

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

---

TARRANT COUNTY HOUSING ASSISTANCE OFFICE  
Annual Plan for Fiscal Year 2018



---

*Tarrant County Housing Assistance Office*  
2100 Circle Drive  
Fort Worth, Texas 76119  
(817) 531-7640  
[housing.tarrantcounty.com](http://housing.tarrantcounty.com)

**Wayne E. Pollard, Jr.**  
Director  
(817) 531-7654  
[wpollard@tarrantcounty.com](mailto:wpollard@tarrantcounty.com)



# **TABLE OF CONTENTS**

## **FY 2018 Annual Plan** **Tarrant County Housing Assistance Office**

| <b><u>ITEM</u></b>   | <b><u>TAB</u></b> |
|--|-------------------|
| <b>PHA FY 2018 Annual Plan<br/>Completed Template<br/>form HUD 50075-HCV<br/>Items 1.0 through 5.0.....</b>  | <b>1</b>          |
| <b>HUD 50077-ST-HCV-HP.....</b><br>PHA Certification of Compliance with<br>the PHA Plan and Related Regulations<br><b>Civil Rights Certification</b>               | <b>2</b>          |
| <b>HUD 50077-SL.....</b><br>Certification by State or Local Official of<br>PHA Plan Consistency with the Consolidated Plan   | <b>3</b>          |
| <b>Resident Advisory Board (RAB) comments</b><br>and Narrative describing their opinion<br>recommendations and TCHAO<br>decisions made on the recommendations..... | <b>4</b>          |
| Challenged Elements (None)   |                   |
| <b>Additional Information</b>  |                   |
| Copy of newspaper and other public notices<br>posted including TCHAO newsletter and website..  | <b>5</b>          |

|  |   |   |
|--|---|---|
| <b>Streamlined Annual<br/>PHA Plan<br/>(HCV Only PHAs)</b> | <b>U.S. Department of Housing and Urban Development<br/>Office of Public and Indian Housing</b> | <b>OMB No. 2577-0226<br/>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-HCV is to be completed annually by **HCV-Only PHAs**. PHAs that meet the definition of a Standard PHA, Troubled PHA, High Performer PHA, Small PHA, or Qualified PHA do not need to submit this form. Where applicable, separate Annual PHA Plan forms are available for each of these types of PHAs.

**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 if administering both programs, or PHAS if only administering public housing.
- (2) **Small PHA** - A PHA that is not designated as PHAS or SEMAP troubled, or at risk of being designated as troubled, 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 and 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>  <b>Tarrant County Housing Assistance Office</b>  </u>      PHA Code: <u>  <b>TX431</b>  </u></p> <p>PHA Plan for Fiscal Year Beginning: (MM/YYYY): <u>  <b>10/2017</b>  </u></p> <p>PHA Inventory (Based on Annual Contributions Contract (ACC) units at time of FY beginning, above)</p> <p>Number of Housing Choice Vouchers (HCVs) <u>  <b>2880</b>  </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 the main office or central office of the PHA. PHAs are strongly encouraged to post complete PHA Plans on their official website.</p> <p><input type="checkbox"/> <b>PHA Consortia:</b> (Check box if submitting a joint Plan and complete table below)</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 25%;">Participating PHAs</th> <th style="width: 10%;">PHA Code</th> <th style="width: 25%;">Program(s) in the Consortia</th> <th style="width: 20%;">Program(s) not in the Consortia</th> <th style="width: 20%;">No. of Units in Each Program</th> </tr> </thead> <tbody> <tr> <td>Lead HA:</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td style="text-align: center;">N/A</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td> </td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td> </td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td> </td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <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 | Lead HA: |  |  |  |  | N/A |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Participating PHAs | PHA Code  | Program(s) in the Consortia | Program(s) not in the Consortia | No. of Units in Each Program |                                 |                              |          |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Lead HA:           |   |                             |                                 |                              |                                 |                              |          |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| N/A                |   |                             |                                 |                              |                                 |                              |          |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|                    |   |                             |                                 |                              |                                 |                              |          |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|                    |   |                             |                                 |                              |                                 |                              |          |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|                    |   |                             |                                 |                              |                                 |                              |          |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|                    |   |                             |                                 |                              |                                 |                              |          |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

|            |   |
|------------|---|
| <b>B.</b>  | <b>Annual Plan.</b>   |
| <b>B.1</b> | <p><b>Revision of PHA Plan Elements.</b></p> <p>(a) Have the following PHA Plan elements been revised by the PHA since its last Annual Plan submission?</p> <p>Y N</p> <p><input checked="" type="checkbox"/> <input type="checkbox"/> Housing Needs and Strategy for Addressing Housing Needs.</p> <p><input type="checkbox"/> <input checked="" type="checkbox"/> Deconcentration and Other Policies that Govern Eligibility, Selection, and Admissions.</p> <p><input type="checkbox"/> <input checked="" type="checkbox"/> Financial Resources.</p> <p><input type="checkbox"/> <input checked="" type="checkbox"/> Rent Determination.</p> <p><input type="checkbox"/> <input checked="" type="checkbox"/> Operation and Management.</p> <p><input type="checkbox"/> <input checked="" type="checkbox"/> Informal Review and Hearing Procedures.</p> <p><input type="checkbox"/> <input checked="" type="checkbox"/> Homeownership Programs.</p> <p><input type="checkbox"/> <input checked="" type="checkbox"/> Self Sufficiency Programs and Treatment of Income Changes Resulting from Welfare Program Requirements.</p> <p><input type="checkbox"/> <input checked="" type="checkbox"/> Substantial Deviation.</p> <p><input type="checkbox"/> <input checked="" type="checkbox"/> Significant Amendment/Modification.</p> <p>(b) If the PHA answered yes for any element, describe the revisions for each element(s):</p> <p><b><u>HOUSING NEEDS AND STRATEGY FOR ADDRESSING HOUSING NEEDS</u></b></p> <ol style="list-style-type: none"> <li><b>We hired a part-time staff person to assist program participants in locating units.</b></li> <li><b>We are updating our Landlord availability list twice a month.</b></li> <li><b>Tarrant County Housing Assistance Office (TCHAO) is now under HUD's mandate to implement the Small Area Fair Market Rents (SAFMR). TCHAO will now be paying higher rents in order to allow families to move to better opportunity areas they could not move to in the past.</b></li> </ol> |
| <b>B.2</b> | <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 checked="" type="checkbox"/> <input type="checkbox"/> Project Based Vouchers.</p> <p>(b) If this activity is planned for the current Fiscal Year, describe the activities. 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>TCHAO plans to Project Base up to 250 vouchers. We will follow HUD's 20% budget authority rule for project basing or HUD's latest guideline on the amount of vouchers.</b></p>   |
| <b>B.3</b> | <p><b>Most Recent Fiscal Year Audit.</b></p> <p>(a) Were there any findings in the most recent FY Audit?</p> <p>Y N N/A</p> <p><input type="checkbox"/> <input checked="" type="checkbox"/> <input type="checkbox"/></p> <p>(b) If yes, please describe:</p>  |
| <b>B.4</b> | <p><b>Civil Rights Certification</b></p> <p><a href="#">Form HUD-50077</a>, <i>PHA Certifications of Compliance with the PHA Plans and Related Regulations</i>, must be submitted by the PHA as an electronic attachment to the PHA Plan.</p>   |
| <b>B.5</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>  |

|                   |  |
|-------------------|--|
| <p><b>B.6</b></p> | <p><b>Progress Report.</b></p> <p>Provide a description of the PHA’s progress in meeting its Mission and Goals described in its 5-Year PHA Plan.</p> <p><b><u>PHA PROGRESS:</u></b></p> <ol style="list-style-type: none"> <li>1. TCHAO continues to improve the marketing plan still under development to attract new landlords.</li> <li>2. TCHAO is already a High Performer, but we continually strive to improve Customer Service.</li> <li>3. TCHAO is implementing a Landlord Advisory Board to aide in finding additional ways to get other landlords in high opportunity areas to accept Section 8 Vouchers.</li> <li>4. TCHAO continues our involvement with the Tarrant County Homeless Coalition in order to get more Service Providers involved to allow more assistance for our participants.</li> <li>5. Due to the improved rental market we are more challenged in getting new landlords to accept Section 8 vouchers. TCHAO is looking for ways to get current landlords more involved including partnering in the development of our marketing plan.</li> <li>6. TCHAO continues to make improvements in the FSS program to enhance our relationships with social service providers and participants.</li> <li>7. Implementing Project Based Vouchers to ensure housing opportunities to program participants.</li> </ol> |
| <p><b>B.7</b></p> | <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/> <b>X</b>   <input type="checkbox"/></p> <p>(a) 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>  |

