Based or sub-jurisdictional waiting list (optional)
 If used, identify which development/subjurisdiction: **Azalea Terrace**

	# of families	% of total families	Annual Turnover
Waiting list total	16		16%
Extremely low income <=30% AMI	3	19%	
Very low income (>30% but <=50% AMI)	8	50%	
Low income (>50% but <80% AMI)	5	31%	
Families with children	0	0	
Elderly families	16	100%	
Families with Disabilities	5	31%	
White	0		
Black	16	100%	
Am. Indian/Alaskan	0		
Asian	0		
Pacific Islander	0		
Characteristics by Bedroom Size (Public Housing Only)			
1BR	2	100%	
2 BR			
3 BR			
4 BR			
5 BR			
5+ BR			

Housing Needs of Families on the Waiting List

Is the waiting list closed (select one)? No Yes

If yes:

How long has it been closed (# of months)?

Does the PHA expect to reopen the list in the PHA Plan year? No Yes

Does the PHA permit specific categories of families onto the waiting list, even if generally closed? No

Housing Needs of Families on the Waiting List

Waiting list type: (select one)

- Section 8 tenant-based assistance
 Public Housing
 Combined Section 8 and Public Housing
 Public Housing Site-Based or sub-jurisdictional waiting list (optional)

If used, identify which development/subjurisdiction: **Aster Park**

	# of families	% of total families	Annual Turnover
Waiting list total	91		32%
Extremely low income <=30% AMI	74	81%	
Very low income (>30% but <=50% AMI)	17	19%	
Low income (>50% but <80% AMI)	0	0%	
Families with children	74	81%	
Elderly families	10	11%	
Families with Disabilities	3	3%	
White	5	5%	
Black	79	87%	
Am. Indian/Alaskan	0	0	
Asian	0	0	
Hispanic	7	8%	
Characteristics by Bedroom Size (Public Housing Only)			
1BR	19	21%	
2 BR	48	53%	
3 BR	24	26%	
4 BR	5	5%	
5 BR			
5+ BR			

Housing Needs of Families on the Waiting List

Is the waiting list closed (select one)? No Yes

If yes:

How long has it been closed (# of months)?

Does the PHA expect to reopen the list in the PHA Plan year? No Yes

Does the PHA permit specific categories of families onto the waiting list, even if generally closed? No

Housing Needs of Families on the Waiting List

Waiting list type: (select one)

- Section 8 tenant-based assistance
 Public Housing
 Combined Section 8 and Public Housing
 Public Housing Site-Based or sub-jurisdictional waiting list (optional)

If used, identify which development/subjurisdiction: **Arbor Oaks**

	# of families	% of total families	Annual Turnover
Waiting list total	31		7%
Extremely low income <=30% AMI	19	61.%	
Very low income (>30% but <=50% AMI)	12	39.%	
Low income (>50% but <80% AMI)	0	0%	
Families with children	31	100%	
Elderly families	0	0	
Families with Disabilities	2	6%	
White	3	10%	
Black	24	77%	
Am. Indian	0		
Asian	0		
Hispanic	2	6%	
Characteristics by Bedroom Size (Public Housing Only)			
1BR			
2 BR	18	58%	
3 BR	13	42%	
4 BR			
5 BR			
5+ BR			

Housing Needs of Families on the Waiting List

Is the waiting list closed (select one)? No Yes

If yes:

How long has it been closed (# of months)?

Does the PHA expect to reopen the list in the PHA Plan year? No Yes

Does the PHA permit specific categories of families onto the waiting list, even if generally closed? No

Housing Needs of Families on the Waiting List

Waiting list type: (select one)

- Section 8 tenant-based assistance
 Public Housing
 Combined Section 8 and Public Housing
 Public Housing Site-Based or sub-jurisdictional waiting list (optional)

If used, identify which development/subjurisdiction: **Alders Point**

	# of families	% of total families	Annual Turnover
Waiting list total	26		10%
Extremely low income <=30% AMI	17	65%	
Very low income (>30% but <=50% AMI)	9	35%	
Low income (>50% but <80% AMI)	0	0	
Families with children	0	0%	
Elderly families	26	100%	
Families with Disabilities	3	12%	
White	0	0%	
Black	25	96%	
Am. Indian/Alaskan	0		
Asian	1	4%	
Pacific Islander	0		
Characteristics by Bedroom Size (Public Housing Only)			
1BR	26	100%	
2 BR			
3 BR			
4 BR			
5 BR			
5+ BR			

Housing Needs of Families on the Waiting List

Is the waiting list closed (select one)? No Yes

If yes:

How long has it been closed (# of months)?

Does the PHA expect to reopen the list in the PHA Plan year? No Yes

Does the PHA permit specific categories of families onto the waiting list, even if generally closed? No

Housing Needs of Families on the Waiting List

Waiting list type: (select one)

- Section 8 tenant-based assistance
 Public Housing
 Combined Section 8 and Public Housing
 Public Housing Site-Based or sub-jurisdictional waiting list (optional)

If used, identify which development/subjurisdiction: **Providence Place**

	# of families	% of total families	Annual Turnover
Waiting list total	65		20%
Extremely low income <=30% AMI	29	45%	
Very low income (>30% but <=50% AMI)	36	55%	
Low income (>50% but <80% AMI)	0	0	
Families with children	46	71%	
Elderly families	3	5%	
Families with Disabilities	3	5%	
White	1	2%	
Black	64	98%	
Am. Indian/Alaskan	0		
Asian	0		
Pacific Islander	0		
Hispanic	0		
Characteristics by Bedroom Size (Public Housing Only)			
1BR	19	30%	
2 BR	23	35%	
3 BR	23	35%	
4 BR			
5 BR			
5+ BR			

Housing Needs of Families on the Waiting List

Is the waiting list closed (select one)? No Yes

If yes:

How long has it been closed (# of months)?

Does the PHA expect to reopen the list in the PHA Plan year? No Yes

Does the PHA permit specific categories of families onto the waiting list, even if generally closed? No

Housing Needs of Families on the Waiting List

Waiting list type: (select one)

- Section 8 tenant-based assistance
 Public Housing
 Combined Section 8 and Public Housing
 Public Housing Site-Based or sub-jurisdictional waiting list (optional)
 If used, identify which development/subjurisdiction: **Willows Peake**

	# of families	% of total families	Annual Turnover
Waiting list total	67		12%
Extremely low income <=30% AMI	47	70%	
Very low income (>30% but <=50% AMI)	20	30%	
Low income (>50% but <80% AMI)	0	0	
Families with children	33	49%	
Elderly families	2	3%	
Families with Disabilities	7	11%	
White	1	1.5%	
Black	64	96%	
Am. Indian/Alaskan	0		
Asian	0		
Pacific Islander	0		
Hispanic	2	3%	
Characteristics by Bedroom Size (Public Housing Only)			
1BR	32	48%	
2 BR	26	39%	
3 BR	7	11%	
4 BR	2	3%	
5 BR			
5+ BR			

Housing Needs of Families on the Waiting List

Is the waiting list closed (select one)? No Yes

If yes:

How long has it been closed (# of months)?

Does the PHA expect to reopen the list in the PHA Plan year? No Yes

Does the PHA permit specific categories of families onto the waiting list, even if generally closed? No

C. Strategy for Addressing 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**, and the Agency's reasons for choosing this strategy.

(1) Strategies

Need: Shortage of affordable housing for all eligible populations

Strategy 1. Maximize the number of affordable units available to the PHA within its current resources by:

Select all that apply

- Employ effective maintenance and management policies to minimize the number of public housing units off-line
- Reduce turnover time for vacated public housing units
- Reduce time to renovate public housing units
- Seek replacement of public housing units lost to the inventory through mixed finance development
- Seek replacement of public housing units lost to the inventory through section 8 replacement housing resources
- Maintain or increase section 8 lease-up rates by establishing payment standards that will enable families to rent throughout the jurisdiction
- Undertake measures to ensure access to affordable housing among families assisted by the PHA, regardless of unit size required
- Maintain or increase section 8 lease-up rates by marketing the program to owners, particularly those outside of areas of minority and poverty concentration
- Maintain or increase section 8 lease-up rates by effectively screening Section 8 applicants to increase owner acceptance of program
- Participate in the Consolidated Plan development process to ensure coordination with broader community strategies
- Other (list below)

Strategy 2: Increase the number of affordable housing units by:

Select all that apply

- Apply for additional section 8 units should they become available
- Leverage affordable housing resources in the community through the creation of mixed - finance housing
- Pursue housing resources other than public housing or Section 8 tenant-based assistance.
- Other: (list below)

Need: Specific Family Types: Families at or below 30% of median

Strategy 1: Target available assistance to families at or below 30 % of AMI

Select all that apply

- Exceed HUD federal targeting requirements for families at or below 30% of AMI in public housing
- Exceed HUD federal targeting requirements for families at or below 30% of AMI in tenant-based section 8 assistance
- Employ admissions preferences aimed at families with economic hardships
- Adopt rent policies to support and encourage work
- Other: (list below)

Need: Specific Family Types: Families at or below 50% of median

Strategy 1: Target available assistance to families at or below 50% of AMI

Select all that apply

- Employ admissions preferences aimed at families who are working
- Adopt rent policies to support and encourage work
- Other: (list below)

Need: Specific Family Types: The Elderly

Strategy 1: Target available assistance to the elderly:

Select all that apply

- Seek designation of public housing for the elderly
- Apply for special-purpose vouchers targeted to the elderly, should they become available
- Other: (list below)

Need: Specific Family Types: Families with Disabilities

Strategy 1: Target available assistance to Families with Disabilities:

Select all that apply

- Seek designation of public housing for families with disabilities
- Carry out the modifications needed in public housing based on the section 504 Needs Assessment for Public Housing
- Apply for special-purpose vouchers targeted to families with disabilities, should they become available
- Affirmatively market to local non-profit agencies that assist families with disabilities
- Other: (list below)

Need: Specific Family Types: Races or ethnicities with disproportionate housing needs

Strategy 1: Increase awareness of PHA resources among families of races and ethnicities with disproportionate needs:

Select if applicable

- Affirmatively market to races/ethnicities shown to have disproportionate housing needs
- Other: (list below)

Strategy 2: Conduct activities to affirmatively further fair housing

Select all that apply

- Counsel section 8 tenants as to location of units outside of areas of poverty or minority concentration and assist them to locate those units
- Market the section 8 program to owners outside of areas of poverty /minority concentrations
- Other: (list below)

Other Housing Needs & Strategies: (list needs and strategies below)

(2) Reasons for Selecting Strategies

Of the factors listed below, select all that influenced the PHA's selection of the strategies it will pursue:

- Funding constraints
- Staffing constraints
- Limited availability of sites for assisted housing
- Extent to which particular housing needs are met by other organizations in the community

- Evidence of housing needs as demonstrated in the Consolidated Plan and other information available to the PHA
- Influence of the housing market on PHA programs
- Community priorities regarding housing assistance
- Results of consultation with local or state government
- Results of consultation with residents and the Resident Advisory Board
- Results of consultation with advocacy groups
- Other: (list below)

2. Statement of Financial Resources

[24 CFR Part 903.7 9 (b)]

List the financial resources that are anticipated to be available to the PHA for the support of Federal public housing and tenant-based Section 8 assistance programs administered by the PHA during the Plan year. Note: the table assumes that Federal public housing or tenant based Section 8 assistance grant funds are expended on eligible purposes; therefore, uses of these funds need not be stated. For other funds, indicate the use for those funds as one of the following categories: public housing operations, public housing capital improvements, public housing safety/security, public housing supportive services, Section 8 tenant-based assistance, Section 8 supportive services or other.

Financial Resources: Planned Sources and Uses		
Sources	Planned \$	Planned Uses
1. Federal Grants (FY 2011 grants)		
a) Public Housing Operating Fund	5,391,408	Public Housing Operations
b) Public Housing Capital Fund	2,058,565	Capital improvements
c) HOPE VI Revitalization		
d) Capital Fund Recovery Grant		
e) Annual Contributions for Section 8 Tenant-Based Assistance	26,493,234	Housing assistance Payments
f) Public Housing Drug Elimination Program (including any Technical Assistance funds)		
g) Resident Opportunity and Self-Sufficiency Grants		
h) Community Development Block Grant		
i) HOME		
Other Federal Grants (list below)		
Housing Choice Voucher FSS Coordinator Grant	57,029	Section 8 FSS

Financial Resources: Planned Sources and Uses		
Sources	Planned \$	Planned Uses
3. Prior Year Federal Grants (unobligated funds only) (list below)		
2009 - RHF – 1 st Increment	580,964	Public housing capital improvements/develop ment activities
RHF - 2 nd Increment	294,178	
RHF – 3 rd Increment	336,555	
Capital Fund 2010	1,162,214	Public housing capital improvements
Security Grant - 2010	250,000	Security Cameras for 2 Public Housing sites
2010 RHF – 2 nd Increment	1,327,338	Public housing capital improvements/develop ment activities
3. Public Housing Dwelling Rental Income	1,693,512	Public housing Operations
4. Other income (list below)		
Other Operating Income	214,000	Operating expense
4. Non-federal sources (list below)		
Total resources	39,858,997	

3. PHA Policies Governing Eligibility, Selection, and Admissions

[24 CFR Part 903.7 9 (c)]

A. Public Housing

Exemptions: PHAs that do not administer public housing are not required to complete subcomponent 3A.

(1) Eligibility

a. When does the PHA verify eligibility for admission to public housing? (select all that apply)

- When families are within a certain number of being offered a unit: (state number)
- When families are within a certain time of being offered a unit: **30-60 days**
- Other: (describe)

b. Which non-income (screening) factors does the PHA use to establish eligibility for admission to public housing (select all that apply)?

- Criminal or Drug-related activity
- Rental history
- Housekeeping
- Other (describe); **Landlord References and Credit Report**

c. Yes No: Does the PHA request criminal records from local law enforcement agencies for screening purposes?

d. Yes No: Does the PHA request criminal records from State law enforcement agencies for screening purposes?

e. Yes No: Does the PHA access FBI criminal records from the FBI for screening purposes? (either directly or through an NCIC-authorized source)

(2) Waiting List Organization

a. Which methods does the PHA plan to use to organize its public housing waiting list (select all that apply)

- Community-wide list
- Sub-jurisdictional lists
- Site-based waiting lists
- Other (describe)

- b. Where may interested persons apply for admission to public housing?
- PHA main administrative office
 - PHA development site management office
 - Other (list below)
- c. If the PHA plans to operate one or more site-based waiting lists in the coming year, answer each of the following questions; if not, skip to subsection **(3) Assignment**
1. How many site-based waiting lists will the PHA operate in the coming year?¹³
 2. Yes No: Are any or all of the PHA's site-based waiting lists new for the upcoming year (that is, they are not part of a previously-HUD-approved site based waiting list plan)?
If yes, how many lists?
 3. Yes No: May families be on more than one list simultaneously?
If yes, how many lists? **As many as they qualify**
 4. Where can interested persons obtain more information about and sign up to be on the site-based waiting lists (select all that apply)?
 - PHA main administrative office
 - All PHA development management offices
 - Management offices at developments with site-based waiting lists
 - At the development to which they would like to apply
 - Other - **All applicants are given a list of developments where applications are being accepted for other public housing units.**

(3) Assignment

- a. How many vacant unit choices are applicants ordinarily given before they fall to the bottom of or are removed from the waiting list? (select one)
- One
 - Two
 - Three or More
- b. Yes No: Is this policy consistent across all waiting list types?
- c. If answer to b is no, list variations for any other than the primary public housing waiting list/s for the PHA:

(4) Admissions Preferences

- a. Income targeting:

- Yes No: Does the PHA plan to exceed the federal targeting requirements by targeting more than 40% of all new admissions to public housing to families at or below 30% of median area income?

b. Transfer policies:

In what circumstances will transfers take precedence over new admissions? (list below)

- Emergencies
 Overhoused
 Underhoused
 Medical justification
 Administrative reasons determined by the PHA (e.g., to permit modernization work)
 Resident choice: (state circumstances below)
 Other: (list below)

c. Preferences

1. Yes No: Has the PHA established preferences for admission to public housing (other than date and time of application)? (If “no” is selected, skip to subsection **(5) Occupancy**)

2. Which of the following admission preferences does the PHA plan to employ in the coming year? (select all that apply from either former Federal preferences or other preferences)

Former Federal preferences:

- Involuntary Displacement (Disaster, Government Action, Action of Housing Owner, Inaccessibility, Property Disposition)
 Victims of domestic violence
 Substandard housing
 Homelessness
 High rent burden (rent is > 50 percent of income)

Other preferences: (select below)

- Working families and those unable to work because of age or disability
 Veterans and veterans' families
 Residents who live and/or work in the jurisdiction
 Those enrolled currently in educational, training, or upward mobility programs
 Households that contribute to meeting income goals (broad range of incomes)
 Households that contribute to meeting income requirements (targeting)
 Those previously enrolled in educational, training, or upward mobility programs
 Victims of reprisals or hate crimes
 Other preference(s) (list below)

3. If the PHA will employ admissions preferences, please prioritize by placing a “1” in the space that represents your first priority, a “2” in the box representing your second priority, and so on. If you give equal weight to one or more of these choices (either through an absolute hierarchy or through a point system), place the same number next to each. That means you can use “1” more than once, “2” more than once, etc.

2 Date and Time

Former Federal preferences:

- Involuntary Displacement (Disaster, Government Action, Action of Housing Owner, Inaccessibility, Property Disposition)
- Victims of domestic violence
- Substandard housing
- Homelessness
- High rent burden

Other preferences (select all that apply)

- 1 Working families and those unable to work because of age or disability**
- Veterans and veterans’ families
- Residents who live and/or work in the jurisdiction
- Those enrolled currently in educational, training, or upward mobility programs
- Households that contribute to meeting income goals (broad range of incomes)
- Households that contribute to meeting income requirements (targeting)
- Those previously enrolled in educational, training, or upward mobility programs
- Victims of reprisals or hate crimes
- Other preference(s) (list below)

4. Relationship of preferences to income targeting requirements:

- The PHA applies preferences within income tiers
- Not applicable: the pool of applicant families ensures that the PHA will meet income targeting requirements

(5) Occupancy

a. What reference materials can applicants and residents use to obtain information about the rules of occupancy of public housing (select all that apply)

- The PHA-resident lease
- The PHA’s Admissions and (Continued) Occupancy policy
- PHA briefing seminars or written materials
- Other source (list) **House Rules**

b. How often must residents notify the PHA of changes in family composition?

(select all that apply)

- At an annual reexamination and lease renewal
- Any time family composition changes
- At family request for revision
- Other (list)

(6) Deconcentration and Income Mixing

a. Yes No: Did the PHA's analysis of its family (general occupancy) developments to determine concentrations of poverty indicate the need for measures to promote deconcentration of poverty or income mixing? **See Attachment A**

b. Yes No: Did the PHA adopt any changes to its **admissions policies** based on the results of the required analysis of the need to promote deconcentration of poverty or to assure income mixing?

c. If the answer to b was yes, what changes were adopted? (select all that apply)

- Adoption of site-based waiting lists
If selected, list targeted developments below:
- Employing waiting list "skipping" to achieve deconcentration of poverty or income mixing goals at targeted developments
If selected, list targeted developments below:
- Employing new admission preferences at targeted developments
If selected, list targeted developments below:
- Other (list policies and developments targeted below)

d. Yes No: Did the PHA adopt any changes to **other** policies based on the results of the required analysis of the need for deconcentration of poverty and income mixing?

e. If the answer to d was yes, how would you describe these changes? (select all that apply)

- Additional affirmative marketing
- Actions to improve the marketability of certain developments
- Adoption or adjustment of ceiling rents for certain developments
- Adoption of rent incentives to encourage deconcentration of poverty and income-mixing
- Other (list below) **Skip applicants on wait list to meet 40% targeting rule.**

f. Based on the results of the required analysis, in which developments will the PHA make special efforts to attract or retain higher-income families? (select all that apply)

- Not applicable: **results of analysis did not indicate a need for such efforts**
- List (any applicable) developments below:

g. Based on the results of the required analysis, in which developments will the PHA make special efforts to assure access for lower-income families? (select all that apply)

- Not applicable: **results of analysis did not indicate a need for such efforts**
- List (any applicable) developments below:

B. Section 8

Exemptions: PHAs that do not administer section 8 are not required to complete sub-component 3B. **Unless otherwise specified, all questions in this section apply only to the tenant-based section 8 assistance program (vouchers, and until completely merged into the voucher program, certificates).**

(1) Eligibility

a. What is the extent of screening conducted by the PHA? (select all that apply)

- Criminal or drug-related activity only to the extent required by law or regulation
- Criminal and drug-related activity, more extensively than required by law or regulation
- More general screening than criminal and drug-related activity (list factors below)
- Other (list below)

b. Yes No: Does the PHA request criminal records from local law enforcement agencies for screening purposes?

c. Yes No: Does the PHA request criminal records from State law enforcement agencies for screening purposes?

- d. Yes No: Does the PHA access FBI criminal records from the FBI for screening purposes? (either directly or through an NCIC-authorized source)
- e. Indicate what kinds of information you share with prospective landlords? (select all that apply)
- Criminal or drug-related activity
- Other (describe below) **Previous landlord history while participating in the Section 8 Program**

(2) Waiting List Organization

- a. With which of the following program waiting lists is the section 8 tenant-based assistance waiting list merged? (select all that apply)
- None
- Federal public housing
- Federal moderate rehabilitation
- Federal project-based certificate program
- Other federal or local program (list below)
- b. Where may interested persons apply for admission to section 8 tenant-based assistance? (select all that apply)
- PHA main administrative office
- Other (list below)

(3) Search Time

- a. Yes No: Does the PHA give extensions on standard 60-day period to search for a unit?

