

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>Plattsburgh Housing Authority</u> PHA Code: <u>NY018</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>07/2010</u>				
2.0	Inventory (based on ACC units at time of FY beginning in 1.0 above) Number of PH units: <u>604</u> Number of HCV units: <u>191</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
	PHA 1:				PH HCV
	PHA 2:				
	PHA 3:				
5.0	5-Year Plan. Complete items 5.1 and 5.2 only at 5-Year Plan update.				
5.1	Mission. State the PHA's Mission for serving the needs of low-income, very low-income, and extremely low income families in the PHA's jurisdiction for the next five years:				
5.2	Goals and Objectives. Identify the PHA's quantifiable goals and objectives that will enable the PHA to serve the needs of low-income and very low-income, and extremely low-income families for the next five years. Include a report on the progress the PHA has made in meeting the goals and objectives described in the previous 5-Year Plan.				
	PHA Plan Update				
6.0	(a) Identify all PHA Plan elements that have been revised by the PHA since its last Annual Plan submission: Attachment A: PHA changes to ACOP Attachment B: HCV changes to Admin. Plan (b) Identify the specific location(s) where the public may obtain copies of the 5-Year and Annual PHA Plan. For a complete list of PHA Plan elements, see Section 6.0 of the instructions. The complete PHA plan is posted at Amp 101, the Ted K Center, Amp 102, Lakeview Towers Bulletin Board, Amp 103, and the PHA Central Office located at 4817 South Catherine Street, Suite 101.				
7.0	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>				
8.0	Capital Improvements. Please complete Parts 8.1 through 8.3, as applicable.				
8.1	Capital Fund Program Annual Statement/Performance and Evaluation Report. As part of the PHA 5-Year and Annual Plan, annually complete and submit the <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. Attachment C				
8.2	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. Attachment D				

8.3	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.
9.0	Housing Needs. Based on information provided by the applicable Consolidated Plan, information provided by HUD, and other generally available data, make a reasonable effort to identify the housing needs of the low-income, very low-income, and extremely low-income families who reside in the jurisdiction served by the PHA, including elderly families, families with disabilities, and households of various races and ethnic groups, and other families who are on the public housing and Section 8 tenant-based assistance waiting lists. The identification of housing needs must address issues of affordability, supply, quality, accessibility, size of units, and location.
9.1	Strategy for Addressing Housing Needs. Provide a brief description of the PHA's strategy for addressing the housing needs of families in the jurisdiction and on the waiting list in the upcoming year. Note: Small, Section 8 only, and High Performing PHAs complete only for Annual Plan submission with the 5-Year Plan.
10.0	Additional Information. Describe the following, as well as any additional information HUD has requested. (a) Progress in Meeting Mission and Goals. Provide a brief statement of the PHA's progress in meeting the mission and goals described in the 5-Year Plan. (b) Significant Amendment and Substantial Deviation/Modification. Provide the PHA's definition of "significant amendment" and "substantial deviation/modification"
11.0	Required Submission for HUD Field Office Review. In addition to the PHA Plan template (HUD-50075), PHAs must submit the following documents. Items (a) through (g) may be submitted with signature by mail or electronically with scanned signatures, but electronic submission is encouraged. Items (h) through (i) must be attached electronically with the PHA Plan. Note: Faxed copies of these documents will not be accepted by the Field Office. (a) Form HUD-50077, <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)

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

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

Part I: Summary		FFY of Grant: 2009 FFY of Grant Approval:	
PHA Name: Pittsburgh Housing Authority		Grant Type and Number Capital Fund Program Grant No: NY06P01850109 Replacement Housing Factor Grant No: Date of CFFP:	
Type of Grant	<input type="checkbox"/> Original Annual Statement <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 12/31/10		
Line	Summary by Development Account	<input checked="" type="checkbox"/> Revised Annual Statement (revision no:4) <input type="checkbox"/> Final Performance and Evaluation Report	
		Original	Revised ²
		Total Estimated Cost	Total Actual Cost ¹
		Obligated	Expended
1	Total non-CFP Funds	0	0
2	1406 Operations (may not exceed 20% of line 21) ³	33,859	33,859
3	1408 Management Improvements	32,056	32,056
4	1410 Administration (may not exceed 10% of line 21)	80,000	39,590
5	1411 Audit	1,000	1,000
6	1415 Liquidated Damages	0	0
7	1430 Fees and Costs	82,776	78,047
8	1440 Site Acquisition	0	0
9	1450 Site Improvement	173,000	111,104
10	1460 Dwelling Structures	275,836	247,394
11	1465.1 Dwelling Equipment—Nonexpendable	0	0
12	1470 Non-dwelling Structures	170,000	267,316
13	1475 Non-dwelling Equipment	61,703	21,009
14	1485 Demolition	0	0
15	1492 Moving to Work Demonstration	0	0
16	1495.1 Relocation Costs	4,100	4,100
17	1499 Development Activities ⁴	0	0

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

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

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

Part I: Summary		FFY of Grant: 2009	
PHA Name: Plattsburgh Housing Authority	Grant Type and Number Capital Fund Program Grant No.: NY06P01850109 Replacement Housing Factor Grant No: Date of CFFP:	FFY of Grant Approval:	

Type of Grant Original Annual Statement Reserve for Disasters/Emergencies Revised Annual Statement (revision no: 4)
 Performance and Evaluation Report for Period Ending: 12/31/10 Final Performance and Evaluation Report

Line	Summary by Development Account	Original	Revised ²	Obligated	Total Actual Cost ¹	Expended
18a	1501 Collateralization or Debt Service paid by the PHA	0	0			
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment	0	0			
19	1502 Contingency (may not exceed 8% of line 20)	0	0			
20	Amount of Annual Grant: (sum of lines 2 - 19)	914,330	914,330	914,330	835,475	
21	Amount of line 20 Related to LBP Activities	25,000	15,159	15,159	15,159	
22	Amount of line 20 Related to Section 504 Activities	0	150,000	150,000	150,000	
23	Amount of line 20 Related to Security - Soft Costs	35,000	30,000	30,000	30,000	
24	Amount of line 20 Related to Security - Hard Costs	0	0	0	0	
25	Amount of line 20 Related to Energy Conservation Measures	47,500	138,770	138,770	138,770	
Signature of Executive Director: <i>Valencia Garcia</i>		Date: 1/14/2011	Signature of Public Housing Director:		Date:	

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 Expires 4/30/2011

Part II: Supporting Pages		Grant Type and Number		Federal FFY of Grant: 2009				
PHA Name: Plattsburgh Housing Authority		Capital Fund Program Grant No: NY06P01850109						
		CFPP (Yes/ No):						
		Replacement Housing Factor Grant No:						
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	
NY 18-101 Lake City Family Housing	Abatement Training	1408	1	0	2,056	2,056	2,056	Training complete
	Drug Prevention	1408	1	0	30,000	30,000	30,000	Police patrol
	Asbestos Testing/Monitoring	1430	31	30,846	30,644	30,643	30,643	complete
	LBP Testing/Monitoring	1430	31	8,371	15,159	15,159	13,207	on-going
	A & E	1430	1	10,000	16,336	16,336	16,336	on-going
	Parking Lot Installation	1450	1	150,000	111,104	111,104	111,104	Complete
	Exterior Door Replacement	1460	250	500	0	0	0	Move to FY 10
	Boiler Replacement	1460	51	147,775	147,775	147,775	147,775	Complete
	Force Account Renovations	1460	1	102,924	74,983	74,983	74,983	on-going
	Hot Water Tank Replace	1460	100	22,559	22,559	22,559	22,559	complete
	Center Door Replace	1470	1	0	0	0	0	Move to FY 10
	Force Account Building Labor	1470	1	0	150,000	58,245	21,754	90% complete
	Construct Admin Building	1470	1	0	141,956	233,711	233,711	90% complete
	Force Account Tools and Equipment	1475	1	0	20,964	20,964	20,964	on-going
	Purchase Abatement Equipment	1475	1	0	45	45	45	Complete
	Relocation	1495	1	4,100	4,100	4,100	4,100	Complete
	NY51P018101 Subtotal			477,075	767,679	767,680	729,237	
						0	0	

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Part II: Supporting Pages		Grant Type and Number		Federal FFY of Grant: 2009		Status of Work	
PHA Name: Plattsburgh Housing Authority		Capital Fund Program Grant No: NY06P01850109		Replacement Housing Factor Grant No:			
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost	Total Actual Cost		
NY 18-102 Lake City Senior Housing	Concrete Testing	1430	1	16,659	16,659	16,659	Complete
	Asbestos Testing and Monitoring	1430	1	1,000	1,203	1,203	Complete
	Force Account Site Renovate	1450	1	23,000	0	0	Move to FY 10
	Lobby Repair/Improvement	1460	1	2,078	2,078	2,078	Complete
	Canopy/Picnic Area	1470	1	20,000	11,852	11,852	Complete
	NY51P018102 Subtotal			62,737	31,792	31,792	
HA Wide	Operations	1406		33,859	33,859	33,859	
	Operations Subtotal			33,859	33,859	33,859	
Non-Tech Salaries	Administration	1410		80,000	80,000	80,000	
	Non-Tech Salaries Subtotal			80,000	80,000	80,000	
CFP Audit Costs	Audit Cost	1411		1,000	1,000	1,000	
	CGP Audit Subtotal			1,000	1,000	1,000	
Management Improvements	Abatement Training	1408	1	2,056	0	0	move to amp 1
	Drug Prevention	1408	1	30,000	0	0	move to amp 1
	Mgmt Improvement Subtotal			32,056	0	0	
A/E Fees	Architect/Engineer	1430		15,900	0	0	move to amp 1
	A/E Subtotal			15,900	0	0	

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Part I: Summary		PHA Name: Plattsburgh Housing Authority		Grant Type and Number Capital Fund Program Grant No: NY06P01850110 Replacement Housing Factor Grant No: Date of CFFP:		FFY of Grant: 2010 FFY of Grant Approval:	
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Line	Type of Grant <input type="checkbox"/> Original Annual Statement <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 12/31/10	Reserve for Disasters/Emergencies <input type="checkbox"/> Reserve for Disasters/Emergencies <input checked="" type="checkbox"/> Revised Annual Statement (revision no:1) <input type="checkbox"/> Final Performance and Evaluation Report	Original	Total Estimated Cost	Obligated	Total Actual Cost ¹
				Revised ²		Expended
1	Total non-CFP Funds					
2	1406 Operations (may not exceed 20% of line 21) ³		100,000	100,000	100,000	0
3	1408 Management Improvements		33,000	33,000	33,000	0
4	1410 Administration (may not exceed 10% of line 21)		89,000	89,000	89,000	0
5	1411 Audit		1,000	1,000	1,000	0
6	1415 Liquidated Damages		0	0		
7	1430 Fees and Costs		26,500	26,500	26,500	0
8	1440 Site Acquisition		0	0		
9	1450 Site Improvement		75,000	75,000	75,000	0
10	1460 Dwelling Structures		575,830	575,830		
11	1465 I Dwelling Equipment—Nonexpendable		0	0		
12	1470 Non-dwelling Structures		0	0		
13	1475 Non-dwelling Equipment		9,000	1,963	1,963	0
14	1485 Demolition		0	0		
15	1492 Moving to Work Demonstration		0	0		
16	1495 I Relocation Costs		5,000	5,000	5,000	0
17	1499 Development Activities ⁴					

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Part I: Summary		FFY of Grant: 2010	
PHA Name: Plattsburgh Housing Authority	Grant Type and Number Capital Fund Program Grant No: NY06P01850110 Replacement Housing Factor Grant No: Date of CFP:	FFY of Grant Approval:	

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	0	0	0	0
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment	0	0	0	0
19	1502 Contingency (may not exceed 8% of line 20)	0	0	0	0
20	Amount of Annual Grant: (sum of lines 2 - 19)	914,330	907,293	907,293	0
21	Amount of line 20 Related to LBP Activities	81,500	81,500	81,500	0
22	Amount of line 20 Related to Section 504 Activities	199,500	199,500	199,500	0
23	Amount of line 20 Related to Security - Soft Costs	33,000	33,000	33,000	0
24	Amount of line 20 Related to Security - Hard Costs	0	0	0	0
25	Amount of line 20 Related to Energy Conservation Measures	121,330	121,330	121,330	0
Signature of Executive Director		Date	Signature of Public Housing Director		Date
<i>[Signature]</i>		1/14/2011	<i>[Signature]</i>		

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Part II: Supporting Pages

PHA Name: Plattsburgh Housing Authority

Grant Type and Number
 Capital Fund Program Grant No.: NY06P01850110
 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	
NY 18-101 Lake City Family Housing	Asbestos/LBP Monitoring	1430.2	100 doors	5,000	5,000	5,000	0	Force Account
	Force Account Site Renovation	1450	1	37,500	37,500	37,500	0	Force Account
	Abatement	1460	100 doors	37,500	37,500	37,500	0	Force Account
	F.A. Bldg. Renovations	1460	100 doors	75,000	75,000	75,000	0	Force Account
	Window Replacement	1460	50 apts	73,830	73,830	73,830	0	Force Account
	Relocation Costs	1495.1	10	5,000	5,000	5,000	0	Force Account
	18-101 Family Housing Subtotal				233,830	233,830	233,830	0
NY 18-102 Lake City Senior Housing	Asbestos/LBP Monitoring	1430.2		1,500	1,500	1,500	0	Force Account
	Force Account Site Renovations	1450	6 floors	37,500	37,500	37,500	0	Force Account
	Force Acct. Bldg/Apt Renovations	1460	1	155,000	155,000	155,000	0	Force Account
	Abatement	1460	6 floors	37,500	37,500	37,500	0	Force Account
	Emergency Generator/Control Replacement	1475.2	2 bldgs	1,000	1,000	1,000	0	Force Account
	Renovate Office Space to Accessible Apts.	1460	2 apts	122,000	122,000	122,000	0	Force Account
	Elevator Pit Repair	1475	1	8,000	963	963	0	Force Account
	Combine Efficiencies Apt/Renovate	1460	6 floors	75,000	75,000	75,000	0	Force Account
	18-102 Senior Housing Subtotal			437,500	430,463	430,463	0	

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Part II: Supporting Pages		PHA Name: Plattsburgh Housing Authority		Grant Type and Number Capital Fund Program Grant No: NY06P01850110 CFPP (Yes/ No): Replacement Housing Factor Grant No:		Federal FFY of Grant: 2010		Status of Work	
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost	Total Actual Cost	Funds Obligated ²	Funds Expended ²		
HA Wide	Operations	1406		Original 100,000	Revised ¹ 100,000	Funds Obligated ² 100,000	Funds Expended ² 0		
	HA Wide Subtotal			100,000	100,000	100,000	0		
Management Improvements	Drug Prevention	1408		33,000	33,000	33,000	0		
	Mgmt Improvement Subtotal			33,000	33,000	33,000	0		
Non-Tech Salaries	Administration	1410.1		80,000	80,000	80,000	0		
	Staff Training	1410.1		4,000	4,000	4,000	0		
	Web Page Administration	1410		5,000	5,000	5,000	0		
	Non-Tech Salaries Subtotal			89,000	89,000	89,000	0		
CFP Audit	Audit	1411		1,000	1,000	1,000	0		
	CFP Audit Subtotal			1,000	1,000	1,000	0		
A & E Fees	A/E	1430.1		20,000	20,000	20,000	0		
	A & E Fees Subtotal			20,000	20,000	20,000	0		
	HA WIDE TOTAL			243,000	243,000	243,000	0		
	GRAND TOTALS			914,330	907,293	907,293	0		

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Part III: Implementation Schedule for Capital Fund Financing Program
 PHA Name: Plattsburgh Housing Authority

Development Number Name/PHA-Wide Activities	All Fund Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Reasons for Revised Target Dates ¹
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	
NY 18-101 Lake City Family Housing	07/14/2012	12/31/10	07/14/2014		
NY 18-102 Lake City Senior Housing	07/14/2012	12/31/10	07/14/2014		
HA Wide	07/14/2012	12/31/10	07/14/2014		
Mgmt Improvements	07/14/2012	12/31/10	07/14/2014		
CFP Audit	07/14/2012	12/31/10	07/14/2014		
A/E Fees	07/14/2012	12/31/10	07/14/2014		

¹ Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of 1937, as amended.

