

**PHA Plans for the  
North Bend Housing Authority  
Five-Year/Annual Plan for FYB 2025**

**Matthew Vorderstrasse, Executive Director**

**FYB January 1, 2025**

**FIRST DRAFT**



**Presented by:**

The **Nelrod** Company

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**Purpose.** The 5-Year and Annual PHA Plans provide a ready source for interested parties to locate basic PHA policies, rules, and requirements concerning the PHA’s operations, programs, and services, and informs HUD, families served by the PHA, and members of the public of the PHA’s mission, goals and objectives for serving the needs of low-income, very low-income, and extremely low-income families.

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

**A PHA Information.**

**A.1** PHA Name: North Bend City Housing Authority  
 PHA Code: OR009  
 PHA Plan for Fiscal Year Beginning: (MM/YYYY): 01/2025  
 The Five-Year Period of the Plan: 2025-2029  
 PHA Submission Type:  5-Year Plan Submission  Revised 5-Year Plan Submission

**Availability of Information.** In addition to the items listed in this form, PHAs must have the elements listed below readily available to the public. A PHA must identify the specific location(s) where the proposed PHA Plan, PHA Plan Elements, and all information relevant to the public hearing and proposed PHA Plan are available for inspection by the public. Additionally, the PHA must provide information on how the public may reasonably obtain additional information on the PHA policies contained in the standard Annual Plan but excluded from their streamlined submissions. At a minimum, PHAs must post PHA Plans, including updates, at each Asset Management Project (AMP) and main office or central office of the PHA. PHAs are strongly encouraged to post complete PHA Plans on their official websites. PHAs are also encouraged to provide each resident council a copy of their PHA Plans.

**The following are the specific locations where the public may obtain copies of the 2025 5-Year PHA Plan:**

- Administrative Office – 1700 Monroe Street, North Bend, OR 97459
- PHA Website: [www.ccnbchas.org](http://www.ccnbchas.org)

**PHA Consortia:** (Check box if submitting a joint PHA Plan and complete table below)

Participating PHAs	PHA Code	Program(s) in the Consortia	Programs Not in the Consortia	No. of Units in Each Program	
				PH	HCV
Lead HA:					

<b>B</b>	<b>Plan Elements.</b> Required for <u>all</u> PHAs completing this form
<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>Our mission is to promote, preserve and provide residents of our community with safe, sanitary and affordable housing in good condition. NBC/CCHAs will assist in connecting residents with other resources which may enhance their quality of living. NBC/CCHAs will provide these services while treating the clients with dignity and respect.</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>PHA GOAL #1: EXPAND THE SUPPLY OF ASSISTED HOUSING</b></p> <p>The PHA established the following objectives to strive in meeting goal #1:</p> <ul style="list-style-type: none"> <li>▪ <i>Acquire or build units or developments</i></li> </ul> <p><b>PHA GOAL #2: IMPROVE THE QUALITY OF ASSISTED HOUSING</b></p> <p>The PHA established the following objectives to strive in meeting goal #2:</p> <ul style="list-style-type: none"> <li>▪ <i>Increase customer satisfaction</i></li> <li>▪ <i>Concentrate on efforts to improve specific management functions (e.g., public housing finance; voucher unit inspections)</i></li> </ul> <p><b>PHA GOAL #3: INCREASE ASSISTED HOUSING CHOICES</b></p> <p>The PHA established the following objectives to strive in meeting goal #3</p> <ul style="list-style-type: none"> <li>▪ <i>Increase voucher payment standards</i></li> </ul> <p><b>PHA GOAL #4: PROVIDE AN IMPROVED LIVING ENVIRONMENT</b></p> <p>The PHA established the following objectives to strive in meeting goal #4</p> <ul style="list-style-type: none"> <li>▪ <i>Implement public housing security improvements</i></li> <li>▪ <i>Designate developments or buildings for particular resident groups (elderly, persons with disabilities)</i></li> </ul>

<p><b>B.2</b></p>	<p align="center"><b>PHA GOAL #5: PROMOTE SELF-SUFFICIENCY AND ASSET DEVELOPMENT OF ASSISTED HOUSEHOLDS</b></p> <p>The PHA established the following objectives to strive in meeting goal #5</p> <ul style="list-style-type: none"> <li>▪ <i>Provide or attract supportive services to improve assistance recipients' employability</i></li> </ul> <p align="center"><b>PHA GOAL #6: ENSURE EQUAL OPPORTUNITY AND AFFIRMATIVELY FURTHER FAIR HOUSING</b></p> <p>The PHA established the following objectives to strive in meeting goal #6</p> <ul style="list-style-type: none"> <li>▪ <i>Undertake affirmative measures to ensure access to assisted housing regardless of race, color, religion, national origin, sex, familial status, and disability</i></li> <li>▪ <i>Undertake affirmative measures to provide a suitable living environment for families living in assisted housing, regardless of race, color, religion, national origin, sex, familial status and disability</i></li> <li>▪ <i>Undertake affirmative measures to ensure accessible housing to persons with all varieties of disabilities regardless of unit size required</i></li> </ul> <p><b>OTHER PHA GOALS AND OBJECTIVES</b></p> <p><i>Begin the development of North Bend City Family Housing. Occupancy will begin in 2026.</i></p>
<p><b>B.3</b></p>	<p><b><u>Progress Statements.</u></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><u>Goals/Objectives</u></b></p> <p><b>PHA GOALS</b></p> <ul style="list-style-type: none"> <li>- Effectively plan capital fund activities to ensure the physical structures in public housing are safe and sanitary for eligible households.</li> <li>- NBHA will allocate 100% of agency funding each year to efficiently operate and maintain the public housing units.</li> <li>- Explore options to partner with community developer to create additional affordable housing.</li> <li>- Review structure of North Bend City Housing Authority to determine best course of action for consolidation/consortium/transfer of properties or programs, etc.</li> </ul> <p><b><u>Progress Statement:</u></b> <i>North Bend City Housing Authority has completed the goals above. North Bend City Family Housing will start construction this year to bring 176 new units to North Bend, OR.</i></p>

<b>B.4</b>	<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. <i>(See attachment or009b01)</i>
<b>C.</b>	<b>Other Document and/or Certification Requirements.</b>
<b>C.1</b>	<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>In accordance with HUD regulations in 24 CFR 903.7(r) and 24 CFR 905.3, the North Bend City Housing Authority (NBHA) has defined the basic criteria that will be used for determining:</p> <ul style="list-style-type: none"> <li>• Substantial deviation from its 5-Year PHA Plan;</li> <li>• Significant amendment or modification to the Capital Fund Program (CFP) 5-Year Action Plan.</li> </ul> <p>Amendments, deviations, or modifications to the agency plan which fundamentally alter the mission, goals, objectives or plans of the NBHA will require formal approval from the Board of Commissioners. Prior to implementing changes that meet such criteria, the NBHA will submit for HUD’s approval a revised plan(s) that meets full public process requirements.</p> <p>Criteria for defining “Substantial Deviation” from the 5-Year PHA Plan</p> <ul style="list-style-type: none"> <li>• A change in federal law takes effect and, in the opinion of NBHA, it creates substantial obligations or administrative burdens beyond the programs under administration, excluding changes made due to insufficient revenue, funding or appropriations, funding reallocations resulting from modifications made to the annual or five-year capital plan or due to the terms of a judicial decree.</li> <li>• All amendments, deviations, or modifications to the agency plan which fundamentally alter the mission, goals, objectives or plans of the NBHA.</li> </ul> <p>Criteria for defining “Significant Amendment or Modification” to the CFP 5-Year Action Plans</p> <ul style="list-style-type: none"> <li>• Proposed demolition, disposition, homeownership, Capital Fund Financing, development, or mixed finance proposals will be considered significant amendments to the CFP 5-Year Action Plan.</li> <li>• Addition of non-emergency work items not included in the current CFP Annual Statement or CFP 5-Year Action plan that exceeds \$100,000.00.</li> </ul> <p>Exceptions</p> <ul style="list-style-type: none"> <li>• Changes under the above definitions that are required due to HUD regulations, federal statutes, state or local laws/ordinances, or as a result of a declared national or local emergency will not be considered substantial deviation or significant amendment/modification</li> </ul>

