RESOLUTION NO. 1588

RESOLUTION OF THE HOUSING DEPARTMENT OF THE CITY OF WINSLOW TO APPROVE THE HOUSING AUTHORITY'S ANNUAL PLAN FOR 2012

WHEREAS, the Department of Housing and Urban Development requires all Housing Authorities to annually review and update their Annual Plans for all Public Housing and Housing Choice Voucher programs; these policies are mandated to reflect current operations and economic conditions as they may occur, and

WHEREAS, the U.S. Department of Housing & Urban Development has recognized that an approved Annual Plan is necessary in the efficient operation of the Authority. This format and entries meet with standard business practices exercised by all Public Housing Authorities and other government instrumentalities.

NOW, THEREFORE, BE IT RESOLVED that the Governing Board of the City of Winslow Housing Authority approves the Annual Plan, all policy attachments and required documents.

PASSED AND ADOPTED BY THE GOVERNING BOARD OF THE WINSLOW PUBLIC HOUSING AUTHORITY THIS 13th DAY OF MARCH, 2012.

BOARD CHAIRMAN

ATTEST:

Suzy Wetzel
City Clerk

City Attorney

CITY OF WINSLOW

January 2012

HAPPY NEW YEAR

CALENDAR OF EVENTS

January 2012

2nd
New Years Day Holiday
City Offices Closed

5th
Arts Council Meeting
4:30 p.m. @ City Hall Conference Room

10th
Renaissance 5 Open House
4-5:30 p.m. @ Council Chambers
City Council Special Meeting and Work Session
6 p.m. @ Council Chambers
City Council Meeting
7 p.m. @ Council Chambers

16th
Martin Luther King Day Holiday
City Offices Closed

17th
Planning and Zoning Commission Meeting
7 p.m. @ Council Chambers

19th
Arts Council Meeting
4:30 p.m. @ City Hall Conference Room

24th
City Council Special Meeting and Work Session
6 p.m. @ Council Chambers
City Council Meeting
7 p.m. @ Council Chambers

26th
Historic Preservation Commission Meeting
4 p.m. @ City Hall Conference Room

WINSLOW PUBLIC HOUSING DEPARTMENT

NOTICE IS HEREBY GIVEN, pursuant to Section 511 of the Quality Housing and Work Responsibility Act of 1998 (QHWRA) that the Winslow Public Housing Department (WPHD) has developed the required Public Housing (PHA) Annual Plan for its public housing and tenant-based Housing Choice Voucher Program. The Annual Plan provides details about the strategy for handling operational concerns, residents' concerns, needs, programs and services for the upcoming fiscal year. The proposed PHA Plan & all relevant information will be available for inspection by the public at the Winslow Housing Department at 900 Henderson St. Winslow, AZ 86047. Copies of the plan may be obtained by visiting our office and written comments may be submitted through February 24, 2012 at 3:00 p.m.

To: Winslow Housing Authority
Attention: Executive Director
900 W. Henderson St.
Winslow, AZ 86047

WPHD does not discriminate on the basis of race, color, religion, sex, age, national origin or disability

Effective January 1, 2012, the City of Winslow Transfer Station will temporarily be closed on Sundays. The hours of operation Monday through Saturday will be from 8 a.m. to 4 p.m.

The transfer station will again be open on [illegible] beginning April 1, 2012.

UPDATE ON CITY OF WINSLOW NEIGHBORHOOD IMPROVEMENTS

SOUTHSIDE WASHINGTON STREET PROJECT
AND
COOPERTOWN CENTRAL STREET PROJECT
December 21, 2011

Work on both projects is now complete. The City has accepted the improvements and all sidewalks and intersections are open and ready for use by residents in both communities. In addition to the new curb, gutter and sidewalks installed, some fifty residents received new mailboxes and posts.

These street improvements are planned to continue for the next five years in various neighborhoods throughout the City. All of these projects are being completely funded using the City's 1% Sales Tax.

CITY OF WINSLOW
PUBLIC INFORMATION NOTICE

The City of Winslow's Primary Election of March 13, 2012 has been cancelled per the City of Winslow Charter which states that "in the event that no more than two (2) candidates file nominating petition for each vacancy in office, the Primary Election may be dispensed with as to that office." Robin Robert Boyd and Thomas R. Chacon, Sr. filed petitions for the office of mayor and will be placed on the ballot for the General Election to be held on May 15, 2012. The following six candidates filed petitions for the three councilmember positions and will be placed on the ballot for the General Election to be held on May 15, 2012: Peter Cake, Judy Howell, Marshall Losey, Rudy A. Montoya, Randy Pritchard and Robert "Bob" Schlesinger. The deadline to register to vote in the City General Election is April 16, 2012 at 12 o'clock midnight. Voter registration forms are available at City Hall and the Library.

/s/ Suzy Wetzel, CMC
City Clerk

CIUDAD DE WINSLOW
AVISO PÚBLICO DE INFORMACIÓN

La Elección Primaria del 13 de marzo de 2012 de la Ciudad de Winslow se ha cancelado de acuerdo con la Constitución de la Ciudad de Winslow que declara que "en el caso de que no más de dos (2) candidatos entablen peticiones de nominación para cada vacancia de un cargo, la Elección Primaria se puede dispensar en relación con ese cargo." Robin Robert Boyd y Thomas R. Chacon, Sr. entablaron peticiones para el cargo de alcalde y aparecerán en la balota de la Elección General que se celebrará el 15 de mayo de 2012. Los siguientes seis candidatos entablaron peticiones para los tres cargos de miembro del concejo y aparecerán en la balota de la Elección General que se celebrará el 15 de mayo de 2012: Peter Cake, Judy Howell, Marshall Losey, Rudy A. Montoya, Randy Pritchard y Robert "Bob" Schlesinger. La última fecha para inscribirse para votar en la Elección General será el 16 de abril de 2012 para las 12 de la medianoche. Los formularios de inscripción como votante están disponibles en el ayuntamiento y en la Biblioteca.

