

IN THE BOARD OF COMMISSIONERS OF THE
HOUSING AUTHORITY AND COMMUNITY SERVICES AGENCY
OF LANE COUNTY, OREGON

RESOLUTION/ORDER NO.

97-12-17-1H

) IN THE MATTER OF
) APPROVING THE PUBLIC
) HOUSING MANAGEMENT
) ASSESSMENT PROGRAM
) CERTIFICATION FOR THE
) FISCAL YEAR ENDED
) SEPTEMBER 30, 1997

WHEREAS, the Public Housing Management Assessment Program (PHMAP) was established in accordance with Section 502 of the National Affordable Housing Act; and

WHEREAS, public housing agencies are required to submit PHMAP certifications each year;

NOW, THEREFORE, IT IS HEREBY RESOLVED AND ORDERED, THAT:

The attached PHMAP Certification for the fiscal year ended September 30, 1997 is approved.

DATED this 17th day of December, 1997.

Cindy Wealdreyer

Chairperson, HA/CSA Board of Commissioners

FILED

DEC 29 1997

COUNTY CLERK
BY *M. Bullock*

APPROVED AS TO FORM

Date 12/9/97 Lane County

[Signature]
OFFICE OF LEGAL COUNSEL

In the Matter of Approving the Public Housing Management Assessment Program Certification for the Fiscal Year Ended September 30, 1997.

**Public Housing Management
Assessment Program
(PHMAP) Certification**

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

OMB No. 2577-0156 (exp. 6/30/99)

BOOK 159 PAGE 1973

The reporting burden for this collection of information is estimated to average 4 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. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the Reports Management Officer, Paperwork Reduction Project (2577-0156), Office of Information Technology, U.S. Department of Housing and Urban Development, Washington, D.C. 20410-3600. This agency may not collect this information, and you are not required to complete this form, unless it displays a currently valid OMB control number.

Do not send this form to the above address.

This information is collected to implement section 502 of the National Affordable Housing Act of 1990 which established seven specific indicators and directs the Secretary to develop no more than five other factors (indicators) deemed appropriate to assess the management performance of public housing agencies (PHAs) in all major areas of management operations. PHAs will complete the PHMAP Certification form HUD-50072 and submit it to HUD. The information is used by HUD to assess all major areas of PHA's management operations, designate PHAs as troubled and mod-troubled, enter into a Memorandum of Agreement (MOA) with troubled and mod-troubled PHAs, and report annually to Congress on the status of troubled and mod-troubled PHAs. This information is required for HUD to fulfill statutory requirements of the 1990 Act. The information collected does not lend itself to confidentiality.

Instructions: A PHA/RMC/AME's responses to this certification form must be the PHA/RMC/AME's actual data; e.g., prior to any adjustments for modifications and/or exclusion requests to the indicators. Round percentages to the nearest two decimal points.

Indicator #1: Component #1: Item b: Total number of ACC days is obtained by multiplying the total number of units under ACC by the number of days in the year. This figure should be adjusted accordingly for units that are added during the fiscal year being assessed based on the date the unit(s) reached the end of the initial operating period (EIOP).

PHA/RMC/AME Name Housing Authority and Community Services Agency of Lane County, Oregon	For FY Ending 9/30/97	Submission Date 12/1/97
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Project name(s) if RMC/AME

The management functions for the following indicator(s) have been assumed by an RMC/AME, and the RMC/AME certification is attached (enter indicator numbers or N/A):

Indicator #1: Vacancy Rate and Unit Turnaround Time

Component # 1: Vacancy Rate

a. PHA has implemented an adequate system to track the duration of vacancies (enter Yes or No)	Yes
b. Total number of ACC days	258,420
c. Total number of non-dwelling days	0
d. Total number of employee occupied days	1,460
e. Total number of days where units were deprogrammed	963
f. Total number of actual vacancy days	1,691
g. Total number of vacancy days exempted for modernization	0
h. Total number of vacancy days exempted for market conditions	0
i. Total number of vacancy days where units were exempted due to law or regulations	0
j. Total number of vacancy days where units were exempted for other reasons	0
k. Percentage points reduction of actual vacancies within past three years (enter percent or N/A)	N/A %