C.1	<ul style="list-style-type: none"> <li>• Changes under the above definitions which are funded by any source other than federal funds will not require Plan amendment or modification</li> <li>• Discretionary or administrative amendments consistent with the NBHA’s stated overall mission and objectives will not be considered substantial deviations or modifications</li> </ul>
C.2	<p><b>Resident Advisory Board (RAB Comments).</b></p> <p>(a) Did the RAB(s) provide comments to the 5-Year PHA Plan? <i>(See attachment or009a01)</i></p> <p>Y    N  <input type="checkbox"/>   <input 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>
C.3	<p><b>Certification by State or Local Officials.</b></p> <p><a href="#">Form HUD 50077-SL</a>, <i>Certification by State or Local Officials of PHA Plans Consistency with the Consolidated Plan</i>, must be submitted by the PHA as an electronic attachment to the PHA Plan.</p>
C.4	<p><b>Required Submission of HUD FO Review</b></p> <p>(a) Did the public challenge any elements of the Plan?</p> <p>Y    N  <input type="checkbox"/>   <input checked="" type="checkbox"/></p> <p>(b) If yes, include Challenged Elements. <i>N/A</i></p>
D.	<p><b>Affirmatively Furthering Fair Housing (AFFH).</b></p>
D.1	<p><b>Affirmatively Furthering Fair Housing (AFFH).</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>

<b>D.1</b>	<p><b>Fair Housing Goal:</b> Describe fair housing strategies and actions to achieve the goal:</p> <p><i>Goal: Annual Fair Housing Inservice Training for all PHA staff.</i></p> <p><i>Goal: Partnering with South Coast Health Equity Coalition to provide D.E.I. training to PHA staff and assist in Affirmative Marketing Efforts.</i></p> <p><i>Goal: Partnering with our tribal partners to market housing opportunities to the BIPOC community and also being cultural training to the PHA.</i></p> <p><i>Each year the PHA has a staff in service for our annual Fair Housing training. We also just signed an MOU with South Coast Health Equity Coalition for Affirmative Marketing support.</i></p>
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**A.1 Availability of Information.** In addition to the items listed in this form, PHAs must have the elements listed below readily available to the public. A PHA must identify the specific location(s) where the proposed PHA Plan, PHA Plan Elements, and all information relevant to the public hearing and proposed PHA Plan are available for inspection by the public. Additionally, the PHA must provide information on how the public may reasonably obtain additional information 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.

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**PHA Consortia:** (Check box if submitting a Joint PHA Plan and complete table below)

Participating PHAs	PHA Code	Program(s) in the Consortia	Program(s) not in the Consortia	No. of Units in Each Program	
				PH	HCV
Lead PHA:					

**B. Plan Elements Submitted with 5-Year PHA Plans.** 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).

**B.1 Revision of Existing PHA Plan Elements.**

(a) Have the following PHA Plan elements been revised by the PHA since its last **Five-Year PHA Plan** submission?

Y    N

Statement of Housing Needs and Strategy for Addressing Housing Needs

Deconcentration and Other Policies that Govern Eligibility, Selection, and Admissions.

Financial Resources.

Rent Determination.

Homeownership Programs.

Substantial Deviation.

Significant Amendment/Modification

**B.1** (b) The PHA must submit its Deconcentration Policy for Field Office Review

DECONCENTRATION OF POVERTY AND INCOME-MIXING [24 CFR 903.1 AND 903.2]

The PHA's admission policy must be designed to provide for deconcentration of poverty and income-mixing by bringing higher income tenants into lower income projects and lower income tenants into higher income projects. A statement of the PHA's deconcentration policies must be included in its annual plan [24 CFR 903.7(b)].

The PHA's deconcentration policy must comply with its obligation to meet the income targeting requirement [24 CFR 903.2(c)(5)].

Developments subject to the deconcentration requirement are referred to as 'covered developments' and include general occupancy (family) public housing developments. The following developments are not subject to deconcentration and income mixing requirements: developments operated by a PHA with fewer than 100 public housing units; mixed population or developments designated specifically for elderly or disabled families; developments operated by a PHA with only one general occupancy development; developments approved for demolition or for conversion to tenant-based public housing; and developments approved for a mixed-finance plan using HOPE VI or public housing funds [24 CFR 903.2(b)].

PHA Policy

According to 24 CFR 903.2(b), the PHA is not subject to deconcentration and incoming mixing requirements.

12-IV.E. DECONCENTRATION

PHA Policy

If subject to deconcentration requirements, the PHA will consider its deconcentration goals when transfer units are offered. When feasible, families above the Established Income Range will be offered a unit in a development that is below the Established Income Range, and vice versa, to achieve the PHA's deconcentration goals. A deconcentration offer will be considered a "bonus" offer; that is, if a resident refuses a deconcentration offer, the resident will receive one additional transfer offer.

(c) If the PHA answered yes for any element, describe the revisions for each element below:

**Statement of Housing Needs and Strategy for Addressing Housing Needs**

**Statement of Housing Needs:**

**Waiting List for Public Housing:**

*Total: 1114*

*Extremely Low Income: 873-78%*

*Very Low Income: 164-15%*

*Low Income: 64-6%*

**B.1**

*Families with children: 371-33%*  
*Elderly families: 361-32%*  
*Families with Disabilities: 548-49%*  
*White: 905-81%*  
*Black/African American: 44-4%*  
*American Indian/Alaska Native: 51-5%*  
*Asian: 18-2%*  
*Native Hawaiian/Other Pacific Islander: 8-1%*  
*Hispanic: 69-6%*

*Bedrooms:*  
*1 BR: 301-27%*  
*2 BR: 613-55%*  
*3 BR: 129-12%*  
*4 BR: 71-6%*

*The waiting list is not closed.*

**Strategies for Addressing Housing Needs:**

**Need: Shortage of affordable housing for all eligible populations**

PHA shall maximize the number of affordable units available to the PHA within its current resources by:

- *Employ effective maintenance and management policies to minimize the number of public housing units off-line*
- *Reduce turnover time for vacated public housing units*
- *Reduce time to renovate public housing units*
- *Undertake measures to ensure access to affordable housing among families assisted by the PHA, regardless of unit size required*
- *Participate in the Consolidated Plan development process to ensure coordination with broader community strategies*

PHA shall increase the number of affordable units available to the PHA within its current resources by:

- *Leverage affordable housing resources in the community through the creation of mixed-finance housing*
- *Pursue housing resources other than public housing or Section 8 tenant-based assistance*

**Need: Specific Family Types: Families at or below 30% of median**

PHA shall target available assistance to families at or below 30% of AMI by:

- *Exceed HUD federal targeting requirements for families at or below 30% of AMI in public housing*
- *Adopt rent policies to support and encourage work*

**B.1 Need: Specific Family Types: Families at or below 50% of median**

PHA shall target available assistance to families at or below 50% of AMI by:

- *Employ admissions preferences aimed at families who are working*
- *Adopt rent policies to support and encourage work*

**Need: Specific Family Types: The Elderly**

PHA shall target available assistance to the elderly by:

- *Seek designation of public housing for the elderly*

**Need: Specific Family Types: Families with Disabilities**

PHA shall target available assistance to Families with Disabilities by:

- *Seek designation of public housing for families with disabilities*
- *Carry out modifications needed in public housing based on the section 504 Needs Assessment for Public Housing*
- *Affirmatively market to local non-profit agencies that assist families with disabilities*

**Reason for Selecting Strategies:**

- *Funding constraints*
- *Staffing constraints*
- *Results of consultation with local or state government*
- *Results of consultation with residents and the Resident Advisory Board*

**Deconcentration and Other Policies that Govern Eligibility, Selection and Admissions**

**Public Housing**

**Eligibility:**

**Equal Access**

*The term “family” includes, but is not limited to the following, regardless of actual or perceived sexual orientation, gender identity, or marital status:*

- (1) *A single person, who may be an elderly person, displaced person, disabled person, near-elderly person or any other single person; or*
- (2) *A group of persons residing together and such group includes, but is not limited to:*
  - (i) *A family with or without children (a child who is temporarily away from the home because of placement in foster care is considered a member of the family);*
  - (ii) *An elderly family;*
  - (iii) *A near-elderly family;*
  - (iv) *A disabled family;*
  - (v) *A displaced family; and*
  - (vi) *The remaining member of a tenant family.*