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

Part I: Summary		Grant Type and Number	
PHA Name: Plattsburgh Housing Authority		Capital Fund Program Grant No.: NY06P01850111 Replacement Housing Factor Grant No.: Date of CFFP:	
FFY of Grant: 2011		FFY of Grant Approval:	

Line	Type of Grant <input checked="" type="checkbox"/> Original Annual Statement <input type="checkbox"/> Performance and Evaluation Report for Period Ending: Summary by Development Account	Reserve for Disasters/Emergencies <input type="checkbox"/>	Revised Annual Statement (revision no:) <input type="checkbox"/> Final Performance and Evaluation Report	Total Estimated Cost		Total Actual Cost ¹	
				Original	Revised ²	Obligated	Expended
1	Total non-CFP Funds						
2	1406 Operations (may not exceed 20% of line 21) ³			100,000			
3	1408 Management Improvements			33,000			
4	1410 Administration (may not exceed 10% of line 21)			89,500			
5	1411 Audit			1,500			
6	1415 Liquidated Damages						
7	1430 Fees and Costs			36,500			
8	1440 Site Acquisition						
9	1450 Site Improvement			31,000			
10	1460 Dwelling Structures			478,000			
11	1465.1 Dwelling Equipment—Nonependable						
12	1470 Non-dwelling Structures						
13	1475 Non-dwelling Equipment			135,293			
14	1485 Demolition						
15	1492 Moving to Work Demonstration						
16	1495.1 Relocation Costs			2,500			
17	1499 Development Activities ⁴						

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Part I: Summary		FFY of Grant: 2011	
PHA Name: Plattsburgh Housing Authority	Grant Type and Number: Capital Fund Program Grant No: NY06P01850111 Replacement Housing Factor Grant No: Date of CFP:	FFY of Grant Approval:	

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

Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost 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)	\$907,293			
21	Amount of line 20 Related to LBP Activities	\$ 44,000			
22	Amount of line 20 Related to Section 504 Activities	\$226,000			
23	Amount of line 20 Related to Security - Soft Costs	\$ 33,000			
24	Amount of line 20 Related to Security - Hard Costs				
25	Amount of line 20 Related to Energy Conservation Measures	\$208,000			
Signature of Executive Director		Date	Signature of Public Housing Director		Date
<i>[Signature]</i>		1/14/2011			

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

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 II: Supporting Pages

PHA Name: Plattsburgh Housing Authority	Grant Type and Number Capital Fund Program Grant No: NY06P01850111 CFPP (Yes/No): Replacement Housing Factor Grant No:	Federal FFY of Grant: 2011
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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	
NY 18-101 Family	Operations	1406		55,000				
	Drug Prevention	1408		18,150				
	Administration	1410.1		44,000				
	Staff Training	1410.1		2,750				
	Web Page-PHA Software	1410		2,475				
	Audit	1411		825				
	A/E	1430.1		16,500				
	Abatement Monitoring	1430.2		5,000				
	Force Account Site Renovations	1450		15,500				
	Abatement	1460		37,500				
	Force Account Bldg. Renovations	1460		98,500				
	Window Replacement	1460		89,000				
	Door Replacement	1460		5,000				
	18-101 Family Housing Subtotal			\$390,200				
NY 18-102 Senior Hsg	Operations	1406		37,000				
	Drug Prevention	1408		12,210				
	Administration	1410.1		29,600				
	Staff Training	1410.1		1,850				
	Web Page-PHA Software	1410		1,665				

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		Grant Type and Number		Federal FFY of Grant: 2011		
PHA Name: Plattsburgh Housing Authority		Capital Fund Program Grant No: NY06P01850111				
		CFPP (Yes/ No):		Replacement Housing Factor Grant No:		
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
NY 18-102 Senior Hsg	Audit	1411		555		
	A/E	1430.1		11,100		
	Abatement Monitoring	1430.2		1,500		
	Force Account Site Renovations	1450		15,500		
	Force Acct. Bldg/Apt. Renovations	1460		95,500		
	Combine Efficiencies	1460		15,000		
	Renovate Office Space to Accessible Apt	1460		100,000		
	Abatement	1460		37,500		
	Emergency Generator/Control Replnt	1475.2		135,293		
	Relocation Costs	1495.1		2,500		
	18-102 Senior Housing Subtotal			\$ 496,773		
NY 18-103 Sterns Apt	Operations	1406		8,000		
	Drug Prevention	1408		2,640		
	Administration	1410.1		6,400		
	Staff Training	1410.1		400		
	Web Page-PHA Software	1410		360		
	Audit	1411		120		
	A/E	1430.1		2,400		
	18-103 Sterns Apartment Subtotal			\$ 20,320		

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.

Capital Fund Program—Five-Year Action Plan

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

Part I: Summary

PHA Name/Number: NY018 Plattsburgh		Locality (City/County & State) Plattsburgh/Clinton/New York			<input checked="" type="checkbox"/> Original 5-Year Plan	<input type="checkbox"/> Revision No:
Housing Authority	Work Statement for Year 1 FFY 2011	Work Statement for Year 2 FFY 2012	Work Statement for Year 3 FFY 2013	Work Statement for Year 4 FFY 2014	Work Statement for Year 5 FFY 2015	
A. Development Number and Name: Lake City Family Housing NY 18-101 NY 18-102 Senior Housing NY 18-103 Sterns Apts						
B. Physical Improvements Subtotal	478,843	478,843	495,343	467,088	466,129	
C. Management Improvements	41,500	41,500	42,500	43,500	44,500	
D. PHA-Wide Non-dwelling Structures and Equipment	65,100	65,100	65,700	58,700	74,900	
E. Administration	90,700	90,700	90,700	84,800	84,800	
F. Other	91,150	91,150	73,050	113,205	96,964	
G. Operations	140,000	140,000	140,000	140,000	140,000	
H. Demolition	-	-	-	-	-	
I. Development	-	-	-	-	-	
J. Capital Fund Financing – Debt Service	-	-	-	-	-	
K. Total CFP Funds	907,293	907,293	907,293	907,293	907,293	
L. Total Non-CFP Funds	-	-	-	-	-	
M. Grand Total	907,293	907,293	907,293	907,293	907,293	

Part II: Supporting Pages – Physical Needs Work Statement(s)

Work Statement for Year 1 FFY 2011	Development Number/Name General Description of Major Work Categories	Quantity	Estimated Cost	Work Statement for Year: 2 FFY 2012	Development Number/Name General Description of Major Work Categories	Quantity	Estimated Cost
	NY 18-101				NY 18-101		
	LAKE CITY FAMILY HOUSING				LAKE CITY FAMILY HOUSING		
	Operations		\$ 80,000		Operations		\$ 80,000
	Drug Prevention		\$ 18,700		Drug Prevention		\$ 19,250
	Staff Training		\$ 4,125		Staff Training		\$ 4,125
	Administration		\$ 50,000		Administration		\$ 50,000
	Audit		\$ 825		Audit		\$ 825
	A & E		\$ 15,000		A & E		\$ 24,750
	Environmental Consulting		\$ 10,000		Environmental Consulting		\$ 10,000
	Environmental Testing Services		\$ 15,000		Environmental Testing Services		\$ 10,000
	FA Abatement Insurance		\$ 5,000		FA Abatement Insurance		\$ 5,150
	Force Acct Apt. Renovate	Dev. Wide	\$ 150,000		Force Acct Apt. Renovate	Dev. Wide	\$ 154,500
	Force Acct Site Renovate	Dev. Wide	\$ 15,000		Force Acct Site Renovate	Dev. Wide	\$ 15,450
	Force Acct Non Dwelling Renovation	Dev. Wide	\$ 20,000		Force Acct Non Dwelling Renovation	Dev. Wide	\$ 20,600
	FA Dump Trailer		\$ 6,600		Force Acct Machinery		\$ 10,000
	Force Account Tools		\$ 4,000		Force Acct Tools		\$ 4,000
	Toilet Rep Energy Eff		\$ 2,000		Boiler Replacement	18-1 150	\$ 26,000
	Asbestos Abatement	Amp Wide	\$ 25,000		Asbestos Abatement	Amp Wide	\$ 20,000
	LBP Abatement	Amp Wide	\$ 25,000		LBP Abatement	Amp Wide	\$ 20,000

Part II: Supporting Pages – Physical Needs Work Statement(s)

Work Statement for Year 1 FFY 2011	Development Number/Name General Description of Major Work Categories	Quantity	Estimated Cost	Work Statement for Year: 2 FFY 2012	Development Number/Name General Description of Major Work Categories	Quantity	Estimated Cost
See Annual	NY 18-101 Cont LAKE CITY FAMILY HOUSING				NY 18-101 Cont LAKE CITY FAMILY HOUSING		
Statement	Rehab Mgmt/Main/Ted K Center	Amp Wide	\$ 5,000		Bldg. Weatherization	Amp Wide	\$ 10,000
	Flag Pole (Lighted)	18-1	\$ 1,500				
	TOTAL FAMILY HOUSING		\$ 452,750		**TOTAL FAMILY HOUSING**		\$ 484,650
	NY 18-102 LAKE CITY SENIOR HOUSING				NY 18-102 LAKE CITY SENIOR HOUSING		
	Operations		\$ 50,000		Operations		\$ 50,000
	Drug Prevention		\$ 12,580		Drug Prevention		\$ 12,950
	Staff Training		\$ 2,775		Staff Training		\$ 2,775
	Administration		\$ 35,500		Administration		\$ 35,500
	Audit		\$ 555		Audit		\$ 555
	A & E		\$ 16,650		A & E		\$ 16,650
	Environmental Consulting Services		\$ 8,000		Environmental Consulting Services		
	Environmental Testing Services		\$ 15,000		FA Abatement Insurance		\$ 5,000
	FA Abatement Insurance		\$ 5,000		Force Acct Apt. Renovate	Dev. Wide	\$ 117,800
	Force Acct Apt. Renovate	Dev. Wide	\$ 114,350		Force Acct Site Renovate	Dev. Wide	\$ 15,500
	Force Acct Site Renovate	Dev. Wide	\$ 15,000				

Part II: Supporting Pages – Physical Needs Work Statement(s)

Work Statement for Year 1 FFY 2011	Development Number/Name General Description of Major Work Categories	Quantity	Estimated Cost	Work Statement for Year: 2 FFY 2012	Development Number/Name General Description of Major Work Categories	Quantity	Estimated Cost
	NY 18-102 Cont				NY 18-102 Cont		
	LAKE CITY SENIOR HOUSING				LAKE CITY SENIOR HOUSING		
	Force Acct Non Dwelling Renovations	Dev. Wide	\$ 20,000		Force Acct Non Dwelling Renovations	Dev. Wide	\$ 20,600
	FA Dump Trailer		\$ 4,500		FA Dump Trailer		\$ 4,500
	FA Tools		\$ 3,000		FA Tools		\$ 3,000
	Eff. Convert To 1 Bdrm	18-4 42 to 28	\$ 75,650		Eff. Convert To 1 Bdrm	18-4 42 to 28	\$ 30,000
	Asbestos Abatement	Amp Wide	\$ 40,000		Intercom System Replace	Amp Wide	\$ 64,400
	LBP Abatement	Amp Wide	\$ 15,343		Emergency Generator	18-4 & 6	\$ 12,693
	TOTAL SENIOR HOUSING		\$ 433,903		**TOTAL SENIOR HOUSING**		\$ 391,923
			\$				\$
			\$				\$
	NY 18-103		\$		NY 18-103		\$
	STERNS APARTMENTS		\$		STERNS APARTMENTS		\$
	Operations		\$ 10,000		Operations		\$ 10,000
	Drug Prevention		\$ 2,720		Drug Prevention		\$ 2,800
	Staff Training		\$ 600		Staff Training		\$ 600
	Administration		\$ 5,200		Administration		\$ 5,200
	Audit		\$ 120		Audit		\$ 120
	FA Dump Trailer		\$ 1,000		Flag Pole		\$ 1,500

Part II: Supporting Pages – Physical Needs Work Statement(s)

Work Statement for Year 1 FFY 2011	Development Number/Name General Description of Major Work Categories	Quantity	Estimated Cost	Work Statement for Year: 4 FFY 2014	Development Number/Name General Description of Major Work Categories	Quantity	Estimated Cost
	NY 18-101				NY 18-101		
	LAKE CITY FAMILY HOUSING				LAKE CITY FAMILY HOUSING		
	Operations		\$ 80,000		Operations		\$ 80,000
	Drug Prevention		\$ 19,800		Drug Prevention		\$ 20,350
	Staff Training		\$ 4,125		Staff Training		\$ 4,125
	Administration		\$ 50,000		Administration		\$ 50,000
	Audit		\$ 825		Audit		\$ 825
	A & E		\$ 24,750		A & E		\$ 24,750
	Environmental Consulting		\$ 15,000		Environmental Consulting Services		\$ 15,000
	Environmental Testing Services		\$ 30,000		Environmental Testing Services		\$ 15,000
	FA Abatement Insurance		\$ 5,305		FA Abatement Insurance		\$ 5,464
	Force Acct Apt. Renovate	Dev. Wide	\$ 159,000		Force Acct Apt. Renovate	Dev. Wide	\$ 163,900
	Force Acct Site Renovate	Dev. Wide	\$ 15,900		Force Acct Site Renovate	Dev. Wide	\$ 16,400
	Force Acct Non Dwelling Renovation	Dev. Wide	\$ 21,200		Force Acct Non Dwelling Renovation	Dev. Wide	\$ 21,900
	Force Acct Machinery		\$ 10,000		Force Acct Machinery		\$ 5,000
	Force Acct Tools		\$ 4,000		Force Acct Tools		\$ 4,000
	Asbestos Abatement	Amp Wide	\$ 5,000		Boiler Replacement	18-1 150	\$ 5,000
	LBP Abatement	Amp Wide	\$ 5,000		Asbestos Abatement	Amp Wide	\$ 5,000
					LBP Abatement	Amp Wide	\$ 5,000

Part II: Supporting Pages – Physical Needs Work Statement(s)

Work Statement for Year 1 FFY 2011	Work Statement for Year: 4 FFY 2014			Work Statement for Year: 5 FFY 2015		
	Development Number/Name General Description of Major Work Categories	Quantity	Estimated Cost	Development Number/Name General Description of Major Work Categories	Quantity	Estimated Cost
Sec Annual	NY 18-101 Cont LAKE CITY FAMILY HOUSING			NY 18-101 Cont LAKE CITY FAMILY HOUSING		
Statement	Thermostat Upgrade	18-3 & 7	\$ 5,000	Rehab Mgmt/Main/Ted K Center	Amp Wide	\$ 2,500
	Improve Comm Space	18-1 & 7	\$ 5,000	Bldg. Sec. Light Install	18-1 12	\$ 500
	Stoop/Handrail Replace	18-3 51	\$ 5,449	Apt. Entry Light Replace	18-1,2,3 251	\$ 1,500
	Pave Off-Street Parking	18-1 TKC	\$ 20,000	Playground Equip. Upgrade/504	18-7	\$ 10,000
	Seal-coat/restripe Parking Lots	Amp Wide	\$ 10,000	Curbing Replacement	18-3 & 7	\$ 5,000
	Window Replacement	18-1,2,3 47 Bldgs.	\$ 25,000	Window Replacement	18-1,2,3 47 Bldgs	\$ 25,000
	Kitchen Remodel	Amp Wide	\$ 6,000	Landscaping/Site Work	Amp Wide	\$ 5,000
	Sidewalk Replacement	18-3 & 7	\$ 500	Galvanized Pipe Replace	Amp Wide	\$ 5,000
	Parking Lot Installation	18-7	\$ 5,000	Electric Outlets Upgrade	Amp Wide	\$ 5,000
	Add Parking Space	18-7	\$ 5,000	Bathroom Remodel	Amp Wide	\$ 5,000
	Bldg. Weatherization	Dev. Wide	\$ 5,000	Kitchen Remodel	Amp Wide	\$ 5,000
	Boiler Replacement		\$ 5,000	Vinyl Sliding repair/replace	18-1,2,3	\$ 5,000
	Crawl Space Vent Replace	18-1 & 2	\$ 4,144	Storage Sheds Installation	Amp Wide	\$ 5,000
	Sprinkler System in Maint. Bldg.	18-1 & 7	\$ 3,000	Bldg. Weatherization	Amp Wide	\$ 5,000