Component # 2: Unit Turnaround

PHA shall respond to the questions below, even if it certifies to a grade of C or above on the vacancy component

a. PHA has implemented an adequate system to track unit turnaround, including down time, make ready time, and lease up time (enter Yes or No)	Yes
b. Total number of turnaround days	2,318
c. Total number of vacancy days exempted for modernization	0
d. Total number of vacancy days exempted for other reasons	0
e. Total number of vacant units turned around and leased in the PHA's immediate past fiscal year	152
f. Average number of calendar days units were in down time	1
g. Average number of calendar days units were in make ready time	12.99
h. Average number of calendar days units were in lease up time	1.46

Indicator #3: Rents Uncollected	
a. Dwelling rent owed by residents in possession at the beginning of the assessed fiscal year, carried forward from the previous fiscal year	\$ 3,211.42
b. Dwelling rents billed during FY being assessed	\$ 1,258,006.10
c. Dwelling rents collected during FY being assessed	\$ 1,252,556.95
Indicator #4: Work Orders	
a. PHA has implemented an adequate system to account for and control work orders (enter Yes or No)	Yes
Component # 1: Emergency Work Orders	
a. Total number of emergency work orders	90
b. Total number of emergency work orders corrected/abated within 24 hours	90
Component # 2: Non-Emergency Work Orders	
a. Total number of non-emergency work orders	5,169
b. Total number of calendar days it took to complete non-emergency work orders	35,255
c. Average number of days PHA has reduced the time it takes to complete non-emergency work orders over the past three years (enter average number of days or N/A)	N/A
Indicator #5: Annual Inspection of Units and Systems	
Component # 1: Annual Inspection of Units	
a. PHA has implemented an adequate inspection program that generates quality inspections and tracks both inspections and repairs (enter Yes or No)	Yes
b. Total number of ACC units	708
c. Units exempted where the PHA made 2 documented attempts to inspect and is enforcing the lease	0
d. Vacant units exempted for modernization	0
e. Vacant units exempted for other reasons	0
f. Total number of units inspected using local code or HUD HQS if there is no local code or the local code is less stringent	708
g. Total number of units meeting local code/HQS	622
h. PHA completed all repairs on units where necessary for local code/HQS compliance either during the inspection, issued work orders for the repairs, or referred the deficiency to the current year's or next year's modernization program (enter Yes or No)	Yes
Component # 2: Annual Inspection of Systems	
a. Total number of sites	5
b. Total number of sites exempted from the inspection of systems	0
c. Total number of sites where all systems were inspected in accordance to the PHA maintenance plan	5
d. Total number of buildings	7
e. Total number of buildings exempted from the inspection of systems	0
f. Total number of buildings where all systems were inspected in accordance to the PHA maintenance plan	7
g. PHA performed required maintenance on buildings and sites in accordance with specifications or local/PHA standards, or issued work orders for the repairs, or included the deficiencies in the current year's or next year's modernization program (enter Yes or No)	Yes
Indicator #6: Financial Management	
Component # 1: Cash Reserves	
a. Amount of cash reserves	\$ 831,084.85
PHA shall respond to the questions for <i>either</i> Option A or Option B, below, even if it certifies to a grade of C or above on the cash reserves component.	
Component # 2: Energy Consumption	
a. All PHA units have tenant-paid utilities (enter Yes or No)	No
Option A: Energy/Utility Consumption Expenses	
a. Total energy/utility consumption expenses	\$ 277,979.97