# Instructions for Preparation of Form HUD-50075-HCV Annual PHA Plan for HCV Only PHAs

---

## A. PHA Information. All PHAs must complete this section. ([24 CFR §903.23\(4\)\(e\)](#))

**A.1** Include the full **PHA Name**, **PHA Code**, **PHA Type**, **PHA Fiscal Year Beginning** (MM/YYYY), **Number of 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.

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

## B. Annual Plan. All PHAs must complete this section. ([24 CFR §903.11\(c\)\(3\)](#))

### 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.”

**Housing Needs and Strategy for Addressing Housing Needs.** Provide a statement addressing the housing needs of low-income, very low-income families who reside in the PHA’s jurisdiction and other families who are on the Section 8 tenant-based waiting list. 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. ([24 CFR §903.7\(a\)\(1\)](#) and [24 CFR §903.7\(a\)\(2\)\(i\)](#)). 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. ([24 CFR §903.7\(a\)\(2\)\(ii\)](#))

**Deconcentration and Other Policies that Govern Eligibility, Selection, and Admissions.** A statement of the PHA’s policies that govern resident or tenant eligibility, selection and admission including admission preferences for HCV. ([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 HCV funding and other anticipated Federal resources available to the PHA, as well as tenant rents and other income available to support 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 rental contributions of families receiving tenant-based assistance, discretionary minimum tenant rents, and payment standard policies. ([24 CFR §903.7\(d\)](#))

**Operation and Management.** A statement that includes a description of PHA management organization, and a listing of the programs administered by the PHA. ([24 CFR §903.7\(e\)\(3\)\(4\)](#)).

**Informal Review and Hearing Procedures.** A description of the informal hearing and review procedures that the PHA makes available to its applicants. ([24 CFR §903.7\(f\)](#))

**Homeownership Programs.** A statement describing any homeownership programs (including project number and unit count) administered by the agency under section 8y of the 1937 Act, or for which the PHA has applied or will apply for approval. ([24 CFR §903.7\(k\)](#))

**Self Sufficiency Programs and Treatment of Income Changes Resulting from Welfare Program Requirements.** A description of any PHA programs relating to services and amenities coordinated, promoted, or provided by the PHA for assisted families, including those resulting from the PHA’s partnership with other entities, for the enhancement of the economic and social self-sufficiency of assisted families, including programs provided or offered as a result of the PHA’s partnerships with other entities, and activities under section 3 of the Housing and Community Development Act of 1968 and under requirements for the Family Self-Sufficiency Program and others. Include the program’s size (including required and actual size of the FSS program) and means of allocating assistance to households. ([24 CFR §903.7\(l\)\(i\)](#)) Describe how the PHA will comply with the requirements of section 12(c) and (d) of the 1937 Act that relate to treatment of income changes resulting from welfare program requirements. ([24 CFR §903.7\(l\)\(iii\)](#)).

**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; or b) any change with regard to homeownership programs. 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.

**B.2 New Activity.** If the PHA intends to undertake new activity using Housing Choice Vouchers (HCVs) for new Project-Based Vouchers (PBVs) in the current Fiscal Year, mark “yes” for this element, and describe the activities to be undertaken in the space provided. If the PHA does not plan to undertake this activity, mark “no.” ([24 CFR §983.57\(b\)\(1\)](#) and Section 8(13)(C) of the United States Housing Act of 1937.

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

- B.3 Most Recent Fiscal Year Audit.** If the results of the most recent fiscal year audit for the PHA included any findings, mark “yes” and describe those findings in the space provided. ([24 CFR §903.11\(c\)\(3\)](#), [24 CFR §903.7\(p\)](#))
- B.4 Civil Rights Certification.** Form HUD-50077, *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\(o\)](#))
- B.5 Certification by State or Local Officials.** Form HUD-50077-SL, *Certification by State or Local Officials of PHA Plans Consistency with the Consolidated Plan*, including the manner in which the applicable plan contents are consistent with the Consolidated Plans, must be submitted by the PHA as an electronic attachment to the PHA Plan. ([24 CFR §903.15](#))
- B.6 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 §903.11\(c\)\(3\)](#), [24 CFR §903.7\(r\)\(1\)](#))
- B.7 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](#))

---

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 Annual PHA Plan. The Annual PHA Plan provides 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 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 4.5 hour 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

**Certifications of Compliance with  
PHA Plans and Related Regulations  
(Standard, Troubled, HCV-Only, and  
High Performer PHAs)**

**U.S. Department of Housing and Urban Development**  
Office of Public and Indian Housing  
**OMB No. 2577-0226**  
**Expires 02/29/2016**

**PHA Certifications of Compliance with the PHA Plan and Related Regulations including  
Required Civil Rights Certifications**

*Acting on behalf of the Board of Commissioners of the Public Housing Agency (PHA) listed below, as its Chairman or other authorized PHA official if there is no Board of Commissioners, I approve the submission of the \_\_\_ 5-Year and/or X Annual PHA Plan for the PHA fiscal year beginning 2017-18, hereinafter referred to as "the Plan", of which this document is a part and make the following certifications and agreements with the Department of Housing and Urban Development (HUD) in connection with the submission of the Plan and implementation thereof:*