If yes, state circumstances below: **Emergency reasons**

(4) Admissions Preferences

- a. Income targeting
- Yes No: Does the PHA plan to exceed the federal targeting requirements by targeting more than 75% of all new admissions to the section 8 program to families at or below 30% of median area income?
- b. Preferences
1. Yes No: Has the PHA established preferences for admission to section 8 tenant-based assistance? (other than date and time of

application) (if no, skip to subcomponent **(5) Special purpose section 8 assistance programs**)

2. Which of the following admission preferences does the PHA plan to employ in the coming year? (select all that apply from either former Federal preferences or other preferences)

Former Federal preferences

- Involuntary Displacement (Disaster, Government Action, Action of Housing Owner, Inaccessibility, Property Disposition)
- Victims of domestic violence
- Substandard housing
- Homelessness
- High rent burden (rent is > 50 percent of income)

Other preferences (select all that apply)

- Working families and those unable to work because of age or disability
- Veterans and veterans' families
- Residents who live and/or work in your jurisdiction
- Those enrolled currently in educational, training, or upward mobility programs
- Households that contribute to meeting income goals (broad range of incomes)
- Households that contribute to meeting income requirements (targeting)
- Those previously enrolled in educational, training, or upward mobility programs
- Victims of reprisals or hate crimes
- Other preference(s) (list below) **1. Referrals from FEMA, 2. Tenants of HAWS owned and/or managed properties where their units will be rehabilitated, disposed of, or demolished, 3. Referrals from Department of Veterans Affairs for VASH Vouchers, 4. Referrals from the local Department of Social Services for FUP Vouchers and/or *5. Section 8 participants who may have been terminated due to a lack of HUD funding.**

3. If the PHA will employ admissions preferences, please prioritize by placing a "1" in the space that represents your first priority, a "2" in the box representing your second priority, and so on. If you give equal weight to one or more of these choices (either through an absolute hierarchy or through a point system), place the same number next to each. That means you can use "1" more than once, "2" more than once, etc.

Date and Time

Former Federal preferences

- Involuntary Displacement (Disaster, Government Action, Action of Housing Owner, Inaccessibility, Property Disposition)
- Victims of domestic violence

Substandard housing
Homelessness
High rent burden

Other preferences (select all that apply)

- Working families and those unable to work because of age or disability
- Veterans and veterans' families
- Residents who live and/or work in your jurisdiction
- Those enrolled currently in educational, training, or upward mobility programs
- Households that contribute to meeting income goals (broad range of incomes)
- Households that contribute to meeting income requirements (targeting)
- Those previously enrolled in educational, training, or upward mobility programs
- Victims of reprisals or hate crimes
- 1 Other preference(s) (list below) 1. Referrals from FEMA, 2. Tenants of HAWS owned and/or managed properties where their units will be rehabilitated, disposed of, or demolished, 3. Referrals from Department of Veterans Affairs for VASH Vouchers, 4. Referrals from the local Department of Social Services for FUP Vouchers and/or *5. Section 8 participants who may have been terminated due to a lack of HUD funding.**

4. Among applicants on the waiting list with equal preference status, how are applicants selected? (select one)

- Date and time of application
- Drawing (lottery) or other random choice technique

5. If the PHA plans to employ preferences for "residents who live and/or work in the jurisdiction" (select one)

- This preference has previously been reviewed and approved by HUD
- The PHA requests approval for this preference through this PHA Plan

6. Relationship of preferences to income targeting requirements: (select one)

- The PHA applies preferences within income tiers
- Not applicable: the pool of applicant families ensures that the PHA will meet income targeting requirements

(5) Special Purpose Section 8 Assistance Programs

a. In which documents or other reference materials are the policies governing eligibility, selection, and admissions to any special-purpose section 8 program administered by the PHA contained? (select all that apply)

- The Section 8 Administrative Plan
- Briefing sessions and written materials
- Other (list below)

b. How does the PHA announce the availability of any special-purpose section 8 programs to the public?

- Through published notices
- Other (list below) **Notices to agencies and word of mouth.**

4. PHA Rent Determination Policies

[24 CFR Part 903.7 9 (d)]

A. Public Housing

Exemptions: PHAs that do not administer public housing are not required to complete sub-component 4A.

(1) Income Based Rent Policies

Describe the PHA's income based rent setting policy/ies for public housing using, including discretionary (that is, not required by statute or regulation) income disregards and exclusions, in the appropriate spaces below.

a. Use of discretionary policies: (select one)

- The PHA will not employ any discretionary rent-setting policies for income based rent in public housing. Income-based rents are set at the higher of 30% of adjusted monthly income, 10% of unadjusted monthly income, the welfare rent, or minimum rent (less HUD mandatory deductions and exclusions). (If selected, skip to sub-component (2))

---or---

- The PHA employs discretionary policies for determining income based rent (If selected, continue to question b.)

b. Minimum Rent

1. What amount best reflects the PHA's minimum rent? (select one)

- \$0
- \$1-\$25
- \$26-\$50

2. Yes No: Has the PHA adopted any discretionary minimum rent hardship exemption policies?

3. If yes to question 2, list these policies below:

c. Rents set at less than 30% than adjusted income

1. Yes No: Does the PHA plan to charge rents at a fixed amount or percentage less than 30% of adjusted income?

2. If yes to above, list the amounts or percentages charged and the circumstances under which these will be used below:

d. Which of the discretionary (optional) deductions and/or exclusions policies does the PHA plan to employ (select all that apply)

For the earned income of a previously unemployed household member

For increases in earned income

Fixed amount (other than general rent-setting policy)

If yes, state amount/s and circumstances below:

Fixed percentage (other than general rent-setting policy)

If yes, state percentage/s and circumstances below:

For household heads

For other family members

For transportation expenses

For the non-reimbursed medical expenses of non-disabled or non-elderly families

Other (describe below)

e. Ceiling rents

1. Do you have ceiling rents? (rents set at a level lower than 30% of adjusted income) (select one)

Yes for all developments

Yes but only for some developments

No

2. For which kinds of developments are ceiling rents in place? (select all that apply)

- For all developments
- For all general occupancy developments (not elderly or disabled or elderly only)
- For specified general occupancy developments
- For certain parts of developments; e.g., the high-rise portion
- For certain size units; e.g., larger bedroom sizes
- Other (list below) **None**

3. Select the space or spaces that best describe how you arrive at ceiling rents (select all that apply)

- Market comparability study
- Fair market rents (FMR)
- 95th percentile rents
- 75 percent of operating costs
- 100 percent of operating costs for general occupancy (family) developments
- Operating costs plus debt service
- The “rental value” of the unit
- Other (list below) **N/A**

f. Rent re-determinations:

1. Between income reexaminations, how often must tenants report changes in income or family composition to the PHA such that the changes result in an adjustment to rent? (select all that apply)

- Never
- At family option
- Any time the family experiences an income increase
- Any time a family experiences an income increase above a threshold amount or percentage: (if selected, specify threshold)_____
- Other (list below) **1. If the Tenant had previously reported an income decrease since their last annual re-exam, or was previously reporting zero income, then all family composition changes must be reported immediately.**

g. Yes No: Does the PHA plan to implement individual savings accounts for residents (ISAs) as an alternative to the required 12 month disallowance of earned income and phasing in of rent increases in the next year?

(2) Flat Rents

1. In setting the market-based flat rents, what sources of information did the PHA use to establish comparability? (select all that apply.)

- The section 8 rent reasonableness study of comparable housing
- Survey of rents listed in local newspaper
- Survey of similar unassisted units in the neighborhood
- Other (list/describe below)

B. Section 8 Tenant-Based Assistance

Exemptions: PHAs that do not administer Section 8 tenant-based assistance are not required to complete sub-component 4B. **Unless otherwise specified, all questions in this section apply only to the tenant-based section 8 assistance program (vouchers, and until completely merged into the voucher program, certificates).**

(1) Payment Standards

Describe the voucher payment standards and policies.

a. What is the PHA's payment standard? (select the category that best describes your standard)

- At or above 90% but below 100% of FMR
- 100% of FMR
- Above 100% but at or below 110% of FMR
- Above 110% of FMR (if HUD approved; describe circumstances below)

b. If the payment standard is lower than FMR, why has the PHA selected this standard? (select all that apply)

- FMRs are adequate to ensure success among assisted families in the PHA's segment of the FMR area
- The PHA has chosen to serve additional families by lowering the payment standard
- Reflects market or submarket
- Other (list below) **Lack of funding by HUD**

c. If the payment standard is higher than FMR, why has the PHA chosen this level? (select all that apply)

- FMRs are not adequate to ensure success among assisted families in the PHA's segment of the FMR area
- Reflects market or submarket
- To increase housing options for families
- Other (list below)

d. How often are payment standards reevaluated for adequacy? (select one)

- Annually, **when new FMR's are published**
 Other (list below)

e. What factors will the PHA consider in its assessment of the adequacy of its payment standard? (select all that apply)

- Success rates of assisted families
 Rent burdens of assisted families
 Other (list below) **Funding available from HUD**

(2) Minimum Rent

a. What amount best reflects the PHA's minimum rent? (select one)

- \$0
 \$1-\$25
 \$26-\$50

b. Yes No: Has the PHA adopted any discretionary minimum rent hardship exemption policies? (if yes, list below)

5. Operations and Management

[24 CFR Part 903.7 9 (e)]

Exemptions from Component 5: High performing and small PHAs are not required to complete this section. Section 8 only PHAs must complete parts A, B, and C(2)

A. PHA Management Structure

Describe the PHA's management structure and organization.

(select one)

- An organization chart showing the PHA's management structure and organization is attached. **Attachment B**
 A brief description of the management structure and organization of the PHA follows:

B. HUD Programs Under PHA Management

— List Federal programs administered by the PHA, number of families served at the beginning of the upcoming fiscal year, and expected turnover in each. (Use “NA” to indicate that the PHA does not operate any of the programs listed below.)

Program Name	Units or Families Served at Year Beginning	Expected Turnover
Public Housing	1351	25%
Section 8 Vouchers	4302	10%
Section 8 Mod Rehab	178	35%
Special Program	Mainstream 73	8%
Section 8	VASH 60	5%
Certificates/Vouchers (list individually)	FUP 100	10%
Public Housing Drug Elimination Program (PHDEP)	N/A	
Other Federal Programs(list individually)		

C. Management and Maintenance Policies

List the PHA’s public housing management and maintenance policy documents, manuals and handbooks that contain the Agency’s rules, standards, and policies that govern maintenance and management of public housing, including a description of any measures necessary for the prevention or eradication of pest infestation (which includes cockroach infestation) and the policies governing Section 8 management.

- (1) Public Housing Maintenance and Management: (list below)

Admissions and Continued Occupancy Plan

- (2) Section 8 Management: (list below)

Section 8 Administrative Plan

6. PHA Grievance Procedures

[24 CFR Part 903.7 9 (f)]

Exemptions from component 6: High performing PHAs are not required to complete component 6. Section 8-Only PHAs are exempt from sub-component 6A.

A. Public Housing

1. Yes No: Has the PHA established any written grievance procedures in addition to federal requirements found at 24 CFR Part 966, Subpart B, for residents of public housing?

If yes, list additions to federal requirements below:

2. Which PHA office should residents or applicants to public housing contact to initiate the PHA grievance process? (select all that apply)

- PHA main administrative office
 PHA development management offices
 Other (list below)

B. Section 8 Tenant-Based Assistance

1. Yes No: Has the PHA established informal review procedures for applicants to the Section 8 tenant-based assistance program and informal hearing procedures for families assisted by the Section 8 tenant-based assistance program in addition to federal requirements found at 24 CFR 982?

If yes, list additions to federal requirements below:

2. Which PHA office should applicants or assisted families contact to initiate the informal review and informal hearing processes? (select all that apply)

- PHA main administrative office
 Other (list below)

7. Capital Improvement Needs

[24 CFR Part 903.7 9 (g)]

Exemptions from Component 7: Section 8 only PHAs are not required to complete this component and may skip to Component 8.

A. Capital Fund Activities

Exemptions from sub-component 7A: PHAs that will not participate in the Capital Fund Program may skip to component 7B. All other PHAs must complete 7A as instructed.

(1) Capital Fund Program Annual Statement

Using parts I, II, and III of the Annual Statement for the Capital Fund Program (CFP), identify capital activities the PHA is proposing for the upcoming year to ensure long-term physical and social viability

of its public housing developments. This statement can be completed by using the CFP Annual Statement tables provided in the table library at the end of the PHA Plan template **OR**, at the PHA's option, by completing and attaching a properly updated HUD-52837.

Select one:

The Capital Fund Program Annual Statement is provided as an attachment to the PHA Plan at Attachment (state name) **Attachments U, V, W, X and Y**

-or-

The Capital Fund Program Annual Statement is provided below: (if selected, copy the CFP Annual Statement from the Table Library and insert here)

(2) Optional 5-Year Action Plan

Agencies are encouraged to include a 5-Year Action Plan covering capital work items. This statement can be completed by using the 5 Year Action Plan table provided in the table library at the end of the PHA Plan template **OR** by completing and attaching a properly updated HUD-52834.

a. Yes No: Is the PHA providing an optional 5-Year Action Plan for the Capital Fund? (if no, skip to sub-component 7B)

b. If yes to question a, select one:

The Capital Fund Program 5-Year Action Plan is provided as an attachment to the PHA Plan at **Attachment Z**

-or-

The Capital Fund Program 5-Year Action Plan is provided below: (if selected, copy the CFP optional 5 Year Action Plan from the Table Library and insert here)

B. HOPE VI and Public Housing Development and Replacement Activities (Non-Capital Fund)

Applicability of sub-component 7B: All PHAs administering public housing. Identify any approved HOPE VI and/or public housing development or replacement activities not described in the Capital Fund Program Annual Statement.

Yes No: a) Has the PHA received a HOPE VI revitalization grant? (if no, skip to question c; if yes, provide responses to question b for each grant, copying and completing as many times as necessary)
b) Status of HOPE VI revitalization grant (complete one set of questions for each grant)

1. Development name: **Kimberly Park Terrace and Happy Hill Gardens**
2. Development (project) number: **NC19URD-012-I197 and NC19URD-012-I102**
3. Status of grant: (select the statement that best describes the current status)
 - Revitalization Plan under development
 - Revitalization Plan submitted, pending approval
 - Revitalization Plan approved
 - Activities pursuant to an approved Revitalization Plan underway

Yes No: c) Does the PHA plan to apply for a HOPE VI Revitalization grant in the Plan year?
 If yes, list development name/s below: **If HOPE VI funding becomes available, the Authority would consider applying for the grant in relation to:**
Sunrise Towers (NC012000008) 195 Units
Cleveland Avenue Homes (NC012000006) 244 Units
Piedmont Park Apartments (NC012000003) 240 Units

Yes No: d) Will the PHA be engaging in any mixed-finance development activities for public housing in the Plan year?
 If yes, list developments or activities below:

Kimberly Park Terrace HOPE VI Revitalization construction of 82 on-site single-family homes, and 19 on-site single family homes.

Happy Hill Gardens Homeownership construction of 59 on-site single-family homes, 47 on-site townhouse units, and 42 off -site townhouse units.

Yes No: e) Will the PHA be conducting any other public housing development or replacement activities not discussed in the Capital Fund Program Annual Statement?
 If yes, list developments or activities below:

Johnson Square – HAWS has purchased Johnson Square Apartments and has added this development to its public housing inventory. This development had 32 units, consisting of 16 three-bedroom units and 16 four-bedroom units. HAWS received approval from HUD’s SAC office to demolish and demolition of the buildings has occurred. Plans are to construct up to 50 new units on the site.

HAWS will be evaluating acquisition opportunities throughout its jurisdiction that will assist it in meeting its purpose of providing affordable housing. These opportunities would be funded by using various types of financing, second increment RHHF, mixed finance arrangements, etc.

HAWS has completed a Master Plan for 130 acres of which the Authority has site control of approximately 30 acres. The area includes 3 public housing sites. In connection with this plan the Authority applied for a 2010 Choice Neighborhood Planning Grant to further the work under this Master Plan and was not awarded. The Authority plans to apply for a 2011 Choice Neighborhood Planning Grant. The Authority plans to apply for a Choice Neighborhood Implementation Grant.

8. Demolition and Disposition

[24 CFR Part 903.7 9 (h)]

Applicability of component 8: Section 8 only PHAs are not required to complete this section.

1. Yes No: Does the PHA plan to conduct any demolition or disposition activities (pursuant to section 18 of the U.S. Housing Act of 1937 (42 U.S.C. 1437p)) in the plan Fiscal Year? (If “No”, skip to component 9; if “yes”, complete one activity description for each development.)

2. Activity Description

Yes No: Has the PHA provided the activities description information in the **optional** Public Housing Asset Management Table? (If “yes”, skip to component 9. If “No”, complete the Activity Description table below.)

Demolition/Disposition Activity Description
1a. Development name: 901 Cleveland Avenue Administrative Office Building 1b. Development (project) number: 051
2. Activity type: Demolition <input type="checkbox"/> Disposition <input checked="" type="checkbox"/>
3. Application status (select one) Approved <input type="checkbox"/> Submitted, pending approval <input type="checkbox"/> Planned application <input checked="" type="checkbox"/>
4. Date application approved, submitted, or planned for submission: (01/31/2012)
5. Number of units affected: 1 Office Building
6. Coverage of action (select one) <input checked="" type="checkbox"/> Part of the development <input type="checkbox"/> Total development

7. Timeline for activity:
- a. Actual or projected start date of activity: **09/31/2012**
 - b. Projected end date of activity: **03/31/2013**

Demolition and Disposition

[24 CFR Part 903.7 9 (h)]

Applicability of component 8: Section 8 only PHAs are not required to complete this section.

1. Yes No: Does the PHA plan to conduct any demolition or disposition activities (pursuant to section 18 of the U.S. Housing Act of 1937 (42 U.S.C. 1437p)) in the plan Fiscal Year? (If “No”, skip to component 9; if “yes”, complete one activity description for each development.)

2. Activity Description

- Yes No: Has the PHA provided the activities description information in the **optional** Public Housing Asset Management Table? (If “yes”, skip to component 9. If “No”, complete the Activity Description table below.)

Demolition/Disposition Activity Description
1a. Development name: Stoney Glen 1b. Development (project) number: NC012000022P
2. Activity type: Demolition <input type="checkbox"/> Disposition <input checked="" type="checkbox"/>
3. Application status (select one) Approved <input type="checkbox"/> Submitted, pending approval <input type="checkbox"/> Planned application <input checked="" type="checkbox"/>
4. Date application approved, submitted, or planned for submission: <u>(01/31/12)</u>
5. Number of units affected: 50 6. Coverage of action (select one) <input type="checkbox"/> Part of the development <input checked="" type="checkbox"/> Total development
7. Timeline for activity: a. Actual or projected start date of activity: 10/31/12 b. Projected end date of activity: 01/31/13

Demolition/Disposition Activity Description
1a. Development name: Northampton (Turnkey III) 1b. Development (project) number: NC012000018

2. Activity type: Demolition <input type="checkbox"/> Disposition <input checked="" type="checkbox"/>
3. Application status (select one) Approved <input type="checkbox"/> Submitted, pending approval <input type="checkbox"/> Planned application <input checked="" type="checkbox"/>
4. Date application approved, submitted, or planned for submission: <u>(09/11/11)</u>
5. Number of units affected: N/A Vacant Land
6. Coverage of action (select one) <input checked="" type="checkbox"/> Part of the development <input type="checkbox"/> Total development
7. Timeline for activity: a. Actual or projected start date of activity: 03/01/12 b. Projected end date of activity: 12/31/12

Demolition/Disposition Activity Description
1a. Development name: Broadbay Heights (Turnkey III) 1b. Development (project) number: NC012000011
2. Activity type: Demolition <input type="checkbox"/> Disposition <input checked="" type="checkbox"/>
3. Application status (select one) Approved <input type="checkbox"/> Submitted, pending approval <input type="checkbox"/> Planned application <input checked="" type="checkbox"/>
4. Date application approved, submitted, or planned for submission: <u>(09/11/11)</u>
5. Number of units affected: N/A Vacant Land
6. Coverage of action (select one) <input checked="" type="checkbox"/> Part of the development <input type="checkbox"/> Total development
7. Timeline for activity: a. Actual or projected start date of activity: 03/01/2012 b. Projected end date of activity: 12/31/12

Demolition/Disposition Activity Description
1a. Development name: Cherryview (Turnkey III) 1b. Development (project) number: NC012000017
2. Activity type: Demolition <input type="checkbox"/> Disposition <input checked="" type="checkbox"/>
3. Application status (select one) Approved <input type="checkbox"/> Submitted, pending approval <input type="checkbox"/> Planned application <input checked="" type="checkbox"/>

4. Date application approved, submitted, or planned for submission: <u>(09/11/11)</u>
5. Number of units affected: N/A Vacant Land
6. Coverage of action (select one) <input checked="" type="checkbox"/> Part of the development <input type="checkbox"/> Total development
7. Timeline for activity: a. Actual or projected start date of activity: 03/01/12 b. Projected end date of activity: 12/31/2012

Demolition/Disposition Activity Description
1a. Development name: North Hills (Turnkey III)
1b. Development (project) number: NC012000013
2. Activity type: Demolition <input type="checkbox"/> Disposition <input checked="" type="checkbox"/>
3. Application status (select one) Approved <input type="checkbox"/> Submitted, pending approval <input type="checkbox"/> Planned application <input checked="" type="checkbox"/>
4. Date application approved, submitted, or planned for submission: <u>(09/11/11)</u>
5. Number of units affected: N/A Vacant Land
6. Coverage of action (select one) <input checked="" type="checkbox"/> Part of the development <input type="checkbox"/> Total development
7. Timeline for activity: a. Actual or projected start date of activity: 03/01/12 b. Projected end date of activity: 12/31/12

Demolition/Disposition Activity Description
1a. Development name: Johnson Square Apartments
1b. Development (project) number: NC012000037
2. Activity type: Demolition <input checked="" type="checkbox"/> Disposition <input type="checkbox"/>
3. Application status (select one) Approved <input checked="" type="checkbox"/> Submitted, pending approval <input type="checkbox"/> Planned application <input type="checkbox"/>
4. Date application approved, submitted, or planned for submission: <u>(12/30/10)</u>
5. Number of units affected: 32
6. Coverage of action (select one) <input type="checkbox"/> Part of the development <input checked="" type="checkbox"/> Total development
7. Timeline for activity:

- a. Actual or projected start date of activity: **03/02/11**
 b. Projected end date of activity: **03/20/11**

9. Designation of Public Housing for Occupancy by Elderly Families or Families with Disabilities or Elderly Families and Families with Disabilities

[24 CFR Part 903.7 9 (i)]

Exemptions from Component 9; Section 8 only PHAs are not required to complete this section.

