

5-Year PHA Plan (for All PHAs)	U.S. Department of Housing and Urban Development Office of Public and Indian Housing	OMB No. 2577-0226 Expires: 02/29/2016
---	---	--

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-50075-5Y is to be completed once every 5 PHA fiscal years by all PHAs.

A.	PHA Information.																																				
A.1	<p> PHA Name: <u>Four Square Community Action, Inc.</u> PHA Code: <u>NC146</u> </p> <p> PHA Plan for Fiscal Year Beginning: (MM/YYYY): <u>07/2020</u> PHA Plan Submission Type: <input checked="" type="checkbox"/> 5-Year Plan Submission <input type="checkbox"/> Revised 5-Year Plan Submission </p> <p> Availability of Information. 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 on 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 websites. PHAs are also encouraged to provide each resident council a copy of their PHA Plans. </p> <p> PHA Plans and supporting documents are available for public inspection at the Main Administration Office of the PHA and also on the PHA's website (www.foursquarecommunityactioninc.com). </p> <p> <input type="checkbox"/> PHA Consortia: (Check box if submitting a Joint PHA Plan and complete table below) </p> <table border="1" data-bbox="203 1318 1463 1927"> <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> <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.	5-Year Plan. Required for <u>all</u> PHAs completing this form.					
B.1	<p>Mission. 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.</p> <p>Our Mission for 2020-2025: The mission of Four Square Community Action, Inc’s (FSCA) Housing Agency is to serve the rental subsidy needs of the Very Low-Income and Extremely Low-Income families residing in Cherokee, Clay, Graham, and Swain Counties of North Carolina. We will administer the Section 8 Housing Choice Voucher Program in accordance with all Department of Housing & Urban Development Rules, Regulations, and Standards. This Housing Agency will adhere to all Federal, State, County, and local rules, laws, and regulations. The program will be administered in accordance with the Administrative Plan, FSCA’s Personnel Policy, and the Annual Contribution Contracts. The Section 8 Housing Choice Voucher Program will provide rent subsidies to eligible families to rent and occupy safe, decent, and sanitary housing in non-impacted residential areas. This agency will strive to eliminate discrimination and promote equal housing opportunities. We will strive to work with all the services in the four counties we serve to improve the situations of low income and extremely low income families.</p>					

B.2

Goals and Objectives. Identify the PHA’s quantifiable goals and objectives that will enable the PHA to serve the needs of low- income, very low-income, and extremely low- income families for the next five years.

Our 5 year goal for 2020-2025: We will continue efforts to utilize the programs available to take clients from homeless, and other unstable living situations to stable, permanent housing.

GOALS	OBJECTIVES
Expand the supply of assisted housing	Assure that only units that meet the HQS are leased under this program.
Improve the quality of assisted housing	Improve voucher management (SEMAP score) Increase customer satisfaction, Concentrate efforts to improve specific management functions: <ul style="list-style-type: none"> • MTCS reporting accuracy rate of not less than 95% • At least 5% Quality Control follow up of HQS Inspections • Satisfactory rating on all SEMAP • Update Administrative Plan on annual basis • Meet all suspense dates and deadlines
Increase assisted housing choices	Provide voucher mobility counseling: <ul style="list-style-type: none"> • Provide Portability Counseling • Four County Coverage by Outreach Staff. Conduct outreach efforts to potential voucher landlords No late HAP payments
Provide an improved living environment	Encourage owners to improve the existing housing stock
Ensure Equal opportunity and affirmatively further fair housing	Ensure Equal housing opportunities Administer program in accordance with this Agency’s Administrative Plan Administer the Section 8 Housing Choice Voucher Program in compliance with all Department rules, regulations, and standards.