/s/ Suzy Wetzel, CMC
Secretaria Municipal

108 E. Second St.
Winslow, AZ 860
Bill

PHA Certifications of Compliance with PHA Plans and Related Regulations	U.S. Department of Housing and Urban Development Office of Public and Indian Housing Expires 4/30/2011

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

Acting on behalf of the Board of Commissioners of the Public Housing Agency (PHA) listed below, as its Chairman or other authorized PHA official if there is no Board of Commissioners, I approve the submission of the ___ 5-Year and/or X Annual PHA Plan for the PHA fiscal year beginning 06/30, hereinafter referred to as" the Plan", of which this document is a part and make the following certifications and agreements with the Department of Housing and Urban Development (HUD) in connection with the submission of the Plan and implementation thereof:

1. The Plan is consistent with the applicable comprehensive housing affordability strategy (or any plan incorporating such strategy) for the jurisdiction in which the PHA is located.
2. The Plan contains a certification by the appropriate State or local officials that the Plan is consistent with the applicable Consolidated Plan, which includes a certification that requires the preparation of an Analysis of Impediments to Fair Housing Choice, for the PHA's jurisdiction and a description of the manner in which the PHA Plan is consistent with the applicable Consolidated Plan.
3. The PHA certifies that there has been no change, significant or otherwise, to the Capital Fund Program (and Capital Fund Program/Replacement Housing Factor) Annual Statement(s), since submission of its last approved Annual Plan. The Capital Fund Program Annual Statement/Annual Statement/Performance and Evaluation Report must be submitted annually even if there is no change.
4. The PHA has established a Resident Advisory Board or Boards, the membership of which represents the residents assisted by the PHA, consulted with this Board or Boards in developing the Plan, and considered the recommendations of the Board or Boards (24 CFR 903.13). The PHA has included in the Plan submission a copy of the recommendations made by the Resident Advisory Board or Boards and a description of the manner in which the Plan addresses these recommendations.
5. The PHA made the proposed Plan and all information relevant to the public hearing available for public inspection at least 45 days before the hearing, published a notice that a hearing would be held and conducted a hearing to discuss the Plan and invited public comment.
6. The PHA certifies that it will carry out the Plan in conformity with Title VI of the Civil Rights Act of 1964, the Fair Housing Act, section 504 of the Rehabilitation Act of 1973, and title II of the Americans with Disabilities Act of 1990.
7. The PHA will affirmatively further fair housing by examining their programs or proposed programs, identify any impediments to fair housing choice within those programs, address those impediments in a reasonable fashion in view of the resources available and work with local jurisdictions to implement any of the jurisdiction's initiatives to affirmatively further fair housing that require the PHA's involvement and maintain records reflecting these analyses and actions.
8. For PHA Plan that includes a policy for site based waiting lists:
   - The PHA regularly submits required data to HUD's 50058 PIC/IMS Module in an accurate, complete and timely manner (as specified in PIH Notice 2006-24);
   - The system of site-based waiting lists provides for full disclosure to each applicant in the selection of the development in which to reside, including basic information about available sites; and an estimate of the period of time the applicant would likely have to wait to be admitted to units of different sizes and types at each site;
   - Adoption of site-based waiting list would not violate any court order or settlement agreement or be inconsistent with a pending complaint brought by HUD;
   - The PHA shall take reasonable measures to assure that such waiting list is consistent with affirmatively furthering fair housing;
   - The PHA provides for review of its site-based waiting list policy to determine if it is consistent with civil rights laws and certifications, as specified in 24 CFR part 903.7(c)(1).
9. The PHA will comply with the prohibitions against discrimination on the basis of age pursuant to the Age Discrimination Act of 1975.
10. The PHA will comply with the Architectural Barriers Act of 1968 and 24 CFR Part 41, Policies and Procedures for the Enforcement of Standards and Requirements for Accessibility by the Physically Handicapped.
11. The PHA will comply with the requirements of section 3 of the Housing and Urban Development Act of 1968, Employment Opportunities for Low-or Very-Low Income Persons, and with its implementing regulation at 24 CFR Part 135.

12. The PHA will comply with acquisition and relocation requirements of the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970 and implementing regulations at 49 CFR Part 24 as applicable.
13. The PHA will take appropriate affirmative action to award contracts to minority and women's business enterprises under 24 CFR 5.105(a).
14. The PHA will provide the responsible entity or HUD any documentation that the responsible entity or HUD needs to carry out its review under the National Environmental Policy Act and other related authorities in accordance with 24 CFR Part 58 or Part 50, respectively.
15. With respect to public housing the PHA will comply with Davis-Bacon or HUD determined wage rate requirements under Section 12 of the United States Housing Act of 1937 and the Contract Work Hours and Safety Standards Act.
16. The PHA will keep records in accordance with 24 CFR 85.20 and facilitate an effective audit to determine compliance with program requirements.
17. The PHA will comply with the Lead-Based Paint Poisoning Prevention Act, the Residential Lead-Based Paint Hazard Reduction Act of 1992, and 24 CFR Part 35.
18. The PHA will comply with the policies, guidelines, and requirements of OMB Circular No. A-87 (Cost Principles for State, Local and Indian Tribal Governments), 2 CFR Part 225, and 24 CFR Part 85 (Administrative Requirements for Grants and Cooperative Agreements to State, Local and Federally Recognized Indian Tribal Governments).
19. The PHA will undertake only activities and programs covered by the Plan in a manner consistent with its Plan and will utilize covered grant funds only for activities that are approvable under the regulations and included in its Plan.
20. All attachments to the Plan have been and will continue to be available at all times and all locations that the PHA Plan is available for public inspection. All required supporting documents have been made available for public inspection along with the Plan and additional requirements at the primary business office of the PHA and at all other times and locations identified by the PHA in its PHA Plan and will continue to be made available at least at the primary business office of the PHA.
21. The PHA provides assurance as part of this certification that:
    (i) The Resident Advisory Board had an opportunity to review and comment on the changes to the policies and programs before implementation by the PHA;
    (ii) The changes were duly approved by the PHA Board of Directors (or similar governing body); and
    (iii) The revised policies and programs are available for review and inspection, at the principal office of the PHA during normal business hours.
22. The PHA certifies that it is in compliance with all applicable Federal statutory and regulatory requirements.