1. The Plan is consistent with the applicable comprehensive housing affordability strategy (or any plan incorporating such strategy) for the jurisdiction in which the PHA is located.
2. The Plan contains a certification by the appropriate State or local officials that the Plan is consistent with the applicable Consolidated Plan, which includes a certification that requires the preparation of an Analysis of Impediments to Fair Housing Choice, for the PHA's jurisdiction and a description of the manner in which the PHA Plan is consistent with the applicable Consolidated Plan.
3. The PHA has established a Resident Advisory Board or Boards, the membership of which represents the residents assisted by the PHA, consulted with this Resident Advisory Board or Boards in developing the Plan, including any changes or revisions to the policies and programs identified in the Plan before they were implemented, and considered the recommendations of the RAB (24 CFR 903.13). The PHA has included in the Plan submission a copy of the recommendations made by the Resident Advisory Board or Boards and a description of the manner in which the Plan addresses these recommendations.
4. The PHA made the proposed Plan and all information relevant to the public hearing available for public inspection at least 45 days before the hearing, published a notice that a hearing would be held and conducted a hearing to discuss the Plan and invited public comment.
5. The PHA certifies that it will carry out the Plan in conformity with Title VI of the Civil Rights Act of 1964, the Fair Housing Act, section 504 of the Rehabilitation Act of 1973, and title II of the Americans with Disabilities Act of 1990.
6. The PHA will affirmatively further fair housing by examining their programs or proposed programs, identifying any impediments to fair housing choice within those programs, addressing those impediments in a reasonable fashion in view of the resources available and work with local jurisdictions to implement any of the jurisdiction's initiatives to affirmatively further fair housing that require the PHA's involvement and by maintaining records reflecting these analyses and actions.
7. For PHA Plans that includes a policy for site based waiting lists:
  - The PHA regularly submits required data to HUD's 50058 PIC/IMS Module in an accurate, complete and timely manner (as specified in PIH Notice 2010-25);
  - The system of site-based waiting lists provides for full disclosure to each applicant in the selection of the development in which to reside, including basic information about available sites; and an estimate of the period of time the applicant would likely have to wait to be admitted to units of different sizes and types at each site;
  - Adoption of a site-based waiting list would not violate any court order or settlement agreement or be inconsistent with a pending complaint brought by HUD;
  - The PHA shall take reasonable measures to assure that such a waiting list is consistent with affirmatively furthering fair housing;
  - The PHA provides for review of its site-based waiting list policy to determine if it is consistent with civil rights laws and certifications, as specified in 24 CFR part 903.7(c)(1).
8. The PHA will comply with the prohibitions against discrimination on the basis of age pursuant to the Age Discrimination Act of 1975.
9. The PHA will comply with the Architectural Barriers Act of 1968 and 24 CFR Part 41, Policies and Procedures for the Enforcement of Standards and Requirements for Accessibility by the Physically Handicapped.
10. The PHA will comply with the requirements of section 3 of the Housing and Urban Development Act of 1968, Employment Opportunities for Low-or Very-Low Income Persons, and with its implementing regulation at 24 CFR Part 135.
11. The PHA will comply with acquisition and relocation requirements of the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970 and implementing regulations at 49 CFR Part 24 as applicable.
12. The PHA will take appropriate affirmative action to award contracts to minority and women's business enterprises under 24 CFR 5.105(a).




13. The PHA will provide the responsible entity or HUD any documentation that the responsible entity or HUD needs to carry out its review under the National Environmental Policy Act and other related authorities in accordance with 24 CFR Part 58 or Part 50, respectively.
14. With respect to public housing the PHA will comply with Davis-Bacon or HUD determined wage rate requirements under Section 12 of the United States Housing Act of 1937 and the Contract Work Hours and Safety Standards Act.
15. The PHA will keep records in accordance with 24 CFR 85.20 and facilitate an effective audit to determine compliance with program requirements.
16. The PHA will comply with the Lead-Based Paint Poisoning Prevention Act, the Residential Lead-Based Paint Hazard Reduction Act of 1992, and 24 CFR Part 35.
17. The PHA will comply with the policies, guidelines, and requirements of OMB Circular No. A-87 (Cost Principles for State, Local and Indian Tribal Governments), 2 CFR Part 225, and 24 CFR Part 85 (Administrative Requirements for Grants and Cooperative Agreements to State, Local and Federally Recognized Indian Tribal Governments).
18. The PHA will undertake only activities and programs covered by the Plan in a manner consistent with its Plan and will utilize covered grant funds only for activities that are approvable under the regulations and included in its Plan.
19. All attachments to the Plan have been and will continue to be available at all times and all locations that the PHA Plan is available for public inspection. All required supporting documents have been made available for public inspection along with the Plan and additional requirements at the primary business office of the PHA and at all other times and locations identified by the PHA in its PHA Plan and will continue to be made available at least at the primary business office of the PHA.
22. The PHA certifies that it is in compliance with applicable Federal statutory and regulatory requirements, including the Declaration of Trust(s).

**Tarrant County Housing Assistance Office**  
 PHA Name

**TX 431**  
 PHA Number/HA Code

Annual PHA Plan for Fiscal Year 2017-18  
 5-Year PHA Plan for Fiscal Years 20\_\_\_\_ - 20\_\_\_\_

I hereby certify that all the information stated herein, as well as any information provided in the accompaniment herewith, is true and accurate. **Warning:** HUD will prosecute false claims and statements. Conviction may result in criminal and/or civil penalties. (18 U.S.C. 1001, 1010, 1012; 31 U.S.C. 3729, 3802).

|                             |   |       |                             |
|-----------------------------|---|-------|-----------------------------|
| Name of Authorized Official | <b>B. Glen Whitley</b>  | Title | <b>Tarrant County Judge</b> |
| Signature                   |  | Date  | <b>June 19, 2018</b>        |

**Certification by State or Local  
Official of PHA Plans Consistency  
with the Consolidated Plan or  
State Consolidated Plan  
(All PHAs)**

U. S Department of Housing and Urban Development  
Office of Public and Indian Housing  
OMB No. 2577-0226  
Expires 2/29/2016

**Certification by State or Local Official of PHA Plans  
Consistency with the Consolidated Plan or State Consolidated Plan**

I, B. GLEN WHITLEY, the Tarrant County Judge  
*Official's Name* *Official's Title*

certify that the 5-Year PHA Plan and/or Annual PHA Plan of the

TARRANT COUNTY HOUSING ASSISTANCE OFFICE  
*PHA Name*

is consistent with the Consolidated Plan or State Consolidated Plan and the Analysis of  
Impediments (AI) to Fair Housing Choice of the

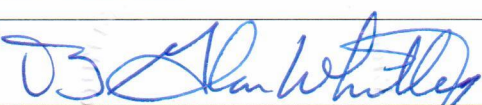
Tarrant County, Texas  
*Local Jurisdiction Name*

pursuant to 24 CFR Part 91.

Provide a description of how the PHA Plan is consistent with the Consolidated Plan or State  
Consolidated Plan and the AI.

The Department of Community Development and the Tarrant County Housing Assistance Office  
work in partnership with each other in the development of the Annual, 5 Year Plan & Consolidated  
Plan. Particular attention is paid to the elements addressing Housing Needs and Strategy for  
Addressing Needs. Additionally, collaboration in policy and progress is address, analyzed and  
assessed at least annually in order to ensure that both departments are pursuing similar goals for the  
Citizens of Tarrant County.

I hereby certify that all the information stated herein, as well as any information provided in the accompaniment herewith, is true and accurate. **Warning:** HUD will prosecute false claims and statements. Conviction may result in criminal and/or civil penalties. (18 U.S.C. 1001, 1010, 1012; 31 U.S.C. 3729, 3802)

|   |                      |
|---|----------------------|
| Name of Authorized Official   | Title                |
| B. GLEN WHITLEY   | Tarrant County Judge |
| Signature  | Date                 |
|   | June 19, 2018        |



## TARRANT COUNTY

Housing Assistance Office  
2100 Circle Drive - Suite 200  
Fort Worth, Texas 76119

Telephone: (817) 531-7640  
Fax: (817) 531-7657  
TDD/TTY: (817) 531-7686  
[tarrantcounty.com/ehousing](http://tarrantcounty.com/ehousing)

Wayne Pollard  
Director

February 15, 2018

## You Are Invited



to attend the Annual  
Resident Advisory Board (RAB) meeting

**Saturday, March 3, 2018**

**10:00 AM – 1:00 PM**

**2300 Circle Drive – Auditorium – Fort Worth, TX 76119**

*Lunch will be Served!*

All members of the Tarrant County Family Self-Sufficiency program, upon enrolling, automatically become members of the Resident Advisory Board (RAB) of the Tarrant County Housing Assistance Office (TCHAO). **Therefore, your attendance at this meeting is very important.**

The purpose of this meeting is for TCHAO to present to the RAB, an overview of the 2018 Annual PHA Plan which includes any changes TCHAO has made or proposes to make to our Administrative Plan. Your feedback and comments are encouraged at this meeting on behalf of all TCHAO tenants.