Part II: Supporting Pages – Physical Needs Work Statement(s)

Work Statement for Year 1 FFY 2011	Work Statement for Year: 4 FFY 2014			Work Statement for Year: 5 FFY 2015		
	Development Number/Name General Description of Major Work Categories	Quantity	Estimated Cost	Development Number/Name General Description of Major Work Categories	Quantity	Estimated Cost
See Annual Statement	NY 18-101 Cont.			NY 18-101 Cont.		
	LAKE CITY FAMILY HOUSING			LAKE CITY FAMILY HOUSING		
				Thermostat Upgrade	18-3 & 7	\$ 5,000
				Apt Wall Soundproof	Dev. Wide	\$ 5,000
				Add Parking Space	18-7	\$ 5,000
				Sidewalk Replacmt		\$ 5,000
	Total Family Housing		\$ 553,998	**Total Family Housing**		\$ 588,614
	NY 18-102			NY 18-102		
	LAKE CITY SENIOR HOUSING			LAKE CITY SENIOR HOUSING		
	Operations		\$ 50,000	Operations		\$ 50,000
	Drug Prevention		\$ 13,320	Drug Prevention		\$ 13,690
	Staff Training		\$ 2,775	Staff Training		\$ 2,775
	Administration		\$ 29,600	Administration		\$ 29,600
	Audit		\$ 555	Audit		\$ 555
	A & E		\$ 6,650	A & E		\$ 16,650
	Environmental Consulting Services		\$ 5,000	Environmental Consulting Services		\$ 5,000
	Environmental Testing Services		\$ 5,000	Environmental Testing Services		\$ 5,000
	FA Abatement Insurance		\$ 5,000	FA Abatement Insurance		\$ 5,000

Part II: Supporting Pages – Physical Needs Work Statement(s)

Work Statement for Year 1 FFY 2011		Work Statement for Year: 4 FFY 2014			Work Statement for Year: 5 FFY 2015		
Development Number/Name General Description of Major Work Categories	Quantity	Estimated Cost	Development Number/Name General Description of Major Work Categories	Quantity	Estimated Cost		
NY 18-102 Cont. LAKE CITY SENIOR HOUSING			NY 18-102 Cont. LAKE CITY SENIOR HOUSING				
Force Acct Apt Renovate	Dev. Wide	\$ 121,300	Force Acct Apt Renovate	Dev. Wide	\$ 50,000		
Force Acct Site Renovate	Dev. Wide	\$ 5,000	Force Acct Site Renovate	Dev. Wide	\$ 8,000		
Force Acct Non Dwelling Renovations	Dev. Wide	\$ 5,000	Force Acct Non Dwelling Renovations	Dev. Wide	\$ 5,000		
Force Account Machinery		\$ 4,500	Force Account Machinery		\$ 4,500		
FA Tools		\$ 3,000	FA Tools		\$ 3,000		
New HVAC	18-5	\$ 5,000	Fire Pump Replacement	18-4	\$ 6,000		
Sidewalk Replacement	Amp Wide	\$ 5,000	Eff. Convert to 1 Bdmm	18-4 42 to 28	\$ 1,000		
Asbestos Abatement	Amp Wide	\$ 10,000	Fire Alarm Syst Replace	18-4	\$ 10,000		
Entry Walk-Off Carpet	18-4	\$ 5,095	Landscaping	Amp Wide	\$ 5,000		
Bathroom Remodel	Amp Wide	\$ 2,000	Front Entry Canopy	18-4 & 5	\$ 5,000		
Intercom System Replace	Amp Wide	\$ 10,000	Fire Walls Common Area	18-4	\$ 5,000		
			Ceiling Light Common Area Replace	18-4	\$ 800		
			Asbestos Abatement	Amp Wide	\$ 500		
			LBP Abatement	Amp Wide	\$ 5,000		
			Stairwell Light Replace	18-4	\$ 4,000		
			Entry Walk-Off Carpet	18-4	\$ 5,000		
			Sprinkler System Extension	18-4, 18-5, 18-6	\$ 5,000		

Part II: Supporting Pages – Physical Needs Work Statements(s)

Work Statement for Year 1 FFY 2011	Work Statement for Year: 4 FFY 2014			Work Statement for Year: 5 FFY 2015		
	Development Number/Name General Description of Major Work Categories	Quantity	Estimated Cost	Development Number/Name General Description of Major Work Categories	Quantity	Estimated Cost
Sec	NY 18-103 Cont.			NY 18-103 Cont.		
Annual	STERNS APTS			STERNS APTS		
Statement	Staff Training		\$ 600	Staff Training		\$ 600
	Administration		\$ 5,200	Administration		\$ 5,200
	Audit		\$ 120	Audit		\$ 120
	Environmental Consulting Services		\$ 5,000	A & E		\$ 3,600
	Environmental Testing Services		\$ 5,000	Asbestos Abatement	Comm. Space	\$ 1,000
	FA Abatement Insurance		\$ 5,000	Lead Abatement		\$ 1,000
	Force Acct Apt Renovate	Dev. Wide	\$ 1,000	Force Acct. Machinery		\$ 1,000
	Force Acct Site Renovate	Dev. Wide	\$ 1,000	FA Tools		\$ 1,000
	Force Acct Non Dwelling Renovations	Dev. Wide	\$ 1,000			
	Repair Recondition Bricks	4 bldgs.	\$ 5,000			
	Crawl/Space Vents Replaced		\$ 5,000			
	Crawl/Space Doors Replaced		\$ 5,000			
	Crawl/Space Grates Replaced		\$ 5,000			
	Ball Valves Dom. Water Hot & Cold		\$ 2,000			
	Crawl/Space Pipes Replaced		\$ 1,700			
	Force Acct Tools		\$ 1,000			
	Force Acct. Machinery		\$ 1,000			

Capital Fund Program—Five-Year Action Plan

U.S. Department of Housing and Urban Development
 Office of Public and Indian Housing
 Expires 4/30/2001

	18-103 Cont.		18-103 Cont.	
	STERNS APARTMENTS		STERNS APARTMENTS	
	Total Sterns Apartments	\$ 59,500	**Total Sterns Apartments**	\$ 26,480
	GRAND TOTALS	\$ 907,293	***GRAND TOTALS***	\$ 907,293

NY0018 Addendum A

2010 Changes to the Admission and Continued Occupancy Policy

- Additions to the ACOP are underlined in blue
- Omissions to the ACOP are {in brackets} and are red

Board Meeting: March 2010

*In Chapter 7, Verification, changed wording to reflect new changes noted in the PIH Notice 2010-3. The changes consist of sending written third party verification at the discretion of the PHA instead of sending written third party verification for all income, assets, expenses, etc.

Board Meeting: May 2010

4-III.E. Final Eligibility Determination

PHA Policy (Addition in blue)

If the PHA determines that the family is ineligible, the PHA will send written notification of the ineligibility determination within 10 business days of the determination. The notice will specify the reasons for ineligibility, and will inform the family of its right to request an informal hearing (see Chapter 14). *The notice may also state the timeframe in which the applicant can reapply. Such as, an applicant must be determined ineligible due to criminal activity for a period of five (5) years from the date of the original arrest, as defined by HUD regulations and shown in Chapter 3. Therefore the applicant will be informed that he/she can re-apply after five years from the date of the original arrest or criminal activity. When an applicant is ineligible due to a negative landlord reference or any other reason, the applicant can re-apply in 18 months to permit corrective behavior or to remedy the situation that resulted in the rejection. The applicant must provide documentation to support the change.

Board Meeting: June 2010

*Chapter 10 of ACOP: The PHA requires pet owners to pay a non-refundable pet fee annually of \$15.00, based on the fiscal year starting July 1st. Any and all payments, for any reasons, of non-refundable pet fees not paid prior to July 1st of each year will be charged an additional \$10.00 (total fees \$25.00) for collection costs. To renew your annual pet registration, all pet owners are to be in compliance with the PHA Pet Policies as per attached. Failure to comply with the pet registration requirements will result in the PHA starting procedures for pet removal. **The PHA will not accept the non-refundable pet fee until the pet registration requirements are met.**

Other Requirements

PHA Policy

All dogs and cats must be spayed or neutered by the age of seven (7) months old. Failure to comply will result in a pet violation as described on page 10-10 in the Pet Rule Violation. Exceptions may be made upon veterinary certification that subjecting this particular pet to the procedure would be temporarily or permanently medically unsafe or unnecessary.

Pets must be licensed in accordance with state or local law. Residents must provide proof of licensing at the time of registration and annually.

Pets must have the proper inoculations; including the rabies vaccination at the time of registration and annually.

Resident must place the pet sticker, which is provided by the PHA, on the bottom, left corner of the window on the apartment storm door. Resident must place pet sticker on apartment door in senior high rise building.

*Chapter 11: PHA community service policy: An addition under the definition of an individual exempt from community service is an adult who is a full time student. A letter from the attending school must be provided from the resident to verify full time status.

Board Meeting: July 2010

*Chapter 14: Revision: The resident must submit a written request for a grievance hearing to the PHA within 10 business days of the tenant's receipt of the summary of the informal settlement.

Board Meeting: August / September 2010

*Chapter 10-II-D Pet Rules; Designated Pet/No-Pet Areas; PHA Policy: Pets are not permitted in the housing offices, maintenance shops/areas, playgrounds, community rooms, laundry rooms and office areas of the buildings. Pets are not permitted in designated no-pet areas/apartments of public housing buildings and developments. Effective October 1, 2010, the apartments 107, 108, 109, 110, 111, and 112 at Lakeview Towers are designated no pet apartments. Effective April 1, 2011, the entire first floor at Lakeview Towers will be designated a no pet area. Pets are permitted in the halls and main lobby of the high rise buildings for the purpose of going from and entering the buildings. They may not be exercised in the halls or lobbies.

*Chapter 16 Program Administration; Part VIII Designated Non-smoking Areas; PHA Policy: No smoking will be permitted (by anyone) in the apartments 107, 108, 109, 110, 111, and 112 on the first floor of the Lakeview Towers apartment building, effective October 1, 2010. Effective April 1, 2011, the entire first floor at Lakeview Towers will be designated a non-smoking area. Other designated non-smoking areas include all common areas of the apartment building as well as within 40 feet from any entrance of all PHA buildings. All future family housing apartments that are subject to major renovations will be designated smoke-free; beginning with 174 D Sharron Avenue.

Due to the utility rate change of 10% this year, please find the following proposed utility allowance revision for public housing residents effective November 1, 2010:

Bedroom Size	1	2	3	4	5
John Collins Park	\$30	\$33	\$38	\$41	
John Collins Ext	\$28	\$35	\$43	\$50	
Thomas Conway	\$35	\$45	\$59	\$67	
Leander Bouyea	\$35	\$45	\$59	\$67	\$118
Russell Barnard	\$47				

Board Meeting: October 2010

*Chapter 16, addition to the *Payment Thresholds*: Prorated rent must be paid in three monthly installments within a ninety day period of signing. *The purpose of this addition to*

the Payment Thresholds is to assist a new resident to obtain housing. When prorated admission rent (plus the required pre-paid security deposit) is determined by the occupancy department to be in excess of the resident's ability to pay, payments will be extended over 90 days. Failure to comply with this additional rental obligation will result in eviction.

Please refer to the below notes for the following changes to the ACOP

Board Meeting: February 2011

Chapter 2 Changed wording to update references

2-Part III: (INTRODUCTION PAGE)

the Final Guidance to Federal Financial Assistance Recipients Regarding Title VI Prohibition against National Origin Discrimination Affecting Limited English Proficient Persons published January 22, 2007, {HUD's Notice of Guidance to Federal Assistance Recipients Regarding Title VI Prohibition Affecting Limited English Proficient Persons, published December 19, 2003} in the *Federal Register* {"Notice of Guidance"}.

2.II.G.

- {PIH 2002-01 (HA), Accessibility Notice} Notice PIH 2006-13
- Notice PIH{ 2002-01(HA)}2006-13{Accessibility Notice (which must be posted in the public housing offices in a conspicuous place)} summarizes information about pertinent laws and implementing regulations related to non-discrimination and accessibility in federally-funded housing programs.

2-III.A.

Language for Limited English Proficiency Persons (LEP) can be a barrier to accessing important benefits or services, understanding and exercising important rights, complying with applicable responsibilities, or understanding other information provided by the public housing program. In certain circumstances, failure to ensure that LEP persons can effectively participate in or benefit from federally-assisted programs and activities may violate the prohibition under Title VI against discrimination on the basis of national origin. This part incorporates the {Notice of} Final Guidance to Federal Assistance Recipients Regarding Title VI Prohibition against National Origin Discrimination Affecting Limited English Proficient Persons, published January 22, 2007, {December 19, 2003} in the *Federal Register*.

Chapter 3 Revised to reflect new social security number disclosure & requirements

3-II.C. SOCIAL SECURITY NUMBERS [24 CFR 5.216 and 5.218, Notice PIH 2010-3]

The applicant and all members of the applicant's household must disclose the complete and accurate social security number (SSN) assigned to each household member, and the documentation necessary to verify each SSN. A detailed discussion of acceptable documentation is provided in Chapter 7.

Note: These requirements do not apply to noncitizens who do not contend eligible immigration status.

In addition, each participant who has not previously disclosed an SSN, has previously disclosed an SSN that HUD or the SSA determined was invalid, or has been issued a new SSN must submit their complete and accurate SSN and the documentation required to verify the SSN at the

time of the next interim or annual reexamination or recertification. Participants age 62 or older as of January 31, 2010, whose determination of eligibility was begun before January 31, 2010, are exempt from this requirement and remain exempt even if they move to a new assisted unit.

The PHA must deny assistance to an applicant family if they do not meet the SSN disclosure and documentation requirements contained in 24 CFR 5.216.

{The applicant and all members of the applicant's household age 6 or older must provide documentation of a valid Social Security Number (SSN) or a certification stating that no SSN has been issued. If a household member who is required to execute a certification is less than 18 years old, the certification must be executed by the individual's parent or guardian [24 CFR 5.216(j)]. Assistance cannot be provided to a family until all SSN documentation requirements are met. A detailed discussion of acceptable documentation is provided in Chapter 7.

If a new member who is at least six years of age is added to the household, the new member's SSN documentation must be submitted at the family's next interim or regular reexamination, whichever comes first. If any member of the household who is at least six years of age obtains a previously undisclosed SSN, or has been assigned a new SSN, the documentation must be submitted at the family's next regularly scheduled reexamination.

The PHA must deny admission to an applicant family if they do not meet the SSN disclosure, documentation and verification, and certification requirements contained in 24 CFR 5.216.}

Chapter 4 Added requirement and revised policy

4-I.B. APPLYING FOR ASSISTANCE

Any family that wishes to reside in public housing must apply for admission to the program [24 CFR 1.4(b)(2)(ii), 24 CFR 960.202(a)(2)(iv), and PH Occ GB, p. 68]. HUD permits the PHA to determine the format and content of its applications, as well how such applications will be made available to interested families and how applications will be accepted by the PHA. However, the PHA must include Form HUD-92006, Supplement to Application for Federally Assisted Housing, as part of the PHA's application [Notice PIH 2009-36].

4-III.D. THE APPLICATION INTERVIEW

HUD recommends that the PHA obtain the information and documentation needed to make an eligibility determination through a private interview. Being invited to attend an interview does not constitute admission to the program.

Assistance cannot be provided to the family until all SSN documentation requirements are met. However, if the PHA determines that an applicant family is otherwise eligible to participate in the program, the family may retain its place on the waiting list for a period of time determined by the PHA [Notice PIH 2010-3].

Pending disclosure and documentation of social security numbers, the PHA will allow the family to retain its place on the waiting list for thirty (30) days. If not all household members have disclosed their SSNs at the next time a unit becomes available, the PHA will offer a unit to the next eligible applicant family on the waiting list.

Chapter 6 Added paragraphs and revised policy

PHAs are required to use HUD's Enterprise Income Verification (EIV) system in its entirety as a third party source to verify employment and income information, and to reduce administrative subsidy payment errors in accordance with HUD administrative guidance [24 CFR 5.233(a)(2)].