1. Yes No: Has the PHA designated or applied for approval to designate or does the PHA plan to apply to designate any public housing for occupancy only by the elderly families or only by families with disabilities, or by elderly families and families with disabilities or will apply for designation for occupancy by only elderly families or only families with disabilities, or by elderly families and families with disabilities as provided by section 7 of the U.S. Housing Act of 1937 (42 U.S.C. 1437e) in the upcoming fiscal year? (If “No”, skip to component 10. If “yes”, complete one activity description for each development, unless the PHA is eligible to complete a streamlined submission; PHAs completing streamlined submissions may skip to component 10.)

2. Activity Description

Yes No: Has the PHA provided all required activity description information for this component in the **optional** Public Housing Asset Management Table? If “yes”, skip to component 10. If “No”, complete the Activity Description table below.

Designation of Public Housing Activity Description	
1a. Development name: Healy Towers	
1b. Development (project) number: NC012000012P	
2. Designation type:	
Occupancy by only the elderly <input checked="" type="checkbox"/>	
Occupancy by families with disabilities <input type="checkbox"/>	
Occupancy by only elderly families and families with disabilities <input type="checkbox"/>	
3. Application status (select one)	
Approved; included in the PHA’s Designation Plan <input checked="" type="checkbox"/>	
Submitted, pending approval <input type="checkbox"/>	
Planned application <input type="checkbox"/>	
4. Date this designation approved, submitted, or planned for submission: (06/10/2005)	
5. If approved, will this designation constitute a (select one)	

<input type="checkbox"/> New Designation Plan <input type="checkbox"/> Revision of a previously-approved Designation Plan?
6. Number of units affected: 105 7. Coverage of action (select one) <input type="checkbox"/> Part of the development <input checked="" type="checkbox"/> Total development

Designation of Public Housing Activity Description
1a. Development name: Azalea Terrace 1b. Development (project) number: NC012000030P
2. Designation type: Occupancy by only the elderly <input checked="" type="checkbox"/> Occupancy by families with disabilities <input type="checkbox"/> Occupancy by only elderly families and families with disabilities <input type="checkbox"/>
3. Application status (select one) Approved; included in the PHA's Designation Plan <input checked="" type="checkbox"/> Submitted, pending approval <input type="checkbox"/> Planned application <input type="checkbox"/>
4. Date this designation approved, submitted, or planned for submission: <u>(06/10/2005)</u>
5. If approved, will this designation constitute a (select one) <input type="checkbox"/> New Designation Plan <input type="checkbox"/> Revision of a previously-approved Designation Plan?
7. Number of units affected: 50 7. Coverage of action (select one) <input checked="" type="checkbox"/> Part of the development <input type="checkbox"/> Total development

Designation of Public Housing Activity Description	
1a. Development name: Alders Point	
1b. Development (project) number: NC012000034P	
2. Designation type:	Occupancy by only the elderly <input checked="" type="checkbox"/> Occupancy by families with disabilities <input type="checkbox"/> Occupancy by only elderly families and families with disabilities <input type="checkbox"/>
3. Application status (select one)	Approved; included in the PHA's Designation Plan <input checked="" type="checkbox"/> Submitted, pending approval <input type="checkbox"/> Planned application <input type="checkbox"/>
4. Date this designation approved, submitted, or planned for submission: (06/10/2005)	
5. If approved, will this designation constitute a (select one)	<input type="checkbox"/> New Designation Plan <input type="checkbox"/> Revision of a previously-approved Designation Plan?
8. Number of units affected: 50	
7. Coverage of action (select one)	<input checked="" type="checkbox"/> Part of the development <input type="checkbox"/> Total development

10. Conversion of Public Housing to Tenant-Based Assistance

[24 CFR Part 903.7 9 (j)]

Exemptions from Component 10; Section 8 only PHAs are not required to complete this section.

A. Assessments of Reasonable Revitalization Pursuant to section 202 of the HUD FY 1996 HUD Appropriations Act

1. Yes No: Have any of the PHA's developments or portions of developments been identified by HUD or the PHA as covered under section 202 of the HUD FY 1996 HUD Appropriations Act? (If "No", skip to component 11; if "yes", complete one activity description for each identified development, unless eligible to complete a streamlined submission. PHAs completing streamlined submissions may skip to component 11.)

2. Activity Description

- Yes No: Has the PHA provided all required activity description information for this component in the **optional** Public Housing

Asset Management Table? If “yes”, skip to component 11. If “No”, complete the Activity Description table below.

Conversion of Public Housing Activity Description	
1a. Development name:	
1b. Development (project) number:	
2. What is the status of the required assessment?	<input type="checkbox"/> Assessment underway <input type="checkbox"/> Assessment results submitted to HUD <input type="checkbox"/> Assessment results approved by HUD (if marked, proceed to next question) <input type="checkbox"/> Other (explain below)
3. <input type="checkbox"/> Yes <input type="checkbox"/> No: Is a Conversion Plan required? (If yes, go to block 4; if no, go to block 5.)	
4. Status of Conversion Plan (select the statement that best describes the current status)	<input type="checkbox"/> Conversion Plan in development <input type="checkbox"/> Conversion Plan submitted to HUD on: (DD/MM/YYYY) <input type="checkbox"/> Conversion Plan approved by HUD on: (DD/MM/YYYY) <input type="checkbox"/> Activities pursuant to HUD-approved Conversion Plan underway
5. Description of how requirements of Section 202 are being satisfied by means other than conversion (select one)	<input type="checkbox"/> Units addressed in a pending or approved demolition application (date submitted or approved: <input type="checkbox"/> Units addressed in a pending or approved HOPE VI demolition application (date submitted or approved:) <input type="checkbox"/> Units addressed in a pending or approved HOPE VI Revitalization Plan (date submitted or approved:) <input type="checkbox"/> Requirements no longer applicable: vacancy rates are less than 10 percent <input type="checkbox"/> Requirements no longer applicable: site now has less than 300 units <input type="checkbox"/> Other: (describe below)

B. Reserved for Conversions pursuant to Section 22 of the U.S. Housing Act of 1937

The Authority plans to complete an assessment of Stoney Glen, Crystal, Townview and other eligible developments in order to determine the feasibility of a Voluntary Conversion Plan to convert public housing ACC units to Housing Choice Vouchers and/or to the Project –Based Section 8 Program under TRA.

11. Homeownership Programs Administered by the PHA

[24 CFR Part 903.7 9 (k)]

A. Public Housing

Exemptions from Component 11A: Section 8 only PHAs are not required to complete 11A.

1. Yes No: Does the PHA administer any homeownership programs administered by the PHA under an approved section 5(h) homeownership program (42 U.S.C. 1437c(h)), or an approved HOPE I program (42 U.S.C. 1437aaa) or has the PHA applied or plan to apply to administer any homeownership programs under section 5(h), the HOPE I program, or section 32 of the U.S. Housing Act of 1937 (42 U.S.C. 1437z-4). (If “No”, skip to component 11B; if “yes”, complete one activity description for each applicable program/plan, unless eligible to complete a streamlined submission due to **small PHA** or **high performing PHA** status. PHAs completing streamlined submissions may skip to component 11B.)

2. Activity Description
 Yes No: Has the PHA provided all required activity description information for this component in the **optional** Public Housing Asset Management Table? (If “yes”, skip to component 12. If “No”, complete the Activity Description table below.)

Public Housing Homeownership Activity Description (Complete one for each development affected)	
1a. Development name:	
1b. Development (project) number:	
2. Federal Program authority:	
<input type="checkbox"/> HOPE I	
<input type="checkbox"/> 5(h)	
<input type="checkbox"/> Turnkey III	
<input type="checkbox"/> Section 32 of the USHA of 1937 (effective 10/1/99)	
3. Application status: (select one)	
<input type="checkbox"/> Approved; included in the PHA’s Homeownership Plan/Program	
<input type="checkbox"/> Submitted, pending approval	
<input type="checkbox"/> Planned application	

4. Date Homeownership Plan/Program approved, submitted, or planned for submission:
(DD/MM/YYYY)

5. Number of units affected:

6. Coverage of action: (select one)

Part of the development

Total development

B. Section 8 Tenant Based Assistance

1. Yes No: Does the PHA plan to administer a Section 8 Homeownership program pursuant to Section 8(y) of the U.S.H.A. of 1937, as implemented by 24 CFR part 982 ? (If “No”, skip to component 12; if “yes”, describe each program using the table below (copy and complete questions for each program identified), unless the PHA is eligible to complete a streamlined submission due to high performer status. **High performing PHAs** may skip to component 12.)

2. Program Description:

a. Size of Program

Yes No: Will the PHA limit the number of families participating in the section 8 homeownership option?

If the answer to the question above was yes, which statement best describes the number of participants? (select one)

25 or fewer participants

26 - 50 participants

51 to 100 participants

more than 100 participants

b. PHA-established eligibility criteria

Yes No: Will the PHA’s program have eligibility criteria for participation in its Section 8 Homeownership Option program in addition to HUD criteria?

If yes, list criteria below:

- For the traditional Section 8 HCV Homeownership Program, the program participant must have been in the FSS program for a minimum of one (1) year prior to the issuance of a HCV Homeownership Voucher.

12. PHA Community Service and Self-sufficiency Programs

[24 CFR Part 903.7 9 (I)]

Exemptions from Component 12: High performing and small PHAs are not required to complete this component. Section 8-Only PHAs are not required to complete sub-component C.

A. PHA Coordination with the Welfare (TANF) Agency

1. Cooperative agreements:

- Yes No: Has the PHA entered into a cooperative agreement with the TANF Agency, to share information and/or target supportive services (as contemplated by section 12(d)(7) of the Housing Act of 1937)?

If yes, what was the date that agreement was signed? 12/04/03

2. Other coordination efforts between the PHA and TANF agency (select all that apply)

- Client referrals
- Information sharing regarding mutual clients (for rent determinations and otherwise)
- Coordinate the provision of specific social and self-sufficiency services and programs to eligible families
- Jointly administer programs
- Partner to administer a HUD Welfare-to-Work voucher program
- Joint administration of other demonstration program
- Other (describe) **HAWS has one employee actively serving on the Workfirst Planning Committee.**

B. Services and programs offered to residents and participants

(1) General

a. Self-Sufficiency Policies

Which, if any of the following discretionary policies will the PHA employ to enhance the economic and social self-sufficiency of assisted families in the following areas? (select all that apply)

- Public housing rent determination policies
- Public housing admissions policies
- Section 8 admissions policies
- Preference in admission to section 8 for certain public housing families
- Preferences for families working or engaging in training or education programs for non-housing programs operated or coordinated by the PHA
- Preference/eligibility for public housing homeownership option participation
- Preference/eligibility for section 8 homeownership option participation
- Other policies (list below)

b. Economic and Social self-sufficiency programs

Yes No: Does the PHA coordinate, promote or provide any programs to enhance the economic and social self-sufficiency of residents? (If “yes”, complete the following table; if “no” skip to sub-component 2, Family Self Sufficiency Programs. The position of the table may be altered to facilitate its use.)

Services and Programs				
Program Name & Description (including location, if appropriate)	Estimated Size	Allocation Method (waiting list/random selection/specific criteria/other)	Access (development office / PHA main office / other provider name)	Eligibility (public housing or section 8 participants or both)
Section 8 FSS	75	Selection Criteria	PHA Main Office	Section 8
Public Housing FSS	13	Selection Criteria	Development Office	Public Housing

(2) Family Self Sufficiency program/s

a. Participation Description

Family Self Sufficiency (FSS) Participation		
Program	Required Number of Participants (start of FY 2005 Estimate)	Actual Number of Participants (As of: DD/MM/YY)
Public Housing	0	13 4/1/11
Section 8	75	68 4/1/11

b. Yes No: If the PHA is not maintaining the minimum program size required by HUD, does the most recent FSS Action Plan address the steps the PHA plans to take to achieve at least the minimum program size?
If no, list steps the PHA will take below:

C. Welfare Benefit Reductions

1. The PHA is complying with the statutory requirements of section 12(d) of the U.S. Housing Act of 1937 (relating to the treatment of income changes resulting from welfare program requirements) by: (select all that apply)

- Adopting appropriate changes to the PHA's public housing rent determination policies and train staff to carry out those policies
- Informing residents of new policy on admission and reexamination
- Actively notifying residents of new policy at times in addition to admission and reexamination.
- Establishing or pursuing a cooperative agreement with all appropriate TANF agencies regarding the exchange of information and coordination of services
- Establishing a protocol for exchange of information with all appropriate TANF agencies
- Other: (list below)

D. Reserved for Community Service Requirement pursuant to section 12(c) of the U.S. Housing Act of 1937

13. PHA Safety and Crime Prevention Measures

[24 CFR Part 903.7 9 (m)]

Exemptions from Component 13: High performing and small PHAs not participating in PHDEP and Section 8 Only PHAs may skip to component 15. High Performing and small PHAs that are participating in PHDEP and are submitting a PHDEP Plan with this PHA Plan may skip to sub-component D.

A. Need for measures to ensure the safety of public housing residents

1. Describe the need for measures to ensure the safety of public housing residents (select all that apply)

- High incidence of violent and/or drug-related crime in some or all of the PHA's developments
- High incidence of violent and/or drug-related crime in the areas surrounding or adjacent to the PHA's developments
- Residents fearful for their safety and/or the safety of their children
- Observed lower-level crime, vandalism and/or graffiti
- People on waiting list unwilling to move into one or more developments due to perceived and/or actual levels of violent and/or drug-related crime
- Other (describe below)

2. What information or data did the PHA used to determine the need for PHA actions to improve safety of residents (select all that apply).

- Safety and security survey of residents
- Analysis of crime statistics over time for crimes committed “in and around” public housing authority
- Analysis of cost trends over time for repair of vandalism and removal of graffiti
- Resident reports
- PHA employee reports
- Police reports
- Demonstrable, quantifiable success with previous or ongoing anticrime/anti drug programs
- Other (describe below)

3. Which developments are most affected? (list below)

Piedmont Park
Cleveland Avenue Homes
Sunrise Towers
Crystal Towers
Townview Apartments
Stoney Glen
Healy Towers

B. Crime and Drug Prevention activities the PHA has undertaken or plans to undertake in the next PHA fiscal year

1. List the crime prevention activities the PHA has undertaken or plans to undertake: (select all that apply)

- Contracting with outside and/or resident organizations for the provision of crime- and/or drug-prevention activities
- Crime Prevention Through Environmental Design
- Activities targeted to at-risk youth, adults, or seniors
- Volunteer Resident Patrol/Block Watchers Program
- Other (describe below) **Installation of surveillance cameras in hi-rise developments and installation of RAB lighting in all family developments.**

2. Which developments are most affected? (list below)

Piedmont Park
Cleveland Avenue Homes
Sunrise Towers
Crystal Towers
Healy Towers
Stoney Glen
Townview Apartments

C. Coordination between PHA and the police

1. Describe the coordination between the PHA and the appropriate police precincts for carrying out crime prevention measures and activities: (select all that apply)

- Police involvement in development, implementation, and/or ongoing evaluation of drug-elimination plan
- Police provide crime data to housing authority staff for analysis and action
- Police have established a physical presence on housing authority property (e.g., community policing office, officer in residence)
- Police regularly testify in and otherwise support eviction cases
- Police regularly meet with the PHA management and residents
- Agreement between PHA and local law enforcement agency for provision of above-baseline law enforcement services
- Other activities (list below)

2. Which developments are most affected? (list below)

- Piedmont Park**
- Cleveland Avenue Homes**
- Sunrise Towers**
- Crystal Towers**
- Healy Towers**
- Stoney Glen**
- Townview Apartments**

D. Additional information as required by PHDEP/PHDEP Plan

PHAs eligible for FY 2005 PHDEP funds must provide a PHDEP Plan meeting specified requirements prior to receipt of PHDEP funds.

- Yes No: Is the PHA eligible to participate in the PHDEP in the fiscal year covered by this PHA Plan?
- Yes No: Has the PHA included the PHDEP Plan for FY 2005 in this PHA Plan?
- Yes No: This PHDEP Plan is an Attachment. (Attachment Filename: ____)

14. RESERVED FOR PET POLICY

[24 CFR Part 903.7 9 (n)]

15. Civil Rights Certifications

[24 CFR Part 903.7 9 (o)]

Civil rights certifications are included in the PHA Plan Certifications of Compliance with the PHA Plans and Related Regulations.

16. Fiscal Audit

[24 CFR Part 903.7 9 (p)]

1. Yes No: Is the PHA required to have an audit conducted under section 5(h)(2) of the U.S. Housing Act of 1937 (42 U.S.C. 1437c(h))?
(If no, skip to component 17.)
2. Yes No: Was the most recent fiscal audit submitted to HUD?
3. Yes No: Were there any findings as the result of that audit?
4. Yes No: If there were any findings, do any remain unresolved?
If yes, how many unresolved findings remain? _____
5. Yes No: Have responses to any unresolved findings been submitted to HUD?
If not, when are they due (state below)?

17. PHA Asset Management

[24 CFR Part 903.7 9 (q)]

Exemptions from component 17: Section 8 Only PHAs are not required to complete this component. High performing and small PHAs are not required to complete this component.

1. Yes No: Is the PHA engaging in any activities that will contribute to the long-term asset management of its public housing stock, including how the Agency will plan for long-term operating, capital investment, rehabilitation, modernization, disposition, and other needs that have **not** been addressed elsewhere in this PHA Plan?
2. What types of asset management activities will the PHA undertake? (select all that apply)
 - Not applicable
 - Private management
 - Development-based accounting
 - Comprehensive stock assessment
 - Other: (list below) **Converted to Asset Based Management in 2004**
3. Yes No: Has the PHA included descriptions of asset management activities in the **optional** Public Housing Asset Management Table?

18. Other Information

[24 CFR Part 903.7 9 (r)]

A. Resident Advisory Board Recommendations

1. Yes No: Did the PHA receive any comments on the PHA Plan from the Resident Advisory Board/s? **Attachment G** – Minutes from the RAB Committee Meeting.

2. If yes, the comments are: (if comments were received, the PHA **MUST** select one)
 Attached at
 Provided below:

3. In what manner did the PHA address those comments? (select all that apply)
 Considered comments, but determined that no changes to the PHA Plan were necessary.
 The PHA changed portions of the PHA Plan in response to comments
List changes below:

 Other: (list below)

B. Description of Election process for Residents on the PHA Board

1. Yes No: Does the PHA meet the exemption criteria provided section 2(b)(2) of the U.S. Housing Act of 1937? (If no, continue to question 2; if yes, skip to sub-component C.)

2. Yes No: Was the resident who serves on the PHA Board elected by the residents? (If yes, continue to question 3; if no, skip to sub-component C.)

3. Description of Resident Election Process
 - a. Nomination of candidates for place on the ballot: (select all that apply)
 Candidates were nominated by resident and assisted family organizations
 Candidates could be nominated by any adult recipient of PHA assistance
 Self-nomination: Candidates registered with the PHA and requested a place on ballot
 Other: (describe)

b. Eligible candidates: (select one)

- Any recipient of PHA assistance
- Any head of household receiving PHA assistance
- Any adult recipient of PHA assistance
- Any adult member of a resident or assisted family organization
- Other (list)

c. Eligible voters: (select all that apply)

- All adult recipients of PHA assistance (public housing and section 8 tenant-based assistance)
- Representatives of all PHA resident and assisted family organizations
- Other (list)

C. Statement of Consistency with the Consolidated Plan

For each applicable Consolidated Plan, make the following statement (copy questions as many times as necessary).

1. Consolidated Plan jurisdiction: **Winston-Salem/Forsyth County**

2. The PHA has taken the following steps to ensure consistency of this PHA Plan with the Consolidated Plan for the jurisdiction: (select all that apply)

- The PHA has based its statement of needs of families in the jurisdiction on the needs expressed in the Consolidated Plan/s.
- The PHA has participated in any consultation process organized and offered by the Consolidated Plan agency in the development of the Consolidated Plan.
- The PHA has consulted with the Consolidated Plan agency during the development of this PHA Plan.
- Activities to be undertaken by the PHA in the coming year are consistent with the initiatives contained in the Consolidated Plan. (list below)
- Other: (list below)

3. The Consolidated Plan of the jurisdiction supports the PHA Plan with the following actions and commitments: (describe below)

- **Providing expanded access to home ownership by first-time home buyers through multiple 2nd mortgage financing program options,**
- **Providing interim acquisition and permanent infrastructure financing for Hope VI developments**

- **Providing financial assistance to address special population needs—the homeless, former substance abusers, and persons with AIDS**
- **Committing first time homebuyer funds for HOPE VI homeownership phases**

D. Other Information Required by HUD

Use this section to provide any additional information requested by HUD.

Substantial Deviation from the 5-year Plan and Significant Amendment or Modification to the Annual Plan will defined as:

Any substantial deviation from the Missions Statement and/or Goals and Objectives presented in the Five-Year Plan that cause changes in the services provided to the residents or significant changes to the Agency’s financial situation will be documented in subsequent Agency Plans. An exception to this definition will be made for revisions that are adopted to reflect changes in HUD regulatory requirements; such changes will not be considered significant amendments by the Housing Authority.

The Housing Authority of the City of Winston-Salem has adopted the HUD standards for reporting significant deviations or amendments according to Notice 99-51.

Attachments

Use this section to provide any additional attachments referenced in the Plans.

