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## **PUBLIC NOTICE**

**POSTED: October 18, 2024**

### **FERNDALE HOUSING COMMISSION 2025 ANNUAL & 5-YEAR PLANS**

In accordance with Section 5A of the United States Housing Act of 1937 (USHA), as amended by Section 511 of the Quality Housing and Work Responsibility Act of 1998, the Ferndale Housing Commission has prepared an Annual Plan for the Fiscal year 2025 for public review and comment.

The public hearing on the Annual Plan will be held before the Board of Commissioners on December 16, 2024, at 6:30 p.m. immediately following the Regular Board Meeting.

Copies of the proposed documents are available during a forty-five-day public review and comment period, from October 18, 2024 to December 2, 2024, at 415 Withington, Ferndale, MI. 48220; at [ferndalehousing.com](http://ferndalehousing.com), by emailing a request to: [info@ferndalehousing.com](mailto:info@ferndalehousing.com) or by calling (248) 547-9500.

Anyone wishing to make written comments or questions about public housing may mail them to the Ferndale Housing Commission at 41 Withington, Ferndale, MI. 48220; or email comments to [info@ferndalehousing.com](mailto:info@ferndalehousing.com) or call (248) 547-9500.

Anyone requiring an accommodation, or needing information or materials in an alternative language, or who needs an interpreter, to fully participate in the comment period or public hearing may use any of the above listed methods of contact to make that request.



|                                           |                                                                                                 |                                                 |
|-------------------------------------------|-------------------------------------------------------------------------------------------------|-------------------------------------------------|
| <b>5-Year PHA Plan<br/>(for All 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 03/31/2024</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.** The Form HUD-50075-5Y is to be completed once every 5 PHA fiscal years by all PHAs.

| <b>A.</b>          | <b>PHA Information.</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                    |          |                             |                                 |                                 |                              |                              |    |     |    |     |  |  |  |  |  |  |  |
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| <b>A.1</b>         | <p> <b>PHA Name:</b> Ferndale Housing Commission      <b>PHA Code:</b> MI096<br/> <b>PHA Plan for Fiscal Year Beginning:</b> (MM/YYYY): 01/2025<br/> <b>The Five-Year Period of the Plan (i.e., 2019-2023):</b> 2025-2029<br/> <b>Plan Submission Type</b>   <input checked="" type="checkbox"/> 5-Year Plan Submission   <input type="checkbox"/> Revised 5-Year Plan 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 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 the 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> <b>How the public can access this PHA Plan:</b> 5 Year Plans may be viewed on the Ferndale Housing Commission website: ferndalehousing.com; copies of the Plan will be in the FHC office located 41 Withington Ferndale, MI. 4220;. The 5 Year Plan may also be requested via email to: info@ferndalehousing.com or phone call: (248) 547-9500. The Plan will be available for forty-five days beginning October 18, 2024 - December 2, 2024. Interested parties needing language translation services for participation with the Plan may request these services by email or phone call.                 </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="191 1121 1555 1182"> <thead> <tr> <th rowspan="2">Participating PHAs</th> <th rowspan="2">PHA Code</th> <th rowspan="2">Program(s) in the Consortia</th> <th colspan="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> <th>PH</th> <th>HCV</th> </tr> </thead> <tbody> <tr> <td> </td> <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 | PH | HCV |  |  |  |  |  |  |  |
| Participating PHAs | PHA Code                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                    |          |                             | Program(s) in the Consortia     | Program(s) not in the Consortia |                              | No. of Units in Each Program |    |     |    |     |  |  |  |  |  |  |  |
|                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | PH                 | HCV      | PH                          |                                 | HCV                             |                              |                              |    |     |    |     |  |  |  |  |  |  |  |
|                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                    |          |                             |                                 |                                 |                              |                              |    |     |    |     |  |  |  |  |  |  |  |
| <b>B.</b>          | <b>Plan Elements. Required for all PHAs completing this form.</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                    |          |                             |                                 |                                 |                              |                              |    |     |    |     |  |  |  |  |  |  |  |
| <b>B.1</b>         | <p> <b>Mission.</b> State the PHA's mission for serving the needs of low- income, very low- income, and extremely low- income families in the PHA's jurisdiction for the next five years.                 </p> <p> <b>The Ferndale Housing Commission assures high quality, affordable, sustainable housing and access to social and community services, where those we serve feel secure and welcome within a diverse and inclusive community that is caring, participatory, and values each person.</b> </p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                    |          |                             |                                 |                                 |                              |                              |    |     |    |     |  |  |  |  |  |  |  |
| <b>B.2</b>         | <p> <b>Goals and Objectives.</b> Identify the PHA's quantifiable goals and objectives that will enable the PHA to serve the needs of low- income, very low-income, and extremely low-income families for the next five years.                 </p> <p> <b>FHC will strive to improve the physical condition of FHC properties; will expand affordable housing within the community, expand participation of private landlords in the Housing Choice Voucher Program; connect residents to health, social economic and other needed resources; clear expectations and strict enforcement of program requirements emphasizing safety, security, respect, inclusivity in a customer focused, service oriented culture.</b> </p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                    |          |                             |                                 |                                 |                              |                              |    |     |    |     |  |  |  |  |  |  |  |
| <b>B.3</b>         | <p> <b>Progress Report.</b> 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> <b>FHC has progressed with emphasizing safety in our two public housing buildings and our forty-three scattered sites by implementing, and enforcing, a Zero Tolerance rule regarding violence within our community; we have committed to eradicate all pests within the buildings, we encourage our HCV participants to consider moving into diverse areas free of poverty.</b> </p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                    |          |                             |                                 |                                 |                              |                              |    |     |    |     |  |  |  |  |  |  |  |