Winslow Public Housing Department — PHA Name

AZ008 — PHA Number/HA Code

____ 5-Year PHA Plan for Fiscal Years 20____ - 20____

_X_ Annual PHA Plan for Fiscal Years 20_12_ - 20_13_

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

Name of Authorized Official	Title
Robin Boyd	Mayor
Signature: R C Boyd	Date: 03/13/2012

Certification for a Drug-Free Workplace

U.S. Department of Housing and Urban Development

Applicant Name

Winslow Public Housing Department

Program/Activity Receiving Federal Grant Funding

Low-Rent Public Housing and HCV

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

Name of Authorized Official	Title
Jesse Fernandez	Executive Director

Signature

X

Date

March 13, 2012

OMB Approval No. 2577-0157 (Exp. 3/31/2010)

Certification of Payments to Influence Federal Transactions

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

Applicant Name

Winslow Public Housing Department

Program/Activity Receiving Federal Grant Funding

Low-Rent Public Housing and HCV program

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

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

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

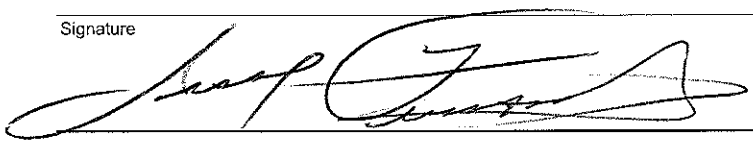
(3) The undersigned shall require that the language of this certification be included in the award documents for all subawards at all tiers (including subcontracts, subgrants, and contracts under grants, loans, and cooperative agreements) and that all subrecipients shall certify and disclose accordingly.

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

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

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

Name of Authorized Official	Title
Jesse Fernandez	Executive Director

Signature	Date (mm/dd/yyyy)
	03/13/2012

DISCLOSURE OF LOBBYING ACTIVITIES

Approved by OMB
0348-0046

Complete this form to disclose lobbying activities pursuant to 31 U.S.C. 1352
(See reverse for public burden disclosure.)

1. Type of Federal Action:	2. Status of Federal Action:	3. Report Type:
[b.] a. contract b. grant c. cooperative agreement d. loan e. loan guarantee f. loan insurance	[b.] a. bid/offer/application b. initial award c. post-award	[a.] a. initial filing b. material change **For Material Change Only:** year _____ quarter _____ date of last report _____

4. Name and Address of Reporting Entity:	5. If Reporting Entity in No. 4 is a Subawardee, Enter Name and Address of Prime:
☐ Prime ☐ Subawardee Tier _____, *if known*: Winslow PHD 900 W. Henderson Sq. Winslow, AZ 86047-2318 **Congressional District**, *if known*:	**Congressional District**, *if known*:
6. Federal Department/Agency:	**7. Federal Program Name/Description:** CFDA Number, *if applicable*: _____
8. Federal Action Number, *if known*:	**9. Award Amount**, *if known*: $
10. a. Name and Address of Lobbying Registrant (*if individual, last name, first name, MI*):	**b. Individuals Performing Services** (*including address if different from No. 10a*) (*last name, first name, MI*):

11. Information requested through this form is authorized by title 31 U.S.C. section 1352. This disclosure of lobbying activities is a material representation of fact upon which reliance was placed by the tier above when this transaction was made or entered into. This disclosure is required pursuant to 31 U.S.C. 1352. This information will be available for public inspection. Any person who fails to file the required disclosure shall be subject to a civil penalty of not less than $10,000 and not more than $100,000 for each such failure.

Signature: _____
Print Name: Jesse Fernandez
Title: Executive Director
Telephone No.: 924-249-1457 Date: 03/13/2012

Federal Use Only:

Authorized for Local Reproduction
Standard Form LLL (Rev. 7-97)

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

Civil Rights Certification

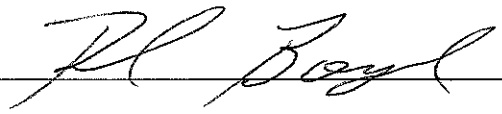
Annual Certification and Board Resolution

Acting on behalf of the Board of Commissioners of the Public Housing Agency (PHA) listed below, as its Chairman or other authorized PHA official if there is no Board of Commissioner, I approve the submission of the Plan for the PHA of which this document is a part and make the following certification and agreement with the Department of Housing and Urban Development (HUD) in connection with the submission of the Plan and implementation thereof:

The PHA certifies that it will carry out the public housing program of the agency in conformity with title VI of the Civil Rights Act of 1964, the Fair Housing Act, section 504 of the Rehabilitation Act of 1973, and title II of the Americans with Disabilities Act of 1990, and will affirmatively further fair housing.

Winslow Public Housing Department	AZ008
PHA Name	PHA Number/HA Code

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

Name of Authorized Official	Title
Robin Boyd	Mayor
Signature 	Date 03/13/2012

Certification by State or Local Official of PHA Plans Consistency with the Consolidated Plan

I, Michael D. Trailor the Director of the Arizona Department of Housing certify that the Five Year and Annual PHA Plan of the Winslow Public Housing Department is consistent with the Consolidated Plan of Click to Enter Jurisdiction Name prepared pursuant to 24 CFR Part 91.

FOR THE DIRECTOR 12/27/11

Signed / Dated by Appropriate State or Local Official

Mayor
Robin R. Boyd

(928) 289-2422
Fax (928) 289-3742
TDD (928) 289-4784

Discover Winslow - A City in Motion

Council Members
Peter Cake
Thomas R. Chacon, Sr.
Curtis Hardy
Marsha Juergens
Marshall Losey
Harold Soehner

Date: January 19, 2012

To: Public Housing Residents

From: Jesse Fernandez, Executive Director,
Winslow Public Housing Department

Subject: Resident Comments/Suggestions for the Annual Plan 2012

Tenant comments are summarized below:

Five total families commented on the annual plan. One of the five wrote no comment, and the other four requested security screen doors.

To date, we have installed seventeen new screen doors and repaired 8 more. In addition, we had APS install a new security light to insure that our dumpster areas are well lit during the hours of darkness. We also have plans to remodel our parking lot at Henderson Square.

The Winslow Public Housing Department will continue to work at setting up a temporary Resident Board. Throughout the year, we will be soliciting residents of public housing to become involved in a formal process of governance.

Attached is the sign-in sheet.