**B.1** *Disabled family means a family whose head (including co-head), spouse or sole member is a person with a disability.*

*Elderly family means a family whose head (including co-head), spouse or sole member is a person who is at least 62 years of age.*

*Near elderly family means a family whose head (including co-head), spouse or sole member is a person who is at least 50 years of age but below the age of 62; or two or more persons, who are at least 50 years of age but below the age of 62, living together; or one or more persons who are at least 50 years of age but below the age of 62.*

*Sexual orientation means homosexuality, heterosexuality or bisexuality.*

*Gender identity means actual or perceived gender-related characteristics.*

**Unit Assignment:**

*Applicants are ordinarily given two (2) vacant unit choices before they are removed from the waiting list. This policy is consistent across all waiting list types.*

**Deconcentration and Income Mixing:**

*The PHA has performed its annual deconcentration and income mixing analysis to determine if the PHA has any general occupancy public housing developments covered by the deconcentration rule. The analysis results follow:*

*The PHA does have general occupancy public housing developments covered by the deconcentration rule.*

*None of the covered developments have an average income that falls above or below the Established Income Range.*

<b>Financial Resources:</b>		
<b>Planned Sources and Uses</b>		
<b>Sources</b>	<b>Planned \$</b>	<b>Planned Uses</b>
<b>1. Federal Grants (FY 2025 grants)</b>		
a) Public Housing Operating Fund	298,786.00	
b) Public Housing Capital Fund	377,346.00	
c) HOPE VI Revitalization		
d) HOPE VI Demolition		
e) Annual Contributions for Section 8 Tenant-Based Assistance		
f) Resident Opportunity and Self-Sufficiency Grants		
g) Community Development Block Grant		
h) HOME		
Other Federal Grants (list below)		
<b>2. Prior Year Federal Grants (unobligated funds only) (list below)</b>		
2023 Capital Funds	318,995.71	Public housing capital improvements
2024 Capital Funds	377,346.00	Public housing capital improvements
<b>3. Public Housing Dwelling Rental Income</b>	<b>395,902.00</b>	Public housing operations
<b>4. Other income (list below)</b>		
<b>5. Non-federal sources (list below)</b>		
<b>Total resources</b>	<b>\$1,768,375.71</b>	

**Rent Determination**

**Public Housing**

**Flat Rents:**

The PHA used the following sources of information in setting the market-based flat rents to establish comparability.

- *Guidelines found in the 2015 Appropriations Act in determining the Public Housing Flat Rent schedule. The PHA will establish a flat rent for each public housing unit that is no less than 80% of the applicable Fair Market Rent (FMR)*

**B.1 Substantial Deviation/Significant Amendment or Modification**

In accordance with HUD regulations in 24 CFR 903.7(r) and 24 CFR 905.3, the Coos-Curry Housing Authority (CCHA) has defined the basic criteria that will be used for determining:

- Substantial deviation from its 5-Year PHA Plan;
- Significant amendment or modification to the Capital Fund Program (CFP) 5-Year Action Plan.

Amendments, deviations, or modifications to the agency plan which fundamentally alter the mission, goals, objectives or plans of the NBHA will require formal approval from the Board of Commissioners. Prior to implementing changes that meet such criteria, the NBHA will submit for HUD’s approval a revised plan(s) that meets full public process requirements.

Criteria for defining “Substantial Deviation” from the 5-Year PHA Plan

- A change in federal law takes effect and, in the opinion of NBHA, it creates substantial obligations or administrative burdens beyond the programs under administration, excluding changes made due to insufficient revenue, funding or appropriations, funding reallocations resulting from modifications made to the annual or five-year capital plan or due to the terms of a judicial decree.
- All amendments, deviations, or modifications to the agency plan which fundamentally alter the mission, goals, objectives or plans of the NBHA.

Criteria for defining “Significant Amendment or Modification” to the CFP 5-Year Action Plans

- Proposed demolition, disposition, homeownership, Capital Fund Financing, development, or mixed finance proposals will be considered significant amendments to the CFP 5-Year Action Plan.
- Addition of non-emergency work items not included in the current CFP Annual Statement or CFP 5-Year Action plan that exceeds \$100,000.00.

Exceptions

- Changes under the above definitions that are required due to HUD regulations, federal statutes, state or local laws/ordinances, or as a result of a declared national or local emergency will not be considered substantial deviation or significant amendment/modification
- Changes under the above definitions which are funded by any source other than federal funds will not require Plan amendment or modification
- Discretionary or administrative amendments consistent with the NBHA’s stated overall mission and objectives will not be considered substantial deviations or modifications

**B.2 New Activities.**

Does the PHA intend to undertake any new activities related to the following in the PHA’s current Fiscal Year?

Y N

Hope VI or Choice Neighborhoods.

Mixed Finance Modernization or Development.

Demolition and/or Disposition.

Conversion of Public Housing to Tenant-Based Assistance.

Conversion of Public Housing to Project-Based Assistance under RAD.

Project-Based Vouchers.

Units with Approved Vacancies for Modernization.

Other Capital Grant Programs (i.e., Capital Fund Community Facilities Grants or Emergency Safety and Security Grants).

(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. 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. *N/A*

**B.3 Progress Report.**

**Mission**

Our mission is to promote, preserve and provide residents of our community with safe, sanitary and affordable housing in good condition. NBC/CCHAs will assist in connecting residents with other resources which may enhance their quality of living. NBC/CCHAs will provide these services while treating the clients with dignity and respect.

**Goals/Objectives**

**PHA GOALS**

- Effectively plan capital fund activities to ensure the physical structures in public housing are safe and sanitary for eligible households.
- NBHA will allocate 100% of agency funding each year to efficiently operate and maintain the public housing units.
- Explore options to partner with community developer to create additional affordable housing.
- Review structure of North Bend City Housing Authority to determine best course of action for consolidation/consortium/transfer of properties or programs, etc.



<b>B.3</b>	<b>Progress Statement:</b> <i>North Bend City Housing Authority has completed the goals above. North Bend City Family Housing will start construction this year to bring 176 new units to North Bend, OR.</i>
<b>B.4</b>	<p><b>Capital Improvements.</b> Required in all years for all PHAs completing this form that administer public housing and receive funding from the Capital Fund Program (CFP).</p> <p>1) Capital Improvements. Include a reference here to the most recent HUD approved 5-Year Action Plan (HUD-50075.2) and the date that it was approved by HUD.</p> <p><i>See Capital Fund 5 Year Action Plan in EPIC approved by HUD on <u>08/23/2023</u></i></p>
<b>B.5</b>	<p><b>Most Recent Fiscal Year Audit.</b></p> <p>(a) Were there any findings in the most recent FY Audit?</p> <p>Y    N  <input type="checkbox"/>   <input checked="" type="checkbox"/></p> <p>If, yes, please describe: <i>N/A</i></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>	
<b>B.1</b>	<b>New Activities</b> <i>Not Required – PHA is preparing Five-Year PHA Plan</i>
<b>B.2</b>	<b>Capital Improvements.</b> Include a reference here to the most recent HUD-approved 5-Year Action Plan (HUD-50075.2) in EPIC and the date that it was approved. <i>Not Required – PHA is preparing Five-Year PHA Plan</i>
<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) <b>Did the RAB(s) provide comments to the PHA Plan? (See attachment or009a01)</b></p> <p>Y    N  <input type="checkbox"/>   <input type="checkbox"/></p> <p>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><u>Form 50077-SM</u>, <i>PHA Certifications of Compliance with PHA Plan, Civil Rights, and Related 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?</p> <p>Y    N  <input type="checkbox"/>   <input checked="" type="checkbox"/></p> <p>If yes, include Challenged Elements. <i>N/A</i></p>
<p><b>D Affirmatively Furthering Fair Housing (AFFH).</b></p>	
<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> <p><b>Fair Housing Goal:</b> Describe fair housing strategies and actions to achieve the goal:</p> <p><i>Goal: Annual Fair Housing Inservice Training for all PHA staff.</i></p> <p><i>Goal: Partnering with South Coast Health Equity Coalition to provide D.E.I. training to PHA staff and assist in Affirmative Marketing Efforts.</i></p> <p><i>Goal: Partnering with our tribal partners to market housing opportunities to the BIPOC community and also being cultural training to the PHA.</i></p>