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| <p><b>B.4</b></p>                                                                                                                                                                                                                                                                  | <p><b>Violence Against Women Act (VAWA) Goals.</b> 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><b>All administrative documents and policies, and associated processes, provide for serving the needs of victims of domestic violence, dating violence, stalking, or sexual assault. FHC provides VAWA materials to all participants regardless of gender.</b></p>                                                                                                                                                                                                                                                    |
| <p><b>C.</b></p>                                                                                                                                                                                                                                                                   | <p><b>Other Document and/or Certification Requirements.</b></p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
| <p><b>C.1</b></p>                                                                                                                                                                                                                                                                  | <p><b>Significant Amendment or Modification.</b> Provide a statement on the criteria used for determining a significant amendment or modification to the 5-Year Plan.</p> <p><b>Substantial deviations or significant amendments or modifications are defined as discretionary changes in the plans or policies of the Housing Commission that fundamentally changes the mission, goals, objectives, or plans of the agency and which require formal approval of the Board of Commissioners. The following are excluded: decision to convert to either PBRA or PBV, changes to capital fund budget that result from an approved RAD conversion, changes to a construction or rehab plan associated with RAD conversion, changes to the financing structure for an approved RAD conversion.</b></p>              |
| <p><b>C.2</b></p>                                                                                                                                                                                                                                                                  | <p><b>Resident Advisory Board (RAB) Comments.</b></p> <p>(a) Did the RAB(s) have comments to the 5-Year PHA Plan?<br/>                 Y <input type="checkbox"/> N <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>C.3</b></p>                                                                                                                                                                                                                                                                  | <p><b>Certification by State or Local Officials.</b></p> <p>Form HUD-50077-SL, Certification by State or Local Officials of PHA Plans Consistency with the Consolidated Plan, must be submitted by the PHA as an electronic attachment to the PHA Plan.</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
| <p><b>C.4</b></p>                                                                                                                                                                                                                                                                  | <p><b>Required Submission for HUD FO Review.</b></p> <p>(a) Did the public challenge any elements of the Plan?<br/>                 Y <input type="checkbox"/> N <input checked="" type="checkbox"/></p> <p>(b) If yes, include Challenged Elements.</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |
| <p><b>D.</b></p>                                                                                                                                                                                                                                                                   | <p><b>Affirmatively Furthering Fair Housing (AFFH).</b></p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
| <p><b>D.1</b></p>                                                                                                                                                                                                                                                                  | <p><b>Affirmatively Furthering Fair Housing.</b> (Non-qualified PHAs are only required to complete this section on the Annual PHA Plan. All qualified PHAs must complete this section.)</p> <p>Provide a statement of the PHA's strategies and actions to achieve fair housing goals outlined in an accepted Assessment of Fair Housing (AFH) consistent with 24 CFR § 5.154(d)(5). Use the chart provided below. (PHAs should add as many goals as necessary to overcome fair housing issues and contributing factors.) Until such time as the PHA is required to submit an AFH, the PHA is not obligated to complete this chart. The PHA will fulfill, nevertheless, the requirements at 24 CFR § 903.7(o) enacted prior to August 17, 2015. See Instructions for further detail on completing this item.</p> |
| <p><b>Fair Housing Goal: Continuously improve the physical condition of FHC properties.</b></p>                                                                                                                                                                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
| <p><u><i>Describe fair housing strategies and actions to achieve the goal</i></u></p> <p>Inspections of apartment units were conducted, all major and minor repairs were made. This is a continuous work in progress.</p>                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
| <p><b>Fair Housing Goal: Expanding Affordable Housing in the Community</b></p>                                                                                                                                                                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
| <p><u><i>Describe fair housing strategies and actions to achieve the goal</i></u></p> <p>FHC has allocated 16 total PBV vouchers to allow low, or extremely low, income families or individuals to move into newly built, inclusive, modern and inclusive apartment buildings.</p> |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
| <p><b>Fair Housing Goal: Connect Residents to health, social, economic and other resources</b></p>                                                                                                                                                                                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |

**Describe fair housing strategies and actions to achieve the goal**

**FHC has hosted guest speakers at our two monthly Resident Committee Meetings. FHC has hosted fire-safety lessons with Ferndale Fire Dept, as guest speakers, In-home care for elderly and disabled, renter insurance guest speakers to educate our families on protecting their assets against property loss, CPR classes and will continue these monthly practices.**

**Form identification:** MI096-Ferndale Housing Commission form HUD-50075-5Y (Form ID - 367) printed by Aliyah Mgawe in HUD Secure Systems/Public Housing Portal at 10/17/2024 07:06PM EST

|                                                     |                                                                                                 |                                                 |
|-----------------------------------------------------|-------------------------------------------------------------------------------------------------|-------------------------------------------------|
| <b>Streamlined Annual PHA Plan<br/>(Small 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 03/31/2024</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, including changes to these policies, 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.** The Form HUD-50075-SM is to be completed annually by **Small PHAs**. PHAs that meet the definition of a Standard PHA, Troubled PHA, High Performer PHA, HCV-Only PHA, or Qualified PHA do not need to submit this form.

**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 the most recent Public Housing Assessment System (PHAS) and Section Eight Management Assessment Program (SEMAP) assessments.
- (2) **Small PHA** - A PHA that is not designated as PHAS or SEMAP troubled, that owns or manages less than 250 public housing units and any number of vouchers where the total combined units exceed 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 exceed 550, and that was designated as a standard performer in the most recent PHAS or 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.