Option B, Energy Audit	
a. PHA has completed or updated its energy audit within the past 5 years (enter Yes or No)	
b. All of the recommendations that were cost effective were implemented (enter Yes, No or N/A)	
c. PHA has an implementation plan to implement all of the recommendations that were cost effective (enter Yes, No or N/A)	
d. PHA is on schedule with its implementation plan, based on available funds (enter Yes, No or N/A)	
Indicator #7: Resident Services and Community Building	
PHAs with fewer than 250 units or with 100% elderly developments will not be assessed under this indicator unless otherwise specified below	
a. Check if PHA with fewer than 250 units or 100% elderly developments requests to be assessed under this indicator (enter Yes or No)	No
Component #1: Economic Uplift and Self Improvement	
a. PHA requests to be assessed for all non-HUD funded programs implemented (enter Yes or No)	No
b. PHA Board of Commissioners has adopted economic uplift and self-improvement programs (enter Yes or No)	Yes
c. Percentage of family occupied units where a PHA can document it has implemented these programs	100 %
d. PHA monitors performance and issues reports concerning progress (enter Yes or No)	Yes
Component #2: Resident Organization	
a. PHA can document it recognizes resident councils, and has a system of communication and collaboration with and supports resident councils (enter Yes or No)	Yes
b. Where no resident council exists, PHA can document it encouraged the formation of resident councils (enter Yes or No)	Yes
Component #3: Resident Involvement	
a. PHA Board of Commissioners, by resolution, provides for resident representation on the Board and committees (enter Yes or No)	Yes
b. PHA implemented measures that ensure residents have input into: (check all that are applicable)	
<input checked="" type="checkbox"/> Security <input checked="" type="checkbox"/> Screening/occupancy <input checked="" type="checkbox"/> Maintenance <input checked="" type="checkbox"/> Operating budget	
<input checked="" type="checkbox"/> Relocation <input checked="" type="checkbox"/> Resident programs <input checked="" type="checkbox"/> Modernization and development programs	
Component #4: Resident Programs Management	
a. PHA has HUD funded special programs (enter Yes or No)	Yes
b. PHA has a Resident Management or Tenant Opportunity Program where the PHA is the contract administrator (enter Yes or No)	No
c. PHA requests to be assessed for all non-HUD funded programs (enter Yes or No)	No
d. Percentage of goals the PHA can document it met under implementation plan(s)	100 %
Indicator #8: Security	
PHAs with fewer than 250 units will not be assessed under this indicator unless otherwise specified below	
a. Check if PHA with fewer than 250 units requests to be assessed under this indicator	No
Component #1: Tracking and Reporting Crime-related Problems	
a. PHA has Board adopted policies and implemented procedures to track crime and crime-related problems (enter Yes or No)	Yes
b. PHA can document that it has a cooperative system for tracking and reporting crime to local police authorities (enter Yes or No)	Yes
c. PHA can document it reports crime to local police authorities (enter Yes or No)	Yes
d. Percentage of developments where PHA can document it tracks crime and crime-related problems	60 %
Component #2: Screening of Applicants	
a. PHA has Board adopted policies and implemented screening procedures that reflect the One-Strike criteria (enter Yes or No)	Yes
b. PHA can document that screening procedures result in successfully denying admission to applicants who meet the One-Strike criteria (enter Yes or No)	Yes
c. Screening procedures result in denying admission to applicants who meet the One-Strike criteria (enter Yes or No)	Yes
Component #3: Lease Enforcement	
a. PHA has Board adopted policies and implemented eviction procedures that reflect the One-Strike criteria (enter Yes or No)	Yes
b. PHA can document that eviction procedures result in appropriately evicting residents who meet One-Strike criteria (enter Yes or No)	Yes
c. Eviction procedures result in the eviction of residents who meet the One-Strike criteria (enter Yes or No)	Yes



Component #4: Grant Program Goals		BOOK 159 PAGE 1976
a. PHA has HUD funded drug prevention and/or crime reduction programs (enter Yes or No)	Yes	
b. PHA requests to be assessed for all non-HUD funded drug prevention and crime reduction programs (enter Yes or No)	No	
c. PHA can document that the program goals are related to drug and crime rates (enter Yes or No)	Yes	
d. Percentage of goals that the PHA can document it met under implementation plan(s) for any and all of these programs	100 %	
Adjustments for Physical Condition and/or Neighborhood Environment		
a. PHA claims adjustment for physical condition and/or neighborhood environment (enter Yes or No)	No	
b. Total units (not exempted for any other reason) subject to both physical conditions and neighborhood environment		
c. Total units (not exempted for any other reason) subject to physical conditions only		
d. Total units (not exempted for any other reason) subject to neighborhood environment only		

We hereby certify that, as of the submission date, the above indicators, under the Public Housing Management Assessment Program (PHMAP), are true and accurate for its fiscal year indicated above. The undersigned further certify that, to their present knowledge, there is no evidence to indicate seriously deficient performance that casts doubt on the PHA's capacity to preserve and protect its public housing developments and operate them in accordance with Federal law and regulations. Appropriate sanctions for intentional false certification will be imposed, including suspension or debarment of the signatories.

Chairperson, Board of Commissioners : (signature & date)

Attested to by: (Executive Director's signature & date)

X

X

A Board Resolution approving this certification is required and must be attached to the executed certification. RMC/AME certifications shall be signed by the corresponding organization's top executive or head.