<b>D.1</b>	<i>Each year the PHA has a staff in service for our annual Fair Housing training. We also just signed an MOU with South Coast Health Equity Coalition for Affirmative Marketing support.</i>
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**Attachment: or009a01**  
**North Bend City Housing Authority**  
**Resident Advisory Board Consultation Process and Comments – FYB 2025**

1. Resident notification of appointment to the Advisory Board

At beginning of PHA Plan process, sent out letter to all residents/participants of opportunity to serve on Resident Advisory Board  
**July 17, 2024**

2. Resident Advisory Board Selection

Selection made from resident/participant response **Please provide date**

3. Meeting Organization

Schedule date to meet with Resident Advisory Board for input to PHA Plan  
**Please provide date**

Notify Resident Advisory Board of scheduled meeting **Please provide date**

Hold Resident Advisory Board meeting **Please provide date**

4. Notification of Public Hearing

Schedule date for Public Hearing and place ad **July 26, 2024**

Notify Resident Advisory Board **Please provide date**

Hold Public Hearing meeting **September 10, 2024**

5. Documentation of resident recommendations and PHA's response to recommendations

**Please provide the residents' recommendations/comments and the PHA response to each comment after each RAB meeting.**

**Attachment: or009b01**  
**North Bend Housing Authority**  
**Violence Against Women (VAWA) Goals**  
**Taken from ACOP Policy**

## 16-VII.A. OVERVIEW

The Violence Against Women Act (VAWA) provides special protections for victims of domestic violence, dating violence, sexual assault, stalking, and human trafficking who are applying for or receiving assistance under the public housing program. If your state or local laws provide greater protection for such victims, those laws take precedence over VAWA.

- Although the VAWA 2022 statute does not specifically include human trafficking in the list of victims protected under VAWA, in 2022 HUD began including human trafficking as part of the list of victims protected under VAWA (as seen in Notices PIH 2022-06, PIH 2022-22, and PIH 2022-24). In the absence of a final rule implementing VAWA 2022 and to mirror HUD's recent usage, this policy includes human trafficking in addition to domestic violence, dating violence, sexual assault, and stalking anywhere such a list appears.

In addition to definitions of key terms used in VAWA, this part contains general VAWA requirements and PHA policies in three areas: notification, documentation, and confidentiality. Specific VAWA requirements and PHA policies are located in Chapter 3, "Eligibility" (sections 3-I.C and 3-III.F); Chapter 5, "Occupancy Standards and Unit Offers" (section 5-II.D); Chapter 8, "Leasing and Inspections" (section 8-I.B); Chapter 12, "Transfer Policy" (sections 12-III.C, 12-III.F, and 12-IV.D); and Chapter 13, "Lease Terminations" (sections 13-III.F and 13-IV.D).

## 16-VII.B. DEFINITIONS [24 CFR 5.2003]

As used in VAWA:

- The term *affiliated individual* means, with respect to a person:
  - A spouse, parent, brother or sister, or child of that individual, or an individual to whom that individual stands in the position or place of a parent; or
  - Any individual, tenant or lawful occupant living in the household of that individual.
- The term *bifurcate* means, with respect to a public housing or Section 8 lease, to divide a lease as a matter of law such that certain tenants can be evicted or removed while the remaining family members' lease and occupancy rights are allowed to remain intact.
- The term *dating violence* means violence committed by a person who is or has been in a social relationship of a romantic or intimate nature with the victim; and where the existence of such a relationship shall be determined based on a consideration of the following factors:
  - The length of the relationship
  - The type of relationship
  - The frequency of interaction between the persons involved in the relationship
- The term *domestic violence* includes felony or misdemeanor crimes of violence committed by a current or former spouse of the victim, by a person with whom the victim shares a child in common, by a person who is cohabitating with or has cohabitated with

the victim as a spouse, by a person similarly situated to a spouse of the victim under the domestic or family violence laws of the jurisdiction receiving grant monies, or by any other person against an adult or youth victim who is protected from that person's acts under the domestic or family violence laws of the jurisdiction.

- the term *sexual assault* means:
  - Any nonconsensual sexual act proscribed by Federal, tribal, or State law, including when the victim lacks the capacity to consent
- The term *stalking* means:
  - To engage in a course of conduct directed at a specific person that would cause a reasonable person to fear for his or her safety or the safety of others, or suffer substantial emotional distress.

#### 16-VII.C. NOTIFICATION [24 CFR 5.2005(a)]

##### **Notification to Public**

The PHA adopts the following policy to help ensure that all actual and potential beneficiaries of its public housing program are aware of their rights under VAWA.

##### PHA Policy

The PHA will post the following information regarding VAWA in its offices and on its web site. It will also make the information readily available to anyone who requests it.

A notice of occupancy rights under VAWA to public housing program applicants and participants who are or have been victims of domestic violence, dating violence, sexual assault, or stalking (Form HUD-5380, see Exhibit 16-1)

A copy of form HUD-5382, Certification of Domestic Violence, Dating Violence, Sexual Assault, or Stalking and Alternate Documentation (see Exhibit 16-2)

A copy of the PHA's emergency transfer plan (Exhibit 16-3)

A copy of HUD's Emergency Transfer Request for Certain Victims of Domestic Violence, Dating Violence, Sexual Assault, or Stalking, Form HUD-5383 (Exhibit 16-4)

The National Domestic Violence Hot Line: 1-800-799-SAFE (7233) or 1-800- 787-3224 (TTY) (included in Exhibit 16-1)

Contact information for local victim advocacy groups or service providers

##### Notification to Applicants and Tenants [24 CFR 5.2005(a)(1)]

PHAs are required to inform public housing applicants and tenants of their rights under VAWA, including their right to confidentiality and the limits thereof, when they are denied assistance, when they are admitted to the program, and when they are notified of an eviction or termination of housing benefits.

The PHA must distribute a notice of VAWA rights, along with the VAWA self-certification form (HUD-5382) at each of these three junctures.

PHA Policy

The VAWA information provided to applicants and participants will consist of the notices in Exhibit 16-1 and 16-2.

The PHA will provide all applicants with information about VAWA at the time they request an application for housing assistance. The PHA will also include such information in all notices of denial of assistance (see section 3-III.F).

The PHA will provide all tenants with information about VAWA at the time of admission (see section 8-I.B) and at annual reexamination. The PHA will also include such information in all lease termination notices (see section 13-IV.D).

The PHA is not limited to providing VAWA information at the times specified in the above policy. If the PHA decides to provide VAWA information to a tenant following an incident of domestic violence, Notice PIH 2006-42 cautions against sending the information by mail, since the abuser may be monitoring the mail. The notice recommends that in such cases the PHA make alternative delivery arrangements that will not put the victim at risk.

PHA Policy

Whenever the PHA has reason to suspect that providing information about VAWA to a public housing tenant might place a victim of domestic violence at risk, it will attempt to deliver the information by hand directly to the victim or by having the victim come to an office or other space that may be safer for the individual, making reasonable accommodations as necessary. For example, the PHA may decide not to send mail regarding VAWA protections to the victim's unit if the PHA believes the perpetrator may have access to the victim's mail, unless requested by the victim.

When discussing VAWA with the victim, the PHA will take reasonable precautions to ensure that no one can overhear the conversation such as having conversations in a private room.

The victim may, but is not required to, designate an attorney, advocate, or other secure contact for communications regarding VAWA protections. (Board approved 9/26/17)

**16-VII.D. DOCUMENTATION [24 CFR 5.2007]**

A PHA presented with a claim for initial or continued assistance based on status as a victim of domestic violence, dating violence, sexual assault, stalking, human trafficking or criminal activity related to any of these forms of abuse may—but is not required to—request that the individual making the claim document the abuse. Any request for documentation must be in writing, and the individual must be allowed at least 14 business days after receipt of the request to submit the documentation. The PHA may extend this time period at its discretion. [24 CFR 5.2007(a)]

The individual may satisfy the PHA's request by providing any one of the following three forms of documentation [24 CFR 5.2007(b)]:

- (1) A completed and signed HUD-approved certification form (HUD-5382, Certification of Domestic Violence, Dating Violence, Sexual Assault, or Stalking), which must include



the name of the perpetrator only if the name of the perpetrator is safe to provide and is known to the victim. The form may be filled out and submitted on behalf of the victim.

