



**Henry County
Community Development Department
Shannan B. Sagnet, Director**



**Public Housing Authority Survey
FY 2017 – 2019 Three-Year Consolidated Plan**

PHA Name: _____

Name and Title of Person Completing Survey: _____

Mailing Address: _____

Telephone #: _____ - _____ - _____ E-mail Address: _____

PUBLIC HOUSING

1. What is the total number of public housing units owned and managed by the Authority:

2. Provide a breakdown of units by public housing development, type of resident (elderly or family), number of bedrooms, occupancy rate, and unit turnover. Attached additional pages if necessary.

Development Name	# of Elderly Units	# of Family Units	# of Bedrooms				Current Occupancy Rate	Annual Turnover of Units
			1	2	3	4+		

3. Complete the following table regarding the current PHA tenants. Current as of: _____

Current PHA Tenants	# of Families	% of Total Families
Extremely Low Income (<30% AMI)		
Low Income (>30% but <50% AMI)		
Moderate Income (>50% but <80% AMI)		
Small Families (2 – 4 persons)		
Larger Families (5 or more persons)		
Elderly (1 or 2 persons)		
Non Elderly Individuals		
Individuals / Families with Disabilities		
White		
Black		
Hispanic		
Other Race		
Characteristics by Bedroom Size		
1 Bedroom		
2 Bedrooms		
3 Bedrooms		
4+ Bedrooms		

4. Are any of the PHA’s public housing developments experiencing chronic vacancies?
 Yes _____ No _____ If Yes, identify the development(s) and indicate the Authority’s strategy to increase occupancy rates.

5. What is the date of the PHA's most recent Physical Needs Assessment (PNA) of its housing stock? Month _____ Year _____
6. Based on the results of the PNA or other objective data, summarize the overall condition and needs of the Authority's public housing stock. Attach additional pages if necessary.

Development Name	*Overall Condition of Housing Stock at this Development:			Strategic Plan for Improvements: NO ACTION NEEDED, MINOR REHAB, MAJOR REHAB, PARTIAL DEMO, or FULL DEMO
	GOOD	FAIR	POOR	

*GOOD - new or recently renovated; FAIR - needs minor rehab or improvements; POOR - needs major rehab or demolition

7. When did the PHA last update its Section 504 needs assessment and transition plan?
 Month _____ Year _____
- a. Are there unmet needs identified in the Section 504 needs assessment and transitional plan?
 Yes _____ No _____ If Yes, what are the unmet needs?

8. Of the total public housing units owned and managed by the PHA, how many units currently meet the Uniform Federal Accessibility Standards (UFAS)? _____
- a. Number of accessible units for persons with mobility disabilities? _____
 - b. Number of accessible units for persons with sight and hearing disabilities? _____
 - c. Of the total number of accessible units, how many are currently occupied by persons/households with disabilities? _____
9. Are accessible units in family public housing available to families with children, consisting of at least one (1) person in the household with a disability? Yes _____ No _____
10. How many non-elderly persons with disabilities are currently living in elderly public housing units? _____
11. Does the PHA have any local preferences for admission of eligible applicants?
Yes _____ No _____ If Yes, specify preference(s):

12. What is the average amount of time that an applicant remains on the waiting list for public housing? _____
- a. Is the public housing waiting list currently open? Yes _____ No _____ If No, when was the waiting list last opened? _____
 - b. For how long was it opened? _____

13. Complete the following table regarding the PHA's Waiting List. (This table is similar to the one the Authority must complete for its Agency Plan.) Current as of: _____

Wait List Totals	# of Families	% of Total Families
Extremely Low Income (<30% AMI)		
Low Income (>30% but <50% AMI)		
Moderate Income (>50% but <80% AMI)		
Small Families (2 – 4 persons)		
Larger Families (5 or more persons)		
Elderly (1 or 2 persons)		
Non Elderly Individuals		
Individuals / Families with Disabilities		
White		
Black		
Hispanic		
Other Race		
Characteristics by Bedroom Size		
1 Bedroom		
2 Bedrooms		
3 Bedrooms		
4+ Bedrooms		

14. What are the top three (3) public housing resident initiatives currently being carried out by the PHA:

I. _____

II. _____

III. _____

15. Describe the major unmet public housing needs in Henry County:

*Example: Need an additional 50 three and four bedroom units to meet the affordable housing needs of senior citizens.

16. Has the PHA received, or does it plan to apply for, any of the following federal program funds in FY2017 through 2019? Attach additional pages if necessary.

Federal Program Funds	Amount of Funding Request(s)	Fiscal Year(s) Funds Requested for
Annual contributions for Section 8 Housing Choice Voucher Assistance	\$	FY
Public Housing Capital Funds	\$	FY
Public Housing Operating Funds	\$	FY
Replacement Housing Factor	\$	FY
Capital Fund Financing Program	\$	FY
Energy Performance Contract	\$	FY
Other:	\$	FY
Other:	\$	FY

17. Describe actions to be undertaken in FY2017 by the PHA to improve the management and operations of public housing and the living environment of public housing residents. If No actions are planned, clearly state so, explaining why not.