JLF

Mayor
Robin R. Boyd

(928) 289-2422
Fax (928) 289-3742
TDD (928) 289-4784

Council Members
Peter Cake
Thomas R. Chacon, Sr.
Judy Howell
Marsha Juergens
Marshall Losey
Harold Soehner

Discover Winslow - A City in Motion

ANNUAL PLAN REVIEW AND COMMENTS 2012

NAME	ADDERSS	COMMENTS			
Noreen Kanucho	911 W. Henderson St.	Put a screen steel dr. That would be great on good after noone days.			
[illegible]	918. HENDERSON	REMODEL	PLEASE VERY MUCH PLEASE		
[illegible]	869 N Alfred	would like to have a screen door put in.			
Veronica Gomez	903 Henderson	Put a Screen on back door Put a new security screendoor on front			
J. Callaway	615 N. Berry				

Equal Opportunity Housing
Public Housing Department • 900 W. Henderson Sq., Winslow, AZ 86047-2331 • (928) 289-4617 Fax (928) 289-3848 • email: wphd@cableone.net

The Housing Authority does not discriminate against any person because of race, age, color, religion, sex, national origin, age, familial status or disability. Changes in our program's nonessential policies and practices would give you an opportunity to participate in the Authority's housing program. If you are an individual with disabilities abuse and require reasonable accommodations or need assistance completing this application please call (928)289-1459.

Statement of Financial Resources

[24 CFR Part 903.12 (b), 903.7 (c)]

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

Financial Resources: Planned Sources and Uses		
Sources	**Planned $**	**Planned Uses**
1. **Federal Grants (FY 2010 grants)**		
a) Public Housing Operating Fund	$202,903.00	
b) Public Housing Capital Fund	$185,020.00	
c) HOPE VI Revitalization		
d) HOPE VI Demolition		
e) Annual Contributions for Section 8 Tenant-Based Assistance	$725,100.00	
f) Resident Opportunity and Self-Sufficiency Grants		
g) Community Development Block Grant		
h) HOME		
Other Federal Grants (list below)		
2. Prior Year Federal Grants (unobligated funds only) (list below)	0	
3. Public Housing Dwelling Rental Income	$ 87,000	Public Housing Operations
4. Other income (list below)		
HCV Unrestricted Net Assets	$249,355.00	HCV Rental Assistance and
HCV Net Restricted Assets	$34,141.00	programs
HCV Cash Investments	$280,857.00	
4. Non-federal sources (list below)		
Total resources	$1,764,276.00	

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

1.0 PHA Information

PHA Name: Winslow Public Housing Department PHA Code: AZ008

PHA Type: ☒ Small ☐ High Performing ☒ Standard ☒ HCV (Section 8)

PHA Fiscal Year Beginning: (MM/YYYY): 07/2012

2.0 Inventory (based on ACC units at time of FY beginning in 1.0 above)

Number of PH units: 55 Number of HCV units: 128

3.0 Submission Type

☐ 5-Year and Annual Plan ☒ Annual Plan Only ☐ 5-Year Plan Only

4.0 PHA Consortia ☐ PHA Consortia: (Check box if submitting a joint Plan and complete table below.)

Participating PHAs	PHA Code	Program(s) Included in the Consortia	Programs Not in the Consortia	No. of Units in Each Program	
				PH	HCV
PHA 1:					
PHA 2:					
PHA 3:					

5.0 5-Year Plan. Complete items 5.1 and 5.2 only at 5-Year Plan update.

5.1 Mission. To Promote adequate and affordable housing, economic and suitable living environment free from discrimination.

The Winslow Public Housing Authority's mission is to provide decent, safe, and affordable rental housing for eligible families and to provide opportunities and promote self-sufficiency, economic independence for Housing Choice Voucher participants and Public Housing residents.

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.

Reduce public housing vacancies,
Improve Public Housing management: (PHAS score),
Increase customer service satisfaction,
Renovate or modernize public housing units,
Provide or attract supportive services to increase independence for the elderly or families with disabilities,
Undertake affirmative measures to ensure access to assisted housing regardless of race, color, religion, national origin, sex, familial status and disability.

6.0 PHA Plan Update

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

1. Policy changes are attached as approved by the Board of Commissioners on March 13, 2012, Board Resolution 1588.

2. Financial Resources: A statement of financial resources is attached to this plan.

3. Fiscal year audit: The Audit for fiscal year 2011 is currently under IPA review.

(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. **Copies of this plan may be obtained by request at 900 West Henderson St. Winslow, AZ. 86047**

All items required for public review under 24 CFR 90.37 are available upon request, and can be obtained at: Administrative Office: 900 West Henderson St. Winslow, AZ 86047.

7.0	**Hope VI, Mixed Finance Modernization or Development, Demolition and/or Disposition, Conversion of Public Housing, Homeownership Programs, and Project-based Vouchers.** *Include statements related to these programs as applicable.* ***HOPE VI...NONE*** ***Conversion of Public Housing.*** **The PHA does not anticipate converting any Public Housing to tenant-based assistance at this time.** ***Project based Vouchers.*** **The PHA does not anticipate utilizing the project-based voucher program.**
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 *Capital Fund Program Annual Statement/Performance and Evaluation Report,* form HUD-50075.1, for each current and open CFP grant and CFFP financing. **SEE ATTACHED**
8.2	**Capital Fund Program Five-Year Action Plan.** As part of the submission of the Annual Plan, PHAs must complete and submit the *Capital Fund Program Five-Year Action Plan,* form HUD-50075.2, and subsequent annual updates (on a rolling basis, e.g., drop current year, and add latest year for a five year period). Large capital items must be included in the Five-Year Action Plan. **SEE ATTACHED**
8.3	**Capital Fund Financing Program (CFFP).** ☐ Check if the PHA proposes to use any portion of its Capital Fund Program (CFP)/Replacement Housing Factor (RHF) to repay debt incurred to finance capital improvements. **NOT APPLICABLE**
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.

HOUSING NEEDS OF FAMILIES IN THE JURISDICRION SERVED BY WPHD:

Housing Needs of Families in the Jurisdiction By Waiting List As of January 2012

Program	Units/Vouchers	Wait List	Annual Vacancies	Current Vacancies	Turnaround Time
Public Housing	55	427	7	0	3.7 days
Housing Choice Voucher Program	128	682	5	1	60-90 days

Housing Needs of Families in the Jurisdiction By Ethnicity As of January 2010

Ethnicity	Public Housing	Housing Choice Voucher	Total Applications	Percentage of Total Applications 1,109
White	27	66	93	8.4%
African Amer.	47	56	103	9.3%
Hispanic	116	152	268	24.7%
Native Amer.	179	436	642	57.3
Asian	1	2	3	0.3%

Source: Agency software Lindsey, used to track tenant applications and characteristics.

