

<b>PHA 5-Year and Annual Plan</b>	<b>U.S. Department of Housing and Urban Development Office of Public and Indian Housing</b>	<b>OMB No. 2577-0226 Expires 4/30/2011</b>
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<b>1.0</b>	<b>PHA Information</b> PHA Name: <u>The City of Miami Beach Housing Authority</u> PHA Code: <u>FL017</u> PHA Type: <input type="checkbox"/> Small <input checked="" type="checkbox"/> High Performing <input type="checkbox"/> Standard <input type="checkbox"/> HCV (Section 8) PHA Fiscal Year Beginning: (MM/YYYY): <u>07/2014</u>				
<b>2.0</b>	<b>Inventory</b> (based on ACC units at time of FY beginning in 1.0 above) Number of PH units: <u>200</u> Number of HCV units: <u>2,766</u>				
<b>3.0</b>	<b>Submission Type</b> <input type="checkbox"/> 5-Year and Annual Plan <input checked="" type="checkbox"/> Annual Plan Only <input type="checkbox"/> 5-Year Plan Only				
<b>4.0</b>	<b>PHA Consortia</b> <input type="checkbox"/> PHA Consortia: (Check box if submitting a joint Plan and complete table below.)				
	Participating PHAs	PHA Code	Program(s) Included in the Consortia	Programs Not in the Consortia	No. of Units in Each Program
	PHA 1:				PH      HCV
	PHA 2:				
	PHA 3:				
<b>5.0</b>	<b>5-Year Plan.</b> Complete items 5.1 and 5.2 only at 5-Year Plan update.				
<b>5.1</b>	<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:				
<b>5.2</b>	<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 and very low-income, and extremely low-income families for the next five years. Include a report on the progress the PHA has made in meeting the goals and objectives described in the previous 5-Year Plan.				
<b>6.0</b>	(b) Identify the specific location(s) where the public may obtain copies of the 5-Year and Annual PHA Plan. For a complete list of PHA Plan elements, see Section 6.0 of the instructions. <b>Executive Office – 200 Alton Road, Miami Beach, FL 33139</b>				
<b>7.0</b>	<b>Hope VI, Mixed Finance Modernization or Development, Demolition and/or Disposition, Conversion of Public Housing, Homeownership Programs, and Project-based Vouchers.</b> <i>Include statements related to these programs as applicable.</i>				
<b>8.0</b>	<b>Capital Improvements.</b> Please complete Parts 8.1 through 8.3, as applicable.				