You are one of the few of our program participants that have the opportunity to speak for and represent all of the 2,800+ participants in the Tarrant County HCV program. We hope you take this privilege very seriously **by being present and on time** for this extremely important meeting.

Escrow checks to the early graduates of the program will be presented and we are holding a **Round Table discussion for you to give us your ideas on what you think we can do to improve the FSS program.**

Please RSVP **immediately**, but **BEFORE Friday, February 23, 2018** to:

***Barbara Whaley***, at (817) 531-7653 or [BWhaley@tarrantcounty.com](mailto:BWhaley@tarrantcounty.com);

***Sonya Roberts*** at (817) 531-7650 or [SCRoberts@tarrantcounty.com](mailto:SCRoberts@tarrantcounty.com); (or)

***Mechall Patterson***, at (817) 531-7643 or [mspatterson@tarrantcounty.com](mailto:mspatterson@tarrantcounty.com) .

On behalf of our Director, **Mr. Wayne E. Pollard, Jr.**, we thank you in advance for your attendance and support as this is one of the two (2) **"Required/Mandatory"** meetings all participants **must attend.**

Sincerely,

A handwritten signature in cursive script that reads "Rosalind Williams".

Rosalind Williams  
Assistant Director  
Resident Advisory Board Coordinator/Facilitator



**TARRANT COUNTY**

**Housing Assistance Office**  
2100 Circle Drive - Suite 200  
Fort Worth, Texas 76119

Telephone: (817) 531-7640  
Fax: (817) 531-7657  
TDD/TTY: (817) 531-7686  
[tarrantcounty.com/ehousing](http://tarrantcounty.com/ehousing)

**Wayne Pollard**  
Director

**A G E N D A**  
**RESIDENT ADVISORY BOARD (RAB)**  
*and*  
**FAMILY SELF-SUFFICIENCY (FSS) ANNUAL MEETING AGENDA**  
**Saturday, MARCH 3, 2018**  
**10:00 AM**



**INVOCATION**

**Delilah Lopez**

**CALL TO ORDER**

**OPENING REMARKS**

**EXPECTATIONS OF FSS PARTICIPANTS**

**Wayne E. Pollard, Jr.**

*Director  
Tarrant County Housing Assistance Office*

**PRESENTATION OF 2018 ADMIN PHA PLAN.....** **Rosalind Williams**

*Assistant Director  
Tarrant County Housing Assistance Office*

**FSS PLEDGE**

**ROSALIND WILLIAMS**

**TENANTS COMMENTS AND FEEDBACK**

**ALL PARTICIPANTS**

**PRESENTATION OF FSS EARLY GRADUATES...** **Wayne E. Pollard, Jr. and**

**FSS Coordinators:**

*Barbara Whaley, Sonya Roberts and  
Mechall Patterson*

**CLOSING REMARKS.....** **Wayne E. Pollard, Jr.**

**BENEDICTION**

**Delilah Lopez**

**LUNCH IS SERVED**





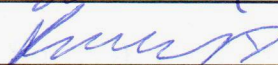

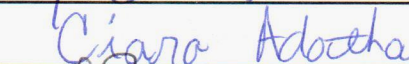

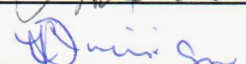

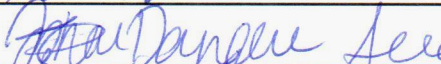
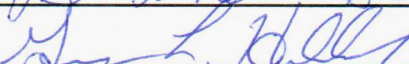
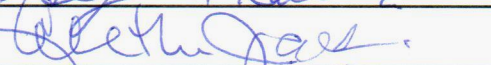

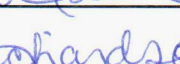
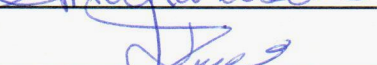

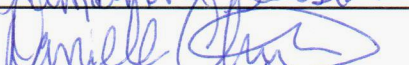



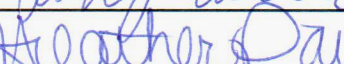
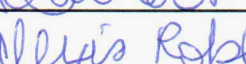



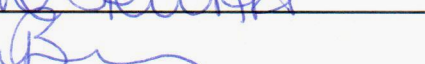
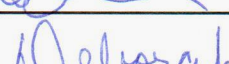
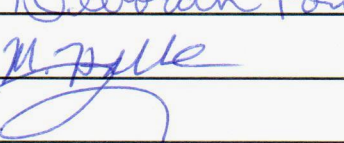
# Resident Advisory Board Meeting

Saturday, March 3, 2018

10:00AM - 12:00PM







|    | Print Name                 | Signature                      | Phone          |
|----|----------------------------|--------------------------------|----------------|
| 1  | Jennifer McKnight Phillips | Jennifer McKnight Phillips     | 817 726 7072   |
| 2  | Jessica Vallejo            | Jessica Vallejo                | 817-793-6523   |
| 3  | Shatina Adams              | Shatina Adams                  | 682 438 8907   |
| 4  | Corey Beasley              | Corey Beasley                  | 817-535-9807   |
| 5  | Rudy Philon                | Rudy Philon                    | 817-803-2550   |
| 6  | Quynna Spates              | Quynna Spates                  | 682 317 8117   |
| 7  | Henrietta Gaurichan        | <del>Henrietta Gaurichan</del> | 817-489-4877   |
| 8  | Jerry Schiffer             | Jerry Schiffer                 | 682-774-1219   |
| 9  | Jonathan Brooks            | Jonathan Brooks                | 682 688 2992   |
| 10 | Almayasa Alwan             | Almayasa Alwan                 | 817 223 0649   |
| 11 | TyAnna Burns               | TyAnna Burns                   | 817-420-4451   |
| 12 | Halima Mudey               | <del>Halima Mudey</del>        | 682-564-2163   |
| 13 | DeNishea Johnson           | DeNishea Johnson               | 682 701 0513   |
| 14 | Chanel Rose                | Chanel Rose                    | (817) 298-7193 |
| 15 | Thekia Brownlow            | Thekia Brownlow                | 318-307-4374   |
| 16 | Evanguela Gentry           | Evanguela Gentry               | 817-986-3532   |
| 17 | Lois Martin                | Lois Martin                    | 817-696-7054   |
| 18 | Valerie Mingo              | Valerie Mingo                  | 682 804 9530   |
| 19 | Natasha Jackson            | Natasha Jackson                | 682-248-9401   |
| 20 | Rosalind Guste             | Rosalind Guste                 | 817-443-2957   |
| 21 | Pamela Turner              | Pamela Turner                  | 817 902-1778   |
| 22 | Fisheika Tobler            | Fisheika Tobler                | 817 360 7384   |
| 23 | Mandi Hazam                | Mandi Hazam                    | 817-655-0575   |
| 24 | Judea Gillarm              | Judea Gillarm                  | 817 798 6021   |