| <b>A.</b>          | <b>PHA Information.</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                    |          |                             |                                 |                                 |                              |                              |    |     |    |     |  |  |  |  |  |  |  |
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| A.1                | <p><b>PHA Name:</b> <u>Ferndale Housing Commission</u>      <b>PHA Code:</b> <u>MI096</u><br/> <b>PHA Type:</b> <input checked="" type="checkbox"/> Small</p> <p><b>PHA Plan for Fiscal Year Beginning:</b> (MM/YYYY): <u>01/2025</u><br/> <b>PHA Inventory</b> (Based on Annual Contributions Contract (ACC) units at time of FY beginning, above)<br/> <b>Number of Public Housing (PH) Units</b> <u>168</u>    <b>Number of Housing Choice Vouchers (HCVs)</b> <u>984</u><br/> <b>Total Combined</b> <u>1152</u></p> <p><b>PHA Plan Submission Type:</b> <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 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 website. PHAs are also encouraged to provide each resident council a copy of their PHA Plans.</p> <p><b>How the public can access this PHA Plan:</b> Annual Plans may be viewed on our website: <a href="http://www.ferndalehousing.com">www.ferndalehousing.com</a>. Copies of the Plan will be in the FHC office located 415 Withington Ferndale MI. 48220. The Annual plan may also be emailed to interested parties by emailing a request to <a href="mailto:info@ferndalehousing.co">info@ferndalehousing.co</a>. The Plan will be available for 45 days beginning October 18, 2024 and ending on December 2, 2024.</p> <p><input type="checkbox"/> <b>PHA Consortia:</b> (Check box if submitting a Joint PHA Plan and complete table below)</p> <table border="1" data-bbox="191 1768 1555 1831"> <thead> <tr> <th rowspan="2">Participating PHAs</th> <th rowspan="2">PHA Code</th> <th rowspan="2">Program(s) in the Consortia</th> <th colspan="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> <th>PH</th> <th>HCV</th> </tr> </thead> <tbody> <tr> <td> </td> <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 | PH | HCV |  |  |  |  |  |  |  |
| Participating PHAs | PHA Code                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                    |          |                             | Program(s) in the Consortia     | Program(s) not in the Consortia |                              | No. of Units in Each Program |    |     |    |     |  |  |  |  |  |  |  |
|                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | PH                 | HCV      | PH                          |                                 | HCV                             |                              |                              |    |     |    |     |  |  |  |  |  |  |  |
|                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                    |          |                             |                                 |                                 |                              |                              |    |     |    |     |  |  |  |  |  |  |  |