Attachment A –	Admissions Policy for Deconcentration
Attachment B –	PHA Organizational Chart
Attachment C –	Resident Board Members Information
Attachment D –	Pet Policy
Attachment E –	Homeownership Capacity
Attachment F –	Project-Based Voucher Program
Attachment G –	Comments of Resident Advisory Board
Attachment H -	Community Service and Self-Sufficiency Requirement Policy
Attachment I –	Assessment of Demographic Changes Since Site Based Waiting Lists Implementation
Attachment J -	Statement regarding Violence Against Women Act (VAWA)
Attachment K –	Steps to Affirmatively Further Fair Housing
Attachment L –	RHF P&E 2005
Attachment M –	RHF P&E 2006
Attachment N –	RHF P&E 2007
Attachment O -	RHF P&E 2008 (1)
Attachment P -	RHF P&E 2008 (2)
Attachment Q -	RHF P&E 2009 (1)
Attachment R -	RHF P&E 2009 (2)
Attachment S -	RHF P&E 2009 (3)
Attachment T -	RHF P&E 2010
Attachment U -	CPF P&E 2008
Attachment V -	CPF P&E 2009
Attachment W -	ARRA Grant P&E 2009
Attachment X -	CPF P&E 2010
Attachment Y -	Security Grant CPF P&E 2010
Attachment Z -	Five Year Action Plan
Attachment AA -	CFP P&E 2007
Attachment AB -	CFP P&E 2011

The Housing Authority of the City of Winston-Salem Deconcentration and Income Mixing Analysis Results

Component 3, (6) Deconcentration and Income Mixing

a. Yes No: Does the PHA have any general occupancy (family) public housing development covered by the deconcentration rule? If no, this section is complete. If yes, continue to the next question.

b. Yes No: Do any of these covered developments have average incomes above or below 85% to 115% of the average incomes of all such developments? If no, this section is complete.

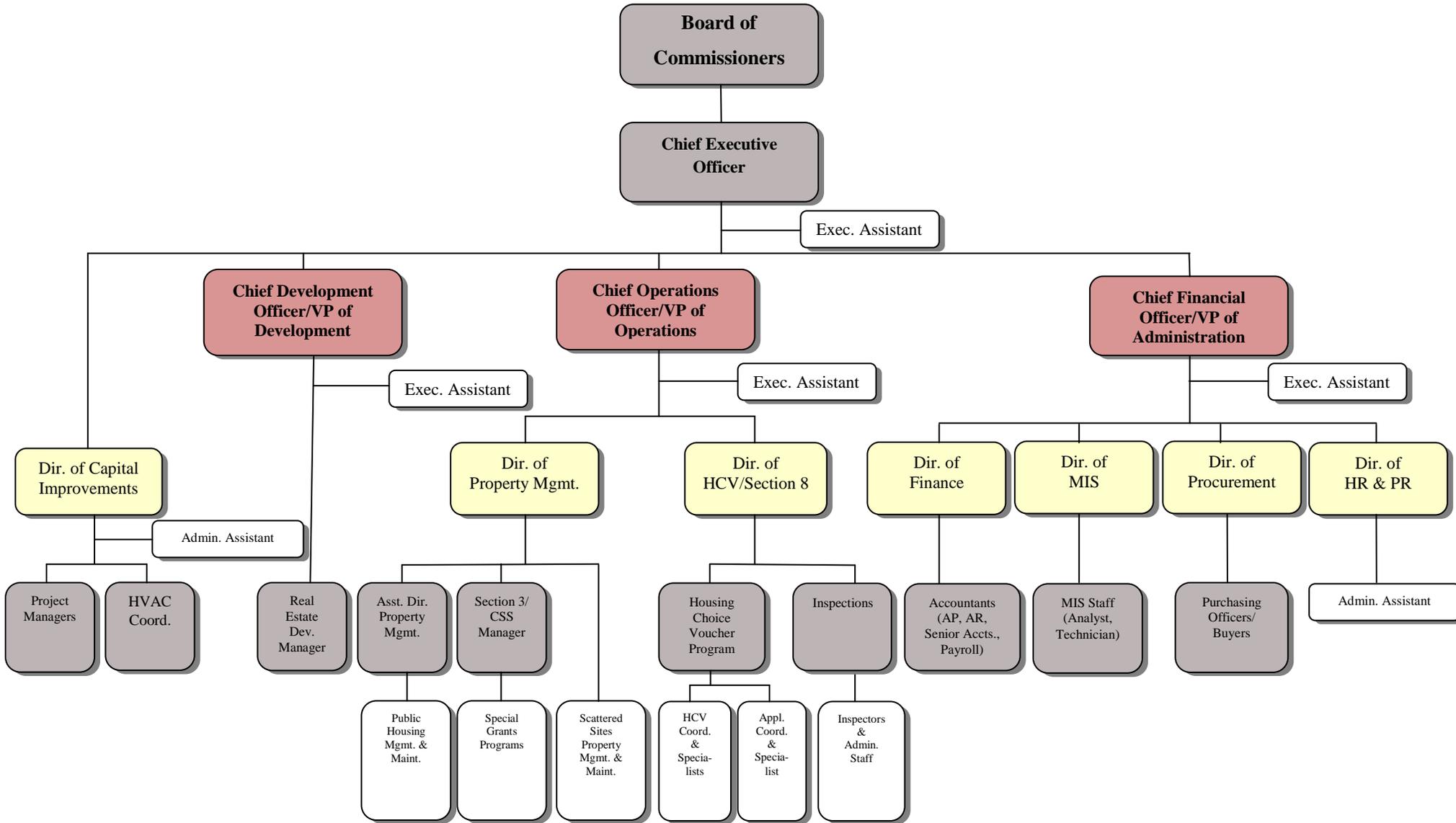
If yes, list these developments as follows:

Development Name:	Deconcentration Policy for Covered Developments		Deconcentration policy (if no explanation) [see step 5 at §903.2 (c) (1)(v)]
	Number of Units	Explanation (if any) [see step 4 at §903.2(c) (1) (iv)]	
NC012-021	50	This development is 132% of the average income of the covered developments. Tenants are required to pay their own utilities (electric, gas and water) directly to the utility company. Therefore tenants typically have some type of income when they move in. In addition, HAWS has site-based waiting lists and gives a “working preference” at all developments.	
NC012-022	50	This development is 125% of the average income of the covered developments. Tenants are required to pay their own utilities (electric, gas and water) directly to the utility company. Therefore tenants typically have some type of income when they move in. In addition, HAWS has site-based waiting lists and gives a “working preference” at all developments.	

Deconcentration Rule

- A. Objective: The objective of the Deconcentration Rule for public housing units is to ensure that families are housed in a manner that will prevent a concentration of poverty families and/or a concentration of higher income families in any one development. The specific objective of the housing authority is to house no less than 40 percent of its public housing inventory with families that have income at or below 30 percent of the area median income by public housing development. Also, the housing authority will take actions to insure that no individual development has a concentration of higher income families in one or more of the developments. To insure that the housing authority does not concentrate families with higher income levels, it is the goal of the housing authority not to house more than 60 percent of its units in any one development with families whose income exceeds 30 percent of the area median income. The housing authority will track the status of family income, by development, on a monthly basis by utilizing income reports generated by the housing authority's computer software system.
- B. Actions: To accomplish the deconcentration goals, the housing authority will take the following actions:
- i. At the beginning of each housing authority fiscal year (October 1st), the housing authority will establish a goal for housing 40 percent of its new admissions with families whose incomes are at or below the area median income. The annual goal will be calculated by taking 40 percent of the total number of move-ins from the previous housing authority fiscal year.
 - ii. To accomplish the goals of:
 - (a) housing not less than 40 percent of its public housing inventory on an annual basis with families that have incomes at or below 30 percent of area median income, and
 - (b) not housing families with incomes that exceed 30 percent of the area median income in developments that have 60 percent or more of the total household living in the development with incomes that exceed 30 percent of the area median income, the housing authority may implement one or more of the following:
 - Skip over certain families on the waiting lists based on incomes;
 - Utilize affirmative marketing efforts and promotion of supportive services/amenities (i.e. after-school tutorial, 24-hour emergency maintenance, etc.) to encourage new applicants with appropriate income levels;
 - Consult and inform applicants on the waiting list of deconcentration goals;
 - Utilization of the working preference.

Organization Chart



RESIDENT BOARD COMMISSIONER MEMBERS

The Mayor of the City of Winston-Salem appoints the resident of HAWS as a board commissioner.

Ms. Doris Kimbrough was appointed on July 25, 2001. Ms. Kimbrough's term is up in July, 2011.

THE HOUSING AUTHORITY OF THE CITY OF WINSTON-SALEM PET POLICY

Residents of the Housing Authority of the City of Winston-Salem (HAWS) may own and keep household pets as set forth in HAWS Pet Rules and policies.

The Pet Rules and policies for the Housing Authority of the City of Winston-Salem herein referred to as PHA, has been developed in accordance with HUD regulations and in accordance with the Quality and Work Responsibility Act of 1998.

The Pet Rules for this PHA are incorporated into this policy. The rules adopted by the PHA are reasonably related to the legitimate interest of the PHA, including:

The PHA's interest in providing decent safe and sanitary living environment for existing and prospective residents;

Protecting and preserving the physical condition of the development;

The PHA's financial interest in the development, and;

The PHA shall permit the maintenance of a common household pet by residents who currently reside in the PHA sites.

I. SELECTION CRITERIA

A. Management Approval

Prior to a pet being accepted for keeping in an apartment within the PHA, the proposed owner must prepare and submit an "Application to Keep a Pet" to the PHA. The Resident/Pet Owner and the PHA must enter a "Pet Agreement".

In Addition to executing the Agreement, the Resident/Pet Owner must provide to the PHA documented proof of the proposed pet health, suitability, and acceptability in accordance with the provisions outlined in "Standards".

Pets must be registered with the PHA before the pet is brought onto the development premises and annually thereafter.

Registration Includes:

1. Certificate signed by licensed veterinarian or designate State or Local authority *or* agent stating that the pet has received all inoculations required by State or Local law.
2. Statement signed by a licensed veterinarian that the animal is in good health, has no communicable diseases or pests and, in the case of dogs and cats, is spayed or neutered. Cats must also be declawed.
3. Name, address and telephone number of one or more responsible parties to care for the pet if the owner dies, is incapacitated or unable to care for the pet.
4. Execution of a Pet Agreement, stating that the Resident accepts complete responsibility for the care and cleaning of the pet and acknowledges the applicable rules.
5. Pet must be licensed in accordance with applicable State and Local law and regulations.

Registration will be coordinated with the annual reexamination date.

Approval for the keeping of a pet shall not be extended until the requirements specified above have been met, and in no event will approval of other than the common household pet be extended.

B. Management Disapproval

The PHA shall refuse to register the pet if:

1. The pet is not a common household pet identified more specifically in the policy:
2. Pet Owner fails to provide complete pet registration information or fails annually to update the registration; and/or
3. The PHA reasonably determines, based on the pet owners habits and practices, that the Pet Owner will be unable to keep the pet in compliance with the Pet Rules and other lease obligations. The pet's temperament may be considered as a factor in determining the prospective pet owner's ability to comply with the pet rules and other lease obligations.

C. Standards

Common household pets as outlined below will be permitted under the following guidelines:

1. Dogs

Maximum number – One (1)
Maximum adult weight- 25 pounds
Must be housebroken
Must be spayed or neutered
Must have all required inoculations
Must be licensed as specified now or in the future by State law and local ordinance

2. Cats

Maximum number – One (1)
Must be declawed
Must be spayed or neutered
Must have all required inoculations
Must be trained to use a litter box or other waste receptacle
Must be licensed as specified now or in the future by State law and local ordinance

3. Birds

Maximum number – One (1)
Must be enclosed inside a cage at all times

4. Fish

Maximum aquarium size – 20 gallons
Must be maintained on approved stand

5. Rodents (only rabbit, guinea pig, hamster, or gerbil)

Maximum number – one (1)
Must be enclosed inside an acceptable cage at all times
Must have any or all inoculation now or in the future required by State law or local ordinance

6. Turtle

Maximum number – one (1)
Must be enclosed in an acceptable cage or container at all times

7. No pets other than specified may be kept by a resident

8. Only one four-legged warm-blooded pet will be allowed per unit

9. Failure to properly register and to provide the specified proof of the proposed pets prior to a pet being bought into the residents' apartment shall result in the initiation of an action to remove the pet and to evict the resident.
10. These rules do not apply to or restrict animals that are used to assist the disabled (service animals)

II. PET DEPOSIT

A. The Resident/Pet Owner shall be required to pay to the PHA a refundable deposit as defined below:

1. Dog or Cat

- a. Upon registration, the owner is required to make a pet deposit and fee of Three Hundred Dollars (\$300.00). Resident agrees to pay Three Hundred Dollars (\$300.00) of which Two Hundred Dollars (\$200.00) is non-refundable. The Two Hundred Dollar (\$200.00) non-refundable fee is not applied to any damages done by the pet; it is for reasonable operating costs. One Hundred Dollars (\$100.00) of the paid deposit shall be refunded when the Resident moves out or when the resident no longer keeps a pet, whichever is earlier and there are no damages associated with the unit.

In addition, there is a monthly rent fee of \$10.00 for each pet.

- b. The deposit shall be paid in either a lump sum or an initial payment of \$200.00 on or prior to the date the pet is properly registered and brought into the apartment. The monthly payments in an amount of no less than \$50.00 must be paid at rent-due time until the specified deposit has been paid.

2. All Other Allowable Pets

- a. A deposit of \$75.00 shall be made for the purpose of defraying all reasonable costs directly attributable to the presence of the pet.
- b. The deposit of \$75.00 shall be paid in full on or prior to the date the pet is properly registered and brought into the apartment.

The PHA reserves the right to change or increase the required deposit by amendment to these rules.

B. All reasonable expenses incurred by the PHA as the result of damages directly attributable to the presence of the pet in the development shall be the responsibility of the Resident/Pet Owner including:

1. Cost of repairs and replacement to Residents' dwelling unit
2. Fumigation of Residents' dwelling unit

Such expenses as a result of a move-out inspection shall be deducted from the Pet Deposit at move-out and the Resident/Pet Owner shall be billed for any balance due.

- C. The pet Deposit shall be refunded when the Resident moves out or when the Resident no longer keeps a pet whichever is earlier.
- D. Resident/Pet Owners' liability for damages caused by his or her pet is not limited to the amount of the Pet Deposit. While the Resident/Pet Owner is in occupancy, he or she will be required to reimburse the PHA for the real Cost of any and all damages caused by his or her pet.
- E. Legal cost to recover unpaid costs or expenses may be commenced if a properly prepared and outlined invoice is not honored.

III. PET RULES

- A. Pets must be maintained within the Resident/Pet Owner's unit. When outside the apartment, dogs and cat must be kept on a leash or carried and under the control of the Resident/Pet Owner or other responsible individual **AT ALL TIMES**. The pet must be fed and watered inside the dwelling unit; no pet food or water may be left outside the dwelling unit at any time. All other allowable pets must remain inside the unit at all times.
- B. Dogs should be walked (always on a leash) and curbed away from the buildings, sidewalks, streets, and other common walking areas. Resident/Pet Owner must carry a scoop and plastic bag when walking pet and clean up after the pet by placing waste in a tied plastic bag in the garbage. Under no circumstances will the pet be allowed to go near the shrubbery and or trees located on the property.
- C. Litter Box Requirements for Cats: litter from litter boxes shall be disposed of in sealed plastic trash bags and placed in a dumpster or other PHA specified garbage areas on the grounds of the development.
- Litter shall be changed at least twice weekly and waste shall be separated from the litter daily.
- Litter shall not be disposed of by being flushed through a toilet. Charges for unclogging the toilet due to the improper disposal of pet waste shall be billed to the Resident/Pet Owner.
- Litter boxes shall be kept INSIDE the Resident/Pet Owners dwelling unit at all times.
- D. Resident/Pet Owner shall assume sole responsibility for liability arising from injury sustained by any person attributable to their pet.
- E. Resident/Pet Owner agrees to control the noise of his/her pet so that such noise does not constitute a nuisance to other residents or interrupt their peaceful enjoyment of their apartments. Failure to control pet noise may result in the removal of the pet from the premises and or lease termination.
- This includes, but is not limited to, loud or continuous barking, howling, whining, biting, scratching, chirping, or other such activities.
- F. Any pet that causes bodily injury to any resident, guest, staff member, or other authorized person on the premises, shall be immediately and permanently removed from the premises without prior notification.
- G. No pet shall be left unattended in any apartment for a period in excess of 12 hours, except for fish.
- H. All Resident/Pet Owners shall be responsible for adequate care, nutrition, exercise, and medical attention for his/her pet.
- I. Resident/Pet Owner must be aware and recognize other residents may have chemical sensitivities or allergies related to pets, or may easily be frightened and/or disoriented by animals. The Resident/Pet Owner agrees to use common sense and common courtesy with respect to such other residents' right to the peaceful and quiet enjoyment of common areas and his/her apartment.
- J. Resident/Pet Owner shall take adequate precautions to eliminate any pet odors within or around the unit and to maintain the unit in a sanitary condition at all times.
- K. All dogs and cats must wear both a flea and a tick collar.
- L. Visiting pets, as well as pets of visitors, are **strictly prohibited**, with the exception of Service animals.
- M. Residents are prohibited from feeding or harboring stray animals. The feeding of stray animals shall constitute having a pet without the written permission of the PHA.
- N. The expense of de-infestation of fleas in the Resident/Pet Owners' apartment shall be the responsibility of the Resident/Pet Owner.
- O. A pet tag furnished by Resident/Pet Owner must be worn by dog or cat at all times identifying the owner and apartment number.

- P. Resident/Pet Owner shall not alter their unit, patio, unit area, or common area to create an enclosure for the animal.
- Q. If an approved pet gives birth to a litter, The Resident/Pet Owner must remove all pets from the premises except the approved pet.

IV. PET RULE VIOLATIONS

A. Violation Notice

If a determination is made which is based on objective facts supported by written statements, that a Resident/Pet Owner has violated a rule, written notice will be served on the Resident/Pet Owner.

The notice must contain a brief statement of the factual basis for the determination and the pet rule allegedly violated. -The notice also must state:

1. That the Resident/Pet Owner has **ten (10) days** from the date of receiving the notice to correct the violation
Or make a written request for a meeting to discuss the violation.
2. That the Resident/Pet Owner is entitled to be accompanied by another person of his or her choice at the meeting.
3. That the Resident/Pet Owner correct the violation, request a meeting, or appear at a requested meeting that may result in the initiation of procedures to terminate the pet owner tenancy.

B. Violation Meeting

If a Resident/Pet Owner request a meeting on a timely basis the PHA will establish a mutually agreeable time and a place for the meeting.

The meeting will be scheduled no later than **ten (10) days** from the effective date of service of notice of the pet rule violation, unless the pet owner agrees to a later date in writing.

The Resident/Pet Owner and the PHA will discuss the alleged violation at the meeting and attempt to correct it.

As a result of the meeting, the PHA may give the Resident/Pet Owner additional time to correct the violation.

C. Notice for Pet Removal

If the Resident/Pet Owner and the PHA are unable to resolve the violation in the allotted time, the PHA may serve notice to Resident/Pet Owner at or after the meeting to remove the pet.

The notice for pet removal must:

1. Contain a brief statement of the factual basis for the determination and the pet rule's that have been violated.
2. State that the Resident/Pet Owner must remove the pet within ten (10) days of the effective date of service of the notice of pet removal; and
3. State that failure to remove the pet may result in initiation of procedure to terminate the Resident/Pet Owner tenancy.

D. Termination of Tenancy

The PHA may initiate procedures for termination of the Resident/Pet Owner tenancy based on a pet rule violation if:

1. The pet owner has failed to remove the pet or correct a pet rule violation within the applicable time period specified; and
2. The pet rule violation is sufficient to begin procedures to terminate the Resident/Pet Owner tenancy under the terms of the lease and applicable regulations.

E. Pet Removal

If the health and/or safety of the pet is threatened by the death or incapacity of the pet owner, or by other factors that render the pet owner unable to care for the pet, the procedures identified below will be followed. This includes pets that appear to be poorly cared for or which are left unattended for more than 12 hours.

The situation will be reported to the Responsible Party designated by the Resident/Pet Owner.

If the responsible Party(s) is/are unwilling or unable to care for the pet, or if the PHA despite reasonable efforts has been unable to contact the Responsible Party(s), the PHA may contact the appropriate State or local authority and request the removal of pet.

V. Responsible Parties

The Resident/Pet Owner will be required to designate two responsible parties for the care of the pet if the health or safety of the pet is threatened by the death or incapacity of the pet owner or by other factors that render the pet owner unable to care for the pet.

VI. Inspections

The PHA, after reasonable notice to the Resident/Pet Owner, may enter and inspect the premises, In addition to other allowable inspections

The PHA may enter and inspect the unit only if he or she has received a signed, written complaint alleging that the conduct or condition of the pet in the dwelling unit constitutes is unacceptable, a nuisance or threat to the health or safety of the occupants of the development or other persons in the community under applicable State or local law.

VII. Emergencies

- A. Vicious Animals: The PHA will be concerned about pets that become vicious or display symptoms of severe illness or demonstrate other behavior that constitutes an immediate threat to the health and safety of the tenancy as a whole.

The PHA will refer these cases to the State or local authority authorized under applicable state or local law to remove these pets that exhibit this behavior.

- B. Apartment Emergencies: In the event of any emergencies which requires response to a Resident/Pet Owner's unit by management or maintenance, fire, or medical personnel, responding personnel shall not be responsible for locating or returning pets who escape from the apartment during the emergency.

- C. Building Emergencies: In the event of a building emergency such as fire or flood (but not limited to these particular emergencies), the responding building personnel or outside building personnel (i.e. fire, management, or others) shall first evacuate residents and guest, and then, if possible pets. The PHA is not responsible for pets unable to be rescued in the event of such an emergency.

Homeownership Program Capacity

The Housing Authority of Winston-Salem is currently utilizing the supportive services of our partner agencies to aid in the process of removing resident barriers to self-sufficiency and preparing residents for homeownership. These agencies include (but are not limited to) the Center for Homeownership (C.H.O.), Experiment in Self Reliance's (ESR), New Century IDA Program, North Carolina Cooperative Extension Agency, Consumer Credit Counseling Service (CCCS), the City of Winston-Salem Housing & Neighborhood Development, and Mechanics & Farmers Bank. Through our partner agencies, HAWS is utilizing the following plan to provide services to our residents during and after their home buying process.