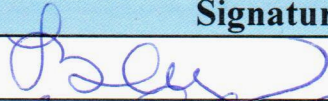

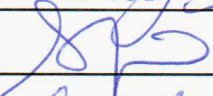
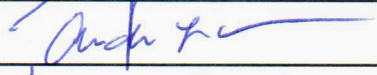
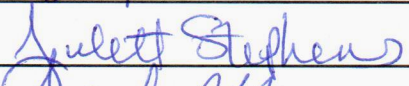
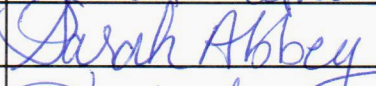
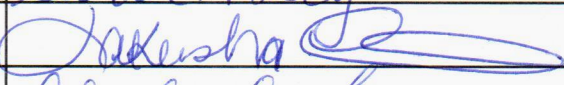
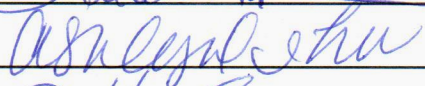
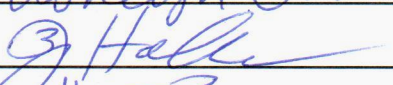
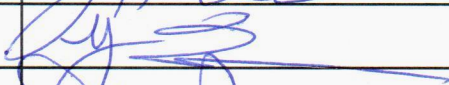
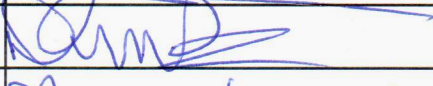
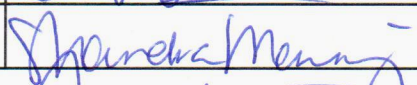
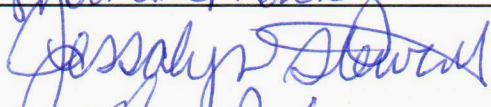

|    | Print Name              | Signature  | Phone          |
|----|-------------------------|--|----------------|
| 25 | Monique Taylor          |    | 817-230-9897   |
| 26 | Zatoya Brice            |    | 817-885-0164   |
| 27 | Anwar Shaikheldin       |    | 817-724-3737   |
| 28 | Jennifer Flores         |    | 817-939-5369   |
| 29 | Ciara Adochan           | Ciara Adochan  | 817-704-8212   |
| 30 | La'Shandra Ramirez      |    | 817-405-5059   |
| 31 | Dominique Claude        |    | (682) 540-1089 |
| 32 | Kristal Pruitt          |     | (817) 341-8183 |
| 33 | Dandrea Scott           |    | 817-941-0137   |
| 34 | Gerry Hubbard           |    | 817-554-3692   |
| 35 | Aetha Jackson           |    | 940-301-1197   |
| 36 | Paulette Smith          |    | 682-802-9002   |
| 37 | Shellie Richardson      |     | 817-995-6036   |
| 38 | Musa Alhassan           |     | 817-210-2393   |
| 39 | Lamaindra Session       |   | (214) 841-8806 |
| 40 | Danielle Christmas      |  | (817) 843-7263 |
| 41 | Michelle Smith          |  | (817) 841-7744 |
| 42 | Lyndon & Jessica Bonner |  | 682-262-6376   |
| 43 | Ashley Collie           |  | 817-673-6902   |
| 44 | Heather Davis           |  | 817-349-9419   |
| 45 | Alexis Robles           |   | 817-349-9419   |
| 46 | Kelly Rich              |   | 214-676-6132   |
| 47 | Tracy Hyslop            |   | 682-203-5861   |
| 48 | Divya Stewart           |   | 817-231-1884   |
| 49 | Brittany Warden         |   | (817) 918-0333 |
| 50 | Deborah Pove            |  | 817-724-5528   |
| 51 | Meaghan Hauke           |   | (817) 487-8418 |
| 52 | JAMESIA CRAVER          |   | (817) 349-1031 |

|    | Print Name           | Signature            | Phone        |
|----|----------------------|----------------------|--------------|
| 53 | Konesha Wilson       | Konesha Wilson       | 817-298-7878 |
| 54 | CESTEAL Coffey       | CSTEAL               | 817-566-4519 |
| 55 | Cornelya Ward        | Cornelya Ward        | 817-347-0818 |
| 56 | JERRY Ward           | Jerry Ward           | 682-319-4579 |
| 57 | DARRE Aybr           | DARRE Aybr           | 404-934-9400 |
| 58 | Cormanisha Dornal    | Cormanisha Dornal    | 817-986-3514 |
| 59 | Lutfi Faleih         | Lutfi Faleih         | 214-710-0892 |
| 60 | Morgan Smith         | Morgan Smith         | 817-443-5316 |
| 61 | Natasha Miles        | Natasha Miles        | 817-679-1019 |
| 62 | Leah Gainero         | Leah Gainero         | 817-705-7080 |
| 63 | Philicia Shields     | Philicia Shields     | 682-221-7931 |
| 64 | Pamela Perkins       | Pamela Perkins       | 682-999-9084 |
| 65 | Jennifer Browns      | Jennifer Browns      | (6)207-5581  |
| 66 | Chereé Owens         | Chereé Owens         | 214-829-7821 |
| 67 | Valerie Sanders      | Valerie Sanders      | 817-344-0812 |
| 68 | Shasta Godina        | Shasta Godina        | 682-203-5441 |
| 69 | Frederic Timmons     | Frederic Timmons     | 682-438-7774 |
| 70 | Dandrea Scott        | Dandrea Scott        | 817-941-0137 |
| 71 | Ricky Thomas         | Ricky Thomas         | 214-545-7955 |
| 72 | Melissa Romero       | Melissa Romero       | 817-893-3098 |
| 73 | Monica Maples        | Monica Maples        | 682-459-6874 |
| 74 | Angelica Roberts     | Angelica Roberts     | 817-231-1082 |
| 75 | Kizzy Weber          | Kizzy Weber          | 817-501-4887 |
| 76 | Fareedah James       | Fareedah James       | 973-862-9983 |
| 77 | Kizzel White         | Kizzel White         | 817-757-5839 |
| 78 | Lanetta Wright       | Lanetta Wright       | 817-291-1775 |
| 79 | Stephanie Montfauery | Stephanie Montfauery | 817-655-2407 |
| 80 |                      |                      |              |

|     | Print Name        | Signature         | Phone          |
|-----|-------------------|-------------------|----------------|
| 81  | TANNA PALMER      | Tanna Palmer      | 817 902 2874   |
| 82  | Lashanti          | Lashanti          | 504 270 5223   |
| 83  | Carla Wilson      | Ms. Carla Wilson  | (817) 724-2344 |
| 84  | Katherine Woods   | Katherine Woods   | 817 715-8372   |
| 85  | Shakiba James     | Shakiba James     | 469-912-5904   |
| 86  | Genesis Mather    | Genesis Mather    | 817-744-0231   |
| 87  | Adria Boone       | Adria Boone       | 817-559-6865   |
| 88  | ANTONIETA QUEPONS | Antonieta Quepons | (682)-233-4997 |
| 89  | DANDREA COUNTER   | Dandrea Counter   | 817-885-4986   |
| 90  | DOROTHY JEMISON   | Dorothy Jemison   | 903-422-6851   |
| 91  | JAVON COLEMAN     | Javon Coleman     | 817-542-6026   |
| 92  | SANDRA RANSOM     | Sandra Ransom     | (682)-560-6257 |
| 93  | VICTORIA SHELTON  | Victoria Shelton  | 817-991-1296   |
| 94  | TANIKA ORTEGA     | Tanika Ortega     | 817-705-9014   |
| 95  | DEBAINA TRET      | Debainatrett      | 817) 466-6992  |
| 96  | LATYIA JOHNSON    | Latyia Johnson    | 98-346-7222    |
| 97  | ROZLYNE NEAL      | Rozlyne Neal      | 682-222-3894   |
| 98  | RHONDA PHIFER     | Rhonda Phifer     | (817) 663-5231 |
| 99  | DESTINI CLAY      | Destini Clay      | 817 344 8127   |
| 100 |                   |                   |                |
| 101 |                   |                   |                |
| 102 |                   |                   |                |
| 103 |                   |                   |                |
| 104 |                   |                   |                |
| 105 |                   |                   |                |
| 106 |                   |                   |                |
| 107 |                   |                   |                |
| 108 |                   |                   |                |