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.** **Need: Shortage of affordable housing for all eligible populations** **Strategy 1: Maximize the number of affordable units available to the PHA within its current resources** • **Employ effective maintenance and management policies to minimize the public housing unit vacant turnaround time** • **Maintain or increase Section 8 lease-up rates** **Strategy 2: Increase the number of affordable units** • **Apply for additional Section 8 vouchers should they become available**
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. **The WPHD has reduced its vacancy down days from 8.7 to 3.7 days by correcting PIC issues. To paint exterior of 25 units, to repair the parking lot at Henderson Square, to install security screed doors in 17 units.** **The WPHD stays up-to-date on all PIH notices and maintains a Section 8 Administrative Plan and Public Housing Admissions and Continued Occupancy Policy that are up-to-date with all the latest HUD regulations.** (b) Significant Amendment and Substantial Deviation/Modification. Provide the PHA's definition of "significant amendment" and "substantial deviation/modification" **The PHA will consider substantial deviations for the 5-year plan as a fundamental shift in the agency's long range goals and objectives.** **The PHA will consider significant amendments or modifications to the Annual Plan as follows:** • **Change to admissions policies removing all preferences to the waiting list;** • **Eligibility policy will include a list of items to consider under Suitability;** • **Changes to the lease termination include codifying the lease and suitability.**

11.0	**Required Submission for HUD Field Office Review.** In addition to the PHA Plan template (HUD-50075), PHAs must submit the following documents. Items (a) through (g) may be submitted with signature by mail or electronically with scanned signatures, but electronic submission is encouraged. Items (h) through (i) must be attached electronically with the PHA Plan. **Note:** Faxed copies of these documents will not be accepted by the Field Office. (a) Form HUD-50077, *PHA Certifications of Compliance with the PHA Plans and Related Regulations* (which includes all certifications relating to Civil Rights) (b) Form HUD-50070, *Certification for a Drug-Free Workplace* (PHAs receiving CFP grants only) (c) Form HUD-50071, *Certification of Payments to Influence Federal Transactions* (PHAs receiving CFP grants only) (d) Form SF-LLL, *Disclosure of Lobbying Activities* (PHAs receiving CFP grants only) (e) Form SF-LLL-A, *Disclosure of Lobbying Activities Continuation Sheet* (PHAs receiving CFP grants only) (f) Resident Advisory Board (RAB) comments. Comments received from the RAB must be submitted by the PHA as an attachment to the PHA Plan. PHAs must also include a narrative describing their analysis of the recommendations and the decisions made on these recommendations. (g) Challenged Elements (h) Form HUD-50075.1, *Capital Fund Program Annual Statement/Performance and Evaluation Report* (PHAs receiving CFP grants only) (i) Form HUD-50075.2, *Capital Fund Program Five-Year Action Plan* (PHAs receiving CFP grants only)

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

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

Part I: Summary

PHA Name: WINSLOW PUBLIC HOUSING DEPARTMENT	Grant Type and Number Capital Fund Program Grant No: AZ20P0085012 Replacement Housing Factor Grant No: Date of CFFP:	FFY of Grant: 2012 FFY of Grant Approval:

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

Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost [1]	
		Original	Revised[2]	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) [3]	69,727			
3	1408 Management Improvements				
4	1410 Administration (may not exceed 10% of line 21)				
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs				
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures				
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment				
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities [4]				

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

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

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

Part I: Summary

PHA Name: WINSLOW PUBLIC HOUSING DEPARTMENT	**Grant Type and Number** Capital Fund Program Grant No: AZ20P00850112 Replacement Housing Factor Grant No: Date of CFFP:	**FFY of Grant:2012** **FFY of Grant Approval:**

Type of Grant

☒ **Original Annual Statement** ☐ **Reserve for Disasters/Emergencies** ☐ **Revised Annual Statement (revision no:)**

☐ **Performance and Evaluation Report for Period Ending:** ☐ **Final Performance and Evaluation Report**

Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost [1]	
		Original	Revised [2]	Obligated	Expended
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)	69,727			
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 Activities				
23	Amount of line 20 Related to Security - Soft Costs				
24	Amount of line 20 Related to Security - Hard Costs				
25	Amount of line 20 Related to Energy Conservation Measures				

Signature of Executive Director	**Date 03/13/2012**	**Signature of Public Housing Director**	**Date**

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

Part II: Supporting Pages

PHA Name: WINSLOW PUBLIC HOUSING DEPARTMENT	**Grant Type and Number** Capital Fund Program Grant No: AZ20P0085012 CFFP (Yes/ No): Replacement Housing Factor Grant No:	**Federal FFY of Grant: 2012**

Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised [1]	Funds Obligated[2]	Funds Expended[2]	
PHA-Wide	Operations	1406		69,727		00.00	00.00	

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

[2] To be completed for the Performance and Evaluation Report.

Part II: Supporting Pages

PHA Name: WINSLOW PUBLIC HOUSING DEPARTMENT	**Grant Type and Number** Capital Fund Program Grant No: Z20P0085012 CFFP (Yes/ No): Replacement Housing Factor Grant No:	**Federal FFY of Grant: 2012**

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]	

[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 III: Implementation Schedule for Capital Fund Financing Program

PHA Name: WINSLOW PUBLIC HOUSING DEPARTMENT | **Federal FFY of Grant: 2012**

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	
PHA-WIDE	03/11/2014		03/10/2016		

[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.

Part III: Implementation Schedule for Capital Fund Financing Program					
PHA Name: WINSLOW PUBLIC HOUSING DEPARTMENT					**Federal FFY of Grant: 2012**
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	

[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.

Part I: Summary

PHA Name/Number			Locality (City/County & State)		☐ **Original 5-Year Plan** ☐ **Revision No:**	
A.	Development Number and Name	Work Statement for Year 1 FFY 2012	Work Statement for Year 2 FFY 2013	Work Statement for Year 3 FFY 2014	Work Statement for Year 4 FFY 2014	Work Statement for Year 5 FFY 2016
B.	Physical Improvements Subtotal	Annual Statement				
C.	Management Improvements					
D.	PHA-Wide Non-dwelling Structures and Equipment					
E.	Administration					
F.	Other					
G.	Operations		90.00	90,000	100,000	100,000
H.	Demolition					
I.	Development					
J.	Capital Fund Financing – Debt Service					
K.	Total CFP Funds		90,000	90,000	100,000	100,000
L.	Total Non-CFP Funds					
M.	Grand Total	69,727	90,000	90,000	100,000	100,000

Part I: Summary (Continuation)