HUD allows PHAs to use pay-stubs to project income once EIV data has been received in such cases where the family does not dispute the EIV employer data and where the PHA does not determine it is necessary to obtain additional third-party data.

PHA Policy

When EIV is obtained and the family does not dispute the EIV employer data, the PHA will use current tenant-provided documents to project annual income. When the tenant provided documents are pay stubs, the PHA will make every effort to obtain current and consecutive pay stubs dated within the last 60 days.

The PHA will obtain written and/or oral third-party verification in accordance with the verification requirements and policy in Chapter 7 in the following cases:

If EIV or other UIV data is not available,

If the family disputes the accuracy of the EIV employer data, and/or

If the PHA determines additional information is needed.

In such cases, the PHA will review and analyze current data to anticipate annual income.

In all cases, the family file will be documented with a clear record of the reason for the decision, and a clear audit trail will be left as to how the PHA annualized projected income.

When the PHA cannot readily anticipate income based upon current circumstances (e.g., in the case of seasonal employment, unstable working hours, or suspected fraud), the PHA will review and analyze historical data for patterns of employment, paid benefits, and receipt of other income and use the results of this analysis to establish annual income. Any time current circumstances are not used to project annual income, a clear rationale for the decision will be documented in the file. In all such cases the family may present information and documentation to the PHA to show why the historic pattern does not represent the family's anticipated income.

Known Changes in Income

If the PHA verifies an upcoming increase or decrease in income, annual income will be calculated by applying each income amount to the appropriate part of the 12-month period.

Example: An employer reports that a full-time employee who has been receiving \$8/hour will begin to receive \$8.25/hour in the eighth week after the effective date of the reexamination. In such a case the PHA would calculate annual income as follows: $(\$8/\text{hour} \times 40 \text{ hours} \times 7 \text{ weeks}) + (\$8.25 \times 40 \text{ hours} \times 45 \text{ weeks})$.

The family may present information that demonstrates that implementing a change before its effective date would create a hardship for the family. In such cases the PHA will calculate annual income using current circumstances and then require an interim reexamination when the change actually occurs. This requirement will be imposed even if the PHA's policy on reexaminations does not require interim reexaminations for other types of changes.

When tenant-provided third-party documents are used to anticipate annual income, they will be dated within the last 60 days of the reexamination interview date.

EIV quarterly wages will not be used to project annual income at an annual or interim reexamination.

Projecting Income

In HUD's EIV webcast of January 2008, HUD made clear that PHAs are not to use EIV quarterly wages to project annual income.

{PHA Policy

When the PHA cannot readily anticipate income based upon current circumstances (e.g., in the case of seasonal employment, unstable working hours, or suspected fraud), the PHA will review and analyze historical data for patterns of employment, paid benefits, and receipt of other income and use the results of this analysis to establish annual income. Anytime current circumstances are not used to project annual income, a clear rationale for the decision will be documented in the file. In all such cases the family may present information and documentation to the PHA to show why the historic pattern does not represent the family's anticipated income.

Known Changes in Income

If the PHA verifies an upcoming increase or decrease in income, annual income will be calculated by applying each income amount to the appropriate part of the 12-month period.

Example: An employer reports that a full-time employee who has been receiving \$6/hour will begin to receive \$6.25/hour in the eighth week after the effective date of the reexamination. In such a case the PHA would calculate annual income as follows: $(\$6/\text{hour} \times 40 \text{ hours} \times 7 \text{ weeks}) + (\$6.25 \times 40 \text{ hours} \times 45 \text{ weeks})$.

The family may present information that demonstrates that implementing a change before its effective date would create a hardship for the family. In such cases the PHA will calculate annual income using current circumstances and then require an interim reexamination when the change actually occurs. This requirement will be imposed even if the PHA's policy on reexaminations does not require interim reexaminations for other types of changes.

Up-Front Income Verification (UIV) and Income Projection [HUD 2008 EIV Webcasts]

HUD strongly recommends the use of up-front income verification (UIV) techniques. UIV is "the verification of income, before or during a family reexamination, through an independent source that systematically and uniformly maintains income information in computerized form for a large number of individuals" [VG, p. 7]. One such source is HUD's Enterprise Income Verification (EIV) system, which maintains data on three types of income: wages, unemployment benefits, and social security (SS) and supplemental security income (SSI) benefits.

HUD allows the PHA to use UIV data as third-party verification of an income source when a resident does not dispute the source. UIV data, however, is generally several months old. Therefore, except in the case of SS and SSI benefits, which are not subject to frequent or dramatic changes, HUD expects the PHA to base its income projection on documentation of current circumstances provided by the resident (such as consecutive pay stubs dated within the last 60 days) or by the income source (if the PHA determines that additional verification is necessary).}

State and Local Employment Training Programs

Treatment of Overpayment Deductions from Social Security Benefits

The PHA must make a special calculation of annual income when the Social Security Administration (SSA) overpays an individual, resulting in a withholding or deduction from his or her benefit amount until the overpayment is paid in full. The amount and duration of the withholding will vary depending on the amount of the overpayment and the percent of the benefit rate withheld. Regardless of the amount withheld or the length of the withholding period, the PHA must use the reduced benefit amount after deducting only the amount of the overpayment withholding from the gross benefit amount [Notice PIH 2010-3].

Chapter 7 Made extension revisions (additions & deletions) to policy

VERIFICATION

[24 CFR 960.259, 24 CFR 5.230, [Notice PIH 2010-19](#)]

INTRODUCTION

The PHA must verify all information that is used to establish the family's eligibility and level of assistance and is required to obtain the family's consent to collect the information. Applicants and tenants must cooperate with the verification process as a condition of receiving assistance. The PHA must not pass on the cost of verification to the family.

The PHA will follow the verification guidance provided by HUD in [{PIH Notice 2004-01 Verification Guidance \("VG"\)}](#) [Notice PIH 2010-19](#) and any subsequent guidance issued by HUD.

This chapter summarizes those requirements and provides supplementary PHA policies.

7-I.B. OVERVIEW OF VERIFICATION REQUIREMENTS

HUD's Verification Hierarchy [[{VG, p. 11-14}](#) [Notice PIH 2010-19](#)]

HUD authorizes the PHA to use [{five}](#) [six](#) methods to verify family information and specifies the

circumstances in which each method will be used. In general HUD requires the PHA to use the most reliable form of verification that is available and to document the reasons when the PHA uses a lesser form of verification.

PHA Policy

In order of priority, the forms of verification that the PHA will use are:

[Up-front Income Verification \(UIV\) using HUD's Enterprise Income Verification \(EIV\) system](#)

[Up-front Income Verification \(UIV\) using a non-HUD system](#)

[Written Third Party Verification \(may be provided by applicant or resident\)](#)

[Written Third-party Verification Form](#)

[Oral Third-party Verification](#)

[Self-Certification](#)

[{Up-front Income Verification \(UIV\) whenever available](#)

[Third-party Written Verification](#)

[Third-party Oral Verification](#)

[Review of Documents](#)

[Self-Certification}](#)

Each of the verification methods is discussed in subsequent sections below. [{Exhibit 7-1 at the](#)

end of the chapter contains an excerpt from the Verification Guidance that provides guidance with respect to how each method may be used.}

Requirements for Acceptable Documents

PHA Policy

Any documents used for verification must be the original (not photocopies) and generally must be dated within 60 {calendar} days of the date they are provided to the PHA. The documents must not be damaged, altered or in any way illegible.

{The PHA will accept documents dated up to 6 months before the effective date of the family's reexamination if the document represents the most recent scheduled report from a source. For example, if the holder of a pension annuity provides semi-annual reports, the PHA would accept the most recent report.}

When the PHA is unable to obtain {3rd} third-party verification, the PHA will document in the family file the reason that third-party verification was not available {and will place a photocopy of the original document(s) in the family file.} [24 CFR 960.259(c)(1); {VG, p.15} Notice PIH 2010-19].

7-I.C. UP-FRONT INCOME VERIFICATION (UIV)

Up-front income verification (UIV) refers to the PHA's use of the verification tools available from independent sources that maintain computerized information about earnings and benefits. UIV will be used to the extent that these systems are available to the PHA.

{PHA Policy}

The PHA will inform all applicants and residents of its use of the following UIV resources during the admission and reexamination process:

HUD's EIV system

[Insert any additional UIV sources used by the PHA]

There may be legitimate differences between the information provided by the family and UIV-generated

information. {The PHA may not take any} If the family disputes the accuracy of UIV data, no adverse action can be taken {against a family based solely on UIV data unless the family does not dispute the data. The PHA must} until the PHA has independently {verify} verified the {any} UIV {data that the family disputes, and, before taking any adverse action, it must give} information and the family has been granted the opportunity to contest {the action} any adverse findings through the PHA's informal review/hearing processes. (For more on UIV and income projection, see section 6-I.C.)

{Use of} Upfront Income Verification Using HUD's Enterprise Income Verification (EIV) System (Mandatory)

HUD's EIV system contains data showing earned income, unemployment benefits, social security benefits, and SSI benefits for resident families. HUD requires the PHA to use the EIV system in its entirety. The following policies apply to the use of HUD's EIV system.

{HUD's EIV system contains data showing earned income, unemployment benefits, and social security (SS) and supplemental security income (SSI) benefits for resident families. HUD requires the PHA to use the EIV system. The following policies apply to use of HUD's EIV system.}

{The EIV system contains two main components: income reports and income discrepancy reports.}

EIV Income Reports

The data shown on income reports is updated quarterly. Data may be between three and six months old at the time reports are generated.

PHA Policy

The PHA will obtain income reports for annual reexaminations on a monthly basis.

Reports will be generated as part of the regular reexamination process.

Income reports will be compared to family-provided information as part of the annual reexamination process. Income reports may be used in the calculation of annual income, as described in Chapter 6.I.C. Income reports may also be used to meet the regulatory requirement for third party verification, as described above. Policies for resolving discrepancies between income reports and family-provided information will be resolved as described in Chapter 6.I.C. and in this chapter.

Income reports will be used in interim reexaminations to identify any discrepancies between reported income and income shown in the EIV system, and as necessary to verify and calculate earned income, unemployment benefits, Social Security and/or SSI benefits. EIV will also be used to verify that families claiming zero income are not receiving income from any of these sources.

Income reports will be retained in resident files with the applicable annual or interim reexamination documents.

When the PHA determines through income reports and third-party verification that a family has concealed or under-reported income, corrective action will be taken pursuant to the policies in Chapter 15, Program Integrity.

{The PHA will obtain income reports for annual reexaminations on a monthly basis.

Reports will be generated as part of the regular reexamination process.

Income reports will be compared to family-provided information as part of the annual reexamination process. When the family does not dispute the EIV data, income reports may be used to meet the regulatory requirement for third-party verification.

Income reports will be used in interim reexaminations when necessary to verify employment income, unemployment benefits, and SS/SSI benefits and to verify that families claiming zero income are not receiving income from any of these sources.

Income reports will be retained in resident files with the applicable annual or interim reexamination documents.

When the PHA determines through income reports and independent third-party verification that a family has concealed or underreported income, corrective action will be taken pursuant to the policies in Chapter 15, “Program Integrity.”}

{Income} EIV Discrepancy Reports {(IDRs)}

The {income} EIV discrepancy report {(IDR)} is a tool for identifying families that may have concealed or underreported income. Data in the {IDR} discrepancy report represents income for past reporting periods and may be between 6 and 30 months old at the time {the report is} reports are generated.

Families that have not concealed or underreported income may appear on the {IDR} discrepancy report in some circumstances, such as loss of a job or addition of new family members.

Income discrepancies may be identified through use of the EIV “Income Discrepancy Report” or

by review of the discrepancy tab for the individual family.

PHA Policy

The PHA will generate the Income Discrepancy Report at least once every 6 months.

{The PHA will generate and review IDRs at least semiannually. The IDR threshold percentage will be adjusted as necessary based on the findings in the IDRs.

In reviewing IDRs, the PHA will begin with the largest discrepancies.}

When the PHA determines that a resident appearing on the {IDR} Income Discrepancy Report has not concealed or underreported income, the resident's name will be placed on a list of "false positive" reviews. To avoid multiple reviews in this situation, residents appearing on this list will be eliminated from {IDR} discrepancy processing until a subsequent interim or annual reexamination has been completed.

The PHA will review the EIV discrepancy tab during processing of annual and interim reexaminations.

When it appears that a family may have concealed or underreported income, the PHA will request independent written third-party {written} verification of the income in question.

When the PHA determines through {IDR} file review and independent third-party verification that a family has concealed or underreported income, corrective action will be taken pursuant to the policies in Chapter 15, "Program Integrity."

EIV Identity Verification

The EIV system verifies resident identities against Social Security Administration (SSA) records. These records are compared to Public and Indian Housing Information Center (PIC) data for a match on social security number, name, and date of birth.

PHAs are required to use EIV's Identity Verification Report on a monthly basis to improve the availability of income information in EIV [Notice PIH 2010-3].

When identity verification for a resident fails, a message will be displayed within the EIV system and no income information will be displayed.

PHA Policy

The PHA will identify residents whose identity verification has failed by reviewing EIV's Identity Verification Report on a monthly basis. {as part of the annual reexamination process.}

The PHA will attempt to resolve PIC/SSA discrepancies by {reviewing file Documents} obtaining appropriate documentation from the tenant. When the PHA determines that discrepancies exist as a result of PHA errors, such as spelling errors or incorrect birth dates, it will correct the errors promptly.

Upfront Income Verification Using Non-HUD Systems (Optional)

In addition to mandatory use of the EIV system, HUD encourages PHAs to utilize other upfront verification sources.

PHA Policy

The PHA will inform all applicants and residents of its use of the following UIV resources during the admission and reexamination process:

HUD's EIV system.

7-I.D. THIRD-PARTY WRITTEN AND ORAL VERIFICATION

HUD's current verification hierarchy defines two types of written third-party verification. The

more preferable form, “written third-party verification,” consists of an original document generated by a third-party source, which may be received directly from a third-party source or provided to the PHA by the family. If written third-party verification is not available, the PHA must attempt to obtain a “written third-party verification form.” This is a standardized form used to collect information from a third party.

Written Third-Party Verification [Notice PIH 2010-19]

Written third-party verification documents must be original and authentic and may be supplied by the family or received from a third-party source.

Examples of acceptable tenant-provided documents include, but are not limited to: pay stubs, payroll summary reports, employer notice or letters of hire and termination, SSA benefit verification letters, bank statements, child support payment stubs, welfare benefit letters and/or printouts, and unemployment monetary benefit notices.

The PHA is required to obtain, at minimum, two current and consecutive pay stubs for determining annual income from wages.

The PHA may reject documentation provided by the family if the document is not an original, if the document appears to be forged, or if the document is altered, mutilated, or illegible.

PHA Policy

Third-party documents provided by the family must be dated within 60 days of the PHA request date.

If the PHA determines that third-party documents provided by the family are not acceptable, the PHA will explain the reason to the family and request additional documentation.

As verification of earned income, the PHA will request pay stubs covering the 60-day period prior to the PHA’s request.

Written Third-Party Verification Form

When upfront verification is not available and the family is unable to provide written third-party documents, the PHA must request a written third-party verification form. HUD’s position is that this traditional third-party verification method presents administrative burdens and risks which may be reduced through the use of family-provided third-party documents.

A written third-party verification form is mandatory when there is an unreported source of income or a substantial difference in reported income (\$2400 annually or more) and there is no UIV or tenant-provided documentation to support the income discrepancy.

PHAs may mail, fax, or e-mail third-party written verification form requests to third-party sources.

PHA Policy

The PHA will send third-party verification forms directly to the third party.

Third-party verification forms will be sent when third-party verification documents are unavailable or are rejected by the PHA.

Oral Third-Party Verification [Notice PIH 2010-19]

For third-party oral verification, PHAs contact sources, identified by UIV techniques or by the family, by telephone or in person.

Oral third-party verification is mandatory if neither form of written third-party verification is available.

Third-party oral verification may be used when requests for written third-party verification forms have not been returned within a reasonable time—e.g., 10 business days.

PHAs should document in the file the date and time of the telephone call or visit, the name of the

person contacted, the telephone number, as well as the information confirmed.

PHA Policy

In collecting third-party oral verification, PHA staff will record in the family's file the name and title of the person contacted, the date and time of the conversation (or attempt), the telephone number used, and the facts provided.