18. Describe the efforts to be undertaken in FY2017 through 2019 by the PHA to ensure that no net loss in the public housing inventory as a result of demolition, by prepayment or voluntary termination of federally assisted mortgages or any other actions:

19. Does the PHA anticipate the reduction of any public housing units during the period of 2017 through 2019 due to any of the following:

Reduction Caused by:	Yes	No	Number of Anticipated Units Lost:
Conversion to private market housing			
Demolition			
Conversions or modernization resulting in the decrease in the number of units			
Disposition			
Other (Specify):			

20. During the 2017 through 2019, does the PHA anticipate adding public housing units to its inventory via acquisition, new construction or the conversion or modernization of existing units? Yes _____ No _____ If Yes, list the proposed projects in the table below. Attach addition pages if necessary.

Development Name	Geographic Location	# of New Units by				Funding Source(s)
		Bedrooms	1	2	3	

21. Complete the “Priority Public Housing Needs” table below:

Public Housing Need Category	Priority Need Level:				Estimated Funding Level Needed to Address Category
	HIGH	MEDIUM	LOW	NO SUCH NEED	
1. Restoration and Revitalization					
Capital Improvements					
Modernization					
Rehabilitation					
Other (Specify):					
2. Management and Operations					
Specify:					
Specify:					
3. Improved Living Environment					
Neighborhood Revitalization (Non-Capital)					
Capital Improvements					
Safety/ Crime Prevention/ Drug Elimination					
Other (Specify):					
4. Economic Opportunity					
Resident Services/ Family Self-Sufficiency					
Homeownership					
Other (Specify):					

22. Describe the PHA’s transition to site-based management:

RESIDENT INITIATIVES

1. Does each public housing development have a separate resident council?
Yes _____ No _____ If No, list which projects have separate resident councils:

2. Do the resident councils have input/involvement in the:

- a. Management operations? Yes _____ No _____
- b. Modernization needs? Yes _____ No _____
- c. Family self-sufficiency program? Yes _____ No _____
- d. Homeownership program? Yes _____ No _____

For each “Yes” response, describe the nature of the resident council’s involvement.

3. Describe actions to be undertaken in FY2017 by the PHA to increase the involvement of PHA residents in management. If No actions are planned, clearly state so, explaining why not.

4. Does the PHA operate a public housing homeownership program?
Yes_____ No_____ If Yes, how many homeownership transactions have been completed to date? _____

5. Describe activities to be undertaken in FY2017 by the PHA to expand public housing homeownership opportunities. If no, such activities are planned, clearly state so, explaining why not.

6. Describe the efforts to be undertaken in FY2017 through 2019 by the PHA to ensure that no net loss of the public housing inventory as a result of conversions of units to homeownership, if applicable.

LEAD BASED PAINT ABATEMENT

1. Does the PHA implement a lead based paint abatement program for its units?
Yes_____ No_____ If Yes, provide a copy of the Lead Based Paint Abatement Program guidelines.

2. Estimate the number of PHA units suspected or known to contain lead based paint: _____

a. Are any of these units occupied? Yes_____ No_____ If Yes, how many?

ORGANIZATIONAL STRUCTURE

1. Describe the PHA’s relationship with Henry County and the unit of local government having appointing authority for the PHA’s board or commissioners.

2. Describe any relationships the PHA has established with special needs housing providers and organizations.

3. Has the PHA created a related non-profit affiliate or instrumentality?
Yes_____ No_____ If Yes, describe the activities that have been carried out by this organizations?

4. Describe the provision of services to the PHA that are funded by Henry County (i.e. public service activities, public safety activities, etc.)

5. Describe Henry County's role in reviewing the PHA's (a) proposed development sites, (b) comprehensive plans, (c) and any proposed demolition or disposition of public housing developments.

6. Does the PHA currently have an ownership interest in or manage non-public housing rental units? Yes_____ No_____ If Yes, describe.

7. Does the PHA intend to participate in any non-public housing residential development or preservation activities during the period of FY2017 through 2019?
Yes_____ No_____ If Yes, describe the nature, location, and status of any proposed project.

8. Are there any other housing activities that the Authority is planning (e.g., tax credit units, resident initiative, etc.) that are not discuss above? If so, provide a brief summary of these activities, including the purpose, target beneficiaries, location, number of units, expected total project cost, and expected funding sources, etc.

Thank you for your support and prompt response to this survey and for assisting Henry County in fulfilling its consolidated planning responsibilities. Please return the completed survey by mail or e-mail by Monday, June 5, 2017 to the address below. Feel free to enclose copies of annual reports, previous grant application or other material that may provide insight or additional information to the information requested in this form.

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