PHA Name/Number			Locality (City/county & State)		☐ **Original 5-Year Plan** ☐ **Revision No:**	
A.	Development Number and Name	Work Statement for Year 1 FFY 2012	Work Statement for Year 2 FFY 2013	Work Statement for Year 3 FFY 2014	Work Statement for Year 4 FFY 2015	Work Statement for Year 5 FFY2016
		Annual Statement				
	PHA-Wide		Operations -- $ 90,000	Operations -- $90,000	Operations --$100,000	Operations --$100,000
		$69,727				

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

Work Statement for Year 1 FFY 2012	Work Statement for Year 2 FFY			Work Statement for Year: 3 FFY		
	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	PHA-Wide/ OPERATIONS		$90,000	PHA-Wide/ OPERATIONS		$90,000
	Subtotal of Estimated Cost		$90,000	Subtotal of Estimated Cost		$90,000

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

Work Statement for Year 1 FFY 2012	Work Statement for Year 4 FFY			Work Statement for Year: 5 FFY		
	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	PHA-Wide/ OPERATIONS		$100,000	PHA-Wide/ OPERATIONS		$100,000
	Subtotal of Estimated Cost		$100,000	Subtotal of Estimated Cost		$100,000

Part III: Supporting Pages – Management Needs Work Statement(s)

Work Statement for Year 1 FFY 2012	Work Statement for Year 2 FFY 2012		Work Statement for Year: 3 FFY	
	Development Number/Name General Description of Major Work Categories	Estimated Cost	Development Number/Name General Description of Major Work Categories	Estimated Cost
See Annual Statement	*PHA-Wide/ OPERATIONS*	$90,000	*PHA-Wide/ OPERATIONS*	$90,000
	Subtotal of Estimated Cost	$90,000	Subtotal of Estimated Cost	$90,000

Part III: Supporting Pages – Management Needs Work Statement(s)

Work Statement for Year 1 FFY 2012	Work Statement for Year 4 FFY		Work Statement for Year: 5 FFY	
	Development Number/Name General Description of Major Work Categories	Estimated Cost	Development Number/Name General Description of Major Work Categories	Estimated Cost
See Annual Statement	*PHA-Wide/ OPERATIONS*	$100,000	*PHA-Wide/ OPERATIONS*	$100,000
	Subtotal of Estimated Cost	$100,000	Subtotal of Estimated Cost	$100,000

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

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

Part I: Summary

PHA Name: WINSLOW PUBLIC HOUSING DEPARTMENT	**Grant Type and Number** Capital Fund Program Grant No: AZ20P0085011 Replacement Housing Factor Grant No: Date of CFFP:	**FFY of Grant: 2011** **FFY of Grant Approval:**

Type of Grant
☐ **Original Annual Statement** ☐ **Reserve for Disasters/Emergencies** ☐ **Revised Annual Statement (revision no:)**
☐ **Performance and Evaluation Report for Period Ending: 06/20/2012** ☐ **Final Performance and Evaluation Report**

Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost [1]	
		Original	Revised[2]	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) [3]	83,794	0.00	0.00	0.00
3	1408 Management Improvements				
4	1410 Administration (may not exceed 10% of line 21)				
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs				
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures				
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment				
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities [4]				

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

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

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

Part I: Summary

PHA Name: WINSLOW PUBLIC HOUSING DEPARTMENT	**Grant Type and Number** Capital Fund Program Grant No: AZ20P00850111 Replacement Housing Factor Grant No: Date of CFFP:	**FFY of Grant:2011** **FFY of Grant Approval:**

Type of Grant

☐ **Original Annual Statement** ☐ **Reserve for Disasters/Emergencies** ☐ **Revised Annual Statement (revision no:)**

☒ **Performance and Evaluation Report for Period Ending: 06/20/2011** ☐ **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)	83,794	0.00	0.00	0.00
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 Activities				
23	Amount of line 20 Related to Security - Soft Costs				
24	Amount of line 20 Related to Security - Hard Costs				
25	Amount of line 20 Related to Energy Conservation Measures				

Signature of Executive Director **Date** 3-13-2012

Signature of Public Housing Director **Date**

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

Part II: Supporting Pages

PHA Name: WINSLOW PUBLIC HOUSING DEPARTMENT	**Grant Type and Number** Capital Fund Program Grant No: AZ20P00850111 CFFP (Yes/ No): Replacement Housing Factor Grant No:	**Federal FFY of Grant: 2011**

Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised [1]	Funds Obligated[2]	Funds Expended[2]	
PHA-Wide	Operations	1406		83,794	0.00	00.00	00.00	

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

[2] To be completed for the Performance and Evaluation Report.

Part II: Supporting Pages

PHA Name: WINSLOW PUBLIC HOUSING DEPARTMENT	**Grant Type and Number** Capital Fund Program Grant No: Z20P0085011 CFFP (Yes/ No): Replacement Housing Factor Grant No:	**Federal FFY of Grant: 2011**

Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised [1]	Funds Obligated[2]	Funds Expended[2]	

[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 III: Implementation Schedule for Capital Fund Financing Program

PHA Name: WINSLOW PUBLIC HOUSING DEPARTMENT					**Federal FFY of Grant: 2011**
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	
PHA-WIDE	08/02/2013		08/01/2015		

[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.

Part III: Implementation Schedule for Capital Fund Financing Program

PHA Name: WINSLOW PUBLIC HOUSING DEPARTMENT					**Federal FFY of Grant: 2010**
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	

[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.

CHAPTER 3
ELIGIBILITY

PART III: DENIAL OF ASSISTANCE

3-III.A. OVERVIEW

A family that does not meet the following eligibility criteria discussed in Parts I and II, must be denied assistance.

In addition, HUD requires or permits the WPHD to deny assistance based on certain types of current or past behaviors of family members.

Forms of Denial [24 CFR 982.552(a)(2); LRPH GB, p. 5-35]

Denial of assistance includes any of the following:

- Not placing the family's name on the waiting list,
- Denying or withdrawing a voucher,
- Not approving a request for tenancy or refusing to enter into a HAP contract, or

Refusing to process a request for or to provide assistance under portability procedures.

POLICY CHANGE

SUITABLITY

Applicant families will be evaluated to determine whether, based on their recent behavior, such behavior could reasonably be expected to result in noncompliance with the public housing lease.

A. WPHD will look at past conduct as an indicator of future conduct.

B. Emphasis will be placed on whether a family's admission could reasonably be expected to have a detrimental effect on the development environment, other tenants, WPHD's employees, or other people residing in the immediate vicinity of the property.

