

5-Year PHA Plan (for All PHAs)	U.S. Department of Housing and Urban Development Office of Public and Indian Housing	OMB No. 2577-0226
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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	<p>PHA Name: Indian River County Board of Commissioners PHA Code: FL132</p> <p>PHA Plan for Fiscal Year Beginning: 10/01/2021</p> <p>PHA Plan Submission Type: <input checked="" type="checkbox"/> 5-Year Plan Submission <input type="checkbox"/> Revised 5-Year Plan Submission</p> <p>Availability of Information:</p> <p>Indian River County Board of Commissioners HCV Program Five – Year Plan, Annual Plan, HCV Administrative Policy and all other elements are available for review by the public at the address listed below between the days and hours of Tuesday, Wednesday and Thursday from 8:00 am till 4:00 pm:</p> <p style="padding-left: 40px;">Indian River County Board of Commissioners Rental Assistance 1800 27th Street, Admin Building B Vero Beach, Florida 32960</p> <p><input type="checkbox"/> PHA Consortia: (Check box if submitting a Joint PHA Plan and complete table below)</p> <table border="1" data-bbox="207 1039 1463 1675"> <thead> <tr> <th rowspan="2">Participating PHAs</th> <th rowspan="2">PHA Code</th> <th rowspan="2">Program(s) in the Consortia</th> <th rowspan="2">Program(s) not in the Consortia</th> <th colspan="2">No. of Units in Each Program</th> </tr> <tr> <th>PH</th> <th>HCV</th> </tr> </thead> <tbody> <tr> <td>Lead PHA: N/A</td> <td>N/A</td> <td>N/A</td> <td>N/A</td> <td>N/A</td> <td>N/A</td> </tr> <tr> <td> </td> <td> </td> <td> </td> <td> </td> <td> </td> <td> </td> </tr> <tr> <td> </td> <td> </td> <td> </td> <td> </td> <td> </td> <td> </td> </tr> <tr> <td> </td> <td> </td> <td> </td> <td> </td> <td> </td> <td> </td> </tr> </tbody> </table>						Participating PHAs	PHA Code	Program(s) in the Consortia	Program(s) not in the Consortia	No. of Units in Each Program		PH	HCV	Lead PHA: N/A	N/A	N/A	N/A	N/A	N/A																		
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<p>B.1</p>	<p>Mission. State the mission for serving the needs of low- income, very low- income, and extremely low- income families in the jurisdiction for the next five years.</p> <p>The Indian River County Board of Commissioners HCV Program is committed to partnering with private owners and property managers in an efficient, professional and ethical manner as a team effort to provide decent, safe, sanitary and affordable housing for the clients that we serve in this community and to enhancing the housing stock for under privileged and low income, including seniors' and</p> <p>To assist and prepare low to moderate income residents in making a transition to a greater financial security; and</p> <p>To provide our clientele with empathy, dignity and responsive customer service; and</p> <p>To provide the highest quality customer service, with uncompromised integrity.</p>
<p>B.2</p>	<p>Goals and Objectives. Identify the quantifiable goals and objectives that will enable the Agency to serve the needs of low- income, very low- income, and extremely low- income families for the next five years.</p> <p>Current goals and objectives:</p> <ol style="list-style-type: none"> 1. EXPAND THE SUPPLY OF ASSISTED HOUSING BY: <ul style="list-style-type: none"> • APPLYING FOR ADDITIONAL VOUCHERS INCLUDING VASH AS THEY BECOME AVAILABLE FROM HUD OR ANY OTHER STATE FUNDED PROGRAM; • CONDUCTING OUTREACH EFFORTS TO POTENTIAL LANDLORDS. 2. IMPROVE THE QUALITY OF ASSISTED HOUSING BY: <ul style="list-style-type: none"> • FOCUSING EFFORTS TO IMPROVE SPECIFIC MANAGEMENT FUNCTIONS, SUCH AS RENT REASONABLENESS REVIEWS, INCOME VERIFICATIONS, VOUCHER UNIT INSPECTIONS AND APPROPRIATE RESPONSE TO PROGRAM VIOLATIONS. 3. PROMOTE SELF-SUFFICIENCY AND ASSET DEVELOPMENT OF ASSISTED HOUSEHOLDS BY: <ul style="list-style-type: none"> • PROVIDING OR ATTRACTING SUPPORTIVE SERVICES TO IMPROVE RECIPIENTS' EMPLOYABILITY AND TO EDUCATE RECIPIENTS' ON HOMEOWNERSHIP PROGRAMS. 4. ADMINISTRATION OF THE HCV PROGRAM WITH EXCELLENCE BY: <ul style="list-style-type: none"> • MAINTAINING 95% OR BETTER UTILIZATION RATE; • PROVIDING QUALITY SERVICE TO CUSTOMERS AND CLIENTS THROUGH OPEN COMMUNICATION, WORKSHOPS AND/OR MEETINGS TO EXPLAIN THE HOUSING CHOICE VOUCHER PROGRAM AND OTHER OPPORTUNITIES;
<p>B.3</p>	<p>Progress on meeting the goals and objectives:</p> <ol style="list-style-type: none"> 1. Expanded and increased the supply of assisted housing: <ul style="list-style-type: none"> • HUD allocated an additional 31 VASH Vouchers for homeless veterans in Indian River County; IRC HCV Program now administers 46 VASH vouchers total. 2. Improved the quality of assisted housing: <ul style="list-style-type: none"> • Set payment standards to an amount in order to attract quality housing from owners on the private market; • Inspected units every six to 12 months as needed; • Continued to encourage portability to clients that want to move to other jurisdictions for improved housing needs. 3. Promoted self-sufficiency and asset development for our assisted households: <ul style="list-style-type: none"> • Partnered with additional supportive service agencies and homeownership agencies in providing participants with the availability to purchase their own home and to continue their education. 4. Administration of the HCV program: <ul style="list-style-type: none"> • Earned the HUD SEMAP High Performer by utilizing the budget authority at 98% or better; • Provided training for staff throughout the fiscal year with Health Advocate, such as: Anger Management, Stress Management and numerous other trainings offered to enhance the customer services that the Rental Assistance HCV Program provides.
<p>B.4</p>	<p>Violence Against Women Act (VAWA) Goals. Provide a statement of the goals, activities objectives, policies, or programs that will enable the Agency to serve the needs of child and adult victims of domestic violence, dating violence, sexual assault, or stalking.</p> <p>Indian River County Rental Assistance HCV Program has a Memorandum of Agreement to Collaborate with Safespace by providing referrals to Safespace depending on the need. In addition, Indian River County Board of Commissioners HCV Program provides VAWA information regarding the tenant rights at lease up and at annual recertifications. Flyers are posted in the office with detailed information on how to obtain assistance if needed.</p>
<p>B.5</p>	<p>Significant Amendment or Modification. Provide a statement on the criteria used for determining a significant amendment or modification to the 5-Year Plan.</p> <p>Indian River County Rental Assistance HCV Program defines "Significant Amendments" would be changes to Federal Regulations that may be required by HUD and any changes to the HCV Admin Policy which would significantly and substantially alter the HCV Program mission; and</p> <p>Indian River County Rental Assistance HCV Program defines "Substantial Deviation/Modification" as a fundamental change to the HCV Program mission statement, goals or objectives identified in the Five Year and Annual Plan.</p> <p>Indian River County Board of Commissioners HCV Program has no "Significant Amendments" or "Substantial Deviation/Modifications to the mission statement, goals and objectives on the five year and annual plan.</p>