Section 8 residents interested in pursuing homeownership will be assisted through the HAWS Section 8 Family Self Sufficiency (FSS) Program. Doing so will not only provide the opportunity to work on mortgage readiness, credit rebuilding and ultimately homeownership, but also offer a means of overcoming other barriers that would hinder self sufficiency. Both the Section 8 FSS Coordinator and the Public Housing FSS Coordinator have attended several workshops and training and hold certificates in various Homeownership Programs. Our new process for homeownership entails:

- Initially meeting with the Section 8 FSS Coordinator to receive an introduction to the FSS Program.
- For those that do qualify, an application is completed and reviewed.
- A referral is provided to the resident and one-on-one counseling with Center for Homeownership (C.H.O.) is scheduled. If needed, a plan of action is implemented for credit repair and mortgage readiness. Additional assistance with budgeting, financial literacy and credit repair is offered by NC Cooperative Extension Agency and Mechanics & Farmers Bank.
- FSS Participants will be required to attend a Financial Literacy classes offered through the Housing Authority of Winston-Salem.
- Residents are also given the option to apply for enrollment in the IDA Program hosted by Experiment in Self-Reliance. In 2007, five of our HAWS Section 8 residents that purchased homes, were graduates of the IDA Program.
- After residents have successfully graduated and received a Certificate of Completion from the New Century IDA Program, they are considered mortgage-ready.
- Once residents become mortgage ready, they attend a 1-day or 2-day Homebuyer Education Class, offered by C.H.O., which covers the main facets of the home buying process. Participants receive a certificate of completion at the end of the class.
- The FSS Coordinator communicates with residents as often as needed. The coordinator attends all closings and continues contact with residents

as needed after the purchase of their home. For HAWS residents under the Section 8 Program, a Section 8 Homeownership Specialist provides continued contact on an as-need basis.

- As a part of the resident's homeownership obligations to HAWS, each household must attend an approved workshop or counseling session once a year on:
 - Post purchase and Default and Foreclosure
 - Home Maintenance

The Center for Homeownership

From January 2009 through December 2009, fifty-three (53) HAWS residents have received services from the Center for Homeownership. Eleven of the fifty-three purchased their home in 2009. The remaining are continuing to work on their mortgage readiness. The Center is a HUD Approved Comprehensive Housing Counseling Agency. Services offered by the Center for Homeownership:

- Homebuyer Education Workshop
- Pre-Purchase Analysis
- Mortgage Loan Pre-Qualification
- Credit Report Review & Analysis
- Credit Rebuilding
- Assistance with Budgeting
- Resource Center

Experiment in Self Reliance's IDA Program

The IDA Program has also been beneficial in the success of our residents pursuing homeownership. ESR's IDA Program has committed to providing the following curriculum through their program:

- Economic Literacy
- Tracking Spending, Cash Flow, & Budgeting
- Wise Use of Credit
- Banking & Credit Products
- Psychology of Money
- Reducing Debt
- Borrowing Money the Smart Way
- Investing for the Future & 401K
- Estate Planning
- Preparing for Homeownership
- Making Your Taxes Work for You
- Pre-Qualification Symposium
- Meet with lenders to review loan products available
 - Determine affordability (city and county programs)
 - View housing opportunities (realtors & non-profit developers)

Participants in the IDA Program can open an Individual Development Account (IDA) to save money regularly for their down payment. The first \$1,000 of these funds receives a 2:1 or 4:1 grant match. Qualification for this program does require participants to be at

least 18 years old, live in Forsyth County, have a stable source of income from wages, and meet ESR's IDA Program income guidelines.

NC Cooperative Extension Service and Mechanics and Farmers Bank

Representatives from both companies have teamed together in order to provide Financial Literacy classes and pre-purchase workshops that enable residents to acquire their success in self sufficiency.

Optional:

Financial Literacy Classes: For 2 hours each month for 5 months, both companies meet with residents to provide information on:

- Creating a Nest Egg – Banking Services
- Dollars and Sense of Handling Money
- Taming and Maintaining a Good Credit History
- Nuts and Bolts of Budgeting your Money
- Piecing Together Your Bills and Obligations
- Dealing with a Major Lifetime Expense

Financial Literacy classes are offered twice a year.

Post Purchase Workshop:

After closing on their home, homeowners are required to attend a post purchase workshop once a year through The Center for Homeownership which help them discover ways to resolve housing-related problems through various problem-solving “action steps”. They receive information about:

- Continued budgeting
- Sustaining their financial obligations to repay the mortgage loans
- Early intervention strategies that minimize the risk of delinquency, default and foreclosure
- Mortgage Insurance vs. Life Insurance
- Home Equity Lines and Refinancing
- Maintaining your home – inside & out
- Energy Efficiency
- Cosmetic Improvements vs. Renovations
- Pest Control
- Landscaping

Section 8 residents of the Housing Authority of Winston-Salem, can transition from rental into homeownership via their Section 8 voucher. Instead of using the voucher subsidy to help a family with rent, the homeownership option allows first-time home buyers to use voucher subsidy to meet monthly homeownership expenses. In addition, city and county first time homebuyer assistance programs will provide subordinate financing that will fill the gap between the reduced purchase price and what prospective homeowners can afford to borrow. Program applicants must meet specific income levels, so that they will be able to successfully obtain the required mortgage funds.

PROJECT-BASED HOUSING CHOICE VOUCHER (HCV) PROGRAM

I. Existing Program(s) and Projected Commitments

The Housing Authority of the City of Winston-Salem currently has the following Project-Based Housing Choice Voucher (HCV) programs:

1. Azalea Terrace Apartments (KPT HOPE VI Project, Phase I) – 50 project-based units for the elderly. Under HAP Contract.
2. Aster Park Apartments (KPT HOPE VI Project, Phase II) – 88 project-based units for family. Under HAP Contract.
3. Arbor Oaks Apartments (KPT HOPE VI Project, Phase III) – 28 project-based units for family, with 8 of the 28 units being targeted to disabled. Under HAP Contract.
4. Mountain View Apartments (Kernersville Project) – 10 project-based units for the elderly, with 5 of the 10 units targeted for the disabled. Under HAP Contract.
5. Alders Pointe – (HHG HOPE VI Project, Phase I) – 50 project-based units for the elderly, with 10 of the 50 targeted for the disabled and/or homeless. Under HAP Contract.
6. Providence Place – (HHG HOPE VI Project, Phase II) – 28 project-based units for family, with 6 of the 28 targeted for the disabled and/or homeless. Under HAP Contract.
7. Pinecrest Apartments (Walkertown Development) – 20 project-based units for family, with 8 of the 20 units targeted for the disabled. Under HAP Contract.
8. Willows Peake (HHG HOPE VI Project, Phase III) – 53 project-based units for family, with 12 of the 53 targeted for the disabled. Under HAP Contract.

The Housing Authority of the City of Winston-Salem has committed and has under contract, to date, a total of 327 units of Project-Based HCV assistance in 8 developments.

The Authority anticipates committing up to an additional 240 units of Project-Based HCV assistance in up to 5 developments during this PHA Plan year.

Attaching Project-Based HCV assistance to these developments meets the Authority's goals for deconcentration and providing affordable housing throughout Winston-Salem and Forsyth County.

II. Request for Proposals and Selection Criteria

INTRODUCTION

The Housing Authority of the City of Winston-Salem (AUTHORITY) is issuing a competitive Request for Proposals (RFP) from experienced housing providers to receive project-based Housing Choice Voucher subsidies for existing and/or rehabilitated housing in the City of Winston-Salem. The Authority's goal for project-basing Housing Choice Voucher assistance is to provide a resource of stable affordable housing units in the volatile economic market and to help increase participation by owners of affordable housing.

The Authority has established a project-based voucher (PBV) assistance program in compliance with U.S. Department of Housing and Urban Development guidelines. In the PBV program, the rental subsidy is attached to the unit rather than to the tenant. The Authority will enter into a Housing Assistance Payments (HAP) Contract for up to fifteen years with an owner, for units in rehabilitated housing. During the term of the HAP contract, the Authority will make payments to the owner for eligible units leased and occupied by eligible families.

PBV PROGRAM REQUIREMENTS

HUD regulations allow the Authority to project-base a limited amount of its funding allocation for the Housing Choice Voucher Program. The number of units actually project-based will be impacted by the bedroom distribution of project-based units, the payment standards established for each project, and the annual funding provided by HUD. HUD regulations also place a cap of 25 percent on the number of units in any project that may have project-based voucher assistance. However, exceptions to the 25 percent limitation may be made for projects specifically for elderly or disabled, single family homes, buildings with four or fewer units, and approved properties with community and supportive services. The Authority will allow excepted projects to utilize the project-based program at 100 percent of their units.

Prior to selection of a project and execution of a HAP contract, an environmental review must be completed. For projects receiving any other governmental financial assistance, including tax credits, prior to selection of a project and execution of a HAP contract, a subsidy layering review must be completed by HUD.

Under project-based voucher regulations, assistance may be attached to HAWS-owned and/or managed units, including units owned by a HAWS subsidiary or affiliate; however, all proposals submitted for HAWS units must be approved by HUD, or an independent entity selected by HUD.

RFP RANKING AND SELECTION POINT VALUES

In order to rank and select RFPs, the Authority will use the following factors for the PBV program. Each factor is comprised of several components with an associated point value. The total points awarded to an application will be an aggregate of the component subtotals for each factor.

The point system used for the selection of PBV applications is directly associated with established Authority goals. Additionally, the Authority's Annual Plan for Fiscal Year 2009 states that the Authority intends to project-based tenant-based Housing Choice Vouchers in order to attract affordable housing to the jurisdiction.

RFP PROPOSAL SUMMARY

In this section, the following RFP components will be discussed:

1. Site Location Adequacy (maximum points: 10)
2. Development and Unit Amenities (maximum points: 10)
3. Previous Experience of Applicant and Related Participants in Ownership (maximum points: 30)
4. Previous Experience of Applicant and Related Participants in Management (maximum points: 30)
5. Public Purpose Relative to Area Housing Needs (maximum points: 20)

Total Maximum Points: 100

Proposals shall meet the following criteria. Please submit a written response (and any necessary supporting documents) to these items:

1. Site Location Adequacy
Project is within 5 miles of places of significant employment offering a range of jobs to lower income workers, shopping and a health facility. If no, 0 points, if yes, 10 points.
2. Development and Unit Amenities
Amenities should include the following: updated units, off-street parking, 24-hour emergency maintenance, play area for children, porches/decks, washer/dryer, hookups or laundry facility, community and supportive services. If three or more amenities, 10 points, if two amenities, 5 points, if less than two amenities, 0 points.
3. Ownership Experience
Applicant must have experience in owning affordable/subsidized rental housing. If 20 years of experience, 30 points; if 10-19 years of experience, 20 points; if 5-9 years of experience, 10 points; if less than 5 years, 0 points.
4. Management Experience
Applicant must have experience in managing affordable/subsidized rental housing. If 20 years of experience, 30 points; if 10-19 years of experience, 20 points; if 5-9 years of experience, 10 points; if less than 5 years, 0 points.
5. Public Purpose
Percentage of all housing units, including non-PBV units to be restricted to low-income households. If 100% of the units are restricted, 20 points; if 75%-99%

restricted, 10 points; if 50%-74% restricted 5 points, if less than 50% restricted, 0 points.

SELECTION PROCESS

The Authority will advertise in the local newspaper, The Winston-Salem Journal, a newspaper of general circulation in Forsyth County and surrounding areas, for owners to utilize project-based assistance for low income, multi-family units. A maximum of 200 units will be made available for this process. One or more developments may be selected. Each development proposed, must have a separate application.

Applications will be evaluated on a competitive basis using the above 100-point ranking system. Applications receiving the largest number of points will be awarded. Selection and award must be approved by the U.S. Department of Housing and Urban Development.

SUBMISSION REQUIREMENTS

Applicants must submit three (3) complete sets of the RFP responses to:

DISCLAIMERS, CONDITIONS AND QUESTIONS

Listed are considerations governing the selection process:

1. The Authority reserves the right to withdraw the solicitation at any time without prior notice. No representations are guaranteed for the selection of a proposer and/or the awarding of a contract. The Authority reserves the right to reject any and all proposal packages submitted in response to this request.
2. The Authority shall not be liable for any pre-contractual expenses incurred by any proposing or selected contractor. The proposer shall not include any such expense as part of their proposal package.
3. Pre-contractual expenses are defined as expenses incurred by proposer and selected agencies in preparing proposal summaries, submitting proposal summaries, negotiating with the Authority, and any other expenses incurred prior to the date of award.
4. Any and all agents of the Authority shall be held harmless and free from any and all liabilities, claims, and expenses whatsoever incurred by or on behalf of any person or organization submitting an RFP.

PHA Plan/Resident Advisory Board Meeting
April 26, 2011
11:00 a.m.

Resident Advisory Board Members Present:

Douglas Van Hayden, Crystal Towers, President
John Brown, Crystal Towers, Vice-President
Sharon Horton, Crystal Towers, Secretary
Doris Kimbrough, Healy Towers, President
Hazeline Neely, Piedmont Park, President
Teresa Thames, Piedmont Park, Vice-President
Almarie Richardson, Stoney Glen, Vice-President
Carolyn Wright, Townview Apartments, Vice-President

Housing Authority of Winston-Salem Staff:

Larry Woods, Chief Executive Officer
Karen Durell, VP/Chief Operations Officer
Martha Dorsey, VP/Chief Financial Officer
Darlie Dudley, Executive Assistant/VP/Chief Financial Officer
Katrina Redmon, VP/Chief Development Officer
Troy DeHaven, Real Estate Development Manager
Kelly Church, Director/ Property Management
Barbara Simmons, Assistant Director/Property Management
Toni Smalls, Administrative Assistant/Property Management
Charles Harvey, Director/Capital Improvements
Ernest Bundy, Director/Accounting
Candace Edwards, Section 3 Compliance Manager
Tineta Brown, L.E.A.D. Coordinator
Clinton Thomas, Procurement Manager
Romonda Gaston, Director/Section 8
Shakerra Jones, Executive Assistant/VP/Chief Operations Officer
Oscar Pilson, Director/MIS
Anthony Jones, HCV Occupancy Coordinator
Karen McCain, Property Manager/Healy Towers
Paulette Kelley, Property Manager/Cleveland Avenue Homes
Deitrich Hancock, Property Manager/Piedmont Park
Beverly Leavy, Property Manager/Sunrise Towers & Stoney Glen
Demitersa Thomas, Property Manager/Crystal Towers & Townview Apartments

The PHA Plan meeting began at 11:00am with Karen Durell welcoming everyone. We went around the room and introduced ourselves.

The PHA Plan with all attachments was disbursed to those who did not already have a copy. Karen Durell began summarizing the 2011 (October 1, 2011-September 30, 2012) PHA Annual Plan, focusing on the upcoming year. Karen Durell reviewed Section 1

regarding the Housing Needs within Forsyth County and the PHA Waiting Lists for public housing.

Martha Dorsey spoke to the group about the financial resources; reviewing the sources and uses for the HCV program, the operating fund, capital fund, and open grant funds. After reviewing, she asked if anyone had any questions.

Karen Durell resumed reviewing Sections 3, 4, 5, and 6, discussing Public Housing and HCV policies on eligibility, admission, rent determination, operations, management, and grievance procedures. She also reviewed the sections regarding designated housing, community service programs, crime and safety, and the pet policy.

Charlie Harvey discussed the Capital Improvement Needs in the PHA Plan and the planned events for the upcoming year; Katrina Redmon reviewed the HOPE VI & Public Housing Development and Replacement Activities and potential public housing projects that may be converted.

Karen Durell opened it up for questions, issues and/or comments. There were no questions, issues, or comments from the group. She explained to the members about the public hearing scheduled on June 7, 2011 at 5:30 p.m. and invited everyone to attend. She also explained that should the members have questions after the leave the meeting, that they should speak with their property manager and the property manager will get an answer for them.

We had a short prayer and a box lunch was served.

The meeting was adjourned.

Part 12-D Community Service and Self Sufficiency Requirement Policy

The following represents HAWS' policy for Community Service implementation:

1. The administrative steps being taken to implement the requirement:
 - **Changes in the public housing lease;**
The public housing lease has been revised to reflect the Community Service and Self Sufficiency Requirement.
 - **Development of written description of service requirement;**
The Housing Services Department of the housing authority developed a policy on the Community Service Requirement that included: the purpose, the exemptions, the service requirements, family violations of requirements, administration of service requirements, resident compliance, and grievance procedures. The Community Service and Self-Sufficiency Requirement is intended to assist adult public housing residents in improving their own economic and social well being and give residents a greater stake in their communities
 - **Written notification to residents regarding requirement or exempt status of each adult family member;**
All residents were notified, in writing, on August 21, 2003 that the Community Service Requirement became effective July 31, 2003. An orientation was held at each public housing development and the orientation included a verbal presentation of the requirements as well as written materials.
 - **Entering into cooperative agreements with TANF (welfare) agencies to assist the PHA in verifying residents' status;**
There is an existing agreement with the Department of Social Services in verifying status of PHA residents who are receiving any TANF benefits.
 - **Whether the PHA or another entity will administer the program;**
The Housing Authority of the City of Winston-Salem is administering the program.
2. The programmatic aspects of the requirement:
 - **The types of activities that residents who are subject to Community Service Requirements may participate in to fulfill their obligations;**
Community Service activities shall include, but not limited to:
 1. Volunteer work in a local school, hospital, child care center, homeless shelter, or other community service organization;
 2. Working with youth organizations;
 3. Helping resident council and other neighborhood groups on special projects;

4. Participation in programs that develop and strengthen resident self-responsibility such as: Drug and alcohol abuse counseling and treatment, household budgeting and credit counseling;
5. GED or Post Secondary Education;
6. The Housing Authority Family Self-Sufficiency Program;
7. Other programs approved by the Housing Authority such as Mother WIT and The Community Family Advocate Program;
8. Apprenticeships and job readiness training;
9. Church volunteer activities

• **Which partner agencies may offer residents opportunities to fulfill requirements, and the process to cure noncompliance.**

Partner Agencies: Non Profit Senior Centers, Non Profit Child Care Centers, Non Profit Youth Organizations, Winston-Salem/Forsyth County Schools, Mother Wit, and HAWS Family Self-Sufficiency Program.

Process To Cure Non-Compliance: If the Housing Authority of the City of Winston-Salem (HAWS) determines that there is a family member who is required to fulfill a service requirement, but who has violated this family obligation (noncompliant resident), the HAWS will notify the head of household of this determination. This notification will describe the noncompliance and state that the HAWS may not renew the lease upon expiration of the term unless:

- The resident and any other noncompliant resident, must enter into a written agreement with the HAWS, in the manner required by HAWS to become compliant by completing the additional hours of community service or economic self-sufficiency activity needed to make up the total number of hours required over the twelve month term of the new lease; and
- The family provides written assurance satisfactory to HAWS that all other members of the family who are subject to the service requirement are currently complying with the service requirement or are no longer residing in the household.

The Housing Authority of the City of Winston-Salem will comply with the due process requirement outlined in Section 512 of the Quality Housing Work Responsibility Act of Community Service and Self-Sufficiency Requirement.

The resident may request a grievance hearing on the determination of noncompliance and may exercise any available judicial remedy for HAWS' non-renewal of the lease because of such determination.

**Assessment of Demographic Changes Since
Site-Based Waiting Lists Implementation**

The Housing Authority of the City of Winston-Salem implemented a system of site-based waiting lists in September 2003. Prior to September 2003, all applications were received at HAWS' Central Administrative offices. Since instituting this system of site-based applications, no change in demographical composition, based on the conversion to site-based waiting lists, has been noted in the waiting lists. In addition, the age, sex, and income of applicants have not shown any significant changes based on data submitted in HAWS' 2002 Annual PHA Plan.

PHA STATEMENT REGARDING VIOLENCE AGAINST WOMEN ACT

Summary:

Battered women and to a much lesser degree, battered men, and their families across the country are being discriminated against, denied access to, and even evicted from public, subsidized, and private housing because of their status as victims of domestic violence or the abuse perpetrated against them. Due to these situations, the Violence Against Women Act (VAWA) was signed into law on January 5, 2006. VAWA ensures that female and male victims have access to the criminal justice system without jeopardizing their current or future housing.

Goals, Objectives and Policies:

The Housing Authority of the City of Winston-Salem has notified all tenants of public housing and participants in the Section 8 program of their rights under VAWA. An incident or incidents of actual or threatened domestic violence, dating violence, or stalking will not be construed as serious or repeated violations of the lease or other "good cause" for termination of the lease or assistance of such a victim. Criminal activity directly relating to abuse, engaged in by a member of a tenant's household or any guest or other person under the tenant's control shall not be cause for termination of the lease or assistance if the tenant or an immediate member of the tenant's family is the victim or threatened victim of domestic, dating violence or stalking.

When responding to an incident or incidents of actual or threatened domestic violence or stalking that may affect a tenant's participation in a housing program, the Authority will request in writing that an individual complete, sign and submit, within 14 business days of the request:

1. form HUD-50066 Certification of Violence, Dating violence or Stalking, or
2. a self-certification that he/she is a victim of domestic violence, dating violence, or stalking, and that the incident or incidences in question are bona fide incidences of such actual or threatened abuse.

In addition, the tenant may be required to provide:

1. a federal, state, or local police record or court record, and/or
2. documentation signed and attested to by an employee, agent or volunteer of a victim service provider, an attorney or a medical professional, from which the victim has sought assistance in addressing domestic violence, dating violence or stalking, or the effects of abuse.

If an individual does not provide the form HUD-50066, certification, and/or required documentation by the 14th business day (or any approved extension), none of the VAWA protections afforded to the victim of domestic violence, dating violence or stalking will apply.

Notwithstanding any restrictions on admission, occupancy, or terminations of occupancy or assistance, or any Federal, State or local law to the contrary, the Authority may "bifurcate" a lease, or otherwise remove a household member from a lease, without regard to whether a household member is a signatory to the lease, in order to evict, remove termination occupancy rights, or terminate assistance to any individual who is a tenant or lawful occupant and who engages in criminal acts of physical violence against family members or others. This action may be taken without evicting, removing, terminating assistance to, or otherwise penalizing the victim of the violence who is also a tenant or lawful occupant. Such eviction, removal, termination of occupancy rights, or termination of assistance shall be effective in accordance with the procedures prescribed by Federal, State, and local law for the termination of leases or assistance.

