

|                                                                 |                                                                                                 |                                                        |
|-----------------------------------------------------------------|-------------------------------------------------------------------------------------------------|--------------------------------------------------------|
| <b>Streamlined Annual<br/>PHA Plan</b><br>( <i>Small PHAs</i> ) | <b>U.S. Department of Housing and Urban Development<br/>Office of Public and Indian Housing</b> | <b>OMB No. 2577-0226</b><br><b>Expires: 02/29/2016</b> |
|-----------------------------------------------------------------|-------------------------------------------------------------------------------------------------|--------------------------------------------------------|

**Purpose.** The 5-Year and Annual PHA Plans provide a ready source for interested parties to locate basic PHA policies, rules, and requirements concerning the PHA's operations, programs, and services, and informs HUD, families served by the PHA, and members of the public of the PHA's mission, goals and objectives for serving the needs of low- income, very low- income, and extremely low- income families

**Applicability.** Form HUD-50075-SM is to be completed annually by **Small PHAs**. PHAs that meet the definition of a Standard PHA, Troubled PHA, High Performer PHA, HCV-Only PHA, or Qualified PHA do not need to submit this form.

**Definitions.**

- (1) **High-Performer PHA** – A PHA that owns or manages more than 550 combined public housing units and housing choice vouchers, and was designated as a high performer on both of the most recent Public Housing Assessment System (PHAS) and Section Eight Management Assessment Program (SEMAP) assessments.
- (2) **Small PHA** - A PHA that is not designated as PHAS or SEMAP troubled, or at risk of being designated as troubled, and that owns or manages less than 250 public housing units and any number of vouchers where the total combined units exceeds 550.
- (3) **Housing Choice Voucher (HCV) Only PHA** - A PHA that administers more than 550 HCVs, was not designated as troubled in its most recent SEMAP assessment, and does not own or manage public housing.
- (4) **Standard PHA** - A PHA that owns or manages 250 or more public housing units and any number of vouchers where the total combined units exceeds 550, and that was designated as a standard performer in the most recent PHAS or SEMAP assessments.
- (5) **Troubled PHA** - A PHA that achieves an overall PHAS or SEMAP score of less than 60 percent.
- (6) **Qualified PHA** - A PHA with 550 or fewer public housing dwelling units and/or housing choice vouchers combined, and is not PHAS or SEMAP troubled.

| A.                 | PHA Information.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                    |          |                             |                                 |                              |                                 |                              |     |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|--------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------|----------|-----------------------------|---------------------------------|------------------------------|---------------------------------|------------------------------|-----|-----------|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|
| A.1                | <p>PHA Name: <u>Housing Authority of the City of Salem</u>      PHA Code: <u>OR011</u></p> <p>PHA Type: <input checked="" type="checkbox"/> Small   <input checked="" type="checkbox"/> High Performer</p> <p>PHA Plan for Fiscal Year Beginning: (MM/YYYY): <u>10/2020</u></p> <p>PHA Inventory (Based on Annual Contributions Contract (ACC) units at time of FY beginning, above)</p> <p>Number of Public Housing (PH) Units <u>137</u>      Number of Housing Choice Vouchers (HCVs) <u>3397</u></p> <p>Total Combined <u>3534</u></p> <p>PHA Plan Submission Type: <input checked="" type="checkbox"/> Annual Submission      <input type="checkbox"/> Revised Annual Submission</p> <p><b>Availability of Information.</b> In addition to the items listed in this form, PHAs must have the elements listed below readily available to the public. A PHA must identify the specific location(s) where the proposed PHA Plan, PHA Plan Elements, and all information relevant to the public hearing and proposed PHA Plan are available for inspection by the public. Additionally, the PHA must provide information on how the public may reasonably obtain additional information of the PHA policies contained in the standard Annual Plan, but excluded from their streamlined submissions. At a minimum, PHAs must post PHA Plans, including updates, at each Asset Management Project (AMP) and main office or central office of the PHA. PHAs are strongly encouraged to post complete PHA Plans on their official website. PHAs are also encouraged to provide each resident council a copy of their PHA Plans.</p> <p><b>Housing Authority of the City of Salem</b><br/>360 Church Street SE<br/>Salem, OR 97301</p> <p><input type="checkbox"/> <b>PHA Consortia:</b> (Check box if submitting a Joint PHA Plan and complete table below)</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th rowspan="2">Participating PHAs</th> <th rowspan="2">PHA Code</th> <th rowspan="2">Program(s) in the Consortia</th> <th rowspan="2">Program(s) not in the Consortia</th> <th colspan="2">No. of Units in Each Program</th> </tr> <tr> <th>PH</th> <th>HCV</th> </tr> </thead> <tbody> <tr> <td>Lead PHA:</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table> | Participating PHAs | PHA Code | Program(s) in the Consortia | Program(s) not in the Consortia | No. of Units in Each Program |                                 | PH                           | HCV | Lead PHA: |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Participating PHAs | PHA Code                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                    |          |                             |                                 | Program(s) in the Consortia  | Program(s) not in the Consortia | No. of Units in Each Program |     |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | PH                 | HCV      |                             |                                 |                              |                                 |                              |     |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Lead PHA:          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                    |          |                             |                                 |                              |                                 |                              |     |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                    |          |                             |                                 |                              |                                 |                              |     |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                    |          |                             |                                 |                              |                                 |                              |     |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