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| <p><b>B.</b></p>                                                                                                                                                                                                         | <p><b>Plan Elements Submitted with 5-Year PHA Plans.</b> Required elements for Small PHAs completing this document in years in which the 5-Year Plan is also due. This section does not need to be completed for years when a Small PHA is not submitting its 5-Year Plan. See sub-section below for required elements in all other years (Years 1-4).</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |
| <p><b>B.1</b></p>                                                                                                                                                                                                        | <p><b>Revision of Existing PHA Plan Elements.</b><br/>                 (a) Have the following PHA Plan elements been revised by the PHA since its last <b>Five-Year PHA Plan</b> submission?<br/><br/>                 Y N<br/> <input type="checkbox"/> <input checked="" type="checkbox"/> Statement of Housing Needs and Strategy for Addressing Housing Needs.<br/> <input type="checkbox"/> <input checked="" type="checkbox"/> Deconcentration and Other Policies that Govern Eligibility, Selection, and Admissions.<br/> <input type="checkbox"/> <input checked="" type="checkbox"/> Financial Resources.<br/> <input type="checkbox"/> <input checked="" type="checkbox"/> Rent Determination.<br/> <input type="checkbox"/> <input checked="" type="checkbox"/> Homeownership Programs.<br/> <input type="checkbox"/> <input checked="" type="checkbox"/> Substantial Deviation.<br/> <input type="checkbox"/> <input checked="" type="checkbox"/> Significant Amendment/Modification<br/><br/>                 (b) If the PHA answered yes for any element, describe the revisions for each revised element(s):<br/><br/>                 (c) The PHA must submit its Deconcentration Policy for Field Office review.</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |
| <p><b>B.2</b></p>                                                                                                                                                                                                        | <p><b>New Activities.</b><br/>                 (a) Does the PHA intend to undertake any new activities related to the following in the PHA's current Fiscal Year?<br/>                 Y N<br/> <input type="checkbox"/> <input checked="" type="checkbox"/> Hope VI or Choice Neighborhoods.<br/> <input type="checkbox"/> <input checked="" type="checkbox"/> Mixed Finance Modernization or Development.<br/> <input type="checkbox"/> <input checked="" type="checkbox"/> Demolition and/or Disposition.<br/> <input type="checkbox"/> <input checked="" type="checkbox"/> Conversion of Public Housing to Tenant Based Assistance.<br/> <input type="checkbox"/> <input checked="" type="checkbox"/> Conversion of Public Housing to Project-Based Rental Assistance or Project-Based Vouchers under RAD.<br/> <input checked="" type="checkbox"/> <input type="checkbox"/> Project Based Vouchers.<br/> <input type="checkbox"/> <input checked="" type="checkbox"/> Units with Approved Vacancies for Modernization.<br/> <input type="checkbox"/> <input checked="" type="checkbox"/> Other Capital Grant Programs (i.e., Capital Fund Community Facilities Grants or Emergency Safety and Security Grants).<br/><br/>                 (b) If any of these activities are planned for the current Fiscal Year, describe the activities. For new demolition activities, describe any public housing develop.. or portion thereof, owned by the PHA for which the PHA has applied or will apply for demolition and/or disposition approval under section 18 of the 1937 Act under the separate demolition/disposition approval process. If using Project-Based Vouchers (PBVs), provide the projected number of project-based units and general locations, and describe how project basing would be consistent with the PHA Plan<br/><br/> <b>Project Based Vouchers.</b><br/>                 Ferndale Housing Commission has allocated 8 PBV vouchers to Shepherd House, a newly built apartment community, and to Royal Oak Cottages, currently still in the building stage with a tentative completion date of November, 2024.</p> |
| <p><b>B.3</b></p>                                                                                                                                                                                                        | <p><b>Progress Report.</b><br/>                 Provide a description of the PHA's progress in meeting its Mission and Goals described in the PHA 5-Year and Annual Plan.<br/> <b>Ferndale Housing Commission has repaired or remodeled apartment units in both PH buildings. All PH Scattered Site homes have been inspected and were repaired, or are undergoing repairs, to bring them back online and provide quality housing to low income families. The grounds at both PH buildings were landscaped, with the wind porch at WW repaired and updated. The scattered site units have been landscaped as well. The two PH buildings now have curb appeal and are welcoming to residents and visitors alike.</b></p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
| <p><b>B.4</b></p>                                                                                                                                                                                                        | <p><b>Capital Improvements.</b> Include a reference here to the most recent HUD-approved 5-Year Action Plan in EPIC and the date that it was approved.<br/> <b>5 Year Action plan promised routine maintenance and activities which included replacing worn carpeting with wood veneer floors, and replacing worn appliances with updated appliances. This plan was approved on 6/20/2024</b></p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |
| <p><b>B.5</b></p>                                                                                                                                                                                                        | <p><b>Most Recent Fiscal Year Audit.</b><br/>                 (a) Were there any findings in the most recent FY Audit?<br/>                 Y <input checked="" type="checkbox"/> N <input type="checkbox"/><br/>                 (b) If yes, please describe:<br/> <b>The Audit listed one finding which was described as a slow response by FHC. This finding has been challenged.</b></p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
| <p><b>Plan Elements Submitted All Other Years (Years 1-4).</b> Required elements for all other fiscal years. This section does not need to be completed in years when a Small PHA is submitting its 5-Year PHA Plan.</p> |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |
| <p><b>B.1</b></p>                                                                                                                                                                                                        | <p><b>New Activities</b><br/>                 (a) Does the PHA intend to undertake any new activities related to the following in the PHA's current Fiscal Year?</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |

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|------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
|            | <p>Y N</p> <p><input type="checkbox"/> <input type="checkbox"/> Hope VI or Choice Neighborhoods.</p> <p><input type="checkbox"/> <input type="checkbox"/> Mixed Finance Modernization or Development.</p> <p><input type="checkbox"/> <input type="checkbox"/> Demolition and/or Disposition.</p> <p><input type="checkbox"/> <input type="checkbox"/> Conversion of Public Housing to Tenant-Based Assistance.</p> <p><input type="checkbox"/> <input type="checkbox"/> Conversion of Public Housing to Project-Based Assistance under RAD.</p> <p><input type="checkbox"/> <input type="checkbox"/> Project Based Vouchers.</p> <p><input type="checkbox"/> <input type="checkbox"/> Units with Approved Vacancies for Modernization.</p> <p><input type="checkbox"/> <input type="checkbox"/> Other Capital Grant Programs (i.e., Capital Fund Community Facilities Grants or Emergency Safety and Security Grants).</p> <p>(b) If any of these activities are planned for the current Fiscal Year, describe the activities. For new demolition activities, describe any public housing development or portion thereof, owned by the PHA for which the PHA has applied or will apply for demolition and/or disposition approval under section 18 of the 1937 Act under the separate demolition/disposition approval process.</p> <p>(c) If using Project-Based Vouchers, provide the projected number of project-based units, general locations, and describe how project-basing would be consistent with the PHA Plan.</p> <p>(d) The PHA must submit its Deconcentration Policy for Field Office Review.</p> |
| <b>B.2</b> | <b>Capital Improvements</b> Include a reference here to the most recent HUD-approved 5-Year Action Plan in EPIC and the date that it was approved.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
| <b>C.</b>  | <b>Other Document or Certification Requirements for Annual Plan Submissions.</b> Required in all submission years.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
| <b>C.1</b> | <p><b>Resident Advisory Board (RAB) Comments.</b></p> <p>(a) Did the RAB(s) have comments to the PHA Plan?<br/>Y <input type="checkbox"/> N <input checked="" type="checkbox"/></p> <p>(b) 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>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |
| <b>C.2</b> | <p><b>Certification by State or Local Officials.</b></p> <p><u>Form HUD 50077-SL</u>, <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>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |
| <b>C.3</b> | <p><b>Civil Rights Certification/ Certification Listing Policies and Programs that the PHA has Revised since Submission of its Last Annual Plan.</b></p> <p>Form HUD-50077-CRT-SM, <i>PHA Certifications of Compliance with PHA Plan, Civil Rights, and Related Laws and Regulations Including PHA Plan Elements that Have Changed</i>, must be submitted by the PHA as an electronic attachment to the PHA Plan</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |
| <b>C.4</b> | <p><b>Challenged Elements.</b> If any element of the PHA Plan is challenged, a PHA must include such information as an attachment with a description of any challenges to Plan elements, the source of the challenge, and the PHA's response to the public.</p> <p>(a) Did the public challenge any elements of the Plan?<br/>Y <input type="checkbox"/> N <input checked="" type="checkbox"/></p> <p>If yes, include Challenged Elements.</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |
| <b>D.</b>  | <b>Affirmatively Furthering Fair Housing (AFFH).</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |
| <b>D.1</b> | <p><b>Affirmatively Furthering Fair Housing (AFFH).</b></p> <p>Provide a statement of the PHA's strategies and actions to achieve fair housing goals outlined in an accepted Assessment of Fair Housing (AFH) consistent with 24 CFR § 5.154(d)(5). Use the chart provided below. (PHAs should add as many goals as necessary to overcome fair housing issues and contributing factors.) Until such time as the PHA is required to submit an AFH, the PHA is not obligated to complete this chart. The PHA will fulfill, nevertheless, the requirements at 24 CFR § 903.7(o) enacted prior to August 17, 2015. See Instructions for further detail on completing this item.</p> <div style="border: 1px solid black; padding: 5px; margin-top: 10px;"> <p><b>Fair Housing Goal: Pull applicants from the waitlist for HCV which has not been opened in close to ten years.</b></p> <p><i>Describe fair housing strategies and actions to achieve the goal</i></p> <p><b>Identify FHC policies which diminished the voucher allotment, research and rectify voucher which may be reissued. Pull from the waitlist to increase housing opportunities for low, and extremely low, income individuals and families.</b></p> </div>                                                                                                                                                                                                                                                                                                                                                                                    |

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