Nothing in this policy may be construed to limit the Authority to evict, or terminate assistance if it can demonstrate an actual and imminent threat to other tenants or those employed at or providing service to the property if the tenant is not evicted or terminated from assistance.

**Fiscal Year 10/1/11 – 9/30/12 Fair Housing Activities
AND
STATEMENT REGARDING THE STEPS THE AGENCY WILL TAKE TO
AFFIRMATIVELY FURTHER FAIR HOUSING**

The Housing Authority of the City of Winston-Salem has accomplished the following Fair Housing Activities for Fiscal Year 10/1/11 through 9/30/12:

1. All property management site staff and Section 8 specialists attended a Fair Housing training provided by the Winston-Salem Human Relations department.
2. All property managers received additional Fair Housing Training in conjunction with their continuing education requirements for the ARM® designation certifications.
3. Fair Housing posters are prominently displayed in all management offices and the central office.
4. When applicants apply at a development, they receive a handout and are encouraged to apply at other developments managed or administered by the Authority.
5. The Housing Authority participated in the Affordable and Fair Housing Summit in Winston-Salem on April 21, 2011.
6. The Housing Authority encourages applications from all individuals and families regardless of race, color, national origin, religion, sex, disability, sexual orientation and familial status. The site based waiting lists are reviewed periodically by a supervisor at site audits to confirm that applicants are placed on the lists appropriately based on the information provided on the preliminary application. Applicants are offered housing based on their preference and the date and time of their preliminary application.
7. The Housing Authority offers a preference to public housing for families who work or to those who cannot work and receive payments in lieu of working.
8. Advertise public housing availability on the Social Serve website (www.socialserve.com).
9. All new Section 8 admissions were briefed for the Housing Choice Voucher. Form HUD 903.1, *Are You a Victim of Housing Discrimination*, is explained and made a part of the briefing materials.
10. The Housing Authority marketed their programs and services to all populations through word of mouth.
11. The Housing Authority has established an internet based listserv in order disseminate information, to include information regarding fair housing, to landlords and owners who participate in the Section 8 HCV program.
12. The Housing Authority conducted a Section 8 Owners Briefing Session which included information regarding Fair Housing.

The Housing Authority of the City of Winston-Salem (HAWS) will continue to conduct activities, within its jurisdiction, to affirmatively further fair housing opportunities for classes protected under the Fair Housing Act. Protected classes include race, color, national origin, religion, sex, disability, and familial status. The agency will protect the rights of citizens to obtain housing of their choice.

1. **Steps to Overcome the effects of impediments to fair housing choice that were identified in the jurisdictions Analysis of Impediments to Fair Housing Choice:**
 - a. HAWS staff is required to attend fair housing workshops and training on an on-going basis.
 - b. HAWS staff refers participants to both HUD Fair Housing Department and the local Winston-Salem Human Relations Commission when allegations of discrimination are brought to their attention. Staff also assists the participant in preparing and documenting the complaint when needed.
 - c. HAWS Section 8 Landlord training and handbook includes Fair Housing topics.
 - d. HAWS staff makes referrals when needed to local churches and agencies to assist with monetary needs to make a Section 8 Housing Choice Voucher unit physically accessible.
 - e. HAWS continues to apply for mainstream funding when available and has a preference for families with disabilities on the HAWS public housing waiting list.

- f. HAWS offers programs and services to all interested applicants.
2. **Steps to remedy discrimination in housing:**
- a. Ongoing education and instruction to Section 8 Owners, landlords and agents on Fair Housing Laws and Regulations via the HAWS listserv and periodic workshops.
 - b. Cooperating, when needed, with Fair Housing testers to screen for discriminatory housing practices.
 - c. Referring allegations of discrimination to both HUD Fair Housing Department and the local Winston-Salem Human Relations Commission,
 - d. Participating in the investigation of housing discrimination complaints, when applicable.
 - e. Participating in fair housing and fair lending workshops.
 - f. Assuring affordable housing for Section 8 participants and public housing residents.
3. **Steps to promote fair housing rights and fair housing choice:**
- a. Sponsoring and participating in various fair housing education and outreach throughout the year and specifically during Fair Housing Month.
 - b. Developing and disseminating community oriented fair housing and housing related education materials.
 - c. Participating in ongoing training conducted by the Winston-Salem Human Relations Commission.
 - d. Briefing HAWS housing applicants and participants on related fair housing issues and making sure they understand their rights under Fair Housing.
4. **Steps to affirmatively further fair housing:**
- a. Advertise widely to the community to fill employment opportunities, when available,
 - b. Market all programs to all eligible persons, including persons with disabilities and person with limited English proficiency,
 - c. Continue to make buildings and communications that facilitate applications and service delivery accessible to person with disabilities,
 - d. Provide fair housing counseling services or referrals to fair housing agencies (including the local Human Relations Commission of the City of Winston-Salem), and
 - e. Recruit landlords and service providers in areas that expand housing choice.

The focus for HAWS is fair housing education and access to affordable housing and services. The housing authority continues to support and assist in efforts to develop and implement programs promoting fair housing and equal housing opportunities.

Attachment I

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

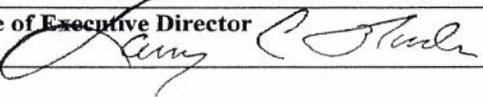
U.S. Department of Housing and Urban Development
 Office of Public and Indian Housing
 OMB No. 2577-0226
 Expires 4/30/2011

Part I: Summary						
PHA Name: Housing Authority of the City of Winston-Salem		Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant No: NC19R012501-05 Date of CFFP:			FFY of Grant: 2005 FFY of Grant Approval: 7/22/05	
Type of Grant <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 03/31/2011 <input type="checkbox"/> Final Performance and Evaluation Report						
Line	Summary by Development Account	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					
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	784,071.00		784,071.00	426,891.06	

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					
PHA Name: Housing Authority of the City of Winston-Salem		Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant No: NC19R2005012501-05 Date of CFFP:		FFY of Grant:2005 FFY of Grant Approval: 7/22/05	
Type of Grant <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 03/31/2011 <input type="checkbox"/> Final Performance and Evaluation Report					
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)	784,071.00		784,071.00	426,891.06
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 		Date		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.
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Annual Statement/Performance and Evaluation Report
 Capital Fund Program, Capital Fund Program Replacement Housing Factor and
 Capital Fund Financing Program

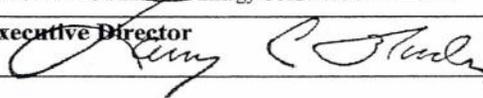
Attachment M
 U.S. Department of Housing and Urban Development
 Office of Public and Indian Housing
 OMB No. 2577-0226
 Expires 4/30/2011

Part I: Summary					
PHA Name: Housing Authority of the City of Winston-Salem		Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant No: NC19R012501-06 Date of CFFP:		FFY of Grant: 2006 FFY of Grant Approval: 06/08/2006	
Type of Grant <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: <input type="checkbox"/> Final Performance and Evaluation Report					
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost 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				
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	698,799.00		698,799.00	441,000.00

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						
PHA Name: Housing Authority of the City of Winston-Salem		Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant No: NC19R012501-06 Date of CFFP:			FFY of Grant:2006 FFY of Grant Approval: 06/08/2006	
Type of Grant						
<input type="checkbox"/> Original Annual Statement		<input type="checkbox"/> Reserve for Disasters/Emergencies		<input type="checkbox"/> Revised Annual Statement (revision no:)		
<input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending:		<input type="checkbox"/> Final Performance and Evaluation Report				
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25	Amount of line 20 Related to Energy Conservation Measures					
Signature of Executive Director 		Date		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/Performance and Evaluation Report
 Capital Fund Program, Capital Fund Program Replacement Housing Factor and
 Capital Fund Financing Program

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

Part I: Summary		
PHA Name: Housing Authority of the City of Winston-Salem	Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant No: NCR012501-07 Date of CFFP:	FFY of Grant: 2007 FFY of Grant Approval: 09/19/2007

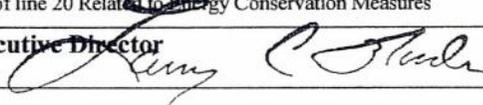
Original Annual Statement
 Reserve for Disasters/Emergencies
 Revised Annual Statement (revision no:)
 Performance and Evaluation Report for Period Ending:
 Final Performance and Evaluation Report

Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost 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				
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	702,323.00		702,323.00	

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					
PHA Name: Housing Authority of the City of Winston-Salem		Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant No: NC19R012501-07 Date of CFFP:		FFY of Grant:2007 FFY of Grant Approval: 09/19/2007	
Type of Grant <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: <input type="checkbox"/> Final Performance and Evaluation Report					
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost 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)	702,323.00		702,323.00	
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 		Date		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/Performance and Evaluation Report
 Capital Fund Program, Capital Fund Program Replacement Housing Factor and
 Capital Fund Financing Program

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

Part I: Summary	
PHA Name: Housing Authority of the City of Winston-Salem	Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant No: NC19R012501-08 Date of CFFP:
FFY of Grant: 2008 FFY of Grant Approval: 05/24/2008	

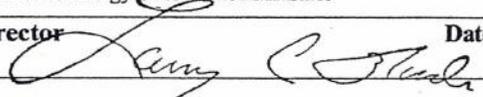
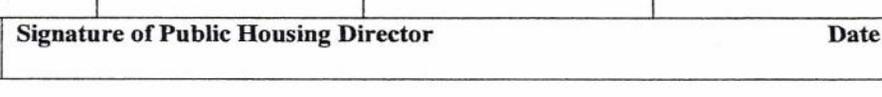
Type of Grant
 Original Annual Statement Reserve for Disasters/Emergencies Revised Annual Statement (revision no:)
 Performance and Evaluation Report for Period Ending: Final Performance and Evaluation Report

Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost 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				
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	538,790.00		538,790.00	

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					
PHA Name: Housing Authority of the City of Winston-Salem		Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant No: NC19R012501-08 Date of CFFP:		FFY of Grant:2008 FFY of Grant Approval: 05/24/2008	
Type of Grant <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: <input type="checkbox"/> Final Performance and Evaluation Report					
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost 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)	538,790.00		538,790.00	
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		Date		Signature of Public Housing Director	
					

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

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

Part I: Summary	PHA Name: Housing Authority of the City of Winston-Salem	Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant No: NC19R012502-08 Date of CFFP:	FFY of Grant: 2008 FFY of Grant Approval: 06/13/2008
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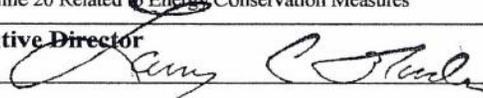
Type of Grant
 Original Annual Statement Reserve for Disasters/Emergencies Revised Annual Statement (revision no:)
 Performance and Evaluation Report for Period Ending: Final Performance and Evaluation Report

Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost 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				
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	738,298.00		738,298.00	

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					
PHA Name: Housing Authority of the City of Winston-Salem		Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant No: NC19R012502-08 Date of CFFP:		FFY of Grant:2008 FFY of Grant Approval: 06/13/2008	
Type of Grant					
<input type="checkbox"/> Original Annual Statement		<input type="checkbox"/> Reserve for Disasters/Emergencies		<input type="checkbox"/> Revised Annual Statement (revision no:)	
<input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending:		<input type="checkbox"/> Final Performance and Evaluation Report			
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost 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)	738,298.00		738,298.00	
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 		Date		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.

Attachment Q

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

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

Part I: Summary

PHA Name: Housing Authority of the City of Winston-Salem	Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant No: NC19R012501-09 Date of CFFP:	FFY of Grant: 2009 FFY of Grant Approval: 09/15/2009
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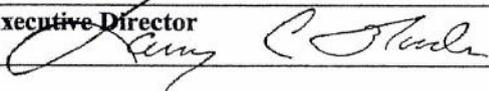
Type of Grant
 Original Annual Statement Reserve for Disasters/Emergencies Revised Annual Statement (revision no:)
 Performance and Evaluation Report for Period Ending: Final Performance and Evaluation Report

Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost 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				
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	580,964.00			

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					
PHA Name: Housing Authority of the City of Winston-Salem		Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant No: NC19R012501-09 Date of CFFP:		FFY of Grant:2009 FFY of Grant Approval: 2009	
Type of Grant <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: <input type="checkbox"/> Final Performance and Evaluation Report					
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost 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)	580,964.00			
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 		Date		Signature of Public Housing Director 	
		Date		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/Performance and Evaluation Report
 Capital Fund Program, Capital Fund Program Replacement Housing Factor and
 Capital Fund Financing Program

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

Part I: Summary						
PHA Name: Housing Authority of the city of Winston-Salem		Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant No: NC19R012502-09 Date of CFFP:			FFY of Grant: 2009 FFY of Grant Approval: 09/15/2009	
Type of Grant <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: <input type="checkbox"/> Final Performance and Evaluation Report						
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost 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					
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	294,178.00				

¹ To be completed for the Performance and Evaluation Report.

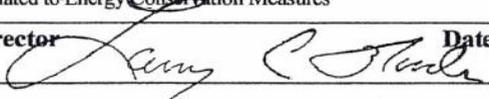
² To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

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					
PHA Name: Housing Authority of the City of Winston-Salem		Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant No: Date of CFFP:		FFY of Grant:2009 FFY of Grant Approval: 09/15/2009	
Type of Grant <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: <input type="checkbox"/> Final Performance and Evaluation Report					
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost 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)	294,178.00			
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 			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/Performance and Evaluation Report
 Capital Fund Program, Capital Fund Program Replacement Housing Factor and
 Capital Fund Financing Program

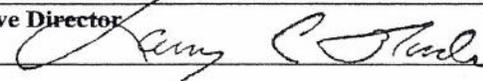
Attachment S
 U.S. Department of Housing and Urban Development
 Office of Public and Indian Housing
 OMB No. 2577-0226
 Expires 4/30/2011

Part I: Summary						
PHA Name: Housing Authority of the City of Winston-Salem		Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant No: NC19R012504-09 Date of CFFP:			FFY of Grant: 2009 FFY of Grant Approval: 04/02/2010	
Type of Grant						
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: <input type="checkbox"/> Final Performance and Evaluation Report						
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost 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					
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	336,555.00				

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						
PHA Name: Housing Authority of the City of Winston-Salem		Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant No: NC19R012504-09 Date of CFFP:		FFY of Grant:2009 FFY of Grant Approval: 04/02/2010		
Type of Grant <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: <input type="checkbox"/> Final Performance and Evaluation Report						
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost 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)	336,555.00				
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 			Date		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/Performance and Evaluation Report
 Capital Fund Program, Capital Fund Program Replacement Housing Factor and
 Capital Fund Financing Program

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

Part I: Summary						
PHA Name: Housing Authority of the City of Winston-Salem		Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant No: NC19R012502-10 Date of CFFP:			FFY of Grant: 2010 FFY of Grant Approval: 07/15/2010	
Type of Grant <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: <input type="checkbox"/> Final Performance and Evaluation Report						
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost 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					
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	1,327,338.00				

¹ To be completed for the Performance and Evaluation Report.

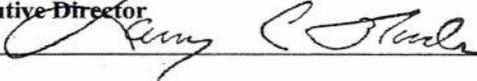
² To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

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							
PHA Name: Housing Authority of the City of Winston-Salem		Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant No: NC19R012502-10 Date of CFFP:		FFY of Grant:2010 FFY of Grant Approval: 07/15/2010			
Type of Grant <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: <input type="checkbox"/> Final Performance and Evaluation Report							
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost 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)	1,327,338.00					
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 		Date		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/Performance and Evaluation Report
 Capital Fund Program, Capital Fund Program Replacement Housing Factor and
 Capital Fund Financing Program

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

Part I: Summary					
PHA Name: Housing Authority of the City of Winston-Salem		Grant Type and Number Capital Fund Program Grant No: NC19P012501-08 Replacement Housing Factor Grant No: Date of CFFP: _____			FFY of Grant: 2008 FFY of Grant Approval:
Type of Grant <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 03/31/11 <input type="checkbox"/> Final Performance and Evaluation Report					
Line	Summary by Development Account	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	183,676.00	183,676.00	183,676.00	183,676.00
3	1408 Management Improvements	367,344.59	343,533.84	343,533.84	343,532.18
4	1410 Administration (may not exceed 10% of line 21)	183,676.00	183,676.00	183,676.00	183,676.00
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	467,150.79	465,487.12	465,487.12	259,822.04
8	1440 Site Acquisition				
9	1450 Site Improvement	3,736.96	3,736.96	3,736.96	3,736.96
10	1460 Dwelling Structures	452,923.89	549,729.16	549,729.16	549,586.16
11	1465.1 Dwelling Equipment—Nonexpendable	3,424.02	3,424.02	3,424.02	3,424.02
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment	174,829.75	103,498.90	103,498.90	100,034.59
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities ⁴				
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)	1,836,762.00	1,836,760.00	1,836,760.00	1,825,706.24
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	197,841.46	197,841.46	197,841.46	197,841.46
24	Amount of line 20 Related to Security – Hard Costs				
25	Amount of line 20 Related to Energy Conservation Measures				

¹ To be completed for the Performance and Evaluation Report.

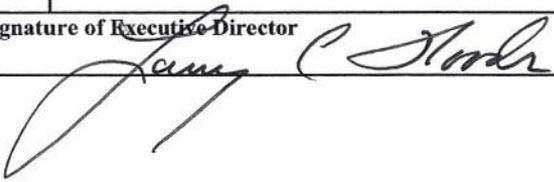
² To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

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
Expires 4/30/2011

Part I: Summary					
PHA Name: Housing Authority of the City of Winston-Salem		Grant Type and Number Capital Fund Program Grant No: NC19P012501-08 Replacement Housing Factor Grant No: Date of CFFP: _____			FFY of Grant: 2008 FFY of Grant Approval:
Type of Grant					
<input type="checkbox"/> Original Annual Statement		<input type="checkbox"/> Reserve for Disasters/Emergencies		<input type="checkbox"/> Revised Annual Statement (revision no:)	
<input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 03/31/11		<input type="checkbox"/> Final Performance and Evaluation Report			
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
		Original	Revised ²	Obligated	Expended
Signature of Executive Director 		Date 7/25/2011	Signature of Public Housing Director		Date

Part II: Supporting Pages								
PHA Name: Housing Authority of the City of Winston-Salem		Grant Type and Number Capital Fund Program Grant No: NC19P012507-08 CFFP (Yes/ No): Replacement Housing Factor Grant No:				Federal FFY of Grant: 2008		
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
PHA Wide	Operations	1406		183,676.00	183,676.00	183,676.00	183,676.00	
	MANAGEMENT IMPROVEMENTS	1408						
PHA Wide	Improve Security	1408		197,841.46	197,841.46	197,841.46	197,841.46	
PHA Wide	Staff Training	1408		34,662.96	34,662.96	34,662.96	34,662.96	
PHA Wide	Computer Software	1408		45,746.54	45,746.54	45,746.54	45,746.54	
PHA Wide	Temp	1408		51,939.33	51,939.33	51,939.33	48,439.15	
PHA Wide	Office Supplies	1408		1,421.46	1,421.46	1,421.46	1,421.46	
PHA Wide	Mgmt Improvements - Sundry	1408		11,920.83	11,920.83	11,920.43	11,623.43	
	ADMINISTRATION	1410						
PHA Wide	Admin Trsf Fee	1410		183,676.00	179,831.40	179,831.40	179,831.40	
PHA Wide	Sundry Administration	1410		0.00	3,844.60	3,844.60	3,844.60	
	FEES & COST	1430						
PHA Wide	A/E Contract	1430	1	698.00	698.00	698.00	698.00	
NC 12-051	Norwood Architecture	1430	1	17,782.81	17,782.81	17,782.81	17,782.55	
PHA Wide	Inspection Salaries	1430	3	138,147.40	138,147.40	138,147.40	138,147.40	
PHA Wide	Inspection Benefits	1430	3	45,244.15	45,244.15	45,244.15	45,244.15	

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

² To be completed for the Performance and Evaluation Report.

Part II: Supporting Pages									
PHA Name: Housing Authority of the City of Winston-Salem			Grant Type and Number Capital Fund Program Grant No: NC19P012501-08 CFFP (Yes/ No): Replacement Housing Factor Grant No:				Federal FFY of Grant: 2008		
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work	
				Original	Revised ¹	Funds Obligated ₂	Funds Expended ²		
PHA Wide	Advertising	1430		3,976.62	3,976.62	3,976.62	3,976.62		
PHA Wide	Master Developer-Weineck & Assoc	1430	1	255,195.00	255,195.00	255,195.00	251,402.43		
PHA Wide	Sundry Planning Cost	1430	1	1,464.94	1,404.59	1,404.59	1,404.59		
PHA Wide	Contract Cost - Vehicles	1430	1	368.64	368.64	368.64	368.64		
PHA Wide	Misc Fees	1430	1	1,474.76	1,474.76	1,474.76	1,474.76		
NC 12-006	Misc Fees	1430	1	1,195.00	1,195.00	1,195.00	1,195.00		
	SITE IMPROVEMENTS	1450							
NC 12-006	Underground Utility Repair-Five Star	1450	1	3,736.96	3,736.96	3,736.96	3,736.96		
	DWELLING STRUCTURES	1460							
NC 12-003	Install Smoke Detectors-Davie Electric	1460	1020	0.00	96,040.22	96,040.22	96,040.22		
NC 12-003	Installation of boiler room cover	1460	1prototype	0.00	2,117.00	2,117.00	2,117.00		
NC 12-003	NC State Taxes for boiler room cover	1460	1	0.00	129.19	129.19	129.19		
NC 12-009	Interior Renovations - Five Star	1460	1	1,750.00	1,750.00	1,750.00	1,750.00		
NC 12-009	Ceiling Repairs - Daleco Electric	1460	1	0.00	468.97	468.97	468.97		
NC 12-009	Discontinue wiring outlets-Daleco Electric	1460	1	0.00	153.08	153.08	153.08		

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

² To be completed for the Performance and Evaluation Report.