When any source responds verbally to the initial written request for verification the PHA will accept the verbal response as oral verification but will also request that the source complete and return any verification forms that were provided.

{Reasonable Effort and Timing

Unless third-party verification is not required as described below, HUD requires the PHA to make at least two unsuccessful attempts to obtain third-party verification before using another form of verification [VG, p. 15].

PHA Policy

The PHA will diligently seek third-party verification using a combination of written and oral requests to verification sources. Information received orally from third parties may be used either to clarify information provided in writing by the third party or as independent verification when written third-party verification is not received in a timely fashion.

The PHA may mail, fax, e-mail, or hand-deliver third-party written verification requests and will accept third-party responses using any of these methods. The PHA will send a written request for verification to each required source within 5 business days of securing a family's authorization for the release of the information and give the source 10 business days to respond in writing. If a response has not been received by the 11th business day, the PHA will request third-party oral verification.

The PHA will make a minimum of two attempts, one of which may be oral, to obtain third-party verification. A record of each attempt to contact the third-party source (including no-answer calls) and all contacts with the source will be documented in the file. Regarding third-party oral verification, PHA staff will record in the family's file the name and title of the person contacted, the date and time of the conversation (or attempt), the telephone number used, and the facts provided.

When any source responds orally to the initial written request for verification, the PHA will accept the oral response as oral verification but will also request that the source complete and return any verification forms that were provided.

If a third party agrees to confirm in writing the information provided orally, the PHA will wait no more than 5 business days for the information to be provided. If the information is not provided by the 6th business day, the PHA will use any information provided orally in combination with reviewing family-provided documents (see below).

When Third-Party Information is Late

When third-party verification has been requested and the timeframes for submission have been exceeded, the PHA will use the information from documents on a provisional basis. If the PHA later receives third-party verification that differs from the amounts used in income and rent determinations and it is past the deadline for processing the reexamination, the PHA will conduct an interim reexamination to adjust the figures used for the reexamination, regardless of the PHA's interim reexamination policy. }

When Third-Party Verification is Not Required [Notice PIH 2010-19]

Third-party verification may not be available in all situations. HUD has acknowledged that it may not be cost-effective or reasonable to obtain third-party verification of income, assets, or expenses when these items would have a minimal impact on the family's total tenant payment.
PHA Policy

If the family cannot provide original documents, the PHA will pay the service charge required to obtain third-party verification, unless it is not cost effective in which case a self-certification will be acceptable as the only means of verification. The cost of verification will not be passed on to the family.

The cost of postage and envelopes to obtain third-party verification of income, assets, and expenses is not an unreasonable cost [VG, p. 18].

Primary Documents

Third-party verification is not required when legal documents are the primary source, such as a birth certificate or other legal documentation of birth.

{Certain} Imputed Assets {and Expenses}

The PHA may accept a self-certification from the family as verification of assets disposed of for less than fair market value [HCV GB, p. 5-28].

PHA Policy

The PHA will accept a self-certification from a family as verification of assets disposed of for less than fair market value [HCV GB, p. 5-28].

{The PHA will use review of documents in lieu of requesting third-party verification when the market value of an individual asset or an expense is less than \$500 annually and the family has original documents that support the declared amount.

Certain Income, Asset and Expense Sources

The PHA will determine that third-party verification is not available when it is known that an income source does not have the ability to provide written or oral third-party verification [VG, p. 15]. For example, the PHA will rely upon review of documents when the PHA determines that a third party's privacy rules prohibit the source from disclosing information.

PHA Policy

The PHA will determine that third-party verification is not available when there is a service charge for verifying an asset or expense *and* the family has original documents that provide the necessary information.

If the family cannot provide original documents, the PHA will pay the service charge required to obtain third-party verification, unless it is not cost effective in which case a self-certification will be acceptable as the only means of verification. The cost of verification will not be passed on to the family.

The cost of postage and envelopes to obtain third-party verification of income, assets, and expenses is not an unreasonable cost [VG, p. 18].

The PHA will document, in the family file, the reason that the third-party verification was not available and will place a photocopy of the original document(s) in the family file.

[VG, p. 15]

7-I.E. REVIEW OF DOCUMENTS

Using Review of Documents as Verification

PHA Policy

If the PHA has determined that third-party verification is not available or not required,

the PHA will use documents provided by the family as verification. The PHA may also review documents when necessary to help clarify information provided by third parties. In such cases the PHA will document in the file how the PHA arrived at a final conclusion about the income or expense to include in its calculations. }

7-I.{F}E. SELF-CERTIFICATION

Self-certification, or “tenant declaration,” is used as a last resort when the PHA is unable to obtain third-party verification.

When the PHA relies on a tenant declaration for verification of income, assets, or expenses, the family’s file must be documented to explain why third-party verification was not available.

7-II.B. SOCIAL SECURITY NUMBERS [24 CFR 5.216 and Notice PIH 2010-3]

The family must provide documentation of a valid social security number (SSN) for each member of the household, with the exception of individuals who do not contend eligible immigration status. Exemptions also include, existing residents who were at least 62 years of age as of January 31, 2010, and had not previously disclosed an SSN.

The PHA must accept the following documentation as acceptable evidence of the social security number:

An original SSN card issued by the Social Security Administration (SSA)

An original SSA-issued document, which contains the name and SSN of the individual

An original document issued by a federal, state, or local government agency, which contains the name and SSN of the individual, along with other identifying information of the individual

Such other evidence of the SSN as HUD may prescribe in administrative instructions

The PHA may only reject documentation of an SSN provided by an applicant or resident if the document is not an original document, if the original document has been altered, mutilated, or is not legible, or if the document appears to be forged.

PHA Policy

The PHA will explain to the applicant or resident the reasons the document is not acceptable and request that the individual obtain and submit acceptable documentation of the SSN to the PHA within 90 days.

When the resident requests to add a new household member who is at least 6 years of age, or who is under the age of 6 and has an SSN, the resident must provide the complete and accurate SSN assigned to each new member at the time of reexamination or recertification, in addition to the documentation required to verify it. The PHA may not add the new household member until such documentation is provided.

When a resident requests to add a new household member who is under the age of 6 and has not been assigned an SSN, the resident must provide the SSN assigned to each new child and the required documentation within 90 calendar days of the child being added to the household. A 90-day extension will be granted if the PHA determines that the resident’s failure to comply was due to unforeseen circumstances and was outside of the resident’s control. During the period the PHA is awaiting documentation of the SSN, the child will be counted as part of the assisted household.

PHA Policy

The PHA will grant one additional 90-day extension if needed for reasons beyond the resident’s control such as delayed processing of the SSN application by the SSA, natural disaster, fire, death in the family, or other emergency.

Social security numbers must be verified only once during continuously-assisted occupancy.

PHA Policy

The PHA will verify each disclosed SSN by:

Obtaining documentation from applicants and residents that is acceptable as evidence of social security numbers

Making a copy of the original documentation submitted, returning it to the individual, and retaining a copy in the file folder

Once the individual's verification status is classified as "verified," the PHA should remove and destroy copies of documentation accepted as evidence of social security numbers by no later than the next reexamination.

PHA Policy

Once an individual's status is classified as "verified" in HUD's EIV system, the PHA may remove and destroy copies of documentation accepted as evidence of social security numbers by no later than the next reexamination.

{HCV, p. 5-12}

For every family member age 6 or older, the family must provide documentation of a valid social security number (SSN), or a self-certification stating that no SSN has been issued. The selfcertification

must be executed personally by any family member 18 or older, or by a parent or guardian for a minor.

PHA Policy

The PHA will also accept the following documents as evidence if the SSN is provided on the document:

Driver's license

Other identification card issued by a federal, state, or local agency, a medical insurance company or provider, or employer or trade union

Payroll stubs

Benefit award letters from government agencies; retirement benefit letters; life insurance policies

Court records (real estate, tax notices, marriage and divorce, judgment or bankruptcy records)

If the family reports an SSN but cannot provide acceptable documentation of the number, the PHA will require a self-certification stating that documentation of the SSN cannot be provided at this time. The PHA will require documentation of the SSN within 60 calendar days from the date of the family member's self-certification mentioned above. If the family is an applicant, assistance cannot be provided until proper documentation of the SSN is provided.

PHA Policy

The PHA will instruct the family to obtain a duplicate card from the local Social Security Administration (SSA) office.

For individuals who are at least 62 years of age and are unable to submit the required documentation of their SSN within the initial 60-day period, the PHA will grant an additional 60 calendar days to provide documentation.

Social security numbers must be verified only once during continuously-assisted occupancy.

If any family member obtains an SSN after admission to the program, the new SSN must be disclosed at the next regularly scheduled reexamination. In addition, if a child reaches the age of 6 and has no SSN, the parent or guardian must execute a self-certification stating that the child

has no SSN at the next regularly scheduled reexamination.

The social security numbers of household members, such as live-in aids, must be verified for the purpose of conducting criminal background checks.}

Eligible Immigrants

Documents Required

All family members claiming eligible immigration status must declare their status in the same manner as U.S. citizens and nationals.

The documentation required for eligible noncitizens varies depending upon factors such as the date the person entered the U.S., the conditions under which eligible immigration status has been granted, age, and the date on which the family began receiving HUD-funded assistance. Exhibit 7-~~2~~ 1 at the end of this chapter summarizes documents family members must provide.

7-III.C. PERIODIC PAYMENTS AND PAYMENTS IN LIEU OF EARNINGS

Social Security/SSI Benefits

PHA Policy

To verify the SS/SSI benefits of applicants, the PHA will request a current (dated within the last 60 days) SSA benefit verification letter from each family member who receives social security benefits. If a family member is unable to provide the document, the PHA will help the applicant request a benefit verification letter from SSA's Web site at www.socialsecurity.gov or ask the family to request one by calling SSA at 1-800-772-1213. Once the family has received the original benefit verification letter, it will be required to provide the letter to the PHA.

To verify the SS/SSI benefits of residents, the PHA will obtain information about social security/SSI benefits through HUD's EIV system, and confirm with the resident(s) that the current listed benefit amount is correct. If the resident disputes the EIV-reported benefit amount, or if benefit information is not available in HUD systems, the PHA will request a current SSA benefit verification letter from each family member that receives social security benefits. {If benefit information is not available in the EIV system, the PHA will request a current (dated within the last 60 days) SSA benefit verification letter from each family member who receives social security benefits.} If a family member is unable to provide the document, the PHA will help the {applicant} resident request a benefit verification letter from SSA's Web site at www.socialsecurity.gov or ask the family to request one by calling SSA at 1-800-772-1213. Once the family has received the benefit verification letter, it will be required to provide the letter to the PHA.

7-III.D. ALIMONY OR CHILD SUPPORT

PHA Policy

The way the PHA will seek verification for alimony and child support differs depending on whether the family declares that it receives regular payments.

If the family declares that it *receives regular payments*, verification will be sought in the following order.

Copy of the receipts and/or payment stubs for the 60 days prior to PHA request

Third-party verification form from the state or local child support enforcement agency

{If payments are made through a state or local entity, the PHA will request a record of payments for the past 12 months and request that the entity

disclose any known information about the likelihood of future payments.}
Third-party verification form from the person paying the support
{Copy of a separation or settlement agreement or a divorce decree stating
amount and type of support and payment schedules
Copy of the latest check and/or payment stubs}

Example 1: An elderly {participant}resident reported a \$10,000 certificate of deposit at the last annual reexamination and the PHA verified this amount. Now the person reports that she has given this \$10,000 to her son. The PHA has a reasonable estimate of the value of the asset; therefore, reverification of the value of the asset is not necessary.

7-III.G. RETIREMENT ACCOUNTS

PHA Policy

The PHA will accept written third-party documents supplied by the family as evidence of the status of retirement accounts.

{When third-party verification is not available the}The type of original document that will be accepted depends upon the family member's retirement status.

7-III.H. INCOME FROM EXCLUDED SOURCES

A detailed discussion of excluded income is provided in Chapter 6, Part I.

The PHA must obtain verification for income exclusions only if, without verification, the PHA would not be able to determine whether the income is to be excluded. For example: If a family's 16 year old has a job at a fast food restaurant, the PHA will confirm that PHA records verify the child's age but will not {send a verification request to the restaurant}require third-party verification of the amount earned. However, if a family claims the earned income disallowance for a source of income, both the source and the income must be verified.

7-IV.B. MEDICAL EXPENSE DEDUCTION

Policies related to medical expenses are found in 6-II.D. The amount of the deduction will be verified following the standard verification procedures described in Part I.

Amount of Expense

PHA Policy

{The PHA will provide a third-party verification form directly to the medical provider requesting the needed information.}

Medical expenses will be verified through:

Written third-party documents provided by the family, such as pharmacy printouts or receipts.

The {Third-party verification form signed by the provider, when possible
If third-party is not possible, copies of cancelled checks used to make medical expense payments and/or printouts or receipts from the source will be used. In this case the} PHA will make a best effort to determine what expenses from the past are likely to continue to occur in the future. The PHA will also accept evidence of monthly payments or total payments that will be due for medical expenses during the upcoming 12 months.

Written third-party verification forms, if the family is unable to provide acceptable documentation.

7-IV.C. DISABILITY ASSISTANCE EXPENSES

Policies related to disability assistance expenses are found in 6-II.E. The amount of the deduction will be verified following the standard verification procedures described in Part I.

Amount of Expense

Attendant Care

PHA Policy

The PHA will accept written third-party documents provided by the family.

If family-provided documents are not available, the {The} PHA will provide a third-party verification form directly to the care provider requesting the needed information.

Expenses for attendant care will be verified through:

Written third-party documents provided by the family, such as receipts or cancelled checks.

Third-party verification form signed by the provider, if family-provided documents are not available.

{Third-party verification form signed by the provider, when possible

If third-party is not possible, copies of cancelled checks used to make attendant care payments and/or receipts from care source}

If third-party {or document review} verification is not possible, written family certification as to costs anticipated to be incurred for the upcoming 12 months.

Auxiliary Apparatus

PHA Policy

Expenses for auxiliary apparatus will be verified through:

Written third-party documents provided by the family, such as billing statements for purchase of auxiliary apparatus, or other evidence of monthly payments or total payments that will be due for the apparatus during the upcoming 12 months.

Third-party verification form signed by the provider, if family-provided documents are not available.

{Third-party verification of anticipated purchase costs of auxiliary apparatus

If third-party is not possible, billing statements for purchase of auxiliary apparatus, or other evidence of monthly payments or total payments that will be due for the apparatus during the upcoming 12 months}

Family Member(s) Permitted to Work

The PHA must verify that the expenses claimed actually enable a family member, or members, (including the person with disabilities) to work.

PHA Policy

The PHA will {seek} request third-party verification from a {Rehabilitation} rehabilitation {Agency} agency or knowledgeable medical professional indicating that the person with disabilities requires attendant care or an auxiliary apparatus to be employed, or that the attendant care or auxiliary apparatus enables another family member, or members, to work (See 6-II.E.). This documentation may be provided by the family.

If third-party {and document review} verification has been attempted and is either unavailable or proves unsuccessful, the family must certify that the disability assistance expense frees a family member, or members (possibly including the family member receiving the assistance), to work.

Unreimbursed Expenses

To be eligible for the disability expenses deduction, the costs must not be reimbursed by another source.

PHA Policy

{An attendant care provider will be asked to certify that, to the best of the provider's knowledge, the expenses are not paid by or reimbursed to the family from any source.}

Unreimbursed Expense

To be eligible for the child care deduction, the costs must not be reimbursed by another source.

PHA Policy

{The child care provider will be asked to certify that, to the best of the provider's knowledge, the child care expenses are not paid by or reimbursed to the family from any source.}

The family will be required to certify that the child care expenses are not paid by or reimbursed to the family from any source.

Seeking Work

Whenever possible the PHA will use documentation from a state or local agency that monitors work-related requirements (e.g., welfare or unemployment). In such cases the PHA will request family-provided verification from the agency of the member's job seeking efforts to date and require the family to submit to the PHA any reports provided to the other agency.

In the event third-party verification is not available, the PHA will provide the family with a form on which the family member must record job search efforts. The PHA will review this information at each subsequent reexamination for which this deduction is claimed.