|                     |  |              |
|---------------------|--|--------------|
| Nikita Howard       |   | 817-361-2554 |
| Monette Truevillian | monette Truevillian  | 817-349-1153 |
| Christen Winters    |   | 682-3148759  |
| La Neil Tucker      |  | 714-393-9191 |
| Monica Maples       |  | 682-459-6872 |
| Rosalinda Garcia    | Rosalinda Garcia   | 817-989-0471 |
| Dolores Peterson    |   | 817-696-1403 |

|     | Print Name        | Signature  | Phone        |
|-----|-------------------|--|--------------|
| 109 | Latoya Bowers     |     | 8173440471   |
| 110 | Courtney L. Drake |    | 817/8226606  |
| 111 | Shaniquia Angu    |     | 817 374-8972 |
| 112 | Andrea Brewer     |    | 817 448-4094 |
| 113 | Sulett Stephens   |    | 817-714-1710 |
| 114 | Sarah Abbey       |     | 817/658 8658 |
| 115 | Lakeisha Taylor   |    | 682-232-5394 |
| 116 | Ashley DeLeon     |    | 817-617-1213 |
| 117 | JaQuetta Hallman  |    | 682-309-9580 |
| 118 | Niger Ferguson    |    | 817 846 5586 |
| 119 | Demetrius Lewis   |    | 817-317-6916 |
| 120 | Shaundra Manning  |    | 817-896-2822 |
|     | Jessalyn Stewart  |   | 817 886 8583 |
|     | Marsha R. Carter  |  | 682-774-1576 |

**2018 RESIDENT ADVISORY BOARD (RAB) MEETING**  
**Tarrant County Housing Assistance Office**  
**Saturday, March 4, 2018**  
**2300 Circle Drive, Auditorium**  
**Fort Worth, TX 76119**

*Chaired by:      Rosalind Williams*  
*Assistant Director*  
*Tarrant County Housing*

*Wayne Pollard*  
*Director*  
*Tarrant County Housing*

Everyone was asked to sign-in upon entering and the "Sign-In" sheets attached reflect that there were at least **119** program participants in attendance which is by far the largest number of participants to ever attend a RAB meeting.

The meeting was opened by Ms. Rosalind Williams, promptly at 10:00 AM, with prayer led by Ms. Delilah Lopez. Ms. Williams then introduced Mr. Pollard, Director of TCHAO.

Ms. Pollard welcomed everyone and announced the purpose of this annual meeting is to allow the Resident Advisory Board (comprised of all FSS program participants) an opportunity to provide input, feedback and comments on the 2018 Annual Agency Plan, most particularly, on any changes we have made to the Administrative Plan. We encouraged their involvement, feedback and provided a center isle microphone for any questions/comments to be heard and discussed.

Mr. Pollard presented a Power Point presentation on information on goals, expectations of program participants and information on Family Self Sufficiency (FSS) "Is It Worth It". Mr. Pollard also explained the new Small Area Fair Market Rents and how they will affect participants and the agency.

Ms. Williams provided a PowerPoint presentation to the participants explaining what a PHA Plan is and the residents' role and responsibility regarding the Annual Plan. The presentation also included why these meetings are held, the PHA Plan process, cycle, and timelines for reporting this information to HUD, availability of the Annual Plan, Administrative Plan and their relationship to one another. Also explained the difference between a calendar year, fiscal year, the Fiscal year for Tarrant County Housing, and how we determine the due date for filing the Plan with HUD.

Participants were again advised that TCHAO values the input and feedback of program participants into the plans and planning of TCHAO matters. All were invited and encouraged to feel free to ask questions, make comments and suggestions, and to provide any ideas they might have relative to the 2018 PHA Annual Plan.

Ms. Williams notified every one of their right to personally review the FY 2018 Annual Agency Plan, Administrative Plan and the procedures for doing so. An explanation was provided of what an Affirmatively Furthering Fair Housing (AFFH) plan is, what a Consolidated Plan is and their relationship to one another and the Annual Plan.

There were four (4) changes made to the Administrative Plan since the RAB met last year. They are as follows with any comments or questions made by the participants:

**Change No. 1**

**SMALL AREA FAIR MARKET RENTS (SAFMR'S):** PER HUD REGULATION, OUR AGENCY WAS ONE OF 22 METROPOLITAN AREAS SELECTED TO IMPLEMENT SELECTED TO IMPLEMENT THE SAFMR'S EFFECTIVE APRIL 1, 2018. SMALL AREAS FAIR MARKET RENTS are payments standards that use fair market rents calculated for zip codes within metropolitan areas.

*Q. So if I remain in my current unit next year and my FMR decreased, will my rent portion of rent increase?*

*A. Yes, you are protected for one year, but at your second annual, the new FMR's are implemented and if your areas FMR was decreased it means that your portion of rent will increase.*

*Q. What if my current landlord chooses to decrease the total rent, how will that affect my portion?*

*A. If he decreases the contract rent, this could possibly make your portion remain the same or close to what you're currently paying.*

*Q. Will I be given an opportunity to move and if so how much time will I have?*

*A. Yes, each year you are given an opportunity to move and under normal circumstances, you will be given up to 90 days.*

**Change No. 2**

**HOTMA (HOUSING OPPORTUNITY THROUGH MODERNIZATION ACT OF 2016)**  
**NEW UNIT FAILED INSPECTIONS**

**CHANGE: TCHAO MAY ALLOW A PARTICIPANT TO MOVE IN IF THE UNIT FAILS INSPECTIONS DUE TO MINOR FAILURES WITH THE AGREEMENT THAT THE OWNER HAS 30 DAYS TO FIX THE FAILED ITEMS. IF THE OWNER FAILS TO MAKE THE REPAIRS, THE UNIT WILL BE ABATED ON THE 30<sup>TH</sup> DAY.**

*Q. If I'm moving to a new unit and it fails, I can move in without the unit passing inspection?*

*A. Yes, if they are minor fails and you have the inspectors written approval to move in prior to the unit passing inspection..*

**Change No. 3**

**ASSISTANCE CHECK FOR PROCESSING ANNUALS AND INTERIMS**

**CHANGE: NON-DISABLED FAMILIES ARE NOW REQUIRED TO TRANSMIT AN ELECTRONIC ANNUAL REEXAMINATION AND/OR INTERIM CHANGES VIA "ASSISTANCECHECK" (INTERNET). IF NEEDED, CLIENTS ARE ABLE TO USE THE COMPUTERS LOCATED IN OUR LOBBY TO PROCESS THEIR CHANGES OR ANNUAL RECERTIFICATIONS WITH STAFFS ASSISTANCE IF NEEDED.**

**IF A FAMILY FAILS TO RESPOND AFTER TWO ELECTRONIC NOTIFICATIONS, THE ANNUAL OR INTERIM CHANGE MUST THEN BE PROCESSED IN PERSON. FAILURE TO COMPLY WITH THIS WILL RESULT IN A NOTICE OF TERMINATION (see Chapter 12) BEING SENT TO THE FAMILY'S EMAIL ADDRESS OF RECORD, AND ANY ALTERNATE ADDRESS PROVIDED IN THE FAMILY'S FILE.**

*Discussed the advantages to taking part of Assistance Check for processing necessary changes and annual reexamination, i.e. not having to take off work, processing at your convenience, etc.*

**Change No. 4**

**PORTABILITY**

**CHANGE:**

IF A FAMILY ELECTS TO MOVE TO AN AREA WHERE THERE IS MORE THAN ONE PHA IN THE AREA, THE **FAMILY MUST** CHOOSE THE RECEIVING PHA.