Part II: Supporting Pages								
PHA Name: Housing Authority of the City of		Grant Type and Number Capital Fund Program Grant No: NC19P012507-08 CFFP (Yes/ No): Replacement Housing Factor Grant No:				Federal FFY of Grant: 2008		
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
	DWELLING STRUCTURES	1460						
NC 12-012	Repair Elevator Door-Southern Elevator	1460	1	13,280.00	13,280.00	13,280.00	13,280.00	
NC12-021	Replace (3) Roofs - Townview Grand	1460	3	14,682.00	14,682.00	14,682.00	14,682.00	
NC 12-051	Renovation of Office Bldg-HG Strickland	1460	1	420,965.70	420,965.70	420,965.70	420,965.70	
	DWELLING EQUIPMENT	1465						
NC 12-009	Range & Refrigerators	1465	10	3,424.02	3,424.02	3,424.02	3,424.02	
	NON-DWELLING EQUIPMENT	1475						
PHA Wide	Computer Equipment - Hardware	1475	140	119,314.34	94,764.96	94,764.96	94,764.96	
PHA Wide	Telephone Equipment	1475	1	50,245.53	3,464.31	3,464.31	3,464.31	
NC 12-008	Security Cameras -Electro Micro	1475	1	2,825.41	2,825.00	2,825.00	2,825.00	
NC 12-009	Security Cameras - Electro Micro	1475	1	388.00	388.00	388.00	388.00	
NC 12-012	Security Cameras-Electro Micro	1475	1	978.00	978.00	978.00	978.00	
PHA Wide	Office Supplies & Equipment	1475	1	1,078.63	1,078.63	1,078.63	1,078.63	

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

² To be completed for the Performance and Evaluation Report.

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

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

Part I: Summary					
PHA Name: Housing Authority of the City of Winston-Salem		Grant Type and Number Capital Fund Program Grant No: NC19P012501-09 Replacement Housing Factor Grant No: Date of CFFP: _____			FFY of Grant: 2009 FFY of Grant Approval:
Type of Grant <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 03/31/11 <input type="checkbox"/> Final Performance and Evaluation Report					
Line	Summary by Development Account	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	414,802.00	414,802.00	414,802.00	297,401.00
3	1408 Management Improvements	419,671.08	419,671.08	419,671.08	416,727.28
4	1410 Administration (may not exceed 10% of line 21)	207,401.00	207,401.00	207,401.00	207,401.00
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	366,853.72	366,853.72	307,663.99	307,663.99
8	1440 Site Acquisition				
9	1450 Site Improvement	30,263.47	30,213.16	30,213.16	30,213.16
10	1460 Dwelling Structures	410,893.33	410,893.33	348,461.24	328,199.43
11	1465.1 Dwelling Equipment—Nonexpendable	84,981.60	82,036.68	82,036.68	82,010.16
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment	115,401.23	115,401.23	115,401.23	115,401.23
14	1485 Demolition	23,757.00	23,757.00	23,757.00	23,757.00
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities ⁴				
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)	2,074,010.00	2,074,010.00	2,074,010.00	1,808,774.25
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	289,552.12	289,552.12	289,552.12	289,552.12
24	Amount of line 20 Related to Security – Hard Costs				
25	Amount of line 20 Related to Energy Conservation Measures				

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.

Part I: Summary				
PHA Name: Housing Authority of the City of Winston-Salem		Grant Type and Number Capital Fund Program Grant No: NC19P012501-09 Replacement Housing Factor Grant No: Date of CFFP: _____		FFY of Grant: 2009 FFY of Grant Approval:
Type of Grant <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 03/31/11 <input type="checkbox"/> Final Performance and Evaluation Report				
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹
		Original	Revised ²	Obligated Expended
Signature of Executive Director 		Date 7/25/2011	Signature of Public Housing Director Date	

Part II: Supporting Pages								
PHA Name: Housing Authority of the City of Winston-Salem		Grant Type and Number Capital Fund Program Grant No: NC19P012507-09 CFFP (Yes/ No): Replacement Housing Factor Grant No:			Federal FFY of Grant: 2009			
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
PHA Wide	Operations	1406		414,802.00	414,802.00	414,802.00	297,401.00	
	MANAGEMENT IMPROVEMENTS	1408						
PHA Wide	Improve Security	1408		289,552.12	289,552.12	289,552.12	289,552.12	
PHA Wide	Staff Training	1408		31,003.89	31,003.89	31,003.89	31,003.89	
PHA Wide	Computer Software	1408		10,000.00	10,000.00	10,000.00	10,000.00	
PHA Wide	Temp	1408		64,115.07	64,115.07	64,115.07	64,115.07	
PHA Wide	Mgmt Improvements - Sundry	1408		25,000.00	23,222.57	23,222.57	23,222.57	
	ADMINISTRATION	1410						
PHA Wide	Admin Trsf Fee	1410		207,401.00	207,401.00	207,401.00	207,401.00	
PHA Wide	Sundry Administration	1410		0.00	0.00	0.00	0.00	
	FEES & COST	1430						
PHA Wide	A/E Contract	1430		57,500.00	57,500.00	12,800.00	12,800.00	
PHA Wide	Inspection Salaries	1430		230,881.48	230,881.48	219,116.43	219,116.43	
PHA Wide	Inspection Benefits	1430		61,240.73	61,240.73	61,240.73	61,240.73	

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

² To be completed for the Performance and Evaluation Report.

Part II: Supporting Pages								
PHA Name: Housing Authority of the City of Winston-Salem			Grant Type and Number Capital Fund Program Grant No: NC19P012501-09 CFFP (Yes/ No): Replacement Housing Factor Grant No:			Federal FFY of Grant: 2009		
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised ¹	Funds Obligated ₂	Funds Expended ²	
PHA Wide	Sundry Planning Cost	1430		1,000.00	1,000.00	619.31	619.31	
PHA Wide	Contract Cost - Vehicles	1430		4,731.51	4,731.51	4,731.51	4,731.51	
PHA Wide	Sundry Planning Cost	1430		1,464.94	1,404.59	1,404.59	1,404.59	
PHA Wide	Misc Fees	1430		4,000.00	4,000.00	3,340.24	3,340.24	
NC 12-006	Misc Fees	1430		5,000.00	5,000.00	4,938.00	4,938.00	
NC 12-051	Misc Fees	1430		1,000.00	1,000.00	260.00	260.00	
PHA Wide	Legal Fees	1430		1,500.00	1,500.00	617.77	617.77	
	SITE IMPROVEMENTS	1450						
NC 12-003	Site Improvements - C2 Contractors	1450	2250 square	23,612.59	23,612.59	23,562.28	23,562.28	
NC 12-006	Site Improvements	1450	1	1,687.41	1,687.41	1,687.41	1,6487.41	
NC 12-021	Site Improvements	1450	1	795.44	795.44	795.44	795.44	
NC 12-022	Site Improvements	1450	1	4,168.03	4,168.03	4,168.03	4,168.03	
	DWELLING STRUCTURES	1460						
NC 12-003	Interior Renovations	1460	5 units	72,214.89	72,214.89	11,431.97	11,431.97	
NC 12-003	Exterior Renovations	1460	1	1,000.00	1,000.00	950.00	950.00	
NC 12-003	Handrail Replacement	1460	5	2,000.00	2,000.00	1,608.94	1,608.94	

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

² To be completed for the Performance and Evaluation Report.

Part II: Supporting Pages								
PHA Name: Housing Authority of the City of		Grant Type and Number Capital Fund Program Grant No: NC19P012501-09 CFFP (Yes/ No): Replacement Housing Factor Grant No:				Federal FFY of Grant: 2009		
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
	DWELLING STRUCTURES	1460						
NC 12-006	Interior Renovations - Larry McDaniel	1460	243units	221,084.50	221,084.50	221,084.50	221,084.50	
NC 12-006	Interior Renovations	1460	2units	60,000.00	60,000.00	58,874.66	58,874.66	
	Sunrise Towers							
NC 12-008	Interior Renovations-Midway Trailer	1460	1	21,652.00	21,652.00	21,652.00	1,390.19	
	Crystal Towers							
NC 12-009	Interior Renovations-Midway Trailer	1460	1	3,000.00	3,000.00	2,976.17	2,976.17	
	Healy Towers							
NC 12-012	Interior Renovations	1460	1	300.00	300.00	255.49	255.49	
	Townview Apts							
NC 12-021	Interior Renovations	1460	1	795.44	795.44	795.44	795.44	
	Stoney Glen							
NC 12-022	Exterior Renovations-Grandview	1460	2 bldg roof	22,783.07	22,783.07	22,783.07	22,783.07	
NC 12-022	Exterior Renovations-Kards Constru	1460	1 roof	6,049.00	6,049.00	6,049.00	6,049.00	

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

² To be completed for the Performance and Evaluation Report.

Part II: Supporting Pages								
PHA Name: Housing Authority of the City of		Grant Type and Number Capital Fund Program Grant No: NC 19P012501-09 CFFP (Yes/ No): Replacement Housing Factor Grant No:				Federal FFY of Grant: 2009		
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
	DWELLING EQUIPMENT	1465						
NC 12-003	Ranges & Refrigerators	1465	30	12,198.66	12,198.66	12,196.88	12,198.66	
NC 12-006	Ranges & Refrigerators	1465	20	8,959.81	8,959.81	8,959.81	8,959.81	
NC 12-008	Ranges & Refrigerators	1465	16	6,800.00	6,800.00	6,800.00	6,786.74	
NC 12-009	Ranges & Refrigerators	1465	16	6,800.00	6,800.00	6,800.00	6,786.74	
NC 12-012	Ranges & Refrigerators	1465	1	500.00	500.00	484.77	484.77	
NC 12-022	Ranges & Refrigerators	1465	6	2,200.00	2,200.00	2,181.45	2,181.45	
NC 12-006	HVAC Equipment	1465	3	1,523.13	1,523.13	1,523.13	1,523.13	
NC 12-012	HVAC Equipment	1465	2	1,000.00	1,000.00	738.93	738.93	
NC 12-008	Water Heaters-Sunrise	1465	75	29,000.00	29,000.00	26,757.06	26,757.06	
NC 12-009	Water Heaters - Crystal	1465	75	16,000.00	16,000.00	15,592.87	15,592.87	
	NON-DWELLING EQUIPMENT	1475						
PHA WIDE	Computer Expense - Hardware	1475	5	93,174.52	93,174.52	93,174.52	93,174.52	
PHA Wide	Vehicles-Snow plow	1475	1	5,810.57	5,810.57	5,810.57	5,810.57	
NC 12-003	Vehicle/Gator - Piedmont Park	1475	1	8,208.07	8,208.07	8,208.07	8,208.07	
NC 12-006	Vehicle/Gator - Cleveland	1475	1	8,208.07	8,208.07	8,208.07	8,208.07	

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

² To be completed for the Performance and Evaluation Report.

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

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

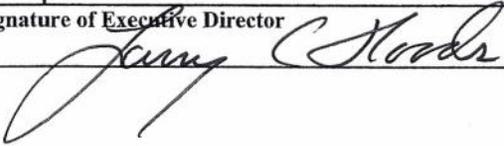
Part I: Summary					
PHA Name: Housing Authority of the City of Winston-Salem		Grant Type and Number Capital Fund Program Grant No: NC19S012501-09 Replacement Housing Factor Grant No: Date of CFFP: _____		FFY of Grant: 2009 FFY of Grant Approval: _____	
Type of Grant <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 03/31/11 <input type="checkbox"/> Final Performance and Evaluation Report					
Line	Summary by Development Account	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)	394,152.00		394,152.00	161,602.36
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	72,007.31		69,125.46	57,356.64
8	1440 Site Acquisition				
9	1450 Site Improvement	67,345.00		67,345.00	19,576.57
10	1460 Dwelling Structures	3,179,640.63		3,179,518.99	3,173,446.99
11	1465.1 Dwelling Equipment—Nonexpendable	132,871.04		132,871.04	132,871.04
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				
18a	1501 Collateralization or Debt Service paid by the PHA				
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment				
19	1502 Contingency (may not exceed 8% of line 20)				
20	Amount of Annual Grant: (sum of lines 2 – 19)	3,941,519.00		3,772,368.44	3,616,398.38
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				

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.

Part I: Summary					
PHA Name: Housing Authority of the City of Winston-Salem		Grant Type and Number Capital Fund Program Grant No: NC19S012501-09 Replacement Housing Factor Grant No: Date of CFFP: _____			FFY of Grant: 2009 FFY of Grant Approval:
Type of Grant <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 03/31/11 <input type="checkbox"/> Final Performance and Evaluation Report					
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
		Original	Revised ²	Obligated	Expended
Signature of Executive Director 		Date 7/25/2011	Signature of Public Housing Director		Date

Part II: Supporting Pages								
PHA Name: Housing Authority of the City of Winston-Salem		Grant Type and Number Capital Fund Program Grant No: NC19S012501-09 CFFP (Yes/ No): Replacement Housing Factor Grant No:				Federal FFY of Grant: 2009		
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
	ADMINISTRATON	1410						
PHA WIDE	Administration Transfer Fee	1410		394,152.00		295,349.93	161,602.36	
	FEEES & COST	1430						
NC 12-021	HADP Architecture - Townview	1430	50	62,575.00		62,575.00	51,580.00	
PHA Wide	Publications/advertising	1430	3	1,000.00		899.71	899.71	
PHA Wide	Misc Fees, Cost	1430	3	2,000.00		2,000.00	2,000.00	
PHA Wide	Legal Fees	1430	1	6,423.31		3,650.75	3,650.75	
	SITE IMPROVEMENTS	1450						
NC 12-021	Misc Site Improvements-Grandview	1450	4250 line	67,345.00		67,345.00	67,345.00	
	DWELLING STRUCTURES	1460						
	Cleveland Ave Homes							
NC 12-006	Interior Renovations - Twin City	1460	1	9,900.00		9,900.00	4,900.00	
NC 12-006	Interior Renovations - LowesA/E Co	1460	1	100.00		83.95	83.95	
NC 12-006	Asbestos Abatement-Piedmont Qua	1460	74	27,315.93		27,315.93	27,315.93	
NC 12-006	Kitchen Upgrades-Kitchen Cabinets	1460	95	622,180.80		622,180.80	622,180.80	

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

² To be completed for the Performance and Evaluation Report.

Part II: Supporting Pages								
PHA Name: Housing Authority of the City of Winston-Salem		Grant Type and Number Capital Fund Program Grant No: NC19S012501-09 CFFP (Yes/ No): Replacement Housing Factor Grant No:				Federal FFY of Grant: 2009		
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised ¹	Funds Obligated ₂	Funds Expended ²	
	DWELLING STRUCTURES	1460						
	Townview							
NC 12-021	Interior Renovations-Blue Ridge	1460	50units	2,443,750.95		2,443,750.95	2,443,750.95	
NC 12-021	Asbestos Abatement - Abatemaster	1460	43	73,787.00		73,787.00	72,874.00	
NC 12-021	Interior Renovations	1460	1	1,557.36		1,557.36	1,557.36	
NC 12-021	Exterior Renovations	1460	1	1,048.59		943.00	784.00	
	DWELLING EQUIPMENT	1465						
	Cleveland Ave Homes							
NC 12-006	Ranges & Refrigerators-Brown Stove	1465	160	52,511.93		52,511.93	52,511.93	
NC 12-006	Parts Ranges & Refrigerators-Lowes	1465	1	63.57		63.57	63.57	
NC 12-006	White sales tax-NC Dept of Revenue	1465	1	4,533.54		4,533.54	4,533.54	
NC 12-006	Ranges & Refrigerators-Diversified	1465	180	75,762.00		75,762.00	75,762.00	
	Sunrise Towers							
NC 12-008	Trash Compactor Replacement	1465	1	22,251.51		22,251.51	22,251.51	
	Crystal Towers							
NC 12-009	Trash Compactor Replacement	1465	1	22,251.51		22,251.51	22,251.51	

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

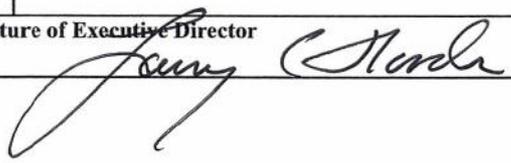
U.S. Department of Housing and Urban Development
 Office of Public and Indian Housing
 OMB No. 2577-0226
 Expires 4/30/2011

Part I: Summary					
PHA Name: Housing Authority of the City of Winston-Salem		Grant Type and Number Capital Fund Program Grant No: NC19P012501-10 Replacement Housing Factor Grant No: Date of CFFP: _____		FFY of Grant: 2010 FFY of Grant Approval:	
Type of Grant <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 03/31/11 <input type="checkbox"/> Final Performance and Evaluation Report					
Line	Summary by Development Account	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	411,713.00		411,713.00	0.00
3	1408 Management Improvements	411,713.00		133,535.02	133,535.02
4	1410 Administration (may not exceed 10% of line 21)	205,857.00		85,000.00	85,000.00
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	254,000.00		69.98	69.98
8	1440 Site Acquisition				
9	1450 Site Improvement	100,000.00		0.00	0.00
10	1460 Dwelling Structures	511,282.00		258,314.75	173,364.75
11	1465.1 Dwelling Equipment—Nonexpendable	14,000.00		7,717.98	7,717.98
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment	15,000.00		0.00	0.00
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities ⁴				
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)	2,058,565.00		896,350.73	417,687.70
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	275,000.00		38,786.85	38,786.85
24	Amount of line 20 Related to Security – Hard Costs				
25	Amount of line 20 Related to Energy Conservation Measures				

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
Expires 4/30/2011

Part I: Summary					
PHA Name: Housing Authority of the City of Winston-Salem		Grant Type and Number Capital Fund Program Grant No: NC19P012501-10 Replacement Housing Factor Grant No: Date of CFFP: _____		FFY of Grant: 2010 FFY of Grant Approval: _____	
Type of Grant <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 03/31/11 <input type="checkbox"/> Final Performance and Evaluation Report					
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
		Original	Revised ²	Obligated	Expended
Signature of Executive Director		Date		Signature of Public Housing Director	
		7/25/2011			

Part II: Supporting Pages								
PHA Name: Housing Authority of the City of Winston-Salem		Grant Type and Number Capital Fund Program Grant No: NC19P012501-10 CFFP (Yes/ No): Replacement Housing Factor Grant No:				Federal FFY of Grant: 2010		
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
PHA Wide	Operations	1406		411,713.00		411,713.00	0.00	
	MANAGEMENT IMPROVEMENTS	1408						
PHA Wide	Improve Security	1408		275,000.00		38,786.85	38,786.85	
PHA Wide	Staff Training	1408		25,000.00		23,526.45	23,526.45	
PHA Wide	Computer Software	1408		25,000.00		175.21	175.21	
PHA Wide	Temp	1408		60,213.00		52,048.36	52,048.36	
PHA Wide	Mgmt Improvements - Sundry	1408		25,000.00		1,001.15	1,001.15	
	ADMINISTRATION	1410						
PHA Wide	Admin Trsf Fee	1410		205,857.00		85,000.00	85,000.00	
	FEES & COST	1430						
PHA Wide	A/E Contract	1430		0.00		0.00	0.00	
PHA Wide	Inspection Salaries	1430	3	200,000.00		0.00	0.00	
PHA Wide	Inspection Benefits	1430	3	54,000.00		0.00	0.00	

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Part II: Supporting Pages								
PHA Name: Housing Authority of the City of Winston-Salem		Grant Type and Number Capital Fund Program Grant No: NC19P012501-10 CFFP (Yes/ No): Replacement Housing Factor Grant No:				Federal FFY of Grant: 2010		
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised ¹	Funds Obligated ₂	Funds Expended ₂	
	SITE IMPROVEMENTS	1450						
PHA WIDE	Site Improvements	1450	1	100,000.00		0.00	0.00	
	DWELLING STRUCTURES	1460						
	Piedmont Park	1460						
NC 12-003	Interior Renovations	1460	34	154,593.91		0.00	0.00	
NC 12-003	Repair Crawlspace- Creative Design	1460	85	151,930.00		151,930.00	151,930.00	
	Cleveland Ave Homes	1460						
NC 12-006	Interior Renovations - AR Home Impr	1460	1	21,434.75		21,434.75	21,434.75	
NC 12-006	Repair Crawlspace-Creative Design	1460	40	84,950.00		84,950.00	0.00	
	Sunrise Towers	1460						
NC 12-008	Interior Renovations	1460	2	26,801.34		0.00	0.00	
	Crystal Towers	1460						
NC 12-009	Interior Renovations	1460	2	26,801.00		0.00	0.00	

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

² To be completed for the Performance and Evaluation Report.