Furthering Education

The PHA will {ask that the academic or vocational educational institution} request thirdparty documentation to verify that the person permitted to further his or her education by the child care is enrolled and provide information about the timing of classes for which the person is registered. The documentation may be provided by the family.

Gainful Employment

The PHA will seek third-party verification {from the employer} of the work schedule of the person who is permitted to work by the child care. In cases in which two or more family members could be permitted to work, the work schedules for all relevant family members may be verified. The documentation may be provided by the family.

Exhibit 7-1: Excerpt from HUD Verification Guidance Notice (PIH 2004-01, pp. 11-14)

Upfront (U-IV)	Highest (Highly Recommended, highest level of third party verification)
Written 3 rd Party	High (Mandatory if upfront income verification is not available or if UIV data differs substantially from tenant-reported information)
Oral 3 rd Party	Medium (Mandatory if written third party verification is not available)
Document Review	Medium-Low (Use on provisional basis)
Tenant Declaration	Low (Use as a last resort)

Income Type	Upfront	Written Third Party	Oral Third Party	Document Review	Tenant Declaration
	(LEVEL 5)	(LEVEL 4)	(LEVEL 3)	(LEVEL 2)	(LEVEL 1)
Wages/Salaries	Use of computer matching agreements with a State Wage Information Collection Agency (SWICA) to obtain wage information electronically, by mail or fax or in person.	The PHA mails, faxes, or e-mails a verification form directly to the independent sources to obtain wage information.	In the event the independent source does not respond to the PHA's written request for information, the PHA may contact the independent source by phone or make an in person visit to obtain the requested information.	When neither form of third party verification can be obtained, the PHA may accept original documents such as consecutive pay stubs (HUD recommends the PHA review at least three months of pay stubs, if employed by the same employer for three months or more), W-2 forms, etc. from the tenant. Note: The PHA must document in the tenant file, the reason third party verification was not available.	The PHA may accept a notarized statement or affidavit from the tenant that declares the family's total annual income from earnings. Note: The PHA must document in the tenant file, the reason third party verification was not available.
	Agreements with private vendor agencies, such as The Work Number or ChoicePoint to obtain wage and salary information.	The PHA may have the tenant sign a Request for Earnings Statement from the SSA to confirm past earnings. The PHA mails the form to SSA and the statement will be sent to the address the PHA specifies on the form.			
	Use of HUD systems, when available.				
<p>Verification of Employment Income: The PHA should always obtain as much information as possible about the employment, such as start date (new employment), termination date (previous employment), pay frequency, pay rate, anticipated pay increases in the next twelve months, year-to-date earnings, bonuses, overtime, company name, address and telephone number, name and position of the person completing the employment verification form.</p> <p>Effective Date of Employment: The PHA should always confirm start and termination dates of employment.</p>					

Income Type	Upfront (LEVEL 5)	Written Third Party (LEVEL 4)	Oral Third Party (LEVEL 3)	Document Review (LEVEL 2)	Tenant Declaration (LEVEL 1)
Self-Employment	Not Available	The PHA mails or faxes a verification form directly to sources identified by the family to obtain income information.	The PHA may call the source to obtain income information.	The PHA may accept any documents (i.e. tax returns, invoices and letters from customers) provided by the tenant to verify self-employment income. Note: The PHA must document in the tenant file, the reason third party verification was not obtained.	The PHA may accept a notarized statement or affidavit from the tenant that declares the family's total annual income from self-employment. Note: The PHA must document in the tenant file, the reason third party verification was not available.
Verification of Self-Employment Income: Typically, it is a challenge for PHAs to obtain third party verification of self-employment income. When third party verification is not available, the PHA should always request a notarized tenant declaration that includes a perjury statement.					
Social Security Benefits	Use of HUD Tenant Assessment System (TASS) to obtain current benefit history and discrepancy reports.	The PHA mails or faxes a verification form directly to the local SSA office to obtain social security benefit information. (Not Available in some areas because SSA makes this data available through TASS. SSA encourages PHAs to use TASS.)	The PHA may call SSA, with the tenant on the line, to obtain current benefit amount. (Not Available in some areas because SSA makes this data available through TASS. SSA encourages PHAs to use TASS.)	The PHA may accept an original SSA Notice from the tenant. Note: The PHA must document in the tenant file, the reason third party verification was not available.	The PHA may accept a notarized statement or affidavit from the tenant that declares monthly social security benefits. Note: The PHA must document in the tenant file, the reason third party verification was not available.
Welfare Benefits	Use of computer matching agreements with the local Social Services Agency to obtain current benefit amount electronically, by mail or fax or in person.	The PHA mails, faxes, or e-mails a verification form directly to the local Social Services Agency to obtain welfare benefit information.	The PHA may call the local Social Services Agency to obtain current benefit amount.	The PHA may review an original award notice or printout from the local Social Services Agency provided by the tenant. Note: The PHA must document in the tenant file, the reason third party verification was not available.	The PHA may accept a notarized statement or affidavit from the tenant that declares monthly welfare benefits. Note: The PHA must document in the tenant file, the reason third party verification was not available.

Income Type	Upfront	Written Third Party	Oral Third Party	Document Review	Tenant Declaration
	(LEVEL 5)	(LEVEL 4)	(LEVEL 3)	(LEVEL 2)	(LEVEL 1)
Child Support	Use of agreement with the local Child Support Enforcement Agency to obtain current child support amount and payment status electronically, by mail or fax or in person.	The PHA mails, faxes, or e-mails a verification form directly to the local Child Support Enforcement Agency or child support payer to obtain current child support amount and payment status.	The PHA may call the local Child Support Enforcement Agency or child support payer to obtain current child support amount and payment status.	The PHA may review an original court order, notice or printout from the local Child Support Enforcement Agency provided by the tenant to verify current child support amount and payment status. Note: The PHA must document in the tenant file, the reason third party verification was not available.	The PHA may accept a notarized statement or affidavit from the tenant that declares current child support amount and payment status. Note: The PHA must document in the tenant file, the reason third party verification was not available.
Unemployment Benefits	Use of computer matching agreements with a State Wage Information Collection Agency to obtain unemployment compensation electronically, by mail or fax or in person. Use of HUD systems, when available.	The PHA mails, faxes, or e-mails a verification form directly to the State Wage Information Collection Agency to obtain unemployment compensation information.	The PHA may call the State Wage Information Collection Agency to obtain current benefit amount.	The PHA may review an original benefit notice or unemployment check stub, or printout from the local State Wage Information Collection Agency provided by the tenant. Note: The PHA must document in the tenant file, the reason third party verification was not available.	The PHA may accept a notarized statement or affidavit from the tenant that declares unemployment benefits. Note: The PHA must document in the tenant file, the reason third party verification was not available.
Pensions	Use of computer matching agreements with a Federal, State, or Local Government Agency to obtain pension information electronically, by mail or fax or in person.	The PHA mails, faxes, or e-mails a verification form directly to the pension provider to obtain pension information.	The PHA may call the pension provider to obtain current benefit amount.	The PHA may review an original benefit notice from the pension provider provided by the tenant. Note: The PHA must document in the tenant file, the reason third party verification was not available.	The PHA may accept a notarized statement or affidavit from the tenant that declares monthly pension amounts. Note: The PHA must document in the tenant file, the reason third party verification was not available.

Income Type	Upfront	Written Third Party	Oral Third Party	Document Review	Tenant Declaration
	(LEVEL 5)	(LEVEL 4)	(LEVEL 3)	(LEVEL 2)	(LEVEL 1)
Assets	Use of cooperative agreements with sources to obtain asset and asset income information electronically, by mail or fax or in person.	The PHA mails, faxes, or emails a verification form directly to the source to obtain asset and asset income information.	The PHA may call the source to obtain asset and asset income information.	The PHA may review original documents provided by the tenant. Note: The PHA must document in the tenant file, the reason third party verification was not available.	The PHA may accept a notarized statement or affidavit from the tenant that declares assets and asset income. Note: The PHA must document in the tenant file, the reason third party verification was not available.
Comments	Whenever HUD makes available wage, unemployment, and SSA information, the PHA should use the information as part of the reexamination process. Failure to do so may result in disallowed costs during a RIM review.	Note: The independent source completes the form and returns the form directly to the PHA. Agency. The tenant should not hand carry documents to or from the independent source.	The PHA should document in the tenant file, the date and time of the telephone call or in person visit, along with the name and title of the person that verified the current income amount.		The PHA should use this verification method as a last resort, when all other verification methods are not possible or have been unsuccessful. Notarized statement should include a perjury penalty statement.
Note: The PHA must not pass verification costs along to the participant.					
Note: In cases where the PHA cannot reliably project annual income, the PHA may elect to complete regular interim reexaminations (this policy should be apart of the PHA's written policies.)					

Exhibit 7-21: Summary of Documentation Requirements for Noncitizens [HCV GB, pp. 5-9 and 5-10)

Chapter 8 Revised policy to add pamphlets to orientation packet

8-I.B. LEASE ORIENTATION

PHA Policy

After unit acceptance but prior to occupancy, a PHA representative will provide a lease orientation to the family. The head of household or spouse is required to attend.

Orientation Agenda

PHA Policy

When families attend the lease orientation, they will be provided with:

A copy of the lease

A copy of the PHA's grievance procedure

A copy of the house rules

A copy of the PHA's schedule of maintenance charges

A copy of the pamphlet *Protect Your Family From Lead in Your Home*

A copy of "Is Fraud Worth It?" (form HUD-1141-OIG), which explains the types of actions a family must avoid and the penalties for program abuse

A copy of "What You Should Know about EIV," a guide to the Enterprise Income Verification (EIV) system published by HUD as an attachment to Notice PIH 2010-19

{A copy of Things You Should Know (HUD-1140-OIG)}

Chapter 9 Added language and minor editorial changes

Notification of and Participation in the Annual Reexamination Process

The PHA is required to obtain information needed to conduct annual reexaminations. How that information will be collected is left to the discretion of the PHA. However, PHAs should give tenants who were not provided the opportunity the option to complete Form HUD-92006 at this time [Notice PIH 2009-36].

The PHA's obligation to make reasonable accommodation for **{handicapped}** persons with disabilities.

PHA Policy

The PHA will not approve the addition of a new family or household member unless the individual meets the PHA's eligibility criteria (see Chapter 3) and documentation requirements (See Chapter 7, Part II).

If the PHA determines that an individual does not meet the PHA's eligibility criteria **{as defined in Chapter 3}** or documentation requirements, the PHA will notify the family in writing of its decision to deny approval of the new family or household member and the reasons for the denial.

Chapter 11 Editorial and policy changes and additions

INTRODUCTION

This chapter explains HUD regulations requiring PHAs to implement a community service program for all **{non-exempt}** nonexempt adults living in public housing.

11-I.A. OVERVIEW

HUD regulations pertaining to the community service requirement are contained in 24 CFR 960 Subpart F (960.600 through 960.609). PHAs and residents must comply with the community

service requirement, effective with PHA fiscal years that commenced on or after October 1, 2000. Per 903.7(l)(1)(iii), the PHA Plan must contain a statement of {the} how the PHA will comply with the community service requirement, including any cooperative agreement that the PHA has entered into or plans to enter into.

Definitions

Exempt Individual [24 CFR 960.601(b), Notice PIH 2009-48]

Is able to meet {Meets the} requirements {for being exempted from having to engage in a work Activity} under {the} a state program funded under part A of title IV of the Social Security Act, or under any other welfare program of the state in which the PHA is located, including a state-administered welfare-to-work program; or

- Is {in} a member of a family receiving assistance, benefits, or services under a state program funded under part A of title IV of the Social Security Act, or under any other welfare program of the state in which the PHA is located, including a state-administered welfare-to-work program, and has not been found by the state or other administering entity to be in noncompliance with such program.

Community Service [24 CFR 960.601(b), {PH Occ GB, p. 174} Notice PIH 2009-48]

Community service is the performance of voluntary work or duties that are a public benefit, and that serve to improve the quality of life, enhance resident self-sufficiency, or increase resident self responsibility in the community. Community service is not employment and may not include political activities.

{volunteer} Eligible community service activities include, but are {work which includes, but is} not

limited to, work at:

- Work at a local} Local public or nonprofit institutions {including but not limited to:} such as schools, head start programs, before or after school programs, child care centers, hospitals, clinics, hospices, nursing homes, recreation centers, senior centers, adult day care programs{center}, homeless shelters, {indigent} feeding programs, cooperative food banks (distributing either donated or commodity foods), or clothes closets, etc. (distributing donated clothing)

- Work with a n} Nonprofit organizations {that serves} serving PHA residents or their children such as: Boy {Scouts,} or Girl Scouts, Boys or Girls Club{s}, 4-H {programs} clubs, Police Assistance League (PAL), organized children's recreation, mentoring or education programs, Big Brothers or Big Sisters, {Garden} garden {Center} centers, community clean-up programs, beautification programs, other youth or senior organizations

- Programs funded under the Older Americans Act, such as Green Thumb, Service Corps of Retired Executives, senior meals programs, senior centers, Meals on Wheels {

- Work at the PHA to help improve physical conditions

- Work at the PHA to help with children's programs

- Work at the PHA to help with senior programs

- Helping neighborhood groups with special projects

- Working through a resident organization to help other residents with problems, serving as an officer in a resident organization, serving on the resident advisory board

- Caring for the children of other residents so they may volunteer} Public or nonprofit organizations dedicated to seniors, youth, children, residents, citizens, special-needs

populations or with missions to enhance the environment, historic resources, cultural identities, neighborhoods, or performing arts

- PHA housing to improve grounds or provide gardens (so long as such work does not alter the PHA's insurance coverage); or work through resident organizations to help other residents with problems, including serving on the Resident Advisory Board
- Care for the children of other residents so parent may volunteer

{NOTE: Political activity is excluded for purposes of eligible community service activities.}

PHAs may form their own policy in regards to accepting community services at profit-motivated entities, acceptance of volunteer work performed at homes or offices of general private citizens, and court-ordered or probation-based work.

PHA Policy

The PHA will accept community services at profit-motivated entities, volunteer work performed at homes or offices of general private citizens, and court-ordered or probation based work as eligible community service activities.

Economic Self-Sufficiency Program [24 CFR 5.603(b), Notice PIH 2009-48]

For purposes of satisfying the community service requirement, an *economic self-sufficiency program* is defined by HUD as: **{Any} any** program designed to encourage, assist, train, or facilitate economic independence of assisted families or to provide work for such families.

{These economic self-sufficiency programs can include} Eligible self-sufficiency activities include, but are not limited to:

- Job readiness or job training
- Training programs through local one-stop career centers, workforce investment boards (local entities administered through the U.S. Department of Labor), or other training providers
- Employment counseling, work placement, or basic skills training
- Education, including higher education (junior college or college), GED classes, or reading, financial, or computer literacy classes
- Apprenticeships (formal or informal)
- English proficiency or English as a second language classes
- Budgeting and credit counseling
- Any activity required by the Department of Public Assistance under Temporary Assistance for Needy Families (TANF)
- Any other program necessary to ready a participant to work (such as substance abuse or mental health counseling)

{job training, employment counseling, work placement, basic skills training, education, English proficiency, workfare, financial or household management, apprenticeships (formal or informal), or any other program necessary to ready a participant to work (such as substance abuse or mental health treatment).}

Notification Requirements [24 CFR 960.605(c)(2), Notice PIH 2009-48]

The PHA must give each family a written description of the community service requirement, the process for claiming status as an exempt person, and the process for PHA verification of exempt status. The PHA must also notify the family of its determination identifying the family members who are subject to the service requirement, and the family members who are exempt. In addition, the family must sign a certification, Attachment A of Notice PIH 2009-48, that they have received and read the policy and understand that if they are not exempt, failure to comply with the requirement will result in nonrenewal of their lease.

PHA Policy

The PHA will provide the family with a copy of the Community Service Policy found in Exhibit 11-1 of this chapter, at lease-up, lease renewal, when a family member is determined to be subject to the community service requirement during the lease term, and at any time upon the family's request.

On an annual basis, at the time of lease renewal, the PHA will notify the family in writing of the family members who are subject to the community service requirement and the family members who are exempt. If the family includes {non-exempt} nonexempt individuals the notice will include a list of agencies in the community that provide volunteer and/or training opportunities, as well as a documentation form on which they may record the activities they perform and the number of hours contributed.