C. Otherwise eligible families will be denied admission if they fail to meet the suitability criteria.

D. WPHD will consider objective and reasonable aspects of the family's background, including:

> ***1. Its history of meeting rent related financial obligations (i.e. rent and basic gas and electricity service);***

2. Its ability to maintain (or with assistance would have the ability to maintain) its housing in a decent and safe condition based on living or housekeeping habits and whether such habits could adversely affect the health, safety, or welfare of other tenants;

3. Its history of disturbing neighbors or destruction of property as can be obtained by conducting criminal background checks;

4. Any fraud committed in connection with any Federal housing assistance program, including the intentional misrepresentation of information related to the family's housing application or benefits derived there from;

5. The criminal history of each adult household member including:

a. Any family member's history of abusing alcohol in a way that may interfere with the health, safety, or right to peaceful enjoyment by others

b. Crimes of physical violence against persons or property

c. criminal activity that would adversely affect the health, safety or well being of other tenants or staff or cause damage to the property, and

d. Any other criminal activity.

6. WPHD will ask applicants to provide information demonstrating their ability to comply with the essential elements of the lease.

7. WPHD will verify the information provided. Verification may include but may not be limited to the following:

a. A criminal background check on all adult household members including live-in aides

b. A home visit, providing the opportunity to observe the family's housekeeping efforts and care for the property and appliances.

Prohibited Reasons for Denial of Assistance [24 CFR 982.202(b)]

HUD rules prohibit denial of assistance to the program based on any of the following criteria:

- Age, disability, race, color, religion, sex, or national origin. (See Chapter 2 for additional information about fair housing and equal opportunity requirements.)
- Where a family lives prior to admission to the program

4-III.C. SELECTION METHOD

PHAs must describe the method for selecting applicant families from the waiting list, including the system of admission preferences that the WPHD will use.

Local Preferences Low Rent Public Housing

PHAs are permitted to establish local preferences, and to give priority to serving families that meet those criteria. HUD specifically authorizes and places restrictions on certain types of local preferences. HUD also permits the WPHD to establish other local preferences, at its discretion. Any local preferences established must be consistent with the Annual Plan and the Consolidated Plan, and must be based on local housing needs and priorities that can be documented by generally accepted data sources.

WPHD Policy

The WPHD has established the following selection procedure:

Each time intake appointments are scheduled, applicants will be taken from the list in the following ratio: **DELETE**

~~1~~ with the Victim of Domestic Violence ~~preference~~

2 with ~~the Elderly, Disabled~~ or handicapped preference

~~3~~ with No ~~Preference~~

NEW POLICY CHANGE

1 with No Preference

Income Targeting Requirement [24 CFR 982.201(b)(2)]

HUD requires that extremely low-income (ELI) families make up at least 40% of the families admitted to the Low Rent Public Housing program during the WPHD's fiscal year. ELI families are those with annual incomes at or below 30% of the area median income. To ensure this requirement is met, a PHA may skip non-ELI families on the waiting list in order to select an ELI family.

Low income families admitted to the program that are "continuously assisted" under the 1937 Housing Act, as well as low-income or moderate-income families admitted to the program that are displaced as a result of the prepayment of the mortgage or voluntary termination of an

Chapter 10

TERMINATION OF THE PUBLIC HOUSING LEASE

Failure to Provide Social Security Documentation

The PHA must terminate assistance if a participant 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.

Methamphetamine Manufacture or Production

The PHA must terminate assistance if any household member has ever been convicted of the manufacture or production of methamphetamine on the premises of federally-assisted housing.

10-I.E. MANDATORY POLICIES AND OTHER AUTHORIZED TERMINATIONS

HUD requires the PHA to establish policies that permit the PHA to terminate assistance if the PHA determines that:

- Any household member is currently engaged in any illegal use of a drug, or has a pattern of illegal drug use that interferes with the health, safety, or right to peaceful enjoyment of the premises by other residents or staff
- Any household member's abuse or pattern of abuse of alcohol may threaten the health, safety, or right to peaceful enjoyment of the premises by other residents or staff
- Any household member has violated the family's obligation not to engage in any drug-related criminal activity
- Any household member has violated the family's obligation not to engage in violent criminal activity

POLICY CHANGE

DRUG RELATED CRIMINAL ACTIVITY

- **The PHA must immediately and permanently terminate tenancy of persons convicted of manufacturing or producing methamphetamine on the premises of the assisted housing project in violation of any federal or state law. "Premises" is defined as the building or complex in which the dwelling unit is located, including common areas and grounds.**

- **The PHA will terminate assistance of participants in cases where the PHA determines there is reasonable cause to believe that the person is illegally using a controlled substance or engages in drug-related or other criminal activity. The same will apply if it is determined that the person abuses alcohol in a way that interferes with the health, safety or right to peaceful enjoyment of the premises by other residents. This includes cases where the PHA determines that there is a pattern of illegal use of controlled substances or a pattern of alcohol abuse.**

- **The PHA will consider the use of a controlled substance or alcohol abuse to be a *pattern* if there is more than one incident during the previous eighteen (18) months.**

Use of Illegal Drugs and Alcohol Abuse

PHA Policy

The PHA will terminate a family's lease if any household member is currently engaged in any illegal use of a drug, or has a pattern of illegal drug use that interferes with the health, safety, or right to peaceful enjoyment of the premises by other residents or staff.

The PHA will terminate lease if any household member's abuse or pattern of abuse of alcohol threatens the health, safety, or right to peaceful enjoyment of the premises by other residents staff.

Currently engaged in is defined as any use of illegal drugs during the previous six months.

The PHA will consider all credible evidence, including but not limited to, any record of arrests, convictions, or observation by staff related to the use of illegal drugs or abuse of alcohol.

In making its decision to terminate assistance, the PHA will consider alternatives as described in Section 10-II.C and other factors described in Section 10-II.D. Upon consideration of such alternatives and factors, the PHA may, on a case-by-case basis, choose not to terminate assistance.

Chapter 10

TERMINATION OF THE PUBLIC HOUSING LEASE

Drug-Related and Violent Criminal Activity [24 CFR 5.100]

Drug means a controlled substance as defined in section 102 of the Controlled Substances Act (21 U.S.C. 802).

Drug-related criminal activity is defined by HUD as the illegal manufacture, sale, distribution, or use of a drug, or the possession of a drug with intent to manufacture, sell, distribute or use the drug.