<p>B.6</p>	<p>Resident Advisory Board (RAB) Comments.</p> <p>(a) Did the RAB(s) provide comments to the 5-Year PHA Plan?</p> <p>Y N <input type="checkbox"/> <input 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. N/A-No response</p>
<p>B.7</p>	<p>Certification by State or Local Officials. (attached)</p> <p>Form HUD 50077-SL, <i>Certification by State or Local Officials of Agency Plans Consistency with the Consolidated Plan</i>, must be submitted by the Agency as an electronic attachment to the Plan.</p>

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

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

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

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

B. 5-Year Plan.

B.1 **Mission.** State the PHA's mission for serving the needs of low- income, very low- income, and extremely low- income families in the PHA's jurisdiction for the next five years. ([24 CFR §903.6\(a\)\(1\)](#))

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

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

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

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

B.6 Resident Advisory Board (RAB) comments.

(a) Did the public or RAB provide comments? n/a no response

(b) If yes, submit comments as an attachment to the Plan and describe the analysis of the comments and the PHA's decision made on these recommendations. ([24 CFR §903.17\(a\)](#), [24 CFR §903.19](#))

This information collection is authorized by Section 511 of the Quality Housing and Work Responsibility Act, which added a new section 5A to the U.S. Housing Act of 1937, as amended, which introduced the 5-Year PHA Plan. The 5-Year PHA Plan provides the PHA's mission, goals and objectives for serving the needs of low- income, very low- income, and extremely low- income families and the progress made in meeting the goals and objectives described in the previous 5-Year Plan.

Public reporting burden for this information collection is estimated to average .76 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. HUD may not collect this information, and respondents are not required to complete this form, unless it displays a currently valid OMB Control Number.

Privacy Act Notice. The United States Department of Housing and Urban Development is authorized to solicit the information requested in this form by virtue of Title 12, U.S. Code, Section 1701 et seq., and regulations promulgated thereunder at Title 12, Code of Federal Regulations. Responses to the collection of information are required to obtain a benefit or to retain a benefit. The information requested does not lend itself to confidentiality.