8.1	<b>Capital Fund Program Annual Statement/Performance and Evaluation Report.</b> As part of the PHA 5-Year and Annual Plan, annually complete and submit the <i>Capital Fund Program Annual Statement/Performance and Evaluation Report</i> , form HUD-50075.1, for each current and open CFP grant and CFFP financing.																																																			
8.2	<b>Capital Fund Program Five-Year Action Plan.</b> As part of the submission of the Annual Plan, PHAs must complete and submit the <i>Capital Fund Program Five-Year Action Plan</i> , form HUD-50075.2, and subsequent annual updates (on a rolling basis, e.g., drop current year, and add latest year for a five year period). Large capital items must be included in the Five-Year Action Plan.																																																			
8.3	<b>Capital Fund Financing Program (CFFP).</b> <input type="checkbox"/> Check if the PHA proposes to use any portion of its Capital Fund Program (CFP)/Replacement Housing Factor (RHF) to repay debt incurred to finance capital improvements.																																																			
9.0	<p><b>Housing Needs.</b> Based on information provided by the applicable Consolidated Plan, information provided by HUD, and other generally available data, make a reasonable effort to identify the housing needs of the low-income, very low-income, and extremely low-income families who reside in the jurisdiction served by the PHA, including elderly families, families with disabilities, and households of various races and ethnic groups, and other families who are on the public housing and Section 8 tenant-based assistance waiting lists. The identification of housing needs must address issues of affordability, supply, quality, accessibility, size of units, and location.</p> <p><b>PUBLIC HOUSING</b></p> <table border="0"> <tr> <td>Waiting List Total</td> <td>590</td> <td></td> </tr> <tr> <td>ELI</td> <td>96.66%</td> <td></td> </tr> <tr> <td>VLI</td> <td>3.33%</td> <td></td> </tr> <tr> <td>LI</td> <td>0.50%</td> <td></td> </tr> </table> <p><b>Elderly Families</b></p> <table border="0"> <tr> <td>Families with Disabilities</td> <td>63</td> <td>10.68%</td> </tr> <tr> <td>Race/Ethnic White</td> <td>588</td> <td>99.66%</td> </tr> <tr> <td>Race/Ethnic Black</td> <td>2</td> <td>0.34%</td> </tr> <tr> <td>Race/Ethnic Hispanic</td> <td>583</td> <td>98.31%</td> </tr> <tr> <td>Race/Ethnic Non-Hispanic</td> <td>9</td> <td>1.19%</td> </tr> </table> <p><b>SECTION 8</b></p> <table border="0"> <tr> <td>Waiting List Total</td> <td>1,337</td> <td></td> </tr> <tr> <td>ELI</td> <td></td> <td></td> </tr> <tr> <td>VLI</td> <td></td> <td></td> </tr> <tr> <td>LI</td> <td></td> <td></td> </tr> <tr> <td>Race/Ethnic White</td> <td>897</td> <td>67.09%</td> </tr> <tr> <td>Race/Ethnic Black</td> <td>436</td> <td>32.61%</td> </tr> <tr> <td>Race/Ethnic Hispanic</td> <td>394</td> <td>29.46%</td> </tr> <tr> <td>Race/Ethnic Non-Hispanic</td> <td>943</td> <td>70.53%</td> </tr> </table>	Waiting List Total	590		ELI	96.66%		VLI	3.33%		LI	0.50%		Families with Disabilities	63	10.68%	Race/Ethnic White	588	99.66%	Race/Ethnic Black	2	0.34%	Race/Ethnic Hispanic	583	98.31%	Race/Ethnic Non-Hispanic	9	1.19%	Waiting List Total	1,337		ELI			VLI			LI			Race/Ethnic White	897	67.09%	Race/Ethnic Black	436	32.61%	Race/Ethnic Hispanic	394	29.46%	Race/Ethnic Non-Hispanic	943	70.53%
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9.1	<p><b>Strategy for Addressing Housing Needs.</b> Provide a brief description of the PHA's strategy for addressing the housing needs of families in the jurisdiction and on the waiting list in the upcoming year. <b>Note: Small, Section 8 only, and High Performing PHAs complete only for Annual Plan submission with the 5-Year Plan.</b></p> <p><b>Increase the supply of Assisted Housing</b></p> <ol style="list-style-type: none"> <li>Pursue additional VASH Vouchers</li> <li>Pursue additional Section 8 Rental Vouchers</li> <li>Maintain full public housing occupancy</li> <li>Leverage affordable housing resources to create new units</li> <li>Provide Homeownership through the FSS Program</li> </ol> <p><b>Increase Assisted Housing Choices</b></p> <ol style="list-style-type: none"> <li>Outreach efforts to potential landlords</li> <li>Pursue housing resources other than public housing or Section 8</li> <li>Provide Voucher Mobility Counseling</li> </ol> <p><b>Specific Family Types:</b></p> <ol style="list-style-type: none"> <li>Target available assistance to the elderly</li> <li>Continue Elderly Designation for Rebecca Towers</li> <li>Affirmatively market to races/ethnicities shown to have disproportionate housing needs</li> <li>Invest efforts and resources to create/locate housing opportunities out of poverty areas</li> </ol>