- (2) A federal, state, tribal, territorial, or local police report or court record
- (3) Documentation signed by a person who has assisted the victim in addressing domestic violence, dating violence, sexual assault, or stalking, or the effects of such abuse. This person may be an employee, agent, or volunteer of a victim service provider; an attorney; or a medical professional. Acceptable documentation also includes a record of an administrative agency, and documentation from a mental health professional. The person signing the documentation must attest under penalty of perjury to the person's belief that the incidents in question are bona fide incidents of abuse. The victim must also sign the documentation.

The PHA may not require third-party documentation (forms 2 and 3) in addition to certification (form 1), except as specified below under "Conflicting Documentation," nor may it require certification in addition to third-party documentation [VAWA final rule].

#### PHA Policy

Any request for documentation of domestic violence, dating violence, sexual assault, stalking, or human trafficking will be in writing, will specify a deadline of 14 business days following receipt of the request, will describe the three forms of acceptable documentation, will provide explicit instructions on where and to whom the documentation must be submitted, and will state the consequences for failure to submit the documentation or request an extension in writing by the deadline.

The PHA may, in its discretion, extend the deadline for 10 business days. In determining whether to extend the deadline, the PHA will consider factors that may contribute to the victim's inability to provide documentation in a timely manner, including cognitive limitations, disabilities, limited English proficiency, absence from the unit, administrative delays, the danger of further violence, and the victim's need to address health or safety issues. Any extension granted by the PHA will be in writing.

Once the victim provides documentation, the PHA will acknowledge receipt of the documentation within 10 business days.

#### Conflicting Documentation [24 CFR 5.2007(e)]

In cases where the PHA receives conflicting certification documents from two or more members of a household, each claiming to be a victim and naming one or more of the other petitioning household members as the perpetrator, the PHA may determine which is the true victim by requiring each to provide acceptable third-party documentation, as described above (forms 2 and 3). The PHA may also request third-party documentation when submitted documentation contains information that conflicts with existing information already available to the PHA. The PHA must honor any court orders issued to protect the victim or to address the distribution of property. Individuals have 30 calendar days to return third-party verification to the PHA. If the PHA does not receive third-party documentation, and the PHA will deny or terminate assistance as a result, the PHA must hold separate hearings for the tenants [Notice PIH 2017-08]. PHA Policy

If presented with conflicting certification documents from members of the same household, the PHA will attempt to determine which is the true victim by requiring each of them to provide third-party documentation in accordance with 24 CFR 5.2007(e) and by following any HUD guidance on how such determinations should be made. When requesting third-party documents, the PHA will provide contact information for local domestic violence and legal aid offices. In such cases, applicants or tenants will be given 30 calendar days from the date of the request to provide such documentation.

If the PHA does not receive third-party documentation within the required timeframe (and any extensions) the PHA will deny VAWA protections and will notify the applicant or tenant in writing of the denial. If, as a result, the applicant or tenant is denied or terminated from the program, the PHA will hold separate hearings for the applicants or tenants.

#### Discretion to Require No Formal Documentation [24 CFR 5.2007(d)]

The PHA has the discretion to provide benefits to an individual based solely on the individual's statement or other corroborating evidence—i.e., without requiring formal documentation of abuse in accordance with 24 CFR 5.2007(b).

##### PHA Policy

If the PHA accepts an individual's statement or other corroborating evidence of domestic violence, dating violence, sexual assault, stalking, or human trafficking the PHA will document acceptance of the statement or evidence in the individual's file.

#### Failure to Provide Documentation [24 CFR 5.2007(c)]

In order to deny relief for protection under VAWA, a PHA must provide the individual requesting relief with a written request for documentation of abuse. If the individual fails to provide the documentation within 14 business days from the date of receipt, or such longer time as the PHA may allow, the PHA may deny relief for protection under VAWA.

#### 16-VII.E. CONFIDENTIALITY [24 CFR 5.2007(b)(4)]

All information provided to the PHA regarding domestic violence, dating violence, sexual assault, or stalking, including the fact that an individual is a victim of such violence or stalking, must be retained in confidence. This means that the PHA (1) may not enter the information into any shared database, (2) may not allow employees or others to access the information unless they are explicitly authorized to do so and have a need to know the information for purposes of their work, and (3) may not provide the information to any other entity or individual, except to the extent that the disclosure is (a) requested or consented to by the individual in writing, (b) required for use in an eviction proceeding, or (c) otherwise required by applicable law.

##### PHA Policy

If disclosure is required for use in an eviction proceeding or is otherwise required by applicable law, the PHA will inform the victim before disclosure occurs so that safety risks can be identified and addressed.

**EXHIBIT 16-1: SAMPLE NOTICE OF OCCUPANCY RIGHTS UNDER THE  
VIOLENCE AGAINST WOMEN ACT, FORM HUD-5380**

**[Insert Name of Housing Provider<sup>1</sup>]**

**Notice of Occupancy Rights under the Violence Against Women Act<sup>2</sup>**

**To all Tenants and Applicants**

The Violence Against Women Act (VAWA) provides protections for victims of domestic violence, dating violence, sexual assault, or stalking. VAWA protections are not only available to women, but are available equally to all individuals regardless of sex, gender identity, or sexual orientation.<sup>3</sup> The U.S. Department of Housing and Urban Development (HUD) is the Federal agency that oversees that **[insert name of program or rental assistance]** is in compliance with VAWA. This notice explains your rights under VAWA. A HUD-approved certification form is attached to this notice. You can fill out this form to show that you are or have been a victim of domestic violence, dating violence, sexual assault, or stalking, and that you wish to use your rights under VAWA.”

**Protections for Applicants**

If you otherwise qualify for assistance under **[insert name of program or rental assistance]**, you cannot be denied admission or denied assistance because you are or have been a victim of domestic violence, dating violence, sexual assault, or stalking.

**Protections for Tenants**

If you are receiving assistance under **[insert name of program or rental assistance]**, you may not be denied assistance, terminated from participation, or be evicted from your rental housing because you are or have been a victim of domestic violence, dating violence, sexual assault, or

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<sup>1</sup> The notice uses HP for housing provider but the housing provider should insert its name where HP is used. HUD’s program-specific regulations identify the individual or entity responsible for providing the notice of occupancy rights.

<sup>2</sup> Despite the name of this law, VAWA protection is available regardless of sex, gender identity, or sexual orientation.

<sup>3</sup> Housing providers cannot discriminate on the basis of any protected characteristic, including race, color, national origin, religion, sex, familial status, disability, or age. HUD-assisted and HUD-insured housing must be made available to all otherwise eligible individuals regardless of actual or perceived sexual orientation, gender identity, or marital status.

stalking.

Also, if you or an affiliated individual of yours is or has been the victim of domestic violence, dating violence, sexual assault, or stalking by a member of your household or any guest, you may not be denied rental assistance or occupancy rights under **[insert name of program or rental assistance]** solely on the basis of criminal activity directly relating to that domestic violence, dating violence, sexual assault, or stalking.

Affiliated individual means your spouse, parent, brother, sister, or child, or a person to whom you stand in the place of a parent or guardian (for example, the affiliated individual is in your care, custody, or control); or any individual, tenant, or lawful occupant living in your household.

### **Removing the Abuser or Perpetrator from the Household**

HP may divide (bifurcate) your lease in order to evict the individual or terminate the assistance of the individual who has engaged in criminal activity (the abuser or perpetrator) directly relating to domestic violence, dating violence, sexual assault, or stalking.

If HP chooses to remove the abuser or perpetrator, HP may not take away the rights of eligible tenants to the unit or otherwise punish the remaining tenants. If the evicted abuser or perpetrator was the sole tenant to have established eligibility for assistance under the program, HP must allow the tenant who is or has been a victim and other household members to remain in the unit for a period of time, in order to establish eligibility under the program or under another HUD housing program covered by VAWA, or, find alternative housing.