A FAMILY WILL BE GIVEN AT LEAST THIRTY (30) DAYS TO SEARCH FOR A UNIT WITHIN THE NEW PHA'S JURISDICTION.

- A FAMILY WHO CHOOSES TO MOVE TO A NEW UNIT WILL BE ISSUED A VOUCHER WITHIN SIXTY (60) DAYS OF THE LEASE END DATE.
- A FAMILY WILL BE GIVEN A LIST OF AVAILABLE UNITS AT THE TIME OF BRIEFING.

*Question. Can I take my Voucher to any city in the Unites States?*

*Yes. As long as that city has an existing HCV Program.*

Ms. Williams talked about Mobility Assistance Counseling for those that are in the process of moving and are having difficulties in locating a unit. She then introduce Mechall Patterson, FSS Coordinator to discuss the Homeownership Program and requirements.

Ms. Williams introduced the FSS Coordinators, i.e.: Barbara Whaley, Mechall Patterson and Sonya Roberts. Information was presented and discussed regarding updates and activities of the FSS program, workshops, seminars and classes and Affirmatively Furthering Fair Housing. All were discussed as well as the TCHAO website and information sharing among the participants.

Ms. Williams promised that all comments would receive consideration.

Eight (8) early graduates were introduced and received their escrow check. Some volunteered to make comments about how helpful the FSS program was for them and their families.

Overall, there were "**NO RECOMMENDATIONS**" from the RAB----only questions, most pertaining to their own individual circumstances.

We advised that we hold RAB meetings at least annually and more often if/when necessary.

The question and answer period rolled into the adjournment of the meeting at about 12:00 PM. Q&A continued during Lunch which was served by the FSS Coordinators.

Respectfully submitted,

Rosalind Williams

FSS Program  
*IS IT WORTH IT?*

“Life is 10% of what happens to me and 90% of how I react to it”.

By Charles Swindoll


FREE MONEY

• \$1.4 Million



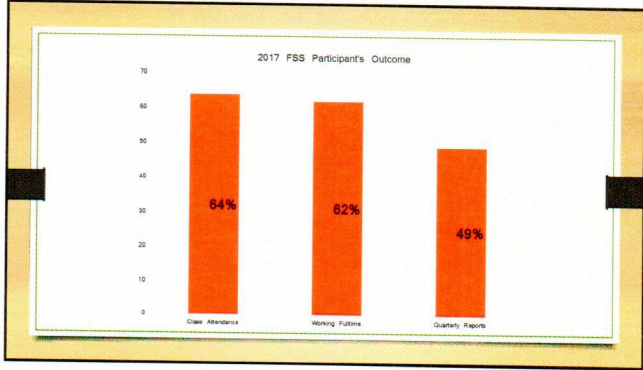
What Would You Do to get part of these funds?

- Attend at least 4 classes a year
- Submit 4 reports a year Timely
- Have a fulltime job
- Completes Goals
- Pay Your Portion of Rent
- Field Contacts



**REALITY!!!!!!**

---



**WHAT'S NEW**

---


- NEW FSS Performance Measurement System**
- Earning Performance Measure
  - Graduation Rate
  - Participation Rate

# SAFMR

SMALL AREA FAIR MARKET RENT


## WHAT ARE SAFMRs?

- Small Area Fair Market Rents are payment standards that use fair market rents calculated for zip codes within metropolitan areas.



## BENEFITS OF SAFMRs

- Lower Poverty Neighborhoods
- Safer Neighborhoods
- Better Health Outcomes
- Better Educational Opportunities
- Improved Employment Opportunities
- Beneficial Income Outcomes



## WHEN WILL THIS AFFECT YOU?

- Changes will affect you at your Annual Re-examination
- Changes will affect you if you move
- TCHAO will protect you for one year if your payment standard is lowered as a result of the SAFMR



## MOBILITY ASSISTANCE



- We have a MOBILITY ASSISTANCE Program to assist in finding units in higher opportunity areas.
- Our Navigation Clerk is available to assist families in their search for units.

## UPDATES & ADDITIONAL INFORMATION

- Please check our website for updates and additional information.



[Http://Housing.TarrantCounty.com](http://Housing.TarrantCounty.com)

## HOTMA

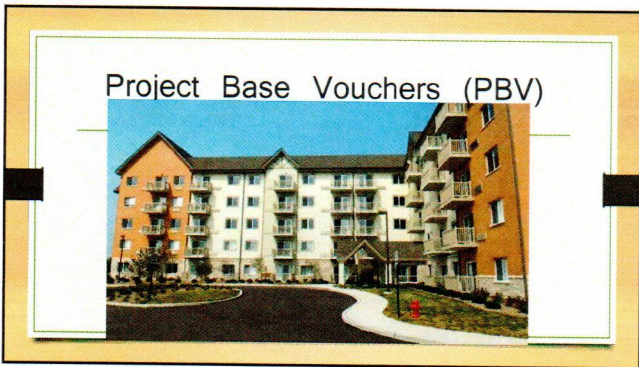
## HOTMA PHASE 2

Effective 4/18/17



New Unit Failed Inspections

- Allow to move in for minor failures
- Owner has 30 days to fix the failed items
- Unit will be abated on the 30<sup>th</sup> day



PBV

- Set-aside up to 50 PBV over the next 2 years
- Partnership with the TCHC to provide referrals
- Supported Services Is a Requirement for TCHAO's PBV
- TCHAO can PBV VASH and FUP Vouchers

## AssistanceCheck



## Benefits

- Saving Money
- Saving Time
- No Longer Missing Work
- Complete Interim Changes Faster
- Track your changes
- Faster and Improved Communication
- No more long hours at Housing
- Prevent losing Paperwork

**BENEFITS**



## Tarrant County Housing Assistance Office

2018 Annual  
Public Housing Authority Admin Plan

Wayne E. Pollard, Jr.  
Director

Rosalind Williams  
Assistant Director

March 4, 2018



## 2018 ADMINISTRATIVE PLAN CHANGES OVERVIEW



Every PHA in the nation is required to submit an Annual PHA Plan and every 5 years, a 5-Year and Annual Plan.

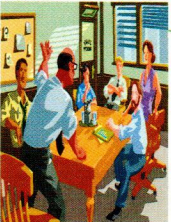

The PHA Administrative Plan is a comprehensive guide to help the PHA plan and implement the policies, programs, operations and strategies each Housing Agency has for meeting local housing needs and goals.



## TIMETABLE.....

HUD also requires all PHAs to do the following, **45 days before** the Public Hearing:


1. Meet with the RAB for comments on all changes to the Admin Plan.
2. Post PHA Plan for Public Comment.
3. Publish a Legal Notice in the local major newspaper inviting all interested parties to the Hearing.





Tarrant County Housing Assistance Office

---

## ADMINISTRATIVE CHANGES MADE OR PROPOSED SINCE YEAR






## ADMIN PLAN CHANGE (Chapter 11-1 B)

### ASSISTANCE CHECK FOR PROCESSING ANNUALS AND INTERIMS

- Families generally are required to transmit an electronic annual reexamination via "AssistanceCheck" (internet) or participate in a group annual reexamination appointment, which must be attended by the head of household, spouse, co-head and all adult members of the household (age 18 and above).
- If a family fails to respond after two electronic notifications, the annual or interim change **MUST** then be processed in person. Failure to comply with this will result in a notice of termination (see Chapter 12) being sent to the family's Email address of record, and to any alternate address provided in the family's file.



