

<b>1.0</b>	<b>PHA Information</b> PHA Name: <u>Housing Authority City of Linden</u> PHA Code: <u>NJ066</u> PHA Type: <input type="checkbox"/> Small <input checked="" type="checkbox"/> High Performing <input type="checkbox"/> Standard <input type="checkbox"/> HCV (Section 8) PHA Fiscal Year Beginning: (MM/YYYY): <u>10/2015</u>				
<b>2.0</b>	<b>Inventory</b> (based on ACC units at time of FY beginning in 1.0 above) Number of PH units: <u>200</u> Number of HCV units: <u>357</u>				
<b>3.0</b>	<b>Submission Type</b> <input checked="" type="checkbox"/> 5-Year and Annual Plan <input type="checkbox"/> Annual Plan Only <input type="checkbox"/> 5-Year Plan Only				
<b>4.0</b>	<b>PHA Consortia</b> <input type="checkbox"/> PHA Consortia: (Check box if submitting a joint Plan and complete table below.)				
	Participating PHAs	PHA Code	Program(s) Included in the Consortia	Programs Not in the Consortia	No. of Units in Each Program
					PH      HCV
	PHA 1:				
	PHA 2:				
	PHA 3:				
<b>5.0</b>	<b>5-Year Plan.</b> Complete items 5.1 and 5.2 only at 5-Year Plan update.				
<b>5.1</b>	<b>Mission.</b> State the PHA's Mission for serving the needs of low-income, very low-income, and extremely low income families in the PHA's jurisdiction for the next five years: The mission of the Housing Authority City of Linden is to provide decent, safe and sanitary housing to eligible families and individuals without discrimination and in such a manner so as to promote serviceability, economy, efficiency and stability. The Housing Authority City of Linden will take steps to ensure the social well-being and enhance the quality of life for its residents. The Housing Authority City of Linden will develop and maintain public and private partnerships to these ends and will seek opportunities for growth and improvement.				
<b>5.2</b>	<b>Goals and Objectives.</b> Identify the PHA's quantifiable goals and objectives that will enable the PHA to serve the needs of low-income and very low-income, and extremely low-income families for the next five years. Include a report on the progress the PHA has made in meeting the goals and objectives described in the previous 5-Year Plan.  The Housing Authority City of Linden will continue to provide services to our residents as follows: With the experience and caring of our Resident Service Coordinator, assist them to apply for all assisted programs that are offered from the County, State, or Federal Government. This also includes resident assistance for submission of their medical bills if needed and follow-up with any balance billing. On a weekly basis an Internist, Chiropractor, Ophthalmologist every other week and a Podiatrist provide services. The Union County Nutrition Program uses our Community Room to serve lunches not only to our residents but any person who lives in the area and qualifies for the program. The food will be delivered to our Residents apartment as long as there is a Doctor's note. Once a month, our income eligible residents are given food through the Union County Food Bank. Effective May 1, 2013 we will have Physical Therapists visit and follow Doctor's Prescriptions for whatever Physical Therapy our residents need.  During the last 5 years, the roof was replaced, new kitchen cabinets and counter tops were installed and cycle painting of apartments was completed. The exterior of the buildings brick face was cleaned and pointed and was power washed. A new security system was installed, toilets were replaced and all common areas were painted.				

**PHA Plan Update**

(a) Identify all PHA Plan elements that have been revised by the PHA since its last Annual Plan submission: Our ACOP has been changed addressing OPENING/CLOSING THE WAITING LIST. The Housing Authority City of Linden will no longer have a "Lottery Selection", however, will replace with Order of Selection (24CFR960, 206(e)). Families will be selected by date and time of application.

(b) Identify the specific location(s) where the public may obtain copies of the 5-Year and Annual PHA Plan. For a complete list of PHA Plan elements, see Section 6.0 of the instructions. The location where the 5-Year and Annual Plan can be reviewed is: Housing Authority City of Linden, 1601 Dill Avenue, Linden, New Jersey 07036.