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

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

Part I: Summary					
PHA Name: Housing Authority of the City of Winston-Salem		Grant Type and Number Capital Fund Program Grant No: NC19E12501-10 Replacement Housing Factor Grant No: Date of CFFP: _____			FFY of Grant: 2010 FFY of Grant Approval: _____
Type of Grant <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 03/31/11 <input type="checkbox"/> Final Performance and Evaluation Report					
Line	Summary by Development Account	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				
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	250,000.00			
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities ⁴				
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				

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³ PHAs with under 250 units in management may use 100% of CFP Grants for operations.
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Part I: Summary				
PHA Name: Housing Authority of the City of Winston-Salem		Grant Type and Number Capital Fund Program Grant No: NC19E012501-10 Replacement Housing Factor Grant No: Date of CFFP: _____		FFY of Grant: 2010 FFY of Grant Approval:
Type of Grant <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 03/31/11 <input type="checkbox"/> Final Performance and Evaluation Report				
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹
		Original	Revised ²	Obligated Expended
Signature of Executive Director <i>[Signature]</i>		Date		Signature of Public Housing Director Date

Capital Fund Program—Five-Year Action Plan

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/Number Housing Authority of W-S		Locality (City/County & State) Winston-Salem, NC			<input checked="" type="checkbox"/> Original 5-Year Plan <input type="checkbox"/> Revision No:	
A.	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	Annual Statement	5,989,400.00	8,768,310.00	5,107,000.00	6,311,500.00
C.	Management Improvements		598,940.00	876,831.00	510,000	631,150
D.	PHA-Wide Non-dwelling Structures and Equipment					
E.	Administration		598,940.00	876,831.00	510,000	631,150
F.	Other					
G.	Operations		598,940.00	876,831.00	510,000	631,150
H.	Demolition					
I.	Development					
J.	Capital Fund Financing – Debt Service					
K.	Total CFP Funds					
L.	Total Non-CFP Funds					
M.	Grand Total		7,786,220.00	11,398,803.00	6,637,000.00	8,204,950.00

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

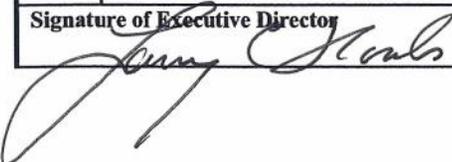
U.S. Department of Housing and Urban Development
 Office of Public and Indian Housing
 OMB No. 2577-0226
 Expires 4/30/2011

Part I: Summary					
PHA Name: Housing Authority of the City of Winston-Salem		Grant Type and Number Capital Fund Program Grant No: NC19P012501-07 Replacement Housing Factor Grant No: Date of CFFP: _____			FFY of Grant: 2007 FFY of Grant Approval:
Type of Grant <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) <input type="checkbox"/> Performance and Evaluation Report for Period Ending: <input checked="" type="checkbox"/> Final Performance and Evaluation Report					
Line	Summary by Development Account	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	519,931.82	519,931.82	519,931.82	519,931.82
3	1408 Management Improvements	526,507.88	526,507.00	526,507.88	526,507.88
4	1410 Administration (may not exceed 10% of line 21)	263,386.00	263,386.00	263,386.00	263,386.00
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	327,057.78	327,057.78	327,057.78	327,057.78
8	1440 Site Acquisition				
9	1450 Site Improvement	44,931.24	44,931.24	44,931.24	44,931.24
10	1460 Dwelling Structures	514,474.24	514,474.24	514,474.24	514,474.24
11	1465.1 Dwelling Equipment—Nonexpendable	244,119.03	244,119.03	244,119.03	244,119.03
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment	193,460.01	193,460.01	193,460.01	193,460.01
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities ⁴				
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)	2,633,868.00	2,633,868.00	2,633,868.00	2,633,868.00
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				

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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
Expires 4/30/2011

Part I: Summary					
PHA Name: Housing Authority of the City of Winston-Salem		Grant Type and Number Capital Fund Program Grant No: NC19P012501-07 Replacement Housing Factor Grant No: Date of CFFP: _____			FFY of Grant: 2007 FFY of Grant Approval:
Type of Grant <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) <input type="checkbox"/> Performance and Evaluation Report for Period Ending: <input checked="" type="checkbox"/> Final Performance and Evaluation Report					
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
		Original	Revised ²	Obligated	Expended
Signature of Executive Director 		Date 7/25/2011	Signature of Public Housing Director		Date

Part II: Supporting Pages								
PHA Name: Housing Authority of the City of Winston-Salem			Grant Type and Number Capital Fund Program Grant No: NC19P012507-07 CFFP (Yes/ No): Replacement Housing Factor Grant No:			Federal FFY of Grant: 2007		
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
	SITE IMPROVEMENTS	1450						
	PIEDMONT PARK							
NC 12-003	Replacement of Retaining Wall-DH C	1450	1	2,222.20	2,222.20	2,222.20	2,222.20	
NC 12-003	Emergency Sewer Repair-Five Star	1450	1	900.00	900.00	900.00	900.00	
	CLEVELAND AVE HOMES							
NC 12-006	Replace handrails - Swaim Ornament	1450	2	855.10	855.10	855.10	855.10	
NC 12-006	Install Security Fence-Piedmont Fenc	1450	1	5,749.00	5,749.00	5,749.00	5,749.00	
NC 12-006	Repair Storm Drain-Five Star	1450	1	1,383.86	1,383.86	1,383.86	1,383.86	
NC 12-006	Repair Storm Drain-Five Star	1450	1	874.43	874.43	874.43	874.43	
	SUNRISE TOWERS							
NC 12-008	Culvert/basin repair(REAC)-Salem In	1450	1	1,649.15	1,649.15	1,649.15	1,649.15	
	TOWNVIEW							
NC 12-021	Replace Main water line-Sink Plumb	1450	1	1,097.50	1,097.50	1,097.50	1,097.50	
NC 12-021	Place sidewalk-James Hickman Cong	1450	1	2,200.00	2,200.00	2,200.00	2,200.00	

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Part II: Supporting Pages								
PHA Name: Housing Authority of the City of Winston-Salem			Grant Type and Number Capital Fund Program Grant No: NC19P012507-07 CFFP (Yes/ No): Replacement Housing Factor Grant No:			Federal FFY of Grant: 2007		
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
	DWELLING STRUCTURES							
NC 12-003	(20)4 x 8 sheets, (12) J caps	1460	32	3,796.88	3,796.88	3,796.88	3,796.88	
NC 12-003	Resource Center - HADP	1460	1	1,575.00	1,575.00	1,575.00	1,575.00	
NC 12-003	Painting & Rehab-Hawks Painting	1460	1	7,722.00	7,722.00	7,722.00	7,722.00	
NC 12-003	Painting & Rehab-Hawks Painting	1460	1	2,449.00	2,449.00	2,449.00	2,449.00	
NC 12-003	Supplies for Renovations-Lowes	1460	9	378.61	378.61	378.61	378.61	
NC 12-003	Painting & Rehab-Hawks Painting	1460	1	3,672.00	3,672.00	3,672.00	3,672.00	
NC 12-003	Painting & Rehab-Hawks Painting	1460	1	5,301.00	5,301.00	5,301.00	5,301.00	
NC12-003	Kitchen renovations-Ceiling & Floor	1460	88	150,920.00	64,101.60	64,101.60	64,101.60	
NC 12-003	Bathroom renovation-Ceiling & Floor	1460	57	40,150.23	70,446.60	70,446.60	70,446.60	
NC 12-003	Kit & bathroom renov-Ceiling & Floor	1460	55	50,364.90	50,364.90	50,364.90	50,364.90	
NC 12-003	Kit & bathroom renov-Ceiling & Floor	1460	82	69,240.60	69,240.60	69,240.60	69,240.60	

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² To be completed for the Performance and Evaluation Report.

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

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

Part I: Summary					
PHA Name: Housing Authority of the City of Winston-Salem		Grant Type and Number Capital Fund Program Grant No: NC19P012501-11 Replacement Housing Factor Grant No: Date of CFFP:			FFY of Grant: 2011 FFY of Grant Approval:
Type of Grant <input checked="" type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) <input type="checkbox"/> Performance and Evaluation Report for Period Ending: <input type="checkbox"/> Final Performance and Evaluation Report					
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
		Original	Revised ²	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) ³	352,792.00			
3	1408 Management Improvements	352,792.00			
4	1410 Administration (may not exceed 10% of line 21)	176,396.00			
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	100,000.00			
8	1440 Site Acquisition				
9	1450 Site Improvement	80,000.00			
10	1460 Dwelling Structures	530,000.00			
11	1465.1 Dwelling Equipment—Nonexpendable	171,979.00			
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.

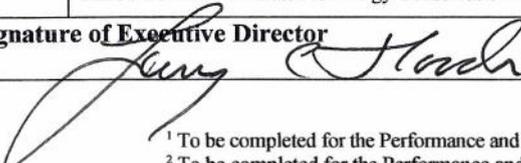
² To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

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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						
PHA Name: Housing Authority of the City of Winston-Salem		Grant Type and Number Capital Fund Program Grant No: NC19P012501-11 Replacement Housing Factor Grant No: Date of CFFP:			FFY of Grant:2011 FFY of Grant Approval:	
Type of Grant						
<input checked="" type="checkbox"/> Original Annual Statement		<input type="checkbox"/> Reserve for Disasters/Emergencies		<input type="checkbox"/> Revised Annual Statement (revision no:)		
<input type="checkbox"/> Performance and Evaluation Report for Period Ending:				<input type="checkbox"/> Final Performance and Evaluation Report		
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost 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)	1,763,959.00				
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 		Date 7/25/2011		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.

Part II: Supporting Pages								
PHA Name: Housing Authority of the City of Winston-Salem			Grant Type and Number Capital Fund Program Grant No: NC19P012501-11 CFFP (Yes/ No): Replacement Housing Factor Grant No:			Federal FFY of Grant:		
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
PHA Wide	Operations	1406		352,792.00				
PHA Wide	Management Improvements	1408		352,792.00				
PHA Wide	Administration	1410		176,396.00				
	FEES AND COSTS							
PHA Wide	A/E Contracts	1430		100,000.00				
	SITE IMPROVEMENTS							
NC 12-003	Site Improvements-Piedmont Pk	1450		40,000.00				
NC 12-006	Site Improvements-Cleveland Fence	1450	800 ft	40,000.00				
	DWELLING STRUCTURES							
NC 12-003	Interior Renovations	1460	1 BLDG	40,000.00				
NC 12-006	Interior Renovations-Kitchens	1460	148	400,000.00				

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

² To be completed for the Performance and Evaluation Report.

Part II: Supporting Pages								
PHA Name: Housing Authority of the City of Winston-Salem			Grant Type and Number Capital Fund Program Grant No: NC19P012501-11 CFFP (Yes/ No): Replacement Housing Factor Grant No:			Federal FFY of Grant: 2011		
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
	DWELLING STRUCTURES							
NC 12-012	Interior Renovations-Lobby	1460	1 BLDG	40,000.00				
NC 12-022	Exterior Renovations-Roofing	1460	10	50,000.00				
	DWELLING EQUIPMENT							
NC 12-022	Range & Refrigerators	1465	120	50,000.00				
NC 12-006	HVAC Equipment-Cleveland	1465	10	50,000.00				
NC 12-009	HVAC Equipment-Crystal	1465	4	21,979.00				
NC 12-012	HVAC Equipment-Healy	1465	70	50,000.00				

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

² To be completed for the Performance and Evaluation Report.

RESOLUTION NO. 1844

**RESOLUTION AUTHORIZING THE HAWS BOARD OF COMMISSIONERS
TO APPROVE THE AUTHORITY'S 2011 PHA PLAN (OCTOBER 1, 2011 –
SEPTEMBER 30, 2012).**

WHEREAS, the Housing Authority has completed the HUD Public Housing Authority (PHA) Annual Plan template detailing the Authority's policies, programs, operations, and resident population served, as well as the PHA's strategy for addressing the housing needs of currently assisted families and the larger community.

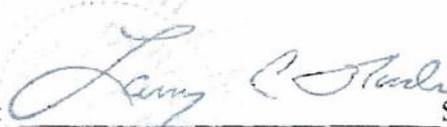
WHEREAS, a meeting of the Resident Advisory Board was held on Tuesday, April 26, 2011 for the purpose of presenting the proposed plan and seeking comments and a copy of such comments are incorporated into the PHA Plan.

WHEREAS, a public hearing notice was published in the Winston-Salem Journal on April 18, 2011 announcing the required public hearing.

WHEREAS, a public hearing was held on Tuesday, June 7, 2011 at 5:30 p.m. at 500 West Fourth Street, Suite 300, Winston-Salem, NC 27101 for the purpose of presenting the plan to the general public and seeking comments.

BE IT RESOLVED, that the HAWS Board of Commissioners has reviewed and hereby approves the 2011 PHA Plan.

Adopted: 6-14-2011 (date)

Signed:  Secretary/Executive Director

Certification of Payments to Influence Federal Transactions

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

Applicant Name

Housing Authority of the City of Winston-Salem

Program/Activity Receiving Federal Grant Funding

PHA Plan

The undersigned certifies, to the best of his or her knowledge and belief, that:

(1) No Federal appropriated funds have been paid or will be paid, by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of an agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the awarding of any Federal contract, the making of any Federal grant, the making of any Federal loan, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any Federal contract, grant, loan, or cooperative agreement.

(2) If any funds other than Federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of an agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this Federal contract, grant, loan, or cooperative agreement, the undersigned shall complete and submit Standard Form-LLL, Disclosure Form to Report Lobbying, in accordance with its instructions.

(3) The undersigned shall require that the language of this certification be included in the award documents for all subawards at all tiers (including subcontracts, subgrants, and contracts under grants, loans, and cooperative agreements) and that all sub recipients shall certify and disclose accordingly.

This certification is a material representation of fact upon which reliance was placed when this transaction was made or entered into. Submission of this certification is a prerequisite for making or entering into this transaction imposed by Section 1352, Title 31, U.S. Code. Any person who fails to file the required certification shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

I hereby certify that all the information stated herein, as well as any information provided in the accompaniment herewith, is true and accurate. **Warning:** HUD will prosecute false claims and statements. Conviction may result in criminal and/or civil penalties. (18 U.S.C. 1001, 1010, 1012; 31 U.S.C. 3729, 3802)

Name of Authorized Official

Larry C. Woods

Title

Chief Executive Officer

Signature



Date (mm/dd/yyyy)

06/30/2011

Certification for a Drug-Free Workplace

U.S. Department of Housing and Urban Development

Applicant Name

Housing Authority of the City of Winston-Salem

Program/Activity Receiving Federal Grant Funding

PHA Plan

Acting on behalf of the above named Applicant as its Authorized Official, I make the following certifications and agreements to the Department of Housing and Urban Development (HUD) regarding the sites listed below:

I certify that the above named Applicant will or will continue to provide a drug-free workplace by:

a. Publishing a statement notifying employees that the unlawful manufacture, distribution, dispensing, possession, or use of a controlled substance is prohibited in the Applicant's workplace and specifying the actions that will be taken against employees for violation of such prohibition.

b. Establishing an on-going drug-free awareness program to inform employees ---

(1) The dangers of drug abuse in the workplace;

(2) The Applicant's policy of maintaining a drug-free workplace;

(3) Any available drug counseling, rehabilitation, and employee assistance programs; and

(4) The penalties that may be imposed upon employees for drug abuse violations occurring in the workplace.

c. Making it a requirement that each employee to be engaged in the performance of the grant be given a copy of the statement required by paragraph a.;

d. Notifying the employee in the statement required by paragraph a. that, as a condition of employment under the grant, the employee will ---

(1) Abide by the terms of the statement; and

(2) Notify the employer in writing of his or her conviction for a violation of a criminal drug statute occurring in the workplace no later than five calendar days after such conviction;

e. Notifying the agency in writing, within ten calendar days after receiving notice under subparagraph d.(2) from an employee or otherwise receiving actual notice of such conviction. Employers of convicted employees must provide notice, including position title, to every grant officer or other designee on whose grant activity the convicted employee was working, unless the Federal agency has designated a central point for the receipt of such notices. Notice shall include the identification number(s) of each affected grant;

f. Taking one of the following actions, within 30 calendar days of receiving notice under subparagraph d.(2), with respect to any employee who is so convicted ---

(1) Taking appropriate personnel action against such an employee, up to and including termination, consistent with the requirements of the Rehabilitation Act of 1973, as amended; or

(2) Requiring such employee to participate satisfactorily in a drug abuse assistance or rehabilitation program approved for such purposes by a Federal, State, or local health, law enforcement, or other appropriate agency;

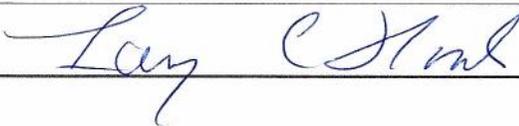
g. Making a good faith effort to continue to maintain a drug-free workplace through implementation of paragraphs a. thru f.

2. Sites for Work Performance. The Applicant shall list (on separate pages) the site(s) for the performance of work done in connection with the HUD funding of the program/activity shown above: Place of Performance shall include the street address, city, county, State, and zip code. Identify each sheet with the Applicant name and address and the program/activity receiving grant funding.)

Check here if there are workplaces on file that are not identified on the attached sheets.

I hereby certify that all the information stated herein, as well as any information provided in the accompaniment herewith, is true and accurate.

Warning: HUD will prosecute false claims and statements. Conviction may result in criminal and/or civil penalties. (18 U.S.C. 1001, 1010, 1012; 31 U.S.C. 3729, 3802)

Name of Authorized Official Larry C. Woods		Title Chief Executive Officer	
Signature X 		Date 6/30/2011	

PHA Certifications of Compliance with PHA Plans and Related Regulations

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
OMB No. 2577-0226
Expires 06/30/2011

PHA Certifications of Compliance with the PHA Plans and Related Regulations: Board Resolution to Accompany the PHA 5-Year and Annual PHA Plan

Acting on behalf of the Board of Commissioners of the Public Housing Agency (PHA) listed below, as its Chairman or other authorized PHA official if there is no Board of Commissioners, I approve the submission of the ___ 5-Year and/or 2011 ___ Annual PHA Plan for the PHA fiscal year beginning, hereinafter referred to as "the Plan", of which this document is a part and make the following certifications and agreements with the Department of Housing and Urban Development (HUD) in connection with the submission of the Plan and implementation thereof:

1. The Plan is consistent with the applicable comprehensive housing affordability strategy (or any plan incorporating such strategy) for the jurisdiction in which the PHA is located.
2. The Plan contains a certification by the appropriate State or local officials that the Plan is consistent with the applicable Consolidated Plan, which includes a certification that requires the preparation of an Analysis of Impediments to Fair Housing Choice, for the PHA's jurisdiction and a description of the manner in which the PHA Plan is consistent with the applicable Consolidated Plan.
3. The PHA certifies that there has been no change, significant or otherwise, to the Capital Fund Program (and Capital Fund Program/Replacement Housing Factor) Annual Statement(s), since submission of its last approved Annual Plan. The Capital Fund Program Annual Statement/Annual Statement/Performance and Evaluation Report must be submitted annually even if there is no change.
4. The PHA has established a Resident Advisory Board or Boards, the membership of which represents the residents assisted by the PHA, consulted with this Board or Boards in developing the Plan, and considered the recommendations of the Board or Boards (24 CFR 903.13). The PHA has included in the Plan submission a copy of the recommendations made by the Resident Advisory Board or Boards and a description of the manner in which the Plan addresses these recommendations.
5. The PHA made the proposed Plan and all information relevant to the public hearing available for public inspection at least 45 days before the hearing, published a notice that a hearing would be held and conducted a hearing to discuss the Plan and invited public comment.
6. The PHA certifies that it will carry out the Plan in conformity 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.
7. The PHA will affirmatively further fair housing by examining their programs or proposed programs, identify any impediments to fair housing choice within those programs, address those impediments in a reasonable fashion in view of the resources available and work with local jurisdictions to implement any of the jurisdiction's initiatives to affirmatively further fair housing that require the PHA's involvement and maintain records reflecting these analyses and actions.
8. For PHA Plan that includes a policy for site based waiting lists:
 - The PHA regularly submits required data to HUD's 50058 PIC/IMS Module in an accurate, complete and timely manner (as specified in PIH Notice 2006-24);
 - The system of site-based waiting lists provides for full disclosure to each applicant in the selection of the development in which to reside, including basic information about available sites; and an estimate of the period of time the applicant would likely have to wait to be admitted to units of different sizes and types at each site;
 - Adoption of site-based waiting list would not violate any court order or settlement agreement or be inconsistent with a pending complaint brought by HUD;
 - The PHA shall take reasonable measures to assure that such waiting list is consistent with affirmatively furthering fair housing;
 - The PHA provides for review of its site-based waiting list policy to determine if it is consistent with civil rights laws and certifications, as specified in 24 CFR part 903.7(c)(1).
9. The PHA will comply with the prohibitions against discrimination on the basis of age pursuant to the Age Discrimination Act of 1975.
10. The PHA will comply with the Architectural Barriers Act of 1968 and 24 CFR Part 41, Policies and Procedures for the Enforcement of Standards and Requirements for Accessibility by the Physically Handicapped.
11. The PHA will comply with the requirements of section 3 of the Housing and Urban Development Act of 1968, Employment Opportunities for Low-or Very-Low Income Persons, and with its implementing regulation at 24 CFR Part 135.
12. The PHA will comply with acquisition and relocation requirements of the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970 and implementing regulations at 49 CFR Part 24 as applicable.

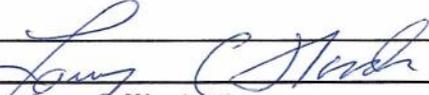
DISCLOSURE OF LOBBYING ACTIVITIES

Complete this form to disclose lobbying activities pursuant to 31 U.S.C. 1352

Approved by OMB

0348-0046

(See reverse for public burden disclosure.)

1. Type of Federal Action: <input type="checkbox"/> a. contract <input checked="" type="checkbox"/> N/A b. grant c. cooperative agreement d. loan e. loan guarantee f. loan insurance	2. Status of Federal Action: <input checked="" type="checkbox"/> N/A a. bid/offer/application b. initial award c. post-award	3. Report Type: <input checked="" type="checkbox"/> N/A a. initial filing b. material change For Material Change Only: year _____ quarter _____ date of last report _____
4. Name and Address of Reporting Entity: <input checked="" type="checkbox"/> Prime <input type="checkbox"/> Subawardee Tier _____, if known: Housing Authority of the City of Winston-Salem (NC012) Congressional District, if known: 4c		5. If Reporting Entity in No. 4 is a Subawardee, Enter Name and Address of Prime: Congressional District, if known:
6. Federal Department/Agency: U.S. Department of HUD	7. Federal Program Name/Description: CFDA Number, if applicable: <u>N/A</u>	
8. Federal Action Number, if known:	9. Award Amount, if known: \$ <u>N/A</u>	
10. a. Name and Address of Lobbying Registrant <i>(if individual, last name, first name, MI):</i> NONE	b. Individuals Performing Services <i>(including address if different from No. 10a)</i> <i>(last name, first name, MI):</i> NONE	
11. Information requested through this form is authorized by title 31 U.S.C. section 1352. This disclosure of lobbying activities is a material representation of fact upon which reliance was placed by the tier above when this transaction was made or entered into. This disclosure is required pursuant to 31 U.S.C. 1352. This information will be available for public inspection. Any person who fails to file the required disclosure shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.	Signature: <u></u> Print Name: <u>Larry C. Woods</u> Title: <u>Chief Executive Officer</u> Telephone No.: <u>336-727-8500, ext. 6053</u> Date: <u>06/30/2011</u>	
Federal Use Only:		Authorized for Local Reproduction Standard Form LLL (Rev. 7-97)

**DISCLOSURE OF LOBBYING ACTIVITIES
CONTINUATION SHEET**

Approved by OMB
0348-0046

Reporting Entity: _____ Page 2 of 2

N/A