## VAWA

- If you are the victim of domestic violence, dating violence, or stalking, you cannot be terminated from the Section 8 program or evicted based on acts or threats of violence committed against you. **Seek safety and contact your Housing Counselor or FSS Coordinator.**
- Also, criminal acts directly related to the domestic violence, dating violence, or stalking **that are caused by a member of your household or a guest** can't be the reason for evicting you or terminating your rental assistance if you were the victim of the abuse.

**MOBILITY ASSISTANCE  
WHEN TRYING TO MOVE TO  
HIGHER OPPORTUNITY  
AREAS**

### Mobility Counseling Notice

8/13/17  
"Can't Find an Apartment"  
Tarrant County Housing Assistance Office may be able to help through our program called  
"MOBILITY COUNSELING"

There are 60 "Mobility Counseling" services available. Please check below for help:

- 1. Rental Assistance Grants (for rent only, 30 and 60 Months of RHC and RHC)
- 2. To locate a rental property
- 3. List of rental properties available in an area of your choice
- 4. Transportation (gas or car) for your mobility counseling appointment (not for other purposes)
- 5. Transportation (gas or car) for your mobility counseling appointment (not for other purposes)
- 6. Assistance with moving
- 7. Rent Assistance (up to an amount of \$1,000)
- 8. To locate a rental property
- 9. To locate a rental property
- 10. To locate a rental property

We request that you read this notice carefully and understand the information on this page.

NAME: \_\_\_\_\_ TITLE: \_\_\_\_\_ PHONE: \_\_\_\_\_ FAX: \_\_\_\_\_  
 HOME TELEPHONE: \_\_\_\_\_ CELL PHONE: \_\_\_\_\_ HOME TELEPHONE: \_\_\_\_\_  
 MAIL ADDRESS: \_\_\_\_\_ BEST TIME TO CONTACT YOU: \_\_\_\_\_  
 DATE OF MOBILE COUNSELING: \_\_\_\_\_

**PLEASE CHECK ALL THAT APPLY TO YOUR CURRENT SITUATION:**

- Low credit score
- Bad credit score
- Rental history
- Criminal record
- Eviction
- Credit/Background Issues
- Landlord not accepting your credit history
- Other (please specify): \_\_\_\_\_

Tarrant County Housing Assistance Office  
1000 Ross Street, Suite 1000, Fort Worth, TX 76102

## HOMEOWNERSHIP

**101** Mechall Patterson

**TARRANT COUNTY HOUSING FAMILY SELF  
SUFFICIENCY PROGRAM**  
**WAYNE POLLARD, DIRECTOR**  
**ROSALIND WILLIAMS,  
ASSISTANT DIRECTOR**


## INTRODUCTION

- The ultimate goal of the Homeownership Option is to provide opportunities for families to become first-time homeowners with the use of their current Housing Choice Voucher as a mortgage subsidy and remain stable homeowners in their community.


## FAMILY ELIGIBILITY

- Must be a current TCHAO Housing Choice Voucher Recipient
- Must be enrolled in the Family Self-Sufficiency Program
- Must be in good standing with the FSS Program for one year
- Meet the minimum income and employment requirements according to federal regulations

## INCOME REQUIREMENTS

- Must have a gross annual income equal to Federal minimum wage (\$7.25) multiplied by  s (\$14,500)
- For a person receiving disability, the annual income must not be less than the Federal Supplemental Security Income for an individual multiplied by 12 (currently \$9,000)

## EMPLOYMENT REQUIREMENTS

- One or more adult member of the family must be employed on a full-time basis (not less than an average of 30 hours weekly) .
- Elderly/ Disabled Families: The employment requirement and minimum income guidelines do not apply.

## HOMEOWNERSHIP READINESS

- One year in good standing on the FSS Program
- Stable employment for one year or more
- Credit score from all 3 bureaus of 620+
- Savings of \$2500 or more
- Attend Housing Counseling Program



## ESSENTIAL REMINDERS



- Keep your FSS coordinator informed of your progress and provide information in a timely manner
- Attend required workshops and meetings
- Report changes in income or family composition
- TCHAO **must** approve all contracts and homes and lending terms

## RESTRICTIONS



Rent to Own



For Sale by Owner



Balloon Mortgages



Fixer Uppers



Welcome Home



Tarrant County Housing Assistance Office  
 Housing Choice Voucher Homeownership Program  
 Wayne Pollard, Director  
 Rosalind Williams, Assistance



## QUESTIONS/COMMENTS ??

If you have questions or comments you may contact:

Rosalind Williams

*Assistant Director*

(817) 531-7680

[rosalindwilliams@tarrantcounty.com](mailto:rosalindwilliams@tarrantcounty.com)







# **PUBLIC NOTICE**

**to all**

Program Participants and the General Public

**Tarrant County Housing Assistance Office**  
has available for your review and inspection the

## **2018 ANNUAL PLAN**

A Public Hearing will be held on

**June 12, 2018**

**10:00 AM**

**Commissioners Court**

**100 East Weatherford St., Fort Worth, TX**

**Interested Parties may attend.**

**PLEASE SEE THE RECEPTIONIST**

***if you have any questions or wish to inspect the plan.***

*Wayne E. Pollard, Jr.*  
*Director*

*Posted April 2, 2018*



# **Aviso Público**

**para todos**

los Participantes del Programa de Vivienda y el Público en general

La Oficina de Ayuda de la Vivienda del Condado Tarrant  
le ofrece a usted a repasar y examinar

## **EL PLAN ANUAL DEL 2018**

Habrà una audiencia pública el día

# **12 DE JUNIO DE 2018**

**a las 10:00 de la Corte del Comisionado  
para todas las personas interesadas**

**Para repasar o examinar el plan  
POR FAVOR CONSULTE A LA RECEPCIONISTA**

*Wayne E. Pollard, Jr., Director*

*Posted 02 de April del 2018*

**Search Results:**

05 ▾ Per Page

Go Back ◀ Page 1 of 1 ▶

Notice Type : Public Notice

Posting Date : 5/13/2018  
Printer Friendly

Tarrant County Housing Assistance Office (TCHAO) has developed the Annual Agency Plan in compliance with the Quality Housing and Work Responsibility Act of 1998. It is always available for review at TCHAO located at 2100 Circle Drive, Suite 200, Fort Worth, TX 76119, between the hours of 8:30am and 4:00pm. A Public Hearing will be held on June 12, 2018 at 10:00am during TARRANT COUNTY COMMISSIONERS COURT, 100 E. Weatherford St., Room 506, Fort Worth, TX 76196. If you have any questions, please contact our office at (817) 531-7640. All interested parties are invited to attend.

01 ▾ Per Page

Go Back ◀ Page 1 of 1 ▶

**LEGALNOTICE.ORG**

*Information without boundaries*

© 2003-2014 Legal Notice Registry Corporation ("LNRC") (solely with regard to the content provided by LNRC).

## **FY 2018 Annual PHA Plan**

On Tuesday, June 12, 2018, a Public Hearing will be held in Commissioner's Court, 100 East Weatherford, Fort Worth, TX, at 10:00 AM, on the 2018 PHA Plan. Any interested parties may attend.

The purpose of the meeting is to provide an opportunity for the public to voice any comments and ask any questions they may have regarding the content of the 2018 Annual PHA Plan.

The Tarrant County Housing Assistance Office Administrative Plan and Annual PHA Plan are always available for public review and inspection by request, at the TCHAO, 2100 Circle Drive, Fort Worth, TX, Monday through Friday, from 9AM to 4PM.

Wayne E. Pollard, Jr.  
Director

*R Williams  
2018PHAPlanWebsite  
05 April, 2018*