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<b>10.0</b>	<p><b>Additional Information.</b> Describe the following, as well as any additional information HUD has requested.</p> <p>(a) Progress in Meeting Mission and Goals. Provide a brief statement of the PHA’s progress in meeting the mission and goals described in the 5-Year Plan.</p> <ol style="list-style-type: none"> <li>1) <b>Special efforts and training to continue to be a high performing authority.</b></li> <li>2) <b>HACMB completed the rehabilitation of Henderson Court, providing five units of affordable housing for the elderly.</b></li> <li>3) <b>HACMB completed the construction of the Steven E. Chaykin Apartments, providing thirty (30) units of affordable housing for elderly disabled persons.</b></li> <li>4) <b>The construction of the Leonard Turkel Residences commenced in the 2<sup>nd</sup> quarter of 2013, providing twenty-one units of affordable housing for the elderly.</b></li> <li>5) <b>Significant physical improvements to our presently owned buildings.</b></li> <li>6) <b>Continue the renovation and modernization of our buildings.</b></li> <li>7) <b>Continue the development of additional supportive services for our participants, we have created a committee of area community agencies, to discuss and implement new services and approaches to benefit our tenants and the community in general.</b></li> <li>8) <b>Successfully integrated additional vouchers (200 VASH Vouchers and 25 Vouchers Administration).</b></li> </ol> <p>(b) Significant Amendment and Substantial Deviation/Modification. Provide the PHA’s definition of “significant amendment” and “substantial deviation/modification”</p>
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<b>11.0</b>	<p><b>Required Submission for HUD Field Office Review.</b> In addition to the PHA Plan template (HUD-50075), PHAs must submit the following documents. Items (a) through (g) may be submitted with signature by mail or electronically with scanned signatures, but electronic submission is encouraged. Items (h) through (i) must be attached electronically with the PHA Plan. <b>Note:</b> Faxed copies of these documents will not be accepted by the Field Office.</p> <ol style="list-style-type: none"> <li>(a) Form HUD-50077, <i>PHA Certifications of Compliance with the PHA Plans and Related Regulations</i> (which includes all certifications relating to Civil Rights)</li> <li>(b) Form HUD-50070, <i>Certification for a Drug-Free Workplace</i> (PHAs receiving CFP grants only)</li> <li>(c) Form HUD-50071, <i>Certification of Payments to Influence Federal Transactions</i> (PHAs receiving CFP grants only)</li> <li>(d) Form SF-LLL, <i>Disclosure of Lobbying Activities</i> (PHAs receiving CFP grants only)</li> <li>(e) Form SF-LLL-A, <i>Disclosure of Lobbying Activities Continuation Sheet</i> (PHAs receiving CFP grants only)</li> <li>(f) Resident Advisory Board (RAB) comments. Comments received from the RAB must be submitted by the PHA as an attachment to the PHA Plan. PHAs must also include a narrative describing their analysis of the recommendations and the decisions made on these recommendations.</li> <li>(g) Challenged Elements</li> <li>(h) Form HUD-50075.1, <i>Capital Fund Program Annual Statement/Performance and Evaluation Report</i> (PHAs receiving CFP grants only)</li> <li>(i) Form HUD-50075.2, <i>Capital Fund Program Five-Year Action Plan</i> (PHAs receiving CFP grants only)</li> </ol>
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**Capital Fund Program—Five-Year Action Plan**