**PHA Plan Elements**

1. We have separate waiting list for our Public Housing and Housing Choice Voucher Program. The Public Housing waiting list has been approved to use the system of Date & Time the applications are received with Linden Residents receiving a preference. There is only preference for Public Housing and that is "resident" of Linden. For our Housing Choice Voucher Program the preferences are "resident, & working family".

2. Following is the list of our estimate of financial resources for FYE 9/30/2016:

	Estimated FYE 9/30/2016
Operating Subsidy	470,000
Capital Fund	179,621
Ross Grant	81,000
Dwelling Rents	770,664
Excess Utilities	16,800
Interest Income	6,635
Management Fees, etc	103,753
Total Resources	1,628,473

Planned Uses: Provide decent, safe and affordable housing to low income families.

Capital Expenditures	134,004
Administrative	427,510
Tenant Services	62,800
Utilities	339,137
Maintenance	320,420
Insurance	70,100
PILOT	44,833
Employee Benefits	214,864
Total Expenditures	1,613,668
Addition to Reserve	14,805

3. This PHA follows HUD regulations that specify the sources of income to include and exclude to arrive then at the family's annual income. Once their annual income has been established this PHA subtracts from annual income all mandatory deductions that the family qualified for. We use these to come to the family's annual adjusted income to calculate their rent. We calculate the total tenant payment, the use of utility allowances to come to the family rent payment. For public housing there are also flat rents the family could choose from. See pages 6-1 through 6-67 of our ACOP.

4. This PHA has a complete MAINTENANCE POLICY covering major ongoing responsibilities include but are not limited to the inspections and maintenance of the following:

1. Service systems
2. Building maintenance and construction
3. Pest control application
4. Fleet/equipment maintenance
5. Protective systems testing and maintenance
6. Appliance maintenance
7. Grounds maintenance
8. Scheduling/monitoring of contracted maintenance /constructions service
9. Unit inspections –these are done two times a year.

**PLEASE NOTE: THE MAINTENANCE SUPERVISOR AND VARIOUS MEMBERS OF OUR MAINTENANCE STAFF HAVE GONE FOR PESTICIDE TRAINING WHICH ALSO INCLUDES "BED BUG" TRAINING GIVEN BY THE STATE OF NEW JERSEY DEPARTMENT OF ENVIRONMENTAL PROTECTION---ALSO VERY IMPORTANT---THIS PHA HAS PURCHASED A MACHINE CALLED "THE LADY BUG" . THIS IS USED FOR KILLING BED BUGS AND THEIR EGGS.**

5. This PHA's Grievance Policy follows the guidelines set forth by CFR 966. This policy is posted on the public bulletin board. It is also given to each resident upon moving into a unit and upon each recertification. See pages 14-1 through 14-22 of our ACOP.

6. N/A

7. N/A

8. We have hired a Director of Security. Presently our buildings are manned Linden Police Department, Union County Sheriff's Officers and Union County Corrections Officers from 5:00pm until 4:00 am seven days a week.

9. Posted on public bulletin board and given to all residents. See pages 10-1 through 10-29 or our ACOP

10. See attachment.

11. See attachment.

12. We only have one (1) property

13. Our policy is set forth by CFR 5.2007(3) and is posted on public bulletin board, given to all residents. See pages 16-25 -16-30 ACOP