In removing the abuser or perpetrator from the household, HP must follow Federal, State, and local eviction procedures. In order to divide a lease, HP may, but is not required to, ask you for documentation or certification of the incidences of domestic violence, dating violence, sexual assault, or stalking.

### **Moving to Another Unit**

Upon your request, HP may permit you to move to another unit, subject to the availability of other units, and still keep your assistance. In order to approve a request, HP may ask you to provide documentation that you are requesting to move because of an incidence of domestic violence, dating violence, sexual assault, or stalking. If the request is a request for emergency transfer, the housing provider may ask you to submit a written request or fill out a form where

you certify that you meet the criteria for an emergency transfer under VAWA. The criteria are:

**1. You are a victim of domestic violence, dating violence, sexual assault, or stalking.**

If your housing provider does not already have documentation that you are a victim of domestic violence, dating violence, sexual assault, or stalking, your housing provider may ask you for such documentation, as described in the documentation section below.

**2. You expressly request the emergency transfer.** Your housing provider may choose to require that you submit a form, or may accept another written or oral request.

**3. You reasonably believe you are threatened with imminent harm from further violence if you remain in your current unit.** This means you have a reason to fear that if you do not receive a transfer you would suffer violence in the very near future.

**OR**

**You are a victim of sexual assault and the assault occurred on the premises during the 90-calendar-day period before you request a transfer.** If you are a victim of sexual assault, then in addition to qualifying for an emergency transfer because you reasonably believe you are threatened with imminent harm from further violence if you remain in your unit, you may qualify for an emergency transfer if the sexual assault occurred on the premises of the property from which you are seeking your transfer, and that assault happened within the 90-calendar-day period before you expressly request the transfer.

HP will keep confidential requests for emergency transfers by victims of domestic violence, dating violence, sexual assault, or stalking, and the location of any move by such victims and their families.

HP's emergency transfer plan provides further information on emergency transfers, and HP must make a copy of its emergency transfer plan available to you if you ask to see it.

**Documenting You Are or Have Been a Victim of Domestic Violence, Dating Violence, Sexual Assault or Stalking**

HP can, but is not required to, ask you to provide documentation to “certify” that you are or have been a victim of domestic violence, dating violence, sexual assault, or stalking. Such request

from HP must be in writing, and HP must give you at least 14 business days (Saturdays, Sundays, and Federal holidays do not count) from the day you receive the request to provide the documentation. HP may, but does not have to, extend the deadline for the submission of documentation upon your request.

You can provide one of the following to HP as documentation. It is your choice which of the following to submit if HP asks you to provide documentation that you are or have been a victim of domestic violence, dating violence, sexual assault, or stalking.

- A complete HUD-approved certification form given to you by HP with this notice, that documents an incident of domestic violence, dating violence, sexual assault, or stalking. The form will ask for your name, the date, time, and location of the incident of domestic violence, dating violence, sexual assault, or stalking, and a description of the incident. The certification form provides for including the name of the abuser or perpetrator if the name of the abuser or perpetrator is known and is safe to provide.
- A record of a Federal, State, tribal, territorial, or local law enforcement agency, court, or administrative agency that documents the incident of domestic violence, dating violence, sexual assault, or stalking. Examples of such records include police reports, protective orders, and restraining orders, among others.
- A statement, which you must sign, along with the signature of an employee, agent, or volunteer of a victim service provider, an attorney, a medical professional or a mental health professional (collectively, “professional”) from whom you sought assistance in addressing domestic violence, dating violence, sexual assault, or stalking, or the effects of abuse, and with the professional selected by you attesting under penalty of perjury that he or she believes that the incident or incidents of domestic violence, dating violence, sexual assault, or stalking are grounds for protection.
- Any other statement or evidence that HP has agreed to accept.

If you fail or refuse to provide one of these documents within the 14 business days, HP does not have to provide you with the protections contained in this notice.

If HP receives conflicting evidence that an incident of domestic violence, dating violence, sexual assault, or stalking has been committed (such as certification forms from two or more members of a household each claiming to be a victim and naming one or more of the other petitioning

household members as the abuser or perpetrator), HP has the right to request that you provide third-party documentation within thirty 30 calendar days in order to resolve the conflict. If you fail or refuse to provide third-party documentation where there is conflicting evidence, HP does not have to provide you with the protections contained in this notice.

### **Confidentiality**

HP must keep confidential any information you provide related to the exercise of your rights under VAWA, including the fact that you are exercising your rights under VAWA.

HP must not allow any individual administering assistance or other services on behalf of HP (for example, employees and contractors) to have access to confidential information unless for reasons that specifically call for these individuals to have access to this information under applicable Federal, State, or local law.

HP must not enter your information into any shared database or disclose your information to any other entity or individual. HP, however, may disclose the information provided if:

- You give written permission to HP to release the information on a time limited basis.
- HP needs to use the information in an eviction or termination proceeding, such as to evict your abuser or perpetrator or terminate your abuser or perpetrator from assistance under this program.
- A law requires HP or your landlord to release the information.

VAWA does not limit HP's duty to honor court orders about access to or control of the property. This includes orders issued to protect a victim and orders dividing property among household members in cases where a family breaks up.

### **Reasons a Tenant Eligible for Occupancy Rights under VAWA May Be Evicted or Assistance May Be Terminated**

You can be evicted and your assistance can be terminated for serious or repeated lease violations that are not related to domestic violence, dating violence, sexual assault, or stalking committed against you. However, HP cannot hold tenants who have been victims of domestic violence, dating violence, sexual assault, or stalking to a more demanding set of rules than it applies to tenants who have not been victims of domestic violence, dating violence, sexual assault, or stalking.

The protections described in this notice might not apply, and you could be evicted and your assistance terminated, if HP can demonstrate that not evicting you or terminating your assistance would present a real physical danger that:

1. Would occur within an immediate time frame, and
2. Could result in death or serious bodily harm to other tenants or those who work on the property.

If HP can demonstrate the above, HP should only terminate your assistance or evict you if there are no other actions that could be taken to reduce or eliminate the threat.

### **Other Laws**

VAWA does not replace any Federal, State, or local law that provides greater protection for victims of domestic violence, dating violence, sexual assault, or stalking. You may be entitled to additional housing protections for victims of domestic violence, dating violence, sexual assault, or stalking under other Federal laws, as well as under State and local laws.

### **Non-Compliance with The Requirements of This Notice**

You may report a covered housing provider's violations of these rights and seek additional assistance, if needed, by contacting or filing a complaint with **[insert contact information for any intermediary, if applicable]** or **[insert HUD field office]**.

### **For Additional Information**

You may view a copy of HUD's final VAWA rule at: <https://www.gpo.gov/fdsys/pkg/FR-2016-11-16/pdf/2016-25888.pdf>.

Additionally, HP must make a copy of HUD's VAWA regulations available to you if you ask to see them.

For questions regarding VAWA, please contact **[insert name of program or rental assistance contact information able to answer questions on VAWA]**.

For help regarding an abusive relationship, you may call the National Domestic Violence Hotline at 1-800-799-7233 or, for persons with hearing impairments, 1-800-787-3224 (TTY). You may also contact **[Insert contact information for relevant local organizations]**.



For tenants who are or have been victims of stalking seeking help may visit the National Center for Victims of Crime’s Stalking Resource Center at <https://www.victimsofcrime.org/our-programs/stalking-resource-center>.

For help regarding sexual assault, you may contact **[Insert contact information for relevant organizations]**

Victims of stalking seeking help may contact **[Insert contact information for relevant organizations]**.