U.S. Department of Housing and Urban Development  
 Office of Public and Indian Housing  
 Expires 4/30/2011

<b>Part I: Summary</b>						
PHA Name/Number The Housing Authority of the City of Miami Beach/FL017		Locality (City/County & State) Miami Beach, Florida			<input checked="" type="checkbox"/> Original 5-Year Plan <input type="checkbox"/> Revision No:	
A.	Development Number and Name	Work Statement for Year 1 FFY <u>2014</u>	Work Statement for Year 2 FFY <u>2015</u>	Work Statement for Year 3 FFY <u>2016</u>	Work Statement for Year 4 FFY <u>2017</u>	Work Statement for Year 5 FFY <u>2018</u>
B.	Physical Improvements Subtotal	Annual Statement				
C.	Management Improvements					
D.	PHA-Wide Non-dwelling Structures and Equipment					
E.	Administration					
F.	Other		\$167,291	\$124,943	\$140,653	\$117,291
G.	Operations					
H.	Demolition			\$42,348	\$26,638	\$50,000
I.	Development					
J.	Capital Fund Financing – Debt Service					
K.	Total CFP Funds					
L.	Total Non-CFP Funds					
M.	Grand Total		\$167,291	\$167,291	\$167,291	\$167,291









<b>Part III: Supporting Pages – Management Needs Work Statement(s)</b>				
Work Statement for Year 1 FFY _____	Work Statement for Year _____ FFY _____		Work Statement for Year: _____ FFY _____	
	Development Number/Name General Description of Major Work Categories	Estimated Cost	Development Number/Name General Description of Major Work Categories	Estimated Cost
See Annual Statement				
	Subtotal of Estimated Cost	\$	Subtotal of Estimated Cost	\$

<b>Part I: Summary</b>	
<b>PHA Name: Housing Authority of the City of Miami Beach</b> 200 Alton Road, Miami Beach, FL 33139	<b>Grant Type and Number</b> Capital Fund Program Grant No: FL14P017501-14 Replacement Housing Factor Grant No: Date of CFFP:
<b>FFY of Grant: 2014</b> <b>FFY of Grant Approval:</b>	

**Type of Grant**  
 **Original Annual Statement**       **Reserve for Disasters/Emergencies**       **Revised Annual Statement (revision no: \_\_\_\_\_)**  
 **Performance and Evaluation Report for Period Ending: 2014**       **Final Performance and Evaluation Report**

Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost <sup>1</sup>	
		Original	Revised <sup>2</sup>	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) <sup>3</sup>				
3	1408 Management Improvements				
4	1410 Administration (may not exceed 10% of line 21)				
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs				
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	\$119,000			
11	1465.1 Dwelling Equipment—Nonexpendable	\$48,291			
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment				
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities <sup>4</sup>				

<sup>1</sup> To be completed for the Performance and Evaluation Report.  
<sup>2</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.  
<sup>3</sup> PHAs with under 250 units in management may use 100% of CFP Grants for operations.  
<sup>4</sup> RHF funds shall be included here.

Annual Statement/Performance and Evaluation Report  
 Capital Fund Program, Capital Fund Program Replacement Housing Factor and  
 Capital Fund Financing Program

U.S. Department of Housing and Urban Development  
 Office of Public and Indian Housing  
 OMB No. 2577-0226  
**Expires 4/30/2011**

<b>Part I: Summary</b>					
<b>PHA Name:</b> The Housing Authority of the City of Miami Beach	<b>Grant Type and Number</b> Capital Fund Program Grant No: FL14P017501-14 Replacement Housing Factor Grant No: Date of CFFP:	<b>FFY of Grant:2014</b> <b>FFY of Grant Approval:</b>			
<b>Type of Grant</b>					
<input checked="" type="checkbox"/> <b>Original Annual Statement</b>		<input type="checkbox"/> <b>Reserve for Disasters/Emergencies</b>		<input type="checkbox"/> <b>Revised Annual Statement (revision no:     )</b>	
<input type="checkbox"/> <b>Performance and Evaluation Report for Period Ending:</b>		<input type="checkbox"/> <b>Final Performance and Evaluation Report</b>			
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost <sup>1</sup>	
		Original	Revised <sup>2</sup>	Obligated	Expended
18a	1501 Collateralization or Debt Service paid by the PHA				
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment				
19	1502 Contingency (may not exceed 8% of line 20)				
20	Amount of Annual Grant:: (sum of lines 2 - 19)	\$167,291			
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 Activities				
23	Amount of line 20 Related to Security - Soft Costs				
24	Amount of line 20 Related to Security - Hard Costs				
25	Amount of line 20 Related to Energy Conservation Measures				
<b>Signature of Executive Director</b>		<b>Date</b>		<b>Signature of Public Housing Director</b>	
				<b>Date</b>	

<sup>1</sup> To be completed for the Performance and Evaluation Report.