|            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |  |  |  |  |  |
|------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|--|--|--|
|            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |  |  |  |  |  |
| <b>B.</b>  | <b>Annual Plan Elements Submitted with 5-Year PHA Plans.</b> Required elements for all PHAs completing this document in years in which the 5-Year Plan is also due. This section does not need to be completed for years when a PHA is not submitting its 5-Year Plan. See Section C for required elements in all other years (Years 1-4).                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |  |  |  |  |  |
| <b>B.1</b> | <b>Revision of PHA Plan Elements.</b><br><br>(a) Have the following PHA Plan elements been revised by the PHA since its last <b>Five-Year PHA Plan</b> submission?<br><br>Y    N<br><input type="checkbox"/> <input checked="" type="checkbox"/> Statement of Housing Needs and Strategy for Addressing Housing Needs.<br><input type="checkbox"/> <input checked="" type="checkbox"/> Deconcentration and Other Policies that Govern Eligibility, Selection, and Admissions.<br><input type="checkbox"/> <input checked="" type="checkbox"/> Financial Resources.<br><input type="checkbox"/> <input checked="" type="checkbox"/> Rent Determination.<br><input type="checkbox"/> <input checked="" type="checkbox"/> Homeownership Programs.<br><input type="checkbox"/> <input checked="" type="checkbox"/> Substantial Deviation.<br><input type="checkbox"/> <input checked="" type="checkbox"/> Significant Amendment/Modification<br><br>(b) The PHA must submit its Deconcentration Policy for Field Office Review.<br><br><b>Changes to Public Housing ACOP</b><br>1) <i>Waiting list preference for former Public Housing residents who do not qualify for their current unit after conversion under RAD. This means that households whose income is over the 60% limit for the LIHTC funding in the RAD properties, but under 80% AMI, can be placed back into Public Housing units so they will not be displaced from assisted housing. (Page 84)</i><br>2) <i>VAWA transfers are prioritized among emergency transfers (previously there was no prioritization). (Page 87)</i><br>3) <i>Unit size determination now stipulates that one bedroom will be assigned for Head of Household and Spouse/Spousal Equivalent (if present) and then one bedroom for every 2 household members thereafter (i.e. a mother and child would qualify for a 2-bedroom unit; a married couple would qualify for a 1-bedroom unit). This is an update to the previous language that stipulated one bedroom for every 2 people. (Page 93)</i><br>4) <i>Utility allowances will be applied at the annual recertification if the amount decreased since the last utility allowance revision (page 139). Most of the time, UAs go up, but we had one this year that went down significantly, and applying it at an interim recertification could result in an increase of rent even if the household income went down – this allows us to put it off until the annual recert.</i><br><br><b>Section 13-III.C. Other Authorized Reasons for Termination</b><br><br>SHA's Public Housing Admissions and Continuing Occupancy Policy (ACOP) currently states:<br><br><b>Over-Income Families<sup>1</sup></b><br><br>Subject to certain restrictions, HUD authorizes SHA to evict or terminate the tenancies of families because they are over income. Unless required to do so by local law, SHA may not evict or terminate the tenancy of a family solely because the family is over income if: (1) the family has a valid contract of participation in the Family Self-Sufficiency (FSS) program, or (2) the family is currently receiving the earned income disallowance. This rule does not require SHA evict over-income residents, but rather gives SHA the discretion to do so thereby making units available for applicants who are income-eligible.<br><br><u>SHA Policy</u><br><br><i>SHA will take the proper steps to evict or terminate the tenancies of families who, at recertification, verify to have income over the applicable low (80%) AMI for their family size. Exception to this policy will be made if a family member of the resident household is pursuing self-sufficiency (through the FSS Program or actively purchasing a home) and/or receiving a mandatory earned income disregard.</i><br><br>(c) If the PHA answered yes for any element, describe the revisions for each element below:<br><br><b>Anticipated Changes to the Section 8 Administrative Plan</b><br><br>SHA intends to revise the Section 8 Administrative Plan as follows. Headings and sections may change, be added or removed. These anticipated changes are to provide a general outline as to the way in which the Section 8 Administrative Plan will be changed.<br><br>1) Delineate all policies required and necessary to administer SHA's PBVs. These policies will likely include the following: (1) general requirements; (2) PBV owner proposals; (3) dwelling units; (4) rehabilitation and newly constructed units; (5) housing assistance payments contracts; (6) waiting list order and selection of PBV program participants; (7) occupancy; (8) determining rent to owner; and (9) payments to owner, including vacancy payments.<br>2) Establish policies relating to mail-in income recertifications.<br>3) Clarify the calculation of medical allowances for the calculation of participant rent share.<br>4) Update criminal background screening to include only criminal activity that requires a mandatory denial under the Code of Federal |  |  |  |  |  |

<sup>1</sup> 24 CFR 960.261 and FR 11/26/04, p. 68786

|                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
|-------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
|                   | <p>Regulations.</p> <p>5) Establish waiting list application criteria for special Voucher types (i.e. Mainstream Vouchers for Non-Elderly Disabled participants) and targeted populations (Domestic Violence and Homeless Rental Assistance Program graduates).</p> <p>6) Establish policies relating to the eligibility of caretakers of children when all other adults in the household are permanently absent.</p> <p>7) Update outdated language and references to federal regulations, HUD notices, and other guidance to ensure the Administrative Plan aligns with current HUD requirements.</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |
| <p><b>B.2</b></p> | <p><b>New Activities.</b></p> <p>(a) Does the PHA intend to undertake any new activities related to the following in the PHA's current Fiscal Year?</p> <p>Y    N</p> <p><input type="checkbox"/> <input checked="" type="checkbox"/> Hope VI or Choice Neighborhoods.</p> <p><input type="checkbox"/> <input checked="" type="checkbox"/> Mixed Finance Modernization or Development.</p> <p><input checked="" type="checkbox"/> <input type="checkbox"/> Demolition and/or Disposition.</p> <p><input type="checkbox"/> <input checked="" type="checkbox"/> Conversion of Public Housing to Tenant Based Assistance.</p> <p><input type="checkbox"/> <input type="checkbox"/> Conversion of Public Housing to Project-Based Assistance under RAD.</p> <p><input checked="" type="checkbox"/> <input type="checkbox"/> Project Based Vouchers.</p> <p><input type="checkbox"/> <input checked="" type="checkbox"/> Units with Approved Vacancies for Modernization.</p> <p><input type="checkbox"/> <input checked="" type="checkbox"/> Other Capital Grant Programs (i.e., Capital Fund Community Facilities Grants or Emergency Safety and Security Grants).</p> <p>(b) If any of these activities are planned for the current Fiscal Year, describe the activities. For new demolition activities, describe any public housing development or portion thereof, owned by the PHA for which the PHA has applied or will apply for demolition and/or disposition approval under section 18 of the 1937 Act under the separate demolition/disposition approval process. If using Project-Based Vouchers (PBVs), provide the projected number of project-based units and general locations, and describe how project basing would be consistent with the PHA Plan.</p> <p><b>Conversion of Public Housing through Section 18 program.</b></p> <p>The remaining public housing stock, 137 units, has been determined a good candidate for the Section 18 Demolition / Disposition. The plan is to replace these units with more sustainable housing for the long-term future.</p> <p><b>Phase 1 – 11-4 Multifamily Units – Project # OR011203300 (58 units)</b><br/>Unit Mix – 42 3-Bedroom, 12 4-Bedroom and 4 5-Bedroom units</p> <p>Shelton Village<br/>2540-2578 SE Lee St<br/>Salem, OR 97301</p> <p>Glen Creek Village<br/>1260-1318 Orchard Heights Rd<br/>Salem, OR 97304</p> <p><b>Phase 2 – 11-9 Scattered Sites – Project # OR011203100 (79 Units)</b><br/>Unit Mix – 20 2-Bedroom, 51 3 Bedroom and 8 4-Bedroom units</p> <p>Locations vary around the city of Salem/Keizer.</p> <p>SHA plans to replace these units with more sustainable housing for the long-term future. SHA is looking to acquire replacement units in a new location (or locations) that would suitably house current residents. SHA is committed to our mission and providing durable, safe, and affordable housing, and we believe replacing these public housing units aligns with our mission.</p> <p>This process will take place over a long period of time. The goal is to start the application in late 2020 and begin replacing units in phases once approved. One phase will be to replace the two multi-family buildings, and one phase will be replacement of the scattered site homes. Appropriate replacement units will be selected for their quality of construction, durability, location, and ease of management within SHA's available funding and budget. It is anticipated that each phase will take 3 – 5 years to complete.</p> <p>SHA will follow HUD guidance on best practices under the Uniform Relocation Act as well as guidance from the Field Office on which phase is most suitable to implement first.</p> <p><b>Project Based Vouchers</b></p> <p>SHA is permitted by HUD regulations to convert a maximum of 20 percent of its Housing Choice Voucher allocation to Project Based Vouchers (PBVs).</p> <p>SHA has been granting PBVs to projects including those that help house challenging populations such as the chronically homeless and individuals who require specific supportive services. SHA also continues to provide VASH project-based vouchers as outlined in its 2018 Annual Plan.</p> <p><b><u>PBV Site Selection Policy</u></b><br/><b><u>Determinations</u></b></p> <p>Prior to selecting a PBV proposal, SHA must first determine that the site: (1) is consistent with SHA's goal of deconcentrating poverty and expanding housing and economic opportunities; (2) the site is suitable from the standpoint of facilitating and furthering full compliance with the applicable provisions of Title VI of the Civil Rights Act of 1964, Title VIII of the Civil Rights Act of 1968. Executive Order 11063, and all relevant implementing</p> |

regulations established by HUD (24 CFR part 1; 24 CFR parts 100-199; and 24 CFR part 2017, respectively). SHA will apply the standard for deconcentrating poverty that is provided by the PHA Plan and SHA's Section 8 Administrative Plan. SHA must also determine that the site meets the Section 504 site selection requirements established by 24 CFR 8.4(b)(5), the HQS standards set forth in 24 CFR 982.401(l), and the housing site and neighborhood standards under 24 CFR 983.57(d)-(e).

#### ***Considerations***

SHA shall consider the following when awarding PBVs:

- (1) Whether the census tract in which the proposed PBV development will be located is in a HUD-designated Enterprise Zone, Economic Community, or Renewal Community;
- (2) Whether a PBV development will be located in a census tract where the concentration of assisted units will be or has decreased as a result of public housing demolition;
- (3) Whether the census tract in which the proposed PBV development will be located is undergoing significant revitalization;
- (4) Whether state, local, or federal dollars have been invested in the area that has assisted in the achievement of the statutory requirement;
- (5) Whether new market rate units are being developed in the same census tract where the proposed PBV development will be located and the likelihood that such market rate units will positively impact the poverty rate in the area;
- (6) If the poverty rate in the area where the proposed PBV development will be located is greater than 20 percent, the PHA should consider whether in the past five years there has been an overall decline in the poverty rate; and
- (7) Whether there are meaningful opportunities for educational and economic advancement in the census tract where the proposed PBV development will be located.

#### ***Site Selection***

After making the above-stated determinations and taking into account the above-stated considerations, SHA shall select the proposal that it determines will best further the goals stated in its PHA Plan and that are intended to be further through the PBV selection and award.

#### **Description of SHA's PBVs as of 6/1/2020**

| <b>Owner/Manager</b> | <b>Project</b>       | <b>Location</b> | <b>Awarded</b> | <b>Project-Based</b> |
|----------------------|----------------------|-----------------|----------------|----------------------|
| SHA                  | Redwood Crossings    | NE Salem        | 31             | 31 – 7/2020          |
| SHA                  | Yaquina Hall         | NE Salem        | 51             | 0                    |
| SHA                  | Southfair Apartments | NE Salem        | 32             | 0                    |
| <b>Total</b>         |                      |                 | 114            | 0                    |

**Awarded** – Project has been allocated voucher to be project-based when development is complete and ready for occupancy.

**Project-Based** – Vouchers have been attached to specific units.

#### **Description of Consistency with PHA Plan**

SHA made all required determinations and considered all factors under 24 CFR 983.57 when awarding the PBVs described above. The projects to which the PBVs were awarded are located in census tracts where there are meaningful opportunities for educational and economic advancement, therefore; the award of these PBVs is consistent with the PHA Plan goals of expanding the supply of affordable housing, increasing assisted housing choices, providing improved living environments, and promoting self-sufficiency.

|     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |
|-----|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| B.3 | <p><b>Progress Report.</b></p> <p>Provide a description of the PHA’s progress in meeting its Mission and Goals described in the PHA 5-Year Plan.</p> <p><b>SHA Goal: Expand the supply of assisted housing</b></p> <ul style="list-style-type: none"> <li>• SHA utilizes CDBG and tax credits to provide additional affordable housing units outside of the Public Housing and Housing Choice Voucher programs.</li> <li>• SHA is utilizing CDBG and other funding sources to construct a total of 87 units across two projects that are slated to begin construction early 2020 – Redwood Crossings and Late 2020 – Yaquina Hall.</li> <li>• SHA has acquired a property and will begin lease up on 36 Single Room Occupancy and 1 one-bedroom affordable housing units that will open Summer 2020.</li> <li>• SHA is also converting a community space at the Southfair Apartments affordable housing project to create two additional ADA units which is set to begin in late 2020.</li> </ul> <p><b>SHA Goal: Improve the quality of assisted housing</b></p> <ul style="list-style-type: none"> <li>• SHA strives to keep its status as “High Performer” in both the Public Housing Assessment System and Section 8 Management Assessment Program.</li> <li>• Each year SHA utilizes Capital Fund Program funds to modernize Public Housing units to maintain the long-term viability of those units.</li> <li>• Public Housing units and sites are made accessible as required.</li> <li>• SHA is also converting a community space at the Southfair Apartments affordable housing project to create two additional ADA units.</li> </ul> <p><b>SHA Goal: Increase assisted housing choices</b></p> <ul style="list-style-type: none"> <li>• SHA provides special vouchers and preferences to veterans, homeless families and victims of domestic violence.</li> <li>• SHA owns and manages other affordable housing in addition to the PH and HCV programs.</li> <li>• Through the Emergency Housing Network SHA coordinates with and supports other housing and service providers in the community.</li> <li>• SHA is involved with its local renter’s association and plays an active role in educating landlords about the HCV program and encouraging their participation.</li> </ul> <p><b>SHA Goal: Provide an improved living environment</b></p> <ul style="list-style-type: none"> <li>• All SHA-owned and managed properties have been designated as non-smoking sites.</li> <li>• SHA works closely with residents to improve the sense of community at multi-family sites. One project utilizes a community garden to meet these goals.</li> <li>• SHA maintains all properties in excellent condition.</li> <li>• SHA timely and adequately responds to all maintenance requests</li> </ul> <p><b>SHA Goal: Promote self-sufficiency and asset development of assisted households</b></p> <ul style="list-style-type: none"> <li>• Grant-funded Family Self Sufficiency (FSS) Coordinators are successfully helping both Voucher and Public Housing families to achieve self-sufficiency.</li> <li>• SHA also administers Valley Individual Development Accounts (VIDAs) to help Public Housing and Voucher clients build savings and assets.</li> <li>• SHA works with the Oregon Dept. of Human Services to provide Family Unification Vouchers and support services to families at risk of separation.</li> </ul> <p><b>SHA Goal: Ensure equal opportunity and affirmatively further fair housing</b></p> <ul style="list-style-type: none"> <li>• The Housing Authority of the City of Salem does not discriminate against any person due to disability; race; color; religion; sex; source of income; familial status; national origin; or actual or perceived sexual orientation, gender identity, marital status and/or domestic partnership in accessing, applying for or receiving assistance, or in treatment or employment in any of its programs and activities.</li> <li>• All public meetings are held in accessible locations. Appropriate aids (assistive listening device, interpreters, readers, assistance filling out forms, etc.) are provided upon request.</li> <li>• Some Public Housing and affordable housing units are accessible to persons with disabilities.</li> <li>• For its affordable housing properties, SHA develops affirmative fair housing marketing plans, develops community contacts, and provides outreach to meet its marketing goals.</li> </ul> <p><b>SHA Goal: Preservation of affordable housing</b></p> <ul style="list-style-type: none"> <li>• In late 2020 / early 2021, SHA intends to begin an extensive rehabilitation on Southfair Apartments. SHA will utilize a variety of funding sources to revitalize and extend the life of Southfair Apartments to continue to serve low income individuals.</li> <li>• In 2019, SHA began construction on RAD Phase 1 to rehabilitate its AMP3 multifamily apartments. This project is underway and lease up started early 2020 in newly renovated homes.</li> </ul> <p><b>SHA Goal: Response to Covid-19</b></p> <ul style="list-style-type: none"> <li>• As the global response to Covid-19 continues, SHA intends to review and follow all provided guidance and respond with measures that protect the health and safety of our clients to the best of our ability. While the goals outlines above are still in place, some may be modified to fit State of Oregon mandatory orders put forth by the Governor.</li> </ul> |
|-----|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

|      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |
|------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| C.   | <b>Annual Plan Elements Submitted All Other Years (Years 1-4).</b> Required elements for all other fiscal years. This section does not need to be completed in years when a PHA is submitting its 5-Year PHA Plan.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
| C.1. | <p><b>New Activities</b></p> <p>(a) Does the PHA intend to undertake any new activities related to the following in the PHA's current Fiscal Year?</p> <p>Y   N</p> <p><input type="checkbox"/> <input checked="" type="checkbox"/> Hope VI or Choice Neighborhoods.</p> <p><input type="checkbox"/> <input checked="" type="checkbox"/> Mixed Finance Modernization or Development.</p> <p><input checked="" type="checkbox"/> <input type="checkbox"/> Demolition and/or Disposition.</p> <p><input type="checkbox"/> <input checked="" type="checkbox"/> Conversion of Public Housing to Tenant-Based Assistance.</p> <p><input checked="" type="checkbox"/> <input type="checkbox"/> Project Based Vouchers.</p> <p><input type="checkbox"/> <input checked="" type="checkbox"/> Other Capital Grant Programs (i.e., Capital Fund Community Facilities Grants or Emergency Safety and Security Grants).</p> <p>(b) If any of these activities are planned for the current Fiscal Year, describe the activities. For new demolition activities, describe any public housing development or portion thereof, owned by the PHA for which the PHA has applied or will apply for demolition and/or disposition approval under section 18 of the 1937 Act under the separate demolition/disposition approval process.</p> <p><b>C.1. (b) Demolition and/or Disposition</b></p> <p>The remaining public housing stock, 137 units, has been determined a good candidate for the Section 18 Demolition / Disposition. The plan is to replace these units with more sustainable housing for the long-term future.</p> <p>Currently, one of the buildings is in a designated floodway, one is in a floodplain, and the remaining are scattered homes which will make managing them in the long term more difficult.</p> <p><b>Phase 1 – 11-4 Multifamily Units – Project # OR011203300 (58 units)</b><br/> Unit Mix – 42 3-Bedroom, 12 4-Bedroom and 4 5-Bedroom units</p> <p>Shelton Village<br/> 2540-2578 SE Lee St<br/> Salem, OR 97301</p> <p>Glen Creek Village<br/> 1260-1318 Orchard Heights Rd<br/> Salem, OR 97304</p> <p><b>Phase 2 – 11-9 Scattered Sites – Project # OR011203100 (79 Units)</b><br/> Unit Mix – 20 2-Bedroom, 51 3 Bedroom and 8 4-Bedroom units</p> <p>Locations vary around the city of Salem/Keizer.</p> <p>SHA plans to replace these units with more sustainable housing for the long-term future. SHA is looking to acquire replacement units in a new location (or locations) that would suitably house current residents. SHA is committed to our mission and providing durable, safe, and affordable housing, and we believe replacing these public housing units aligns with our mission.</p> <p>This process will take place over a long period of time. The goal is to start the application in late 2020 and begin replacing units in phases once approved. One phase will be to replace the two multi-family buildings, and one phase will be replacement of the scattered site homes. Appropriate replacement units will be selected for their quality of construction, durability, location, and ease of management within SHA's available funding and budget. It is anticipated that each phase will take 3 – 5 years to complete.</p> <p>SHA will follow HUD guidance on best practices under the Uniform Relocation Act as well as guidance from the Field Office on which phase is most suitable to implement first.</p> <p>(c) If using Project-Based Vouchers, provide the projected number of project-based units, general locations, and describe how project-basing would be consistent with the PHA Plan.</p> <p>(d) The PHA must submit its Deconcentration Policy for Field Office Review.</p> <p><b>C.1 (b) Project Based Vouchers</b></p> <p>SHA is permitted by HUD regulations to convert a maximum of 20 percent of its Housing Choice Voucher allocation to Project Based Vouchers (PBVs).</p> <p>SHA has been granting PBVs to projects including those that help house challenging populations such as the chronically homeless and individuals who require specific supportive services. SHA also continues to provide VASH project-based vouchers as outlined in its 2018 Annual Plan.</p> <p><b><u>PBV Site Selection Policy</u></b><br/> <b><u>Determinations</u></b></p> |

|               | <p>Prior to selecting a PBV proposal, SHA must first determine that the site: (1) is consistent with SHA's goal of deconcentrating poverty and expanding housing and economic opportunities; (2) the site is suitable from the standpoint of facilitating and furthering full compliance with the applicable provisions of Title VI of the Civil Rights Act of 1964, Title VIII of the Civil Rights Act of 1968, Executive Order 11063, and all relevant implementing regulations established by HUD (24 CFR part 1; 24 CFR parts 100-199; and 24 CFR part 2017, respectively). SHA will apply the standard for deconcentrating poverty that is provided by the PHA Plan and SHA's Section 8 Administrative Plan. SHA must also determine that the site meets the Section 504 site selection requirements established by 24 CFR 8.4(b)(5), the HQS standards set forth in 24 CFR 982.401(l), and the housing site and neighborhood standards under 24 CFR 983.57(d)-(e).</p> <p><b>Considerations</b><br/>SHA shall consider the following when awarding PBVs:</p> <ol style="list-style-type: none"> <li>(1) Whether the census tract in which the proposed PBV development will be located is in a HUD-designated Enterprise Zone, Economic Community, or Renewal Community;</li> <li>(2) Whether a PBV development will be located in a census tract where the concentration of assisted units will be or has decreased as a result of public housing demolition;</li> <li>(3) Whether the census tract in which the proposed PBV development will be located is undergoing significant revitalization;</li> <li>(4) Whether state, local, or federal dollars have been invested in the area that has assisted in the achievement of the statutory requirement;</li> <li>(5) Whether new market rate units are being developed in the same census tract where the proposed PBV development will be located and the likelihood that such market rate units will positively impact the poverty rate in the area;</li> <li>(6) If the poverty rate in the area where the proposed PBV development will be located is greater than 20 percent, the PHA should consider whether in the past five years there has been an overall decline in the poverty rate; and</li> <li>(7) Whether there are meaningful opportunities for educational and economic advancement in the census tract where the proposed PBV development will be located.</li> </ol> <p><b>Site Selection</b><br/>After making the above-stated determinations and taking into account the above-stated considerations, SHA shall select the proposal that it determines will best further the goals stated in its PHA Plan and that are intended to be further through the PBV selection and award.</p> <p><b>Description of SHA's PBVs as of 6/1/2020</b></p> <table border="1" data-bbox="180 840 1425 968"> <thead> <tr> <th>Owner/Manager</th><th>Project</th><th>Location</th><th>Awarded</th><th>Project-Based</th></tr> </thead> <tbody> <tr> <td>SHA</td><td>Redwood Crossings</td><td>NE Salem</td><td>31</td><td>31 – 7/2020</td></tr> <tr> <td>SHA</td><td>Yaquina Hall</td><td>NE Salem</td><td>51</td><td>0</td></tr> <tr> <td>SHA</td><td>Southfair Apartments</td><td>NE Salem</td><td>32</td><td>0</td></tr> <tr> <td colspan="3"><b>Total</b></td><td><b>114</b></td><td><b>0</b></td></tr> </tbody> </table> <p><b>Awarded</b> – Project has been allocated voucher to be project-based when development is complete and ready for occupancy.<br/><b>Project-Based</b> – Vouchers have been attached to specific units.</p> <p><b>Description of Consistency with PHA Plan</b><br/>SHA made all required determinations and considered all factors under 24 CFR 983.57 when awarding the PBVs described above. The projects to which the PBVs were awarded are located in census tracts where there are meaningful opportunities for educational and economic advancement, therefore; the award of these PBVs is consistent with the PHA Plan goals of expanding the supply of affordable housing, increasing assisted housing choices, providing improved living environments, and promoting self-sufficiency.</p> | Owner/Manager | Project    | Location      | Awarded | Project-Based | SHA | Redwood Crossings | NE Salem | 31 | 31 – 7/2020 | SHA | Yaquina Hall | NE Salem | 51 | 0 | SHA | Southfair Apartments | NE Salem | 32 | 0 | <b>Total</b> |  |  | <b>114</b> | <b>0</b> |
|---------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------|------------|---------------|---------|---------------|-----|-------------------|----------|----|-------------|-----|--------------|----------|----|---|-----|----------------------|----------|----|---|--------------|--|--|------------|----------|
| Owner/Manager | Project                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | Location      | Awarded    | Project-Based |         |               |     |                   |          |    |             |     |              |          |    |   |     |                      |          |    |   |              |  |  |            |          |
| SHA           | Redwood Crossings                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | NE Salem      | 31         | 31 – 7/2020   |         |               |     |                   |          |    |             |     |              |          |    |   |     |                      |          |    |   |              |  |  |            |          |
| SHA           | Yaquina Hall                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | NE Salem      | 51         | 0             |         |               |     |                   |          |    |             |     |              |          |    |   |     |                      |          |    |   |              |  |  |            |          |
| SHA           | Southfair Apartments                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | NE Salem      | 32         | 0             |         |               |     |                   |          |    |             |     |              |          |    |   |     |                      |          |    |   |              |  |  |            |          |
| <b>Total</b>  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |               | <b>114</b> | <b>0</b>      |         |               |     |                   |          |    |             |     |              |          |    |   |     |                      |          |    |   |              |  |  |            |          |
| <b>C.2</b>    | <p><b>Certification Listing Policies and Programs that the PHA has Revised since Submission of its Last Annual Plan</b></p> <p><u>Form 50077-SM</u>, <i>Certification of Compliance with PHA Plans and Related Regulations</i>, including Item 5 must be submitted by the PHA as an electronic attachment to the PHA Plan. Item 5 requires certification on whether plan elements have been revised, provided to the RAB for comment before implementation, approved by the PHA board, and made available for review and inspection by the public.</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |               |            |               |         |               |     |                   |          |    |             |     |              |          |    |   |     |                      |          |    |   |              |  |  |            |          |
| <b>D</b>      | <p><b>Other Document or Certification Requirements for Annual Plan Submissions.</b> Required in all submission years.</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |               |            |               |         |               |     |                   |          |    |             |     |              |          |    |   |     |                      |          |    |   |              |  |  |            |          |
| <b>D.1</b>    | <p><b>Civil Rights Certification.</b></p> <p><u>Form 50077-SM-HP</u>, <i>Certification of Compliance with PHA Plans and Related Regulations</i>, must be submitted by the PHA as an electronic attachment to the PHA Plan.</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |               |            |               |         |               |     |                   |          |    |             |     |              |          |    |   |     |                      |          |    |   |              |  |  |            |          |
| <b>D.2</b>    | <p><b>Resident Advisory Board (RAB) Comments.</b></p> <p>(a) Did the RAB(s) provide comments to the PHA Plan?</p> <p>Y   N<br/> <input type="checkbox"/>   <input checked="" type="checkbox"/></p> <p>If yes, comments must be submitted by the PHA as an attachment to the PHA Plan. PHAs must also include a narrative describing their analysis of the RAB recommendations and the decisions made on these recommendations.</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |               |            |               |         |               |     |                   |          |    |             |     |              |          |    |   |     |                      |          |    |   |              |  |  |            |          |

|            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |
|------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
|            | <p><b>*Covid-19 restrictions are in place which prohibit large gatherings (currently defined as 10 or more persons). As an alternative to hosting a public meeting, SHA has ensured that residents and program participants have the ability to comment and provide insight on the plan in the following ways:</b></p> <ol style="list-style-type: none"> <li>1) Notification to all Public Housing residents and Housing Choice Voucher program participants of the location of the draft PHA plan online,</li> <li>2) Invitation to all residents and program participants to submit written comments on the PHA Plan by US postal mail or email to the PHA.</li> <li>3) Comments may be submitted until 4:30 pm on Wednesday, July 8, 2020.</li> </ol> |
| <b>D.3</b> | <p><b>Certification by State or Local Officials.</b></p> <p><a href="#">Form HUD 50077-SL</a>, <i>Certification by State or Local Officials of PHA Plans Consistency with the Consolidated Plan</i>, must be submitted by the PHA as an electronic attachment to the PHA Plan.</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |
| <b>E</b>   | <p><b>Statement of Capital Improvements.</b> Required in all years for all PHAs completing this form that administer public housing and receive funding from the Capital Fund Program (CFP).</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
| <b>E.1</b> | <p><b>Capital Improvements.</b> Include a reference here to the most recent HUD-approved 5-Year Action Plan (HUD-50075.2) and the date that it was approved by HUD.</p> <p><b>SEE CFP 5YPlan 2020-2024 – In addition prior plans were adjusted in response to the Covid-19 pandemic. The revised plans have been included for review. SHA is now utilizing BLI 1509 for Covid-19 related response.</b></p>                                                                                                                                                                                                                                                                                                                                                |

## Instructions for Preparation of Form HUD-50075-SM Annual Plan for Small and High Performing PHAs

### A. PHA Information. All PHAs must complete this section.

**A.1** Include the full **PHA Name**, **PHA Code**, **PHA Type**, **PHA Fiscal Year Beginning** (MM/YYYY), **PHA Inventory**, **Number of Public Housing Units and or Housing Choice Vouchers (HCVs)**, **PHA Plan Submission Type**, and the **Availability of Information**, specific location(s) of all information relevant to the public hearing and proposed PHA Plan. ([24 CFR §903.23\(4\)\(e\)](#))

**PHA Consortia:** Check box if submitting a Joint PHA Plan and complete the table. ([24 CFR §943.128\(a\)](#))

### B. Annual Plan. PHAs must complete this section during years where the 5-Year Plan is also due. (24 CFR §903.12)

#### B.1 Revision of PHA Plan Elements. PHAs must:

Identify specifically which plan elements listed below that have been revised by the PHA. To specify which elements have been revised, mark the “yes” box. If an element has not been revised, mark “no.”

☐ **Statement of Housing Needs and Strategy for Addressing Housing Needs.** Provide a statement addressing the housing needs of low-income, very low-income and extremely low-income families and a brief description of the PHA’s strategy for addressing the housing needs of families who reside in the jurisdiction served by the PHA. The statement must identify the housing needs of (i) families with incomes below 30 percent of area median income (extremely low-income), (ii) elderly families and families with disabilities, and (iii) households of various races and ethnic groups residing in the jurisdiction or on the waiting list based on information provided by the applicable Consolidated Plan, information provided by HUD, and other generally available data. The identification of housing needs must address issues of affordability, supply, quality, accessibility, size of units, and location. For years in which the PHA’s 5-Year PHA Plan is also due, this information must be included only to the extent it pertains to the housing needs of families that are on the PHA’s public housing and Section 8 tenant-based assistance waiting lists. ([24 CFR §903.7\(a\)\(1\)](#)) and 24 CFR §903.12(b). Provide a description of the PHA’s strategy for addressing the housing needs of families in the jurisdiction and on the waiting list in the upcoming year. For years in which the PHA’s 5-Year PHA Plan is also due, this information must be included only to the extent it pertains to the housing needs of families that are on the PHA’s public housing and Section 8 tenant-based assistance waiting lists. ([24 CFR §903.7\(a\)\(2\)\(ii\)](#)) and 24 CFR §903.12(b).

☐ **Deconcentration and Other Policies that Govern Eligibility, Selection and Admissions.** Describe the PHA’s admissions policy for deconcentration of poverty and income mixing of lower-income families in public housing. The Deconcentration Policy must describe the PHA’s policy for bringing higher income tenants into lower income developments and lower income tenants into higher income developments. The deconcentration requirements apply to general occupancy and family public housing developments. Refer to 24 CFR §903.2(b)(2) for developments not subject to deconcentration of poverty and income mixing requirements. ([24 CFR §903.7\(b\)](#)) Describe the PHA’s procedures for maintaining waiting lists for admission to public housing and address any site-based waiting lists. ([24 CFR §903.7\(b\)](#)) A statement of the PHA’s policies that govern resident or tenant eligibility, selection and admission including admission preferences for both public housing and HCV. ([24 CFR §903.7\(b\)](#)) Describe the unit assignment policies for public housing. ([24 CFR §903.7\(b\)](#))

☐ **Financial Resources.** A statement of financial resources, including a listing by general categories, of the PHA’s anticipated resources, such as PHA operating, capital and other anticipated Federal resources available to the PHA, as well as tenant rents and other income available to support public housing



or tenant-based assistance. The statement also should include the non-Federal sources of funds supporting each Federal program, and state the planned use for the resources. (24 CFR §903.7(c))

☐ **Rent Determination.** A statement of the policies of the PHA governing rents charged for public housing and HCV dwelling units, including applicable public housing flat rents, minimum rents, voucher family rent contributions, and payment standard policies. (24 CFR §903.7(d))

☐ **Homeownership Programs.** A description of any homeownership programs (including project number and unit count) administered by the agency or for which the PHA has applied or will apply for approval. For years in which the PHA's 5-Year PHA Plan is also due, this information must be included only to the extent that the PHA participates in homeownership programs under section 8(y) of the 1937 Act. (24 CFR §903.7(k)) and 24 CFR §903.12(b).

☐ **Substantial Deviation.** PHA must provide its criteria for determining a "substantial deviation" to its 5-Year Plan. (24 CFR §903.7(r)(2)(i))

☐ **Significant Amendment/Modification.** PHA must provide its criteria for determining a "Significant Amendment or Modification" to its 5-Year and Annual Plan. Should the PHA fail to define "significant amendment/modification", HUD will consider the following to be "significant amendments or modifications": a) changes to rent or admissions policies or organization of the waiting list; b) additions of non-emergency public housing CFP work items (items not included in the current CFP Annual Statement or CFP 5-Year Action Plan); or c) any change with regard to demolition or disposition, designation, homeownership programs or conversion activities. See guidance on HUD's website at: [Notice PIH 1999-51](#). (24 CFR §903.7(r)(2)(ii))

If any boxes are marked "yes", describe the revision(s) to those element(s) in the space provided.

PHAs must submit a Deconcentration Policy for Field Office review. For additional guidance on what a PHA must do to deconcentrate poverty in its development and comply with fair housing requirements, see [24 CFR 903.2](#). (24 CFR §903.23(b))

**B.2 New Activities.** If the PHA intends to undertake any new activities related to these elements or discretionary policies in the current Fiscal Year, mark "yes" for those elements, and describe the activities to be undertaken in the space provided. If the PHA does not plan to undertake these activities, mark "no."

☐ **Hope VI or Choice Neighborhoods.** 1) A description of any housing (including project name, number (if known) and unit count) for which the PHA will apply for HOPE VI; and 2) A timetable for the submission of applications or proposals. The application and approval process for Hope VI is a separate process. See guidance on HUD's website at: <http://www.hud.gov/offices/pih/programs/ph/hope6/index.cfm>. (Notice PIH 2010-30)

☐ **Mixed Finance Modernization or Development.** 1) A description of any housing (including name, project number (if known) and unit count) for which the PHA will apply for Mixed Finance Modernization or Development; and 2) A timetable for the submission of applications or proposals. The application and approval process for Mixed Finance Modernization or Development is a separate process. See guidance on HUD's website at: <http://www.hud.gov/offices/pih/programs/ph/hope6/index.cfm>. (Notice PIH 2010-30)

☒ **Demolition and/or Disposition.** Describe any public housing projects owned by the PHA and subject to ACCs (including name, project number and unit numbers [or addresses]), and the number of affected units along with their sizes and accessibility features) for which the PHA will apply or is currently pending for demolition or disposition; and (2) A timetable for the demolition or disposition. This statement must be submitted to the extent that approved and/or pending demolition and/or disposition has changed. The application and approval process for demolition and/or disposition is a separate process. See guidance on HUD's website at: [http://www.hud.gov/offices/pih/centers/sac/demo\\_dispo/index.cfm](http://www.hud.gov/offices/pih/centers/sac/demo_dispo/index.cfm). (24 CFR §903.7(h))

☐ **Conversion of Public Housing.** Describe any public housing building(s) (including project number and unit count) owned by the PHA that the PHA is required to convert or plans to voluntarily convert to tenant-based assistance; 2) An analysis of the projects or buildings required to be converted; and 3) A statement of the amount of assistance received to be used for rental assistance or other housing assistance in connection with such conversion. See guidance on HUD's website at: <http://www.hud.gov/offices/pih/centers/sac/conversion.cfm>. (24 CFR §903.7(j))

☒ **Project-Based Vouchers.** Describe any plans to use HCVs for new project-based vouchers. (24 CFR §983.57(b)(1)) If using project-based vouchers, provide the projected number of project-based units and general locations, and describe how project-basing would be consistent with the PHA Plan.

☐ **Other Capital Grant Programs** (i.e., Capital Fund Community Facilities Grants or Emergency Safety and Security Grants).

**B.3 Progress Report.** For all Annual Plans following submission of the first Annual Plan, a PHA must include a brief statement of the PHA's progress in meeting the mission and goals described in the 5-Year PHA Plan. (24 CFR §903.7(r)(1))

**C. Annual Plan.** PHAs must complete this section during years where the 5-Year Plan is not due. (24 CFR §903.12)

**C.1 New Activities.** If the PHA intends to undertake any new activities related to these elements in the current Fiscal Year, mark "yes" for those elements, and describe the activities to be undertaken in the space provided. If the PHA does not plan to undertake these activities, mark "no."

☐ **Hope VI or Choice Neighborhoods.** 1) A description of any housing (including project number (if known) and unit count) for which the PHA will apply for HOPE VI or Choice Neighborhoods; and 2) A timetable for the submission of applications or proposals. The application and approval process for Hope VI or Choice Neighborhoods is a separate process. See guidance on HUD's website at: <http://www.hud.gov/offices/pih/programs/ph/hope6/index.cfm>. (Notice PIH 2010-30)

☐ **Mixed Finance Modernization or Development.** 1) A description of any housing (including project number (if known) and unit count) for which the PHA will apply for Mixed Finance Modernization or Development; and 2) A timetable for the submission of applications or proposals. The application and approval process for Mixed Finance Modernization or Development is a separate process. See guidance on HUD's website at: <http://www.hud.gov/offices/pih/programs/ph/hope6/index.cfm>. (Notice PIH 2010-30)

☒ **Demolition and/or Disposition.** Describe any public housing projects owned by the PHA and subject to ACCs (including project number and unit numbers [or addresses]), and the number of affected units along with their sizes and accessibility features) for which the PHA will apply or is currently pending for demolition or disposition; and (2) A timetable for the demolition or disposition. This statement must be submitted to the extent that approved and/or pending demolition and/or disposition has changed. The application and approval process for demolition and/or disposition is a separate process. See guidance on HUD's website at: [http://www.hud.gov/offices/pih/centers/sac/demo\\_dispo/index.cfm](http://www.hud.gov/offices/pih/centers/sac/demo_dispo/index.cfm). (24 CFR §903.7(h))

☐ **Conversion of Public Housing.** Describe any public housing building(s) (including project number and unit count) owned by the PHA that the PHA is required to convert or plans to voluntarily convert to tenant-based assistance; 2) An analysis of the projects or buildings required to be converted; and 3) A statement of the amount of assistance received to be used for rental assistance or other housing assistance in connection with such conversion. See guidance on HUD's website at: <http://www.hud.gov/offices/pih/centers/sac/conversion.cfm>. (24 CFR §903.7(j))

☐ **Conversion of Public Housing.** Describe any public housing building(s) (including project number and unit count) owned by the PHA that the PHA plans to voluntarily convert to project-based assistance under RAD. See additional guidance on HUD's website at: [Notice PIH 2012-32](#)

☒ **Project-Based Vouchers.** Describe any plans to use HCVs for new project-based vouchers. (24 CFR §983.57(b)(1)) If using project-based vouchers, provide the projected number of project-based units and general locations, and describe how project-basing would be consistent with the PHA Plan.

☐ **Units with Approved Vacancies for Modernization.** The PHA must include a statement related to units with approved vacancies that are undergoing modernization in accordance with [24 CFR §990.145\(a\)\(1\)](#).

☐ **Other Capital Grant Programs** (i.e., Capital Fund Community Facilities Grants or Emergency Safety and Security Grants).

**C.2 Certification Listing Policies and Programs that the PHA has Revised since Submission of its Last Annual Plan.** Provide a certification that the following plan elements have been revised, provided to the RAB for comment before implementation, approved by the PHA board, and made available for review and inspection by the public. This requirement is satisfied by completing form HUD-50077 SM-HP.

**D. Annual Plan.** PHAs must complete this section in all years.

**D.1 Civil Rights Certification.** Form HUD-50077 SM-HP, *PHA Certifications of Compliance with the PHA Plans and Related Regulation*, must be submitted by the PHA as an electronic attachment to the PHA Plan. This includes all certifications relating to Civil Rights and related regulations. A PHA will be considered in compliance with the AFFH Certification if: it can document that it examines its programs and proposed programs to identify any impediments to fair housing choice within those programs; addresses those impediments in a reasonable fashion in view of the resources available; works with the local jurisdiction to implement any of the jurisdiction's initiatives to affirmatively further fair housing; and assures that the annual plan is consistent with any applicable Consolidated Plan for its jurisdiction. (24 CFR §903.7(o))

**D.2 Resident Advisory Board (RAB) comments.** If the RAB provided comments to the annual plan, mark "yes," submit the comments as an attachment to the Plan and describe the analysis of the comments and the PHA's decision made on these recommendations. (24 CFR §903.13(c), 24 CFR §903.19)

**D.3 Certification by State or Local Officials.** Form HUD-50077-SL, *Certification by State or Local Officials of PHA Plans Consistency with the Consolidated Plan*, must be submitted by the PHA as an electronic attachment to the PHA Plan. (24 CFR §903.15)

**E. Statement of Capital Improvements.** PHAs that receive funding from the Capital Fund Program (CFP) must complete this section. (24 CFR 903.7 (g))

**E.1 Capital Improvements.** In order to comply with this requirement, the PHA must reference the most recent HUD approved Capital Fund 5 Year Action Plan. PHAs can reference the form by including the following language in Section C. 8.0 of the PHA Plan Template: "See HUD Form 50075.2 approved by HUD on XX/XX/XXXX."

---

This information collection is authorized by Section 511 of the Quality Housing and Work Responsibility Act, which added a new section 5A to the U.S. Housing Act of 1937, as amended, which introduced the 5-Year and Annual PHA Plan. The 5-Year and Annual PHA Plans provide a ready source for interested parties to locate basic PHA policies, rules, and requirements concerning the PHA's operations, programs, and services, and informs HUD, families served by the PHA, and members of the public of the PHA's mission, goals and objectives for serving the needs of low- income, very low- income, and extremely low- income families.

Public reporting burden for this information collection is estimated to average 16.64 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. HUD may not collect this information, and respondents are not required to complete this form, unless it displays a currently valid OMB Control Number.

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