Determination of Compliance

The PHA must review resident family compliance with service requirements annually at least {thirty} 30 days before the end of the twelve month lease term [24 CFR 960.605(c)(3)].

Change in Status {Between} between Annual Determinations

PHA Policy

Exempt to None{-E} xempt Status

If an exempt individual becomes {non-exempt} nonexempt during the twelve month lease term, it is the family's responsibility to report this change to the PHA within 10 business days.

None{-E} xempt to Exempt Status

If a {non-exempt} nonexempt person becomes exempt during the twelve month lease term, it is the family's responsibility to report this change to the PHA within 10 business days.

Documentation and Verification of Compliance

At each regularly scheduled reexamination, each nonexempt family member presents a signed standardized certification form developed by the PHA of community service and self-sufficiency activities performed over the last 12 months [Notice PIH 2009-48].

In addition, all other members of the family who are subject to the service requirement must be currently complying with the service requirement or must no longer be residing in the unit [24 CFR 960.607(c), Notice PIH 2009-48].

Enforcement Documentation [Notice PIH 2009-48]

PHAs are required to initiate due process (see 24 CFR 966.53(c)) against households failing to comply with lease requirements including the community service and self-sufficiency requirement.

When initiating due process, the PHA must take the following procedural safeguards:

- Adequate notice to the tenant of the grounds for terminating the tenancy and for eviction
- Right of the tenant to be represented by counsel
- Opportunity for the tenant to refute the evidence presented by the PHA, including the right to confront and cross-examine witnesses and present any affirmative legal or equitable defense which the tenant may have

□ A decision on merits

If the PHA has a ROSS program, a ROSS Service Coordinator, or an FSS program, the PHA will coordinate individual training and service plans (ITSPs) with the community service requirement. Regular meetings with PHA coordinators will satisfy community service activities and PHA coordinators will verify community service hours within individual monthly logs.

EXHIBIT 11-1: COMMUNITY SERVICE AND SELF-SUFFICIENCY POLICY

A. Background

The Quality Housing and Work Responsibility Act of 1998 requires that all {nonexempt} nonexempt

(see definitions) public housing adult residents (18 or older) contribute eight (8) hours per month of community service (volunteer work) or participate in eight (8) hours of training, counseling, classes or other activities that help an individual toward self-sufficiency and economic independence. This is a requirement of the public housing lease.

B. Definitions

Community Service – {volunteer work which includes, but is not limited to:} community service activities include, but are not limited to, work at:

- Local public or nonprofit institutions such as schools, head start programs, before or after school programs, child care centers, hospitals, clinics, hospices, nursing homes, recreation centers, senior centers, adult day care programs, homeless shelters, feeding programs, food banks (distributing either donated or commodity foods), or clothes closets (distributing donated clothing)
- Nonprofit organizations serving PHA residents or their children such as: Boy or Girl Scouts, Boys or Girls Club, 4-H clubs, Police Assistance League (PAL), organized children's recreation, mentoring or education programs, Big Brothers or Big Sisters, garden centers, community clean-up programs, beautification programs
- Programs funded under the Older Americans Act, such as Green Thumb, Service Corps of Retired Executives, senior meals programs, senior centers, Meals on Wheels
- Public or nonprofit organizations dedicated to seniors, youth, children, residents, citizens, special-needs populations or with missions to enhance the environment, historic resources, cultural identities, neighborhoods, or performing arts
- PHA housing to improve grounds or provide gardens (so long as such work does not alter the PHA's insurance coverage); or work through resident organizations to help other residents with problems, including serving on the Resident Advisory Board
- Care for the children of other residents so parent may volunteer {
- Work at a local institution, including but not limited to: school, child care center, hospital, hospice, recreation center, senior center, adult day care center, homeless shelter, indigent feeding program, cooperative food bank, etc.
- Work with a nonprofit organization such as: Parks and Recreation, United Way, Red Cross, Volunteers of America, Boy Scouts, Girl Scouts, Boys or Girls Clubs, 4-H Program, PAL, Garden Center, community clean-up programs, beautification programs, other counseling, aid, youth or senior organizations
- Work at the housing authority to help with litter control
- Work at the housing authority to help with children's programs
- Work at the housing authority to help with senior programs

- Helping neighborhood groups with special projects
- Working through a resident organization to help other residents with problems
- Serving as an officer in a resident organization
- Serving on the Resident Advisory Board
- Caring for children of other residents so they may volunteer}

Note: Political activity is excluded.

Self-Sufficiency Activities – self-sufficiency activities include, but are not limited to:

- Job readiness or job training
- Training programs through local one-stop career centers, workforce investment boards (local entities administered through the U.S. Department of Labor), or other training providers
- Employment counseling, work placement, or basic skills training
- Education, including higher education (junior college or college), GED classes, or reading, financial, or computer literacy classes
- Apprenticeships (formal or informal)
- English proficiency or English as a second language classes
- Budgeting and credit counseling
- Any activity required by the Department of Public Assistance under Temporary Assistance for Needy Families (TANF)
- Any other program necessary to ready a participant to work (such as substance abuse or mental health counseling)

{activities that include, but are not limited to:

- _ Job readiness programs
- _ Job training programs
- _ GED classes
- _ Substance abuse or mental health counseling
- _ English proficiency or literacy (reading) classes
- _ Apprenticeships
- _ Budgeting and credit counseling
- _ Any kind of class that helps a person toward economic independence
- _ Student status at any school, college or vocation school}

Exempt Adult – an adult member of the family who meets any of the following criteria:

- Is 62 years of age or older
- Is blind or a person with disabilities (as defined under section 216[i][1] or 1614 of the Social Security Act), and who certifies that because of this disability he or she is unable to comply with the service provisions, or is the primary caretaker of such an individual
- { Is working at least 30 hours per week}
- Is engaged in work activities
- Is able to meet requirements under a state program funded under part A of title IV of the Social Security Act, or under any other welfare program of the state in which the PHA is located, including a state-administered welfare-to-work program; or
- Is a member of a family receiving assistance, benefits, or services under a state program funded under part A of title IV of the Social Security Act, or under any other welfare program of the state in which the PHA is located, including a state-administered welfare-to-work program, and has not been found by the state or other administering entity to be in

noncompliance with such program.

Work Activities – as it relates to an exemption from the community service requirement, *work activities* means:

- Unsubsidized employment
- Subsidized private sector employment
- Subsidized public sector employment
- Work experience (including work associated with the refurbishing of publicly assisted housing) if sufficient private sector employment is not available
- On-the-job training
- Job search and job readiness assistance
- Community service programs
- Vocational educational training (not to exceed 12 months with respect to any individual)
- Job skills training directly related to employment
- Education directly related to employment, in the case of a recipient who has not received a high school diploma or a certificate of high school equivalency
- Satisfactory attendance at secondary school or in a course of study leading to a certificate of general equivalence, in the case of a recipient who has not completed secondary school or received such a certificate
- Provision of child care services to an individual who is participating in a community service program

{Meets the requirements for being exempted from having to engage in a work activity under TANF or any other State welfare program including a State-administered welfare-to-work program

Is a member of a family receiving assistance, benefits or services under TANF or any other State welfare program and has not been found to be in noncompliance with such program}

3. Family obligation:

At lease execution, all adult members (18 or older) of a public housing resident family must:

Sign a certification ([Attachment A](#)) that they have received and read this policy and understand that if they are not exempt, failure to comply with the community service requirement will result in a nonrenewal of their lease; and

Declare if they are exempt. If exempt, they must complete the Exemption Form (Exhibit 11-3) and provide documentation of the exemption.

Upon written notice from the PHA, {non-exempt} nonexempt family members must present complete documentation of activities performed during the applicable lease term. This documentation will include places for signatures of supervisors, instructors, or counselors, certifying to the number of hours contributed.

If a family member is found to be noncompliant at the end of the 12-month lease term, he or she, and the head of household, will be required to sign an agreement with the housing authority to make up the deficient hours over the next twelve (12) month period, {as a condition of continued occupancy} or the lease will be terminated.

4. Change in exempt status:

If, during the twelve (12) month lease period, a {non-exempt} nonexempt person becomes exempt, it is his or her responsibility to report this to the PHA and provide documentation of exempt status.

If, during the twelve (12) month lease period, an exempt person becomes {nonexempt}nonexempt, it is his or her responsibility to report this to the PHA. Upon receipt of this information the PHA will provide the person with the appropriate documentation form(s) and a list of agencies in the community that provide volunteer and/or training opportunities.

4. Noncompliance of family member:

At least thirty (30) days prior to the end of the 12-month lease term, the PHA will begin reviewing the exempt or {non-exempt}nonexempt status and compliance of family members;

The PHA will secure a certification of compliance from nonexempt family members (Attachment B).

EXHIBIT 11-3: PHA DETERMINATION OF EXEMPTION FOR COMMUNITY SERVICE Family:

Adult family member:

This adult family member meets the requirements for being exempted from the PHA's community service requirement for the following reason:

62 years of age or older. *(Documentation of age in file)*

Is a person with disabilities and self-certifies below that he or she is unable to comply with the community service requirement. *(Documentation of HUD definition of disability in file)*

Tenant certification: I am a person with disabilities and am unable to comply with the community service requirement.

Signature of Family Member Date

Is the primary caretaker of such an individual in the above category. *(Documentation in file)*

Is {working at least 30 hours per week}engaged in work activities{.} (*Employment Verification*)Verification in file{

Is participating in a welfare-to-work program. *(Documentation in file).*

Meets}Is able to meet requirements under a state program funded under part A of title IV of the Social Security Act, or under any other welfare program of the state in which the PHA is located, including a state-administered welfare-to-work program {the requirements for being exempted from having to engage in a work activity under TANF or any other State welfare program, including a State-administered welfare-to-work program} *(Documentation in file)*

Is a member of a family receiving assistance, benefits, or services under a state program funded under part A of title IV of the Social Security Act, or under any other welfare program of the state in which the PHA is located, including a state-administered welfare-to-work program, and has not been found by the state or other administering entity to be in noncompliance with such program {Is a member of a family receiving assistance, benefits or services under TANF or any other State welfare program and has not been found to be in noncompliance with such program.} *(Documentation in file)*

Chapter 13 Revised text and added a new policy

13-II.D. FAILURE TO DISCLOSE AND DOCUMENT SOCIAL SECURITY NUMBERS{DOCUMENTATION} [24 CFR 5.218(c), {and} 24 CFR 960.259(a)(3), Notice PIH 2010-3]

The PHA must terminate assistance if a participant family fails to disclose the complete and accurate social security numbers of each household member and the documentation necessary to verify each social security number.

However, if the family is otherwise eligible for continued program assistance, and the PHA determines that the family's failure to meet the SSN disclosure and documentation requirements was due to circumstances that could not have been foreseen and were outside of the family's control, the PHA may defer the family's termination and provide the opportunity to comply with the requirement within a period not to exceed 90 calendar days from the date the PHA determined the family to be noncompliant.

PHA Policy

The PHA will defer the family's termination and provide the family with the opportunity to comply with the requirement for a period of 90 calendar days for circumstances beyond the participant's control such as delayed processing of the SSN application by the SSA, natural disaster, fire, death in the family, or other emergency, if there is a reasonable likelihood that the participant will be able to disclose an SSN by the deadline.

{The PHA must terminate the lease if a resident family fails to provide the documentation or certification required for any family member who obtains a social security number, joins the family, or reaches 6 years of age.} See Chapter 7 for a complete discussion of documentation and

certification requirements.

13-II.H. DEATH OF A SOLE FAMILY MEMBER [Notice PIH 2010-3]

The PHA must immediately terminate program assistance for deceased single member households.

Chapter 15 Added text, revised policy and minor editorial changes

15-I.A. PREVENTING ERRORS AND PROGRAM ABUSE

HUD created the Enterprise Income Verification (EIV) system to provide PHAs with a powerful tool for preventing errors and program abuse. PHAs are required to use the EIV system in its entirety in accordance with HUD administrative guidance [24 CFR 5.233]. PHAs are further required to:

- Provide applicants and residents with form HUD-52675, "Debts Owed to PHAs and Terminations"
- Require all adult members of an applicant or participant family to acknowledge receipt of form HUD-52675 by signing a copy of the form for retention in the family file

PHA Policy

The PHA anticipates that the vast majority of families and PHA employees intend to and will comply with program requirements and make reasonable efforts to avoid errors.

To ensure that the PHA's program is administered effectively and according to the highest ethical and legal standards, the PHA will employ a variety of techniques to ensure that both errors and intentional program abuse are rare.

The PHA will provide each applicant and resident with a copy of "Is Fraud Worth It?" (form HUD-1141-OIG), which {the publication *Things You Should Know (HUD-1140-OIG)* that} explains the types of actions a family must avoid and the penalties for program abuse.

The PHA will provide each applicant and resident with a copy of "What You Should Know about EIV," a guide to the Enterprise Income Verification (EIV) system published by HUD as an attachment to Notice PIH 2010-19. In addition, the PHA will require the head of each household to acknowledge receipt of the guide by signing a copy for retention in the family file.

The PHA will place a warning statement about the penalties for fraud (as described in {the False Statement Act,} 18 U.S.C. 1001 and 1010) on key PHA forms and form letters that request information from a family member.

The PHA routinely will use available sources of up-front income verification, including HUD's EIV system, to compare with family-provided information.

Chapter 16 Added and revised new guidance in policy

16-III.A. OVERVIEW

This part describes the PHA's policies for recovery of monies {that have been underpaid} owed to the PHA by families.

PHA Policy

When an action or inaction of a resident family results in the underpayment of rent or other amounts, the PHA holds the family liable to return any underpayments to the PHA. The PHA will enter into repayment agreements in accordance with the policies contained in this part as a means to recover overpayments. {The term *repayment agreement* refers to a formal document signed by a tenant and provided to the PHA in which a tenant acknowledges a debt in a specific amount and agrees to repay the amount due at specific time periods.}

16-III.B. REPAYMENT POLICY

Family Debts to the PHA

PHA Policy

Any amount {due} owed to the PHA by a public housing family must be repaid. If the family is unable to repay the debt within 30 days, the PHA will offer to enter into a repayment agreement in accordance with the policies below.

If the family refuses to repay the debt, does not enter into a repayment agreement, or breaches a repayment agreement, the PHA will terminate the family's tenancy in accordance with the policies in Chapter 13. The PHA will also pursue other modes of collection.

General Repayment Agreement Guidelines

Down Payment Requirement

PHA Policy

Before executing a repayment agreement with a family, the PHA will generally require a down payment of 10 percent of the total amount owed. If the family can provide evidence satisfactory to the PHA that a down payment of 10 percent would impose an undue hardship, the PHA may, in its sole discretion, require a lesser percentage or waive the requirement.

{Prior to the execution of a repayment agreement, the family must pay 10 percent of the balance owed to the PHA.}

Payment Thresholds

Notice PIH 2010-19 recommends that the total amount that a family must pay each month—the family’s monthly share of rent plus the monthly debt repayment amount—should not exceed 40 percent of the family’s monthly adjusted income, which is considered “affordable.” Moreover, Notice PIH 2010-19 acknowledges that PHAs have the discretion to establish “thresholds and policies” for repayment agreements with families [24 CFR 982.552(c)(1)(vii)].

PHA Policy

If the family’s income increases or decreases during the term of a repayment agreement, either the PHA or the family may request that the monthly payment amount be adjusted accordingly.

Execution of the Agreement

PHA Policy

Any repayment agreement between the PHA and a family must be signed and dated by the PHA and by the {The} head of household and spouse/cohead (if applicable). {must sign the repayment agreement.}

{Non-Payment}Late or Missed Payments

PHA Policy

If a payment is not received by the end of the business day on the date due, and prior approval for the missed payment has not been given by the PHA, the PHA will send the family a delinquency notice giving the family 10 business days to make the late payment. If the payment is not received by the due date of the delinquency notice, it will be considered a breach of the agreement and the PHA will terminate tenancy in accordance with the policies in Chapter 13.

If a family receives three delinquency notices for unexcused late payments in a 12- month period, the repayment agreement will be considered in default, and the PHA will terminate tenancy in accordance with the policies in Chapter 13.