<sup>2</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

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Annual Statement/Performance and Evaluation Report  
 Capital Fund Program, Capital Fund Program Replacement Housing Factor and  
 Capital Fund Financing Program

U.S. Department of Housing and Urban Development  
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<b>Part I: Summary</b>	
<b>PHA Name: Housing Authority of the City of Miami Beach</b> 200 Alton Road, Miami Beach, FL 33139	<b>Grant Type and Number</b> Capital Fund Program Grant No: FL14P017501-13 Replacement Housing Factor Grant No: Date of CFFP:
<b>FFY of Grant: 2013</b> <b>FFY of Grant Approval:</b>	

**Type of Grant**  
 Original Annual Statement       Reserve for Disasters/Emergencies       Revised Annual Statement (revision no: )  
 Performance and Evaluation Report for Period Ending: 2013       Final Performance and Evaluation Report

Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost <sup>1</sup>	
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6	1415 Liquidated Damages				
7	1430 Fees and Costs				
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	\$92,291			
11	1465.1 Dwelling Equipment—Nonexpendable	\$75,000			
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment				
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities <sup>4</sup>				

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<sup>2</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.  
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Annual Statement/Performance and Evaluation Report  
 Capital Fund Program, Capital Fund Program Replacement Housing Factor and  
 Capital Fund Financing Program

U.S. Department of Housing and Urban Development  
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**Expires 4/30/2011**

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<b>Type of Grant</b>					
<input type="checkbox"/> Original Annual Statement		<input type="checkbox"/> Reserve for Disasters/Emergencies		<input type="checkbox"/> Revised Annual Statement (revision no: )	
<input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending:		<input type="checkbox"/> Final Performance and Evaluation Report			
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost <sup>1</sup>	
		Original	Revised <sup>2</sup>	Obligated	Expended
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<b>Signature of Executive Director</b>			<b>Signature of Public Housing Director</b>		
<b>Date</b>			<b>Date</b>		

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Annual Statement/Performance and Evaluation Report  
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<b>Part I: Summary</b>	
<b>PHA Name: Housing Authority of the City of Miami Beach</b> 200 Alton Road, Miami Beach, FL 33139	<b>Grant Type and Number</b> Capital Fund Program Grant No: FL14P017501-12 Replacement Housing Factor Grant No: Date of CFFP:
<b>FFY of Grant: 2012</b> <b>FFY of Grant Approval:</b>	

**Type of Grant**  
 Original Annual Statement       Reserve for Disasters/Emergencies       Revised Annual Statement (revision no: 1 )  
 Performance and Evaluation Report for Period Ending: 2012       Final Performance and Evaluation Report

Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost <sup>1</sup>	
		Original	Revised <sup>2</sup>	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) <sup>3</sup>		\$190,485		
3	1408 Management Improvements				
4	1410 Administration (may not exceed 10% of line 21)				
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	\$10,653			
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	\$179,832			
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment				
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities <sup>4</sup>				

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<b>Type of Grant</b>					
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<input type="checkbox"/> Performance and Evaluation Report for Period Ending: 2012		<input type="checkbox"/> Final Performance and Evaluation Report			
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## **Required Attachment FL017b01**

### **PUBLIC HEARING**

#### **Streamlined Annual Plan for Fiscal Year 2014**

**Tuesday, February 18, 2014      3:00 p.m.**  
**Rebecca Towers North Multipurpose Room**  
**200 Alton Road, Miami Beach, FL 33139**

The public hearing for the 2014 Housing Authority of the City of Miami Beach (HACMB) Streamlined Annual Plan for Fiscal year 2014 started at 3:00 p.m. Persons present at the hearing were:

Vashtye Leon, Section 8 – Special Projects Supervisor, HACMB  
Thomas Urriola, Special Projects Manager, HACMB  
Matthew Garwick – Director of Housing Programs/Operations, HACMB  
Amelia Sola-Ortiz-Asset Manager, HACMB

There was no one present from the public. Vashtye Leon, who served as moderator, acknowledged that the HACMB received three documents in response to a request for comments for the Annual Plan. Those documents were:

- Email from D. Mayer requesting a copy of the Annual Plan
- Letter from M. Bruno providing comment(s) on the Section 8 HQS Inspection process and tenant rent increases
- Letter from M. Villanueva with questions about her application status

With no further discussion, the public hearing closed at 3:15 p.m. Upon closing of the public hearing, no further comments will be received regarding the plan.