Violent criminal activity means any criminal activity that has as one of its elements the use, attempted use, or threatened use of physical force substantial enough to cause, or be reasonably likely to cause, serious bodily injury or property damage.

PHA Policy **DELETE**

~~The PHA will terminate a family's lease if any household member has violated the family's obligation not to engage in any drug-related or violent criminal activity during participation in the HCV program.~~

~~The PHA will consider all credible evidence, including but not limited to, any record of arrests and/or convictions of household members related to drug-related or violent criminal activity, and any staff observations of drug-related or violent criminal activity.~~

POLICY CHANGE

The PHA must immediately and permanently terminate tenancy of persons convicted of manufacturing or producing methamphetamine on the premises of the assisted housing project in violation of any federal or state law. "Premises" is defined as the building or complex in which the dwelling unit is located, including common areas and grounds.

The PHA will terminate assistance of participants in cases where the PHA determines there is reasonable cause to believe that the person is illegally using a controlled substance or engages in drug-related or other criminal activity. The same will apply if it is determined that the person abuses alcohol in a way that interferes with the health, safety or right to peaceful enjoyment of the premises by other residents. This includes cases where the PHA determines that there is a pattern of illegal use of controlled substances or a pattern of alcohol abuse.

The PHA will consider the use of a controlled substance or alcohol abuse to be a pattern if there is more than one incident during the previous eighteen (18) months.

The PHA may permit continued occupancy provided the family accepts imposed conditions that the involved family member(s) does not reside in the unit. The PHA will consider evidence that the person is no longer in the household such as a divorce decree/incarceration/ death/copy of a new lease or the person including the owner's telephone number and address/or other substantiating evidence.

In making its decision to terminate assistance, the PHA will consider alternatives as described in Section 10-II.C and other factors described in Section 10-II.D. Upon consideration of such alternatives and factors, the PHA may, on a case-by-case basis, choose not to terminate assistance.

Other Authorized Reasons for Termination of the Public Housing Lease

HUD permits the PHA to terminate the lease under a number of other circumstances. It is left to the discretion of the PHA whether such circumstances in general warrant consideration for the termination of assistance.

PHA Policy

The PHA **will** terminate a family's lease if:

The family has failed to comply with any family obligations under the program. See Exhibit 10-1 for a listing of family obligations and related PHA policies.

Any family member has committed fraud, bribery, or any other corrupt or criminal act in connection with any federal housing program.

It is learned that the family currently owes rent or other amounts to any PHA in connection with the HCV, Certificate, Moderate Rehabilitation or public housing programs.

It is learned that the family has not reimbursed any PHA for amounts the PHA paid to an owner under a HAP contract for rent, damages to the unit, or other amounts owed by the family under the lease in the Section 8 program.

The family has breached the terms of a repayment agreement entered into with the PHA.

A family member has engaged in or threatened violent or abusive behavior toward tenant's or PHA personnel.

Abusive or violent behavior towards tenant's or PHA personnel includes verbal as well as physical abuse or violence. Use of racial epithets, or other language, written or oral, that is customarily used to intimidate may be considered abusive or violent behavior.

Threatening refers to oral or written threats or physical gestures that communicate intent to abuse or commit violence.

Policy Change

The lease may be terminated by the PHA at any time by giving written notice for violation of material terms of the lease, such as, but not limited to the following:

Nonpayment of rent or other charges due under the lease or chronic late payment of rent (late more than four times in a twelve-month period)

Failure to pay reasonable charges that are caused by the resident(s) or guest(s) under the resident(s) control (other than for normal wear and tear) for the repair of damages to the premises, project buildings, facilities, equipment, or common areas

Failure to provide, pay for and maintain all utilities not furnished by the Housing authority

Failure to provide timely and accurate statements of income, assets, expenses and family composition at admission, interim, special or annual rent recertification's

Non-compliance with non-citizen rule requirements

Discovery, after admission, of any inaccurate facts or omission of information that would have made the resident ineligible

Use of the premises for purposes other than solely as a dwelling unit for the resident and resident's household as identified in this Lease, or permitting its use for any other purposes

Assignment or subleasing of the premises or providing accommodation for boarders or lodgers and/or allowing previous residents that have been evicted and or had their lease terminated by the housing authority access to and/or on property or premises

Failure to abide by posted house rules, necessary and reasonable rules and/or other notices made by the PHA for the benefit and well being of the housing development and the residents

Alcohol abuse that the PHA determines interferes with the health, safety, or right to peaceful enjoyment of the premises by other residents (See Chapter 3 Suitability)

Failure to abide by applicable building and housing codes materially affecting health and/or safety

Failure to dispose of garbage waste and rubbish in a safe and sanitary manner and/or non compliance with recycling protocol

Failure to dispose of pet waste or control pet(s) (i.e.; use of leash, barking

dog, loose cat etc.) in accordance with pet policy and agreement. Feeding or harboring stray or wild animals

Failure to use electrical, plumbing, heating, ventilating, air conditioning and other equipment, in a safe manner

Acts of destruction, defacement or removal of any part of the premises, or failure to cause guests to refrain from such acts

Failure to report adult members criminal activity, arrests, convictions, at annual recertifications (add a self certification that resident and/or members of household have not been involved in any criminal activity

Criminal or other activity by an adult member of the household that threatens the health and safety of other public housing residents in the immediate vicinity of the premises

Criminal activity by an adult member of the household that threatens the health and safety of PHA staff

The resident, any member of the resident's household, or a guest shall not engage in drug-related or violent criminal activity, in, on or near public housing premises (as defined in the lease), while the resident resides in public housing. Such criminal activity shall be cause for termination of tenancy. The term "drug-related criminal activity" means the illegal manufacture, sale, distribution, use or possession with intent to manufacture, sell, distribute, or use, a controlled substance (as defined in section 102 of the Controlled Substances Act (21 U.S.C. 802)). If contraband or a controlled substance is seized on the above premises, incidental to a lawful search or arrest, the landlord (the PHA) will bring an unlawful detainer against that resident

Violating a condition of probation or parole imposed under federal or state law

Fleeing to avoid prosecution, custody, or confinement after conviction for a crime, or attempt to commit a crime that is a felony under the laws of the place from which the tenant flees

Other good cause

In making its decision to terminate assistance, the PHA will consider alternatives as described in Section 10-II.C and other factors described in Section 10-II.D. Upon consideration of such alternatives and factors, the PHA may, on a case-by-case basis, choose not to terminate assistance.