<p>B.3</p>	<p>Progress Report. Include a report on the progress the PHA has made in meeting the goals and objectives described in the previous 5-Year Plan.</p> <p>Progress Report: Through our program efforts the supply of eligible assisted housing has expanded because only units that meet the HQS were leased under our program. The quality of assisted housing has improved through management which has enabled us to meet all of our objectives during the past 5 years. We have also provided counseling services for clients, outreach efforts to potential voucher landlords and ensured that no late HAP payments were made. Through our efforts we have also provided an improved living environment for local residents by encouraging owners to upgrade existing housing stock. Four Square Community Action, Inc.'s Section 8 Program has also ensured fair housing and equal opportunities through a program administration that complies with all Section 8 rules, regulations, and standards.</p>
<p>B.4</p>	<p>Violence Against Women Act (VAWA) Goals. Provide a statement of the PHA's goals, activities objectives, policies, or programs that will enable the PHA to serve the needs of child and adult victims of domestic violence, dating violence, sexual assault, or stalking.</p> <p>In accordance with the federal Violence Against Women Act of 2005 (VAWA) and the subsequent enactment of this legislation in 2006 the Four Square Community Action, Inc.'s PHA has revised the Administrative Plan to include protection for an applicant, a tenant or member of the tenant's family who are victims of domestic violence, date violence or stalking from being either denied application or being evicted and/or terminated from housing assistance based on acts of violence against them. The FSCA's PHA is using the revised HAP contract form 52641 and the revised Tenancy Addendum 52641-A that includes language required to protect victims of abuse in the Housing Choice Voucher Program. The PHA works with REACH in each of its respective counties assisting families of domestic violence.</p>
<p>B.5</p>	<p>Significant Amendment or Modification. Provide a statement on the criteria used for determining a significant amendment or modification to the 5-Year Plan.</p> <p>Any substantial deviation, significant amendment, or modification is defined as discretionary changes in the plans or policies of the housing agency that would fundamentally change the mission, goals, objective, or plans of the agency; and which require formal approval of the Board of Directors.</p>
<p>B.6</p>	<p>Resident Advisory Board (RAB) Comments.</p> <p>(a) Did the RAB(s) provide comments to the 5-Year PHA Plan?</p> <p>Y N <input type="checkbox"/> <input checked="" type="checkbox"/></p> <p>(b) If yes, comments must be submitted by the PHA as an attachment to the 5-Year 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.7</p>	<p>Certification by State or Local Officials.</p> <p>Form HUD 50077-SL, <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>

Instructions for Preparation of Form HUD-50075-5Y 5-Year PHA Plan for All PHAs

A. PHA Information [24 CFR §903.23\(4\)\(e\)](#)

A.1 Include the full **PHA Name**, **PHA Code**, **PHA Fiscal Year Beginning** (MM/YYYY), **PHA Plan Submission Type**, and the **Availability of Information**, specific location(s) of all information relevant to the hearing and proposed PHA Plan.

PHA Consortia: Check box if submitting a Joint PHA Plan and complete the table.

B. 5-Year Plan.

B.1 Mission. 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. ([24 CFR §903.6\(a\)\(1\)](#))

B.2 Goals and Objectives. Identify the PHA's quantifiable goals and objectives that will enable the PHA to serve the needs of low- income, very low- income, and extremely low- income families for the next five years. ([24 CFR §903.6\(b\)\(1\)](#)) For Qualified PHAs only, if at any time a PHA proposes to take units offline for modernization, then that action requires a significant amendment to the PHA's 5-Year Plan.

B.3 Progress Report. Include a report on the progress the PHA has made in meeting the goals and objectives described in the previous 5-Year Plan. ([24 CFR §903.6\(b\)\(2\)](#))

B.4 Violence Against Women Act (VAWA) Goals. Provide a statement of the PHA's goals, activities objectives, policies, or programs that will enable the PHA to serve the needs of child and adult victims of domestic violence, dating violence, sexual assault, or stalking. ([24 CFR §903.6\(a\)\(3\)](#))

B.5 Significant Amendment or Modification. Provide a statement on the criteria used for determining a significant amendment or modification to the 5-Year Plan.

B.6 Resident Advisory Board (RAB) comments.

(a) Did the public or RAB provide comments?

(b) If yes, submit 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 §903.17\(a\)](#), [24 CFR §903.19](#))

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 PHA Plan. The 5-Year PHA Plan provides the PHA's mission, goals and objectives for serving the needs of low- income, very low- income, and extremely low- income families and the progress made in meeting the goals and objectives described in the previous 5-Year Plan.

Public reporting burden for this information collection is estimated to average .76 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.