6.0

7.0	<b>Hope VI, Mixed Finance Modernization or Development, Demolition and/or Disposition, Conversion of Public Housing, Homeownership Programs, and Project-based Vouchers.</b> <i>Include statements related to these programs as applicable.</i>
8.0	<b>Capital Improvements.</b> Please complete Parts 8.1 through 8.3, as applicable.
8.1	<b>Capital Fund Program Annual Statement/Performance and Evaluation Report.</b> As part of the PHA 5-Year and Annual Plan, annually complete and submit the <i>Capital Fund Program Annual Statement/Performance and Evaluation Report</i> , form HUD-50075.1, for each current and open CFP grant and CFFP financing.
8.2	<b>Capital Fund Program Five-Year Action Plan.</b> As part of the submission of the Annual Plan, PHAs must complete and submit the <i>Capital Fund Program Five-Year Action Plan</i> , form HUD-50075.2, and subsequent annual updates (on a rolling basis, e.g., drop current year, and add latest year for a five year period). Large capital items must be included in the Five-Year Action Plan.
8.3	<b>Capital Fund Financing Program (CFFP).</b> <input type="checkbox"/> Check if the PHA proposes to use any portion of its Capital Fund Program (CFP)/Replacement Housing Factor (RHF) to repay debt incurred to finance capital improvements.
9.0	<b>Housing Needs.</b> Based on information provided by the applicable Consolidated Plan, information provided by HUD, and other generally available data, make a reasonable effort to identify the housing needs of the low-income, very low-income, and extremely low-income families who reside in the jurisdiction served by the PHA, including elderly families, families with disabilities, and households of various races and ethnic groups, and other families who are on the public housing and Section 8 tenant-based assistance waiting lists. The identification of housing needs must address issues of affordability, supply, quality, accessibility, size of units, and location. The loss of jobs, the high rents in our jurisdiction, etc. makes the need for housing even greater. The HACL will continue, as it has in the past, to house our eligible applicants as a unit becomes available.
9.1	<b>Strategy for Addressing Housing Needs.</b> Provide a brief description of the PHA's strategy for addressing the housing needs of families in the jurisdiction and on the waiting list in the upcoming year. <b>Note: Small, Section 8 only, and High Performing PHAs complete only for Annual Plan submission with the 5-Year Plan.</b> When a unit becomes available the HACL will always offer it to the next person on the public housing waiting list. A voucher will be offered to the next person on the Section 8 waiting list. Prior to approval, a criminal background check will be conducted along with determining income eligibility for both programs.
10.0	<b>Additional Information.</b> Describe the following, as well as any additional information HUD has requested. (a) <b>Progress in Meeting Mission and Goals.</b> Provide a brief statement of the PHA's progress in meeting the mission and goals described in the 5-Year Plan. The HACL has and will continue to assist applicants from its waiting list. Reasonable Accommodations will be provided if requested. If it is for any type of physical change the HACL will review to see if it is financially feasible. Once an applicant is house they will be offered all of the services that we have in place if they choose as stated in Section 5.2. (b) <b>Significant Amendment and Substantial Deviation/Modification.</b> Provide the PHA's definition of "significant amendment" and "substantial deviation/modification". N/A
11.0	<b>Required Submission for HUD Field Office Review.</b> In addition to the PHA Plan template (HUD-50075), PHAs must submit the following documents. Items (a) through (g) may be submitted with signature by mail or electronically with scanned signatures, but electronic submission is encouraged. Items (h) through (i) must be attached electronically with the PHA Plan. <b>Note:</b> Faxed copies of these documents will not be accepted by the Field Office. (a) Form HUD-50077, <i>PHA Certifications of Compliance with the PHA Plans and Related Regulations</i> (which includes all certifications relating to Civil Rights) (b) Form HUD-50070, <i>Certification for a Drug-Free Workplace</i> (PHAs receiving CFP grants only) (c) Form HUD-50071, <i>Certification of Payments to Influence Federal Transactions</i> (PHAs receiving CFP grants only) (d) Form SF-LLL, <i>Disclosure of Lobbying Activities</i> (PHAs receiving CFP grants only) (e) Form SF-LLL-A, <i>Disclosure of Lobbying Activities Continuation Sheet</i> (PHAs receiving CFP grants only) (f) Resident Advisory Board (RAB) comments. Comments received from the RAB must be submitted by the PHA as an attachment to the PHA Plan. PHAs must also include a narrative describing their analysis of the recommendations and the decisions made on these recommendations. (g) Challenged Elements (h) Form HUD-50075.1, <i>Capital Fund Program Annual Statement/Performance and Evaluation Report</i> (PHAs receiving CFP grants only) (i) Form HUD-50075.2, <i>Capital Fund Program Five-Year Action Plan</i> (PHAs receiving CFP grants only)