**Attachment:** Certification form HUD-5382 **[form approved for this program to be included]**

<p align="center"><b>EXHIBIT 16-2: CERTIFICATION OF DOMESTIC VIOLENCE, DATING VIOLENCE, SEXUAL ASSAULT, OR STALKING AND ALTERNATE DOCUMENTATION, FORM HUD-5382</b></p>
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<b>CERTIFICATION OF</b> 2577-0286 <b>DOMESTIC VIOLENCE,</b> 06/30/2017 <b>DATING VIOLENCE,</b> <b>SEXUAL ASSAULT, OR STALKING,</b> <b>AND ALTERNATE DOCUMENTATION</b>	<b>U.S. Department of Housing</b> <b>and Urban Development</b>	<b>OMB Approval No.</b>  <b>Exp.</b>
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**Purpose of Form:** The Violence Against Women Act (“VAWA”) protects applicants, tenants, and program participants in certain HUD programs from being evicted, denied housing assistance, or terminated from housing assistance based on acts of domestic violence, dating violence, sexual assault, or stalking against them. Despite the name of this law, VAWA protection is available to victims of domestic violence, dating violence, sexual assault, and stalking, regardless of sex, gender identity, or sexual orientation.

**Use of This Optional Form:** If you are seeking VAWA protections from your housing provider, your housing provider may give you a written request that asks you to submit documentation about the incident or incidents of domestic violence, dating violence, sexual assault, or stalking.

In response to this request, you or someone on your behalf may complete this optional form and submit it to your housing provider, or you may submit one of the following types of third-party documentation:

- (1) A document signed by you and an employee, agent, or volunteer of a victim service provider, an attorney, or medical professional, or a mental health professional (collectively, “professional”) from whom you have sought assistance relating to domestic violence, dating violence, sexual assault, or stalking, or the effects of abuse. The document must specify, under penalty of perjury, that the professional believes the incident or incidents of domestic violence, dating violence, sexual assault, or stalking occurred and meet the definition of “domestic violence,” “dating violence,” “sexual assault,” or “stalking” in HUD’s regulations at 24 CFR 5.2003.
- (2) A record of a Federal, State, tribal, territorial or local law enforcement agency, court, or administrative agency; or

(3) At the discretion of the housing provider, a statement or other evidence provided by the applicant or tenant.

**Submission of Documentation:** The time period to submit documentation is 14 business days from the date that you receive a written request from your housing provider asking that you provide documentation of the occurrence of domestic violence, dating violence, sexual assault, or stalking. Your housing provider may, but is not required to, extend the time period to submit the documentation, if you request an extension of the time period. If the requested information is not received within 14 business days of when you received the request for the documentation, or any extension of the date provided by your housing provider, your housing provider does not need to grant you any of the VAWA protections. Distribution or issuance of this form does not serve as a written request for certification.

**Confidentiality:** All information provided to your housing provider concerning the incident(s) of domestic violence, dating violence, sexual assault, or stalking shall be kept confidential and such details shall not be entered into any shared database. Employees of your housing provider are not to have access to these details unless to grant or deny VAWA protections to you, and such employees may not disclose this information to any other entity or individual, except to the extent that disclosure is: (i) consented to by you in writing in a time-limited release; (ii) required for use in an eviction proceeding or hearing regarding termination of assistance; or (iii) otherwise required by applicable law.

**TO BE COMPLETED BY OR ON BEHALF OF THE VICTIM OF DOMESTIC VIOLENCE, DATING VIOLENCE, SEXUAL ASSAULT, OR STALKING**

**1. Date the written request is received by victim:**

\_\_\_\_\_

**2. Name of victim:**

\_\_\_\_\_

**3. Your name (if different from victim's):** \_\_\_\_\_

**4. Name(s) of other family member(s) listed on the lease:** \_\_\_\_\_

\_\_\_\_\_

**5. Residence of victim:**

\_\_\_\_\_

**6. Name of the accused perpetrator (if known and can be safely disclosed):** \_\_\_\_\_

\_\_\_\_\_

7. Relationship of the accused perpetrator to the victim: \_\_\_\_\_

8. Date(s) and times(s) of incident(s) (if known): \_\_\_\_\_

10. Location of incident(s): \_\_\_\_\_

In your own words, briefly describe the incident(s):

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of domestic violence, dating violence, sexual assault, or stalking. I acknowledge that submission of false information could jeopardize program eligibility and could be the basis for denial of admission, termination of assistance, or eviction.

Signature \_\_\_\_\_ Signed on (Date)

**Public Reporting Burden:** The public reporting burden for this collection of information is estimated to average 1 hour per response. This includes the time for collecting, reviewing, and reporting the data. The information provided is to be used by the housing provider to request certification that the applicant or tenant is a victim of domestic violence, dating violence, sexual assault, or stalking. The information is subject to the confidentiality requirements of VAWA. This agency may not collect this information, and you are not required to complete this form, unless it displays a currently valid Office of Management and Budget control number.

**EXHIBIT 16-3: NMA EMERGENCY TRANSFER PLAN FOR VICTIMS OF DOMESTIC VIOLENCE, DATING VIOLENCE, SEXUAL ASSAULT, OR STALKING**

Attachment: Certification form HUD-5382

**[Insert name of covered housing provider]**

**Emergency Transfer Plan for Victims of Domestic Violence, Dating Violence, Sexual Assault, or Stalking  
Public Housing Program**

**Emergency Transfers**

The PHA is concerned about the safety of its tenants, and such concern extends to tenants who are victims of domestic violence, dating violence, sexual assault, or stalking. In accordance with

the Violence Against Women Act (VAWA),<sup>4</sup> the PHA allows tenants who are victims of domestic violence, dating violence, sexual assault, or stalking to request an emergency transfer from the tenant's current unit to another unit. The ability to request a transfer is available regardless of sex, gender identity, or sexual orientation.<sup>5</sup> The ability of the PHA to honor such request for tenants currently receiving assistance, however, may depend upon a preliminary determination that the tenant is or has been a victim of domestic violence, dating violence, sexual assault, or stalking, and on whether the PHA has another dwelling unit that is available and is safe to offer the tenant for temporary or more permanent occupancy.

This plan identifies tenants who are eligible for an emergency transfer, the documentation needed to request an emergency transfer, confidentiality protections, how an emergency transfer may occur, and guidance to tenants on safety and security. This plan is based on a model emergency transfer plan published by the U.S. Department of Housing and Urban Development (HUD), the federal agency that oversees that the **public housing and housing choice voucher (HCV) programs** are in compliance with VAWA.

### **Eligibility for Emergency Transfers**

A tenant who is a victim of domestic violence, dating violence, sexual assault, or stalking, as provided in HUD's regulations at 24 CFR part 5, subpart L, is eligible for an emergency transfer, if the tenant reasonably believes that there is a threat of imminent harm from further violence if the tenant remains within the same unit. If the tenant is a victim of sexual assault, the tenant may also be eligible to transfer if the sexual assault occurred on the premises within the 90-calendar-day period preceding a request for an emergency transfer.

A tenant requesting an emergency transfer must expressly request the transfer in accordance with the procedures described in this plan.

Tenants who are not in good standing may still request an emergency transfer if they meet the eligibility requirements in this section.

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<sup>4</sup>Despite the name of this law, VAWA protection is available to all victims of domestic violence, dating violence, sexual assault, and stalking, regardless of sex, gender identity, or sexual orientation.

<sup>5</sup>Housing providers cannot discriminate on the basis of any protected characteristic, including race, color, national origin, religion, sex, familial status, disability, or age. HUD-assisted and HUD-insured housing must be made available to all otherwise eligible individuals regardless of actual or perceived sexual orientation, gender identity, or marital status.

## **Emergency Transfer Request Documentation**

To request an emergency transfer, the tenant shall notify the PHA's management office and submit a written request for a transfer to **any PHA office**. The PHA will provide reasonable accommodations to this policy for individuals with disabilities. The tenant's written request for an emergency transfer should include either:

1. A statement expressing that the tenant reasonably believes that there is a threat of imminent harm from further violence if the tenant were to remain in the same dwelling unit assisted under the PHA's program; OR
2. A statement that the tenant was a sexual assault victim and that the sexual assault occurred on the premises during the 90-calendar-day period preceding the tenant's request for an emergency transfer.

## **Confidentiality**

The PHA will keep confidential any information that the tenant submits in requesting an emergency transfer, and information about the emergency transfer, unless the tenant gives the PHA written permission to release the information on a time-limited basis, or disclosure of the information is required by law or required for use in an eviction proceeding or hearing regarding termination of assistance from the covered program. This includes keeping confidential the new location of the dwelling unit of the tenant, if one is provided, from the person or persons that committed an act of domestic violence, dating violence, sexual assault, or stalking against the tenant. See the Notice of Occupancy Rights under the Violence against Women Act for All Tenants for more information about the PHA's responsibility to maintain the confidentiality of information related to incidents of domestic violence, dating violence, sexual assault, or stalking.