No Offer of Repayment Agreement

PHA Policy

The PHA generally will not enter into a repayment agreement with a family if there is already a repayment agreement in place with the family, or if the amount {s} owed by the family exceeds the {Federal} federal or {State} state threshold for criminal prosecution.

Repayment Agreements Involving Improper Payments

Notice PIH 2010-19 requires certain provisions to be included in any repayment agreement involving amounts owed by a family because it underreported or failed to report income:

A reference to the items in the public housing lease that state the family’s obligation to provide true and complete information at every reexamination and the grounds on which the PHA may terminate assistance because of a family’s action or failure to act

A statement clarifying that each month the family not only must pay to the PHA the monthly payment amount specified in the agreement but must also pay to the owner the family’s

monthly share of the rent to owner

A statement that the terms of the repayment agreement may be renegotiated if the family's income decreases or increases

A statement that late or missed payments constitute default of the repayment agreement and may result in termination of tenancy

16-V.B. RECORD RETENTION

The PHA must keep the last three years of the Form HUD-50058 and supporting documentation during the term of each assisted lease, and for a period of at least three years from the end of participation (EOP) date [24 CFR 908.101].

* At a minimum of four years after each public housing tenancy or EOP, the PHA may destroy all documents related to a family's eligibility, tenancy, and termination. If the family owes money and/or are deceased, files may be destroyed at the discretion of the Executive Director four years after they have vacated.

Asterisk (*) denotes changes made to the ACOP by the PHA within the HUD guidelines.

Most of the other changes were necessitated by the final rule "Refinement of Income and Rent Determination Requirements in Public and Assisted Housing Programs: Implementation of the Enterprise Income Verification System-Amendments."

NY0018 Addendum B
2011 Changes to the HCVP Administrative Plan

Key: Omissions will be underlined
Additions will be in {{Brackets}}

Chapter 2

Part III: Prohibition of Discrimination Against Limited English Proficiency Persons. This part details the obligations of the PHA to ensure meaningful access to the HCV program and its activities by persons with limited English proficiency (LEP). This part incorporates HUD and DOJ's Notice of Guidance, published December 19, 2003 {{the Final Guidance to Federal Financial Assistance Recipients Regarding Title VI Prohibition against National Origin Discrimination Affecting Limited English Proficient Persons published January 22, 2007}}, in the *Federal Register*.

2-II.G. PHYSICAL ACCESSIBILITY

PIH 2002-01 (HA), Accessibility Notice {{ Notice PIH 2006-13}}

Notice PIH 2002-01(HA) Accessibility Notice (which must be posted in the HCV offices in a conspicuous place) {{2006-13}}

PART III: IMPROVING ACCESS TO SERVICES FOR PERSONS WITH LIMITED ENGLISH PROFICIENCY (LEP)

2-III.A. OVERVIEW

This part incorporates the Notice of {{Final}} Guidance to Federal Assistance Recipients Regarding Title VI Prohibition {{against National Origin Discrimination}} Affecting Limited English Proficient Persons, published December 19, 2003 {{January 22, 2007}}, in the *Federal Register*.

Chapter 3

Previous Behavior in Assisted Housing [24 CFR 982.552(c)]

PHA Policy

The PHA **will** deny assistance to an applicant family if:

The Family has misrepresented or does not provide complete information related to eligibility, including income, award of preferences for admission, expenses, family composition or rent.

{{Any family member has been denied assistance with the HCVP in the past 18 months.}}

3-II.C. SOCIAL SECURITY NUMBERS [24 CFR 5.216 and 5.218, {{Notice PIH 2010-3}}]

The applicant and all members of the applicant's household age 6 or older the family must provide documentation of a valid Social Security Number (SSN) or a certification stating that no SSN has been issued. If a household member who is required to execute a certification is less than 18 years old, the certification must be executed by the individual's parent or guardian [24 CFR 5.216(j)]. {{disclose the complete and accurate social security number (SSN) assigned to each household member, and the documentation necessary to verify each SSN}}. Assistance cannot be provided to a family until all SSN documentation requirements are met. A detailed discussion of acceptable documentation is provided in Chapter 7.

{{Note: These requirements do not apply to noncitizens who do not contend eligible immigration status. In addition, each participant who has not previously disclosed an SSN, has previously disclosed an SSN that HUD or the SSA determined was invalid, or has been issued a new SSN must submit their complete and accurate SSN and the documentation required to verify the SSN at the time of the next interim or annual reexamination or recertification. Participants age 62 or older as of January 31, 2010, whose determination of eligibility was begun before January 31, 2010, are exempt from this requirement and remain exempt even if they move to a new assisted unit}}. If a new member who is at least six years of age is added to the family, the new member's SSN documentation must be submitted at the household's next interim or regular reexamination, whichever comes first. If any member of the household who is at least six years of age obtains a previously undisclosed SSN, or has been assigned a new SSN, the documentation must be submitted at the family's next regularly scheduled reexamination. The PHA must deny assistance to an applicant family if they do not meet the SSN disclosure, {and} documentation and verification, and certification requirements contained in 24 CFR 5.216.

Chapter 4

4-III.E. THE APPLICATION INTERVIEW

HUD recommends that the PHA obtain the information and documentation needed to make an eligibility determination through a private interview [HCV GB, pg. 4-16]. Being invited to attend an interview does not constitute admission to the program.

{{Assistance cannot be provided to the family until all SSN documentation requirements are met. However, if the PHA determines that an applicant family is otherwise eligible to participate in the program, the family may retain its place on the waiting list for a period of time determined by the PHA [Notice PIH 2010-3].}}

PHA Policy

{{Pending disclosure and documentation of social security numbers, the PHA will allow the family to retain its place on the waiting list for sixty (60) days. If not all household members have disclosed their SSNs at the next time the PHA is issuing vouchers, the PHA will issue a voucher to the next eligible applicant family on the waiting list.}}

Chapter 5

Additional Items to {{B}}be Included in the Briefing Packet

In addition to items required by the regulations, PHAs may wish to include supplemental materials to help explain the program to both participants and owners [HCV GB p. 8-7, *{{Notice PIH 2010-19.}}*}}

PHA Policy

The PHA will provide the following additional materials in the briefing packet:
The publication Things You Should Know {"Is Fraud Worth It?" (form)} HUD-1140{{1141}}-OIG) that, {{which}} explains the types of actions a family must avoid and the penalties for program abuse

{{HUD Pamphlet "A Good Place to Live" which explains what the PHA will be considering during an HQS Inspection}}

A description of any PHA policy on security deposits

Owner responsibilities:

HAP Contract

How to Report Changes in income or family composition

{{"What You Should Know about EIV," a guide to the Enterprise Income Verification (EIV) system published by HUD as an attachment to Notice PIH 2010-19.}}

Chapter 6

6-I.C. ANTICIPATING ANNUAL INCOME

Basis of Annual Income Projection

{{PHAs are required to use HUD's Enterprise Income Verification (EIV) system in its entirety as a third party source to verify employment and income information, and to reduce administrative subsidy payment errors in accordance with HUD administrative guidance [24CFR 5.233(a)(2)].}}

HUD allows PHAs to use pay-stubs to project income once EIV data has been received in such cases where the family does not dispute the EIV employer data and where the PHA does not determine it is necessary to obtain additional third-party data.}}

PHA Policy

Whenever possible, the PHA will use HUD's EIV system. When EIV is obtained and the family does not dispute the EIV employer data, the PHA will use current tenant-provided documents to project annual income. When the tenant provided documents are pay stubs, the PHA will make every effort to obtain at least 4 {{current and}} consecutive pay stubs dated within the last 60 days.

Known Changes in Income

When tenant-provided {{third party}} documents are used to anticipate annual income, they will be dated within the last 60 days of the reexamination interview date.

{{Treatment of Overpayment Deductions from Social Security Benefits

The PHA must make a special calculation of annual income when the Social Security Administration (SSA) overpays an individual, resulting in a withholding or deduction from his or her benefit amount until the overpayment is paid in full. The amount and duration of the withholding will vary depending on the amount of the overpayment and the percent of the benefit rate withheld. Regardless of the amount withheld or the length of the withholding period, the PHA must use the reduced benefit amount after deducting only the amount of the overpayment withholding from the gross benefit amount [Notice PIH 2010-3].}}

Chapter 7

Changes to comply with the requirements of PIH Notice 2010-19

VERIFICATION [24 CFR 982.516, 24 CFR 982.551, 24 CFR 5.230,{{ Notice PIH 2010-19}}]

INTRODUCTION

The PHA will follow the verification guidance provided by HUD in PIH Notice {{PIH}} 2004-01 {{2010-19}} Verification Guidance and any subsequent guidance issued by HUD. This chapter summarizes those requirements and provides supplementary PHA policies.

7-I.B. OVERVIEW OF VERIFICATION REQUIREMENTS

HUD's Verification Hierarchy {{[Notice PIH 2010-19]}}

HUD authorizes the PHA to use five {{six}} methods to verify family information and specifies the circumstances in which each method will be used. In general HUD requires the PHA to use the most reliable form of verification that is available and to document the reasons when the PHA uses a lesser form of verification.

PHA Policy

In order of priority, the forms of verification that the PHA will use are:

Up-front Income Verification (UIV) using HUD's Enterprise Income Verification (EIV) system

Up-front Income Verification (UIV) using a non-HUD system

Written Third Party Verification (may be provided by applicant or participant)

Written Third-party Verification Form

Oral Third-party Verification

Self-Certification}} Up-front Income Verification (UIV)

Third-party Written Verification

Third-party Oral Verification

Review of Documents

Self-Certification

Each of the verification methods is discussed in subsequent sections below. Exhibit 7-1 at the end of the chapter contains an excerpt from the notice that provides guidance with respect to how each method may be used.

Requirements for Acceptable Documents

PHA Policy

Any documents used for verification must be the original (not photocopies) and generally must be dated within 60 calendar days of the date they are provided to the PHA. The documents must not be damaged, altered or in any way illegible. The PHA will accept documents dated up to 6 months before the effective date of the family's reexamination if the document represents the most recent scheduled report from a source. For example, if the holder of a pension annuity provides semi-annual reports, the PHA would accept the most recent report. Print-outs from web {{Web}} pages are considered original documents.

File Documentation

When the PHA is unable to obtain 3rd party verification, the PHA will document in the family file the reason that third-party verification was not available and will place a photocopy of any

original document(s) in the family file [24 CFR 960.259(c)(1); VG, p.15{{Notice PIH 2010-19}.}}

Chapter 8

Units that Must Not be Used as Comparables

Comparable units must represent unrestricted market rents. Therefore, units that receive some form of federal, state, or local assistance that imposes rent restrictions cannot be considered comparable units. These include units assisted by HUD through any of the following programs: Section 8 project-based assistance, Section 236 and Section 221(d)(3) Below Market Interest Rate (BMIR) projects, HOME or Community Development Block Grant (CDBG) program assisted units in which the rents are subsidized; units subsidized through federal, state, or local tax credits; units subsidized by the Department of Agriculture rural housing programs, and units that are rent-controlled by local ordinance.

{{Note: Notice PIH 2010-18, issued May 10, 2010, provides further guidance on the issue of what constitutes an assisted unit.}}

Chapter 10

Changes in wording to clarify the policies and requirements to portability and VAWA

Chapter 11

Notification of and Participation in the Annual Reexamination Process

The PHA is required to obtain the information needed to conduct annual reexaminations. How that information will be collected is left to the discretion of the PHA. However, PHAs should give tenants who were not provided the opportunity the option to complete Form HUD-92006 at this time [Notice PIH 2009-36].

PHA Policy

Annual reexaminations will be conducted by mail. Notification of the annual reexamination will be sent by first-class mail and will inform the family of the information and documentation that must be provided to the PHA, and the deadline for providing it. Documents will be accepted by mail, by fax, or in person.

If the notice is returned by the post office with no forwarding address, a notice of termination (see Chapter 12) will be sent to the family's address of record, as well as to any alternate address provided in the family's file.

An interview will be scheduled if the family requests assistance in providing information or documentation requested by the PHA.

If the family is unable to attend a scheduled interview, the family should contact the PHA in advance of the interview to schedule a new appointment. If a family does not attend the scheduled interview, the PHA will send a second notification with a new interview appointment time.

Families that fail to attend two scheduled interviews without PHA approval will be sent a notice of termination in accordance with policies contained in Chapter 12.

An advocate, interpreter, or other assistant may assist the family in the interview process. The family and the PHA must execute a certification attesting to the role and assistance of any such third party.

Corrected grammatical errors, and changed wording to clarify requirements under PIH Notice 2010-19

Chapter 12

Changed/added wording to comply with requirements of PIH Notice 2010-19

Chapter 13

13-II.E. HAP CONTRACT TERM AND TERMINATIONS

The term of the HAP contract runs concurrently with the term of the dwelling lease [24 CFR 982.451(a)(2)], beginning on the first day of the initial term of the lease and terminating on the last day of the term of the lease, including any lease term extensions.

PHA Policy

The PHA will begin all HAP contracts on the first calendar day of the month after the unit passes HQS Inspection. }

The HAP contract and the housing assistance payments made under the HAP contract terminate if [HCV Guidebook pp.11-4 and 11-5, pg. 15-3]:

Chapter 14

14-I.A. PREVENTING ERRORS AND PROGRAM ABUSE

PHA Policy

At the time of orientation the PHA will provide each applicant with a copy of “What You Should Know about EIV,” a guide to the Enterprise Income Verification (EIV) system published by HUD as an attachment to Notice PIH 2010-19. In addition, the PHA will require the head of each household to acknowledge receipt of the guide. }

**Updated HUD form #'s to reflect the current forms/guidance being used by HUD

Chapter 16

General Repayment Agreement Guidelines for Families

Payment Thresholds

Notice PIH 2010-19 recommends that the total amount that a family must pay each month—the family’s monthly share of rent plus the monthly debt repayment amount—should not exceed 40 percent of the family’s monthly adjusted income. However, a family may already be paying 40 per cent or more of its monthly adjusted income in rent. Moreover, Notice PIH 2010-19 acknowledges that PHAs have the discretion to establish “thresholds and policies” for repayment agreements with families [24 CFR 982.552(c)(1)(vii)]. }

PHA Policy

The PHA has established the following thresholds for repayment of debts: }

Amounts between \$3,000 and the Federal federal or State state threshold for criminal prosecution must be repaid within 36 months.

Amounts between \$2,000 and \$2,999 must be repaid within 30 months.

Amounts between \$1,000 and \$1,999 must be repaid within 24 months.

Amounts under \$1,000 must be repaid within 12 months.

If a family can provide evidence satisfactory to the PHA that the threshold applicable to the family’s debt would impose an undue hardship, the PHA may, in its sole discretion, determine that a lower monthly payment amount is reasonable. In making its determination, the PHA will consider all relevant information, including the following:

The amount owed by the family to the PHA
The reason for the debt, including whether the debt was the result of family action/inaction or circumstances beyond the family's control
The family's current and potential income and expenses
The family's current family share, as calculated under 24 CFR 982.515
The family's history of meeting its financial responsibilities}}

Execution of the Agreement

PHA Policy

The {{Any repayment agreement between the PHA and a family must be signed and dated by the PHA and by the}} head of household and spouse/cohead (if applicable) must sign the repayment agreement.

Due Dates

PHA Policy

All payments are due by the close of business on the 15th day of the month. If the 15th does not fall on a business day, the due date is the close of business on the first business day after the 15th.

Non-Payment{{Late or Missed Payments}}

PHA Policy

If a payment is not received by the end of the business day on the date due, and prior approval for the missed payment has not been given by the PHA, the PHA will send the family a delinquency notice giving the family 10 business days to make the late payment. If the payment is not received by the due date of the delinquency notice, it will be considered a breach of the agreement and the PHA will terminate assistance{{ in accordance with the policies in Chapter 12}} upon written notification to the family. If a family receives 3 {{three}} delinquency notices for unexcused late payments in a 12 {{12-}}month period, the repayment agreement will be considered in default, and the PHA will terminate assistance upon written notification to the family{{in accordance with the policies in Chapter 12.}}

No Offer of Repayment Agreement

PHA Policy

The PHA {{generally}} will not enter into a repayment agreement {{with a family}} if there is already a repayment agreement in place with the family or owner, or if the amounts owed by the family or owner exceeds the Federal {{federal}} or State {{state}} threshold for criminal prosecution.