## **Emergency Transfer Timing and Availability**

The PHA cannot guarantee that a transfer request will be approved or how long it will take to process a transfer request. The PHA will, however, act as quickly as possible to move a tenant who is a victim of domestic violence, dating violence, sexual assault, or stalking to another unit, subject to availability and safety of a unit. If a tenant reasonably believes a proposed transfer would not be safe, the tenant may request a transfer to a different unit. If a unit is available, the transferred tenant must agree to abide by the terms and conditions that govern occupancy in the

unit to which the tenant has been transferred. The PHA may be unable to transfer a tenant to a particular unit if the tenant has not or cannot establish eligibility for that unit.

If the PHA has no safe and available units for which a tenant who needs an emergency transfer is eligible, the PHA will assist the tenant in identifying other housing providers who may have safe and available units to which the tenant could move. At the tenant's request, the PHA will also assist tenants in contacting the local organizations offering assistance to victims of domestic violence, dating violence, sexual assault, or stalking that are attached to this plan.

### **Emergency Transfers: Public Housing (PH) Program**

If you are a public housing resident and request an emergency transfer as described in this plan, the PHA will attempt to assist you in moving to a safe unit quickly. The PHA will make exceptions as required to policies restricting moves.

Emergency transfers for which you are not required to apply for assistance include the following:

- Public housing unit in a different development
- Public housing unit in the same development, if you determine that the unit is safe

At your request, the PHA will refer you to organizations that may be able to further assist you.

You may also request an emergency transfer to the following programs for which you are required to apply for assistance:

- HCV tenant-based program
- HCV project-based assistance
- Other programs administered by the PHA (such as state housing programs)

Emergency transfers will not take priority over waiting list admissions for these types of assistance. At your request, the PHA will refer you to organizations that may be able to further assist you.

### **Safety and Security of Tenants**

Pending processing of the transfer and the actual transfer, if it is approved and occurs, the tenant is urged to take all reasonable precautions to be safe.

Tenants who are or have been victims of domestic violence are encouraged to contact the National Domestic Violence Hotline at 1-800-799-7233, or a local domestic violence shelter, for

assistance in creating a safety plan. For persons with hearing impairments, that hotline can be accessed by calling 1-800-787-3224 (TTY).

Tenants who have been victims of sexual assault may call the Rape, Abuse, and Incest National Network's National Sexual Assault Hotline at 1-800-656-HOPE, or visit the online hotline at <https://ohl.rainn.org/online/>.

Tenants who are or have been victims of stalking seeking help may visit the National Center for Victims of Crime's Stalking Resource Center at <https://www.victimsofcrime.org/our-programs/stalking-resource-center>.

**Attachment:** Local organizations offering assistance to victims of domestic violence, dating violence, sexual assault, or stalking.

<b>EXHIBIT 16-4: EMERGENCY TRANSFER REQUEST FOR CERTAIN VICTIMS OF DOMESTIC VIOLENCE, DATING VIOLENCE, SEXUAL ASSAULT, OR STALKING, FORM HUD-5383</b>
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**EMERGENCY TRANSFER**  
2577-0286

**U.S. Department of Housing**

OMB Approval No.

**REQUEST FOR CERTAIN**  
06/30/2017

**and Urban Development**

Exp.

**VICTIMS OF DOMESTIC VIOLENCE, DATING VIOLENCE, SEXUAL ASSAULT, OR STALKING**

**Purpose of Form:** If you are a victim of domestic violence, dating violence, sexual assault, or stalking, and you are seeking an emergency transfer, you may use this form to request an emergency transfer and certify that you meet the requirements of eligibility for an emergency transfer under the Violence Against Women Act (VAWA). Although the statutory name references women, VAWA rights and protections apply to all victims of domestic violence, dating violence, sexual assault or stalking. Using this form does not necessarily mean that you will receive an emergency transfer. See your housing provider's emergency transfer plan for more information about the availability of emergency transfers.

**The requirements you must meet are:**

- (1) You are a victim of domestic violence, dating violence, sexual assault, or stalking.** If your housing provider does not already have documentation that you are a victim of domestic violence, dating violence, sexual assault, or stalking, your housing provider may ask you for such documentation. In response, you may submit Form HUD-5382, or any one of the other types of documentation listed on that Form.
- (2) You expressly request the emergency transfer.** Submission of this form confirms that you have expressly requested a transfer. Your housing provider may choose to require that you submit this form, or may accept another written or oral

request. Please see your housing provider's emergency transfer plan for more details.

**(3) You reasonably believe you are threatened with imminent harm from further violence if you remain in your current unit.** This means you have a reason to fear that if you do not receive a transfer you would suffer violence in the very near future.

**OR**

**You are a victim of sexual assault and the assault occurred on the premises during the 90-calendar-day period before you request a transfer.** If you are a victim of sexual assault, then in addition to qualifying for an emergency transfer because you reasonably believe you are threatened with imminent harm from further violence if you remain in your unit, you may qualify for an emergency transfer if the sexual assault occurred on the premises of the property from which you are seeking your transfer, and that assault happened within the 90-calendar-day period before you submit this form or otherwise expressly request the transfer.

**Submission of Documentation:** If you have third-party documentation that demonstrates why you are eligible for an emergency transfer; you should submit that documentation to your housing provider if it is safe for you to do so. Examples of third party documentation include, but are not limited to: a letter or other documentation from a victim service provider, social worker, legal assistance provider, pastoral counselor, mental health provider, or other professional from whom you have sought assistance; a current restraining order; a recent court order or other court records; a law enforcement report or records; communication records from the perpetrator of the violence or family members or friends of the perpetrator of the violence, including emails, voicemails, text messages, and social media posts.

**Confidentiality:** All information provided to your housing provider concerning the incident(s) of domestic violence, dating violence, sexual assault, or stalking, and concerning your request for an emergency transfer shall be kept confidential. Such details shall not be entered into any shared database. Employees of your housing provider are not to have access to these details unless to grant or deny VAWA protections or an emergency transfer to you. Such employees may not disclose this information to any other entity or individual, except to the extent that disclosure is: (i) consented to by you in writing in a time-limited release; (ii) required for use in an eviction proceeding or hearing regarding termination of assistance; or (iii) otherwise required by applicable law.

**TO BE COMPLETED BY OR ON BEHALF OF THE PERSON REQUESTING A TRANSFER**

**1. Name of victim requesting an emergency transfer:** \_\_\_\_\_

**2. Your name (if different from victim's)** \_\_\_\_\_

**3. Name(s) of other family member(s) listed on the lease:** \_\_\_\_\_

**4. Name(s) of other family member(s) who would transfer with the victim:** \_\_\_\_\_

\_\_\_\_\_  
**5. Address of location from which the victim seeks to transfer:**

\_\_\_\_\_



6. Address or phone number for contacting the victim: \_\_\_\_\_

7. Name of the accused perpetrator (if known and can be safely disclosed): \_\_\_\_\_

8. Relationship of the accused perpetrator to the victim: \_\_\_\_\_

9. Date(s), Time(s) and location(s) of incident(s): \_\_\_\_\_

10. Is the person requesting the transfer a victim of a sexual assault that occurred in the past 90 days on the premises of the property from which the victim is seeking a transfer? If yes, skip question 11. If no, fill out question 11. \_\_\_\_\_

11. Describe why the victim believes they are threatened with imminent harm from further violence if they remain in their current unit.

12. If voluntarily provided, list any third-party documentation you are providing along with this notice:

\_\_\_\_\_

This is to certify that the information provided on this form is true and correct to the best of my knowledge, and that the individual named above in Item 1 meets the requirement laid out on this form for an emergency transfer. I acknowledge that submission of false information could jeopardize program eligibility and could be the basis for denial of admission, termination of assistance, or eviction.

Signature \_\_\_\_\_ Signed on (Date)

\